Generic Name	MDC	Indications	Dosage	Category
Abacavir Sulphate 600 mg and Lamivudine 300 mg Tablet	J05AR02964T1001XX	Antiretroviral combination therapy of HIV infection in adults and adolescents from 12 years of age with the following criteria: i)Patients unsuitable or failed other HAART treatment ii)Patients who are at high risk of renal impairment iii)Patients with osteoporosis or at high risk of bone loss	ADULTS & ADOLESCENT (> 12 years of age): Recommended dose is one tablet once daily. Not to be used in adults or adolescents weigh less than 40kg. CHILDREN : Not recommended	A*
Acarbose 50 mg Tablet	A10BF01000T1001XX	Only for treatment of: i) Non insulin dependent diabetes mellitus (NIDDM) when diet therapy is insufficient ii) Non insulin dependent diabetes mellitus (NIDDM) in combination with existing conventional oral therapy where glycaemic control is inadequate	Initially 50 mg daily, increase to 3 times daily up to 100 mg 3 times daily. Max 200 mg 3 times daily	A/KK
Acetazolamide 250 mg Tablet	S01EC01000T1001XX	Reduction of intraocular pressure in open-angle glaucoma, secondary glaucoma and peri-operatively in angle-closure glaucoma	250mg 1-4 times a day, the dosage being titrated according to patient response	B
Acetazolamide 500 mg Injection	S01EC01000P4001XX	Reduction of intra-ocular pressure in open-angle glaucoma, secondary glaucoma and peri-operatively in angle-closure glaucoma	Adult : 250-1000mg per 24hours, usually in divided doses for amounts over 250mg daily	B
Acetylcysteine 200 mg/ml Injection	V03AB23520P3001XX	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	A*
Acetylsalicylic Acid 100 mg, Glycine 45 mg Tablet	B01AC06259T1001XX	Prevention of myocardial infarct, stroke, vascular occlusion and deep vein thrombosis. Transient ischaemic attacks	1 tablet daily	B
Acetylsalicylic Acid 300 mg Soluble Tablet	N02BA01000T4001XX	Mild to moderate pain	300 - 900 mg every 4 - 6 hours as required. Max 4 g daily. Use in children not recommended	C

Generic Name	MDC	Indications	Dosage	Category
Acitretin 10 mg Capsule	D05BB02000C1001XX	i) Severe form of psoriasis including erythrodermic psoriasis and local or generalized pustular psoriasis. ii) Severe disorders of keratinization, such as -congenital ichthyosis -pityriasis rubra pilaris -Darier's disease -other disorders of keratinization which may be resistant to other therapies	ADULT: initially 25-30 mg daily for 2-4 weeks, then adjusted according to response, usually within range 25-50 mg daily for further 6-8 weeks (max: 75 mg daily). In disorders of keratinization, maintenance therapy of less than 20mg/day and should not exceed 50mg/day CHILD: 0.5mg/kg daily occasionally up to 1 mg/kg daily to a max. 35 mg daily for limited periods	A*
Acitretin 25 mg Capsule	D05BB02000C1002XX	i) Severe form of psoriasis including erythrodermic psoriasis and local or generalized pustular psoriasis. ii) Severe disorders of keratinization, such as -congenital ichthyosis -pityriasis rubra pilaris -Darier's disease -other disorders of keratinization which may be resistant to other therapies	ADULT: initially 25-30 mg daily for 2-4 weeks, then adjusted according to response, usually within range 25-50 mg daily for further 6-8 weeks (max: 75 mg daily). In disorders of keratinization, maintenance therapy of less than 20mg/day and should not exceed 50mg/day CHILD: 0.5mg/kg daily occasionally up to 1 mg/kg daily to a max. 35 mg daily for limited periods	A*
Acriflavine 0.1% Lotion	D08AA03000L6001XX	Infected skin, lesions, cuts, abrasions, wounds and burns.	Apply undiluted three times daily to the affected part .	C+
Actinomycin D (Dactinomycin) 500 mcg/ml Injection	L01DA01110P4001XX	i) For solid tumours ii) Gestational trophoblastic disease	i) ADULT: 500 mcg IV daily for max of 5 days. CHILD: 1.5 mg/m2 once every 3 weeks (if weight less than 10 kg, 50 mcg/kg) ii) 500 mcg IV on Days 2, 4, 6, 8, 10, repeat every 7 - 10 days or 500 mcg IV bolus on Days 1 and 2, repeat every 15 days	A

Generic Name	MDC	Indications	Dosage	Category
Acyclovir 200 mg Tablet	J05AB01000T1001XX	i) Mucocutaneous Herpes Simplex infection in immunocompromised and AIDS patients ii) Primary and recurrent Varicella Zoster infection in immunocompromised and AIDS patients iii) Severe Kaposi Varicella Eruption (Eczema herpeticum) iv) Severe primary HSV infections (eg. Neonatal herpes, encephalitis, eczema herpeticum, genital herpes, gingival stomatitis, vaginal delivery with maternal vulva herpes) v) Severe and complicated varicella infection (eg. Encephalitis, purpura fulminans) vi) Severe zoster infection in paediatrics (eg. Encephalitis, purpura fulminans, immunocompromised patients and facial, sacral and motor zoster)	i) ADULT: initially 400 mg 5 times daily for 7 - 14 days. CHILD less than 2 years: 200 mg 4 times daily, CHILD more than 2 years: 400 mg 4 times daily ii), iii) and iv) ADULT: 200 - 400 mg 4 times daily. CHILD: less than 2 years, half adult dose; more than 2 years, adult dose v) ADULT: 800 mg 5 times daily for 7 days vi) ADULT: 20 mg/kg (maximum: 800 mg) four times daily for 5 days, CHILD 6 years: 800 mg four times daily. CHILD less than 2 years; 400mg 4 times daily, more than 2 years; 800mg 4 times daily	A/KK

Generic Name	MDC	Indications	Dosage	Category
Acyclovir 200 mg/5 ml Suspension	J05AB01000L8001XX	i) Mucocutaneous Herpes Simplex infection in immunocompromised and AIDS patients ii) Primary and recurrent Varicella Zoster infection in immunocompromised and AIDS patients iii) Severe Kaposi Varicella Eruption (Eczema herpeticum) iv) Severe primary HSV infections (eg. Neonatal herpes, encephalitis, eczema herpeticum, genital herpes, gingival stomatitis, vaginal delivery with maternal vulva herpes) v) Severe and complicated varicella infection (eg. Encephalitis, purpura fulminans) vi) Severe zoster infection in paediatrics (eg.Encephalitis, purpura fulminans, immunocompromised patients and facial, sacral and motor zoster)	i) ADULT: initially 400 mg 5 times daily for 7 - 14 days. CHILD less than 2 years: 200 mg 4 times daily, CHILD more than 2 years: 400 mg 4 times daily ii), iii) and iv) ADULT: 200 - 400 mg 4 times daily. CHILD : less than 2 years, half adult dose; more than 2 years, adult dose. v) ADULT: 800 mg 5 times daily for 7 days vi) ADULT: 20 mg/kg (maximum: 800 mg) four times daily for 5 days, CHILD 6 years: 800 mg four times daily. CHILD: less than 2 years; 400mg 4 times daily, more than 2 years; 800 mg 4 times daily	A*

Generic Name	MDC	Indications	Dosage	Category
Acyclovir 250 mg Injection	J05AB01000P4001XX	Treatment and prophylaxis of herpes simplex in immunocompromised, severe initial genital herpes and Varicella -Zoster	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/m2 8 hourly for 5 days, doubled to 500 mg/m2 8 hourly for varicella-zoster in the immunocompromised and in simplex encephalitis (usually given for 10 days in encephalitis)	A*
Acyclovir 3% Eye Ointment	S01AD03000G5101XX	Only for the treatment of herpes simplex keratitis	Apply 1 cm 5 times daily. Continue for at least 3 days after healing	A*
Acyclovir 5% Cream	D06BB03000G1001XX	Herpes simplex infections of the skin, including initial and recurrent labial and genital herpes simplex infections	Apply every 4 hours for 5 - 10 days	A*

Generic Name	MDC	Indications	Dosage	Category
Acyclovir 800 mg Tablet	J05AB01000T1002XX	i) Mucocutaneous Herpes Simplex infection in immunocompromised and AIDS patients ii) Primary and recurrent Varicella Zoster infection in immunocompromised and AIDS patients iii) Severe Kaposi Varicella Eruption (Eczema herpeticum) iv) Severe primary HSV infections (eg. Neonatal herpes, encephalitis, eczema herpeticum, genital herpes, gingival stomatitis, vaginal delivery with maternal vulva herpes) v) Severe and complicated varicella infection (eg. Encephalitis, purpura fulminans) vi) Severe zoster infection in paediatrics (eg. Encephalitis, purpura fulminans, immunocompromised patients and facial, sacral and motor zoster)	i) ADULT: initially 400 mg 5 times daily for 7 - 14 days. CHILD less than 2 years: 200 mg 4 times daily, CHILD more than 2 years: 400 mg 4 times daily ii), iii) and iv) ADULT: 200 - 400 mg 4 times daily. CHILD: less than 2 years, half adult dose; more than 2 years, adult dose v) ADULT: 800 mg 5 times daily for 7 days vi) ADULT: 20 mg/kg (maximum: 800 mg) four times daily for 5 days, CHILD 6 years: 800 mg four times daily. CHILD less than 2 years; 400mg 4 times daily, more than 2 years; 800mg 4 times daily	A/KK

Generic Name	MDC	Indications	Dosage	Category
Adalimumab 40 mg Injection	L04AB04000P5001XX	i) Third line treatment of: - Severe rheumatoid arthritis - Psoriatic arthritis - Ankylosing spondylitis after failure of conventional DMARDs or other biologics ii)Treatment of adults with moderate to severe chronic plaque psoriasis who have not responded to, have contraindication or are unable to tolerate phototherapy and/or systemic therapies including acitretin, methotreaxate and cyclosporine iii) Crohn's Disease a) For treatment of moderately to severely active Crohn?s Disease in adult patients who have inadequate response to conventional therapy b) For treatment of moderately to severely active Crohn?s Disease in adult patients who have lost response to or are intolerant to infliximab iv) Ulcerative Colitis - For treatment of moderately to severely active ulcerative colitis in adult patients who have had an inadequate response to conventional therapy including corticosteroids and 6-mercaptopurine or azathioprine, or who are intolerant to or have medical contraindications for such therapies	i)Severe rheumatoid arthritis, Psoriatic arthritis, Ankylosing spondylitis : Subcutaneous 40 mg every other week ii)Chronic plaque psoriasis : Initial, 80 mg SC, followed by 40 mg SC every other week starting one week after the initial dose iii) & iv) Crohn?s disease & Ulcerative colitis: 160mg at week 0 (dose can be administered as four injections in one day or as two injections per day for two consecutive days) and 80mg at week 2. After induction treatment, the recommended maintenance dose is 40mg every other week via subcutaneous injection.	A*
Adapalene 0.1% Cream	D10AD03000G1001XX	Acne vulgaris where comedones, papules and pustules predominate in those sensitive to benzoyl peroxide or topical tretinoin [third line treatment]	Apply once daily to the affected areas after washing at bedtime	A*
Adapalene 0.1% Gel	D10AD03000G3001XX	Acne vulgaris where comedones, papules and pustules predominate in those sensitive to benzoyl peroxide or topical tretinoin [third line treatment]	Apply once daily to the affected areas after washing at bedtime	A*

Generic Name	MDC	Indications	Dosage	Category
Adefovir Dipivoxil 10 mg Tablet	J05AF08000T1001XX	i) Treatment of chronic HBeAg positive and HBeAg negative hepatitis B infection in adults with compensated liver function (lamivudine should be tried first) ii) Lamivudine-resistant chronic hepatitis B virus infection with either compensated or decompensated hepatitis function (only by hepatologist and gastroenterologist for approved indications)	Adult (18-65 years): 10mg Once Daily Renal Dose Adjustment : 10mg every 48hours (30-49ml/min); 10mg every 72hours (10-29ml/min); 10mg every 7 days (Hemodialysis)	A*
Adenosine 3 mg/ml Injection	C01EB10000P3001XX	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 supraventicular tachycardia with in 1-2 minutes, 12 mg should be given also as a rapid IV bolus	B
Adrenaline Acid (Epinephrine) Tartrate 1 mg/ml Injection	C01CA24123P3001XX	Cardiopulmonary resuscitation	1 mg by intravenous injection repeated every 3-5 minutes according to response	B
Agomelatine 25 mg Tablet	N06AX22000T1001XX	Major depression	The recommended dose is 25mg once daily at bedtime, maybe increased to 50mg once daily at bedtime.	A*
Albendazole 200 mg Tablet	P02CA03000T1001XX	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	C+

Generic Name	MDC	Indications	Dosage	Category
Albendazole 200 mg/5 ml Suspension	P02CA03000L8001XX	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	C+
Alcohol 70% Solution	D08AX08000L9901XX	Use as antiseptic and disinfectant	Apply to the skin undiluted or when needed	C+
Alendronate Sodium 70 mg and Cholecalciferol 5600 IU Tablet	M05BB03972T1002XX	Osteoporosis in post menopausal women with a history of vertebral fracture and whom oestrogen replacement therapy is contraindicated. Review treatment after 2 years and if there is positive response, treatment may be continued up to 5 years and then re-evaluate. Treatment should be stopped if there is no positive response after 5 years. Otherwise, patient needs to be given drug holiday for 1 to 2 years and then continue treatment shall the benefit outweigh the risk.	1 tablet once weekly [70mg/5600 IU]. Patient should receive supplemental calcium or vitamin D, if dietary vitamin D inadequate. The tablet should be taken at least half and hour before the first food, beverage, or medication of the day with plain water only. To facilitate delivery to stomach and thus reduce the potential for esophageal irritation, it should only be swallowed upon arising for the day with a full glass of water and patient should not lie down for at least 30 minutes and until after their first food of the day.	A*
Alendronate Sodium 70 mg Tablet	M05BA04520T1001XX	Osteoporosis in post menopausal women with a history of vertebral fracture and whom oestrogen replacement therapy is contraindicated. Review treatment after 2 years and if there is positive response, treatment may be continued up to 5 years and then re-evaluate. Treatment should be stopped if there is no positive response after 5 years. Otherwise, patient needs to be given drug holiday for 1 to 2 years and then continue treatment shall the benefit outweigh the risk.	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	A*

Generic Name	MDC	Indications	Dosage	Category
Alfacalcidol 0.25 mcg Capsule	A11CC03000C1001XX	i) Renal osteodystrophy in patients on haemodialysis ii) Hypoparathyroidism and pseudohypoparathyroidism iii) Adjunct to the management of tertiary hyperparathyroidism iv) Rickets and osteomalacia v) Osteoporosis	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	A/KK
Alfacalcidol 1 mcg Capsule	A11CC03000C1002XX	i) Renal osteodystrophy in patients on haemodialysis ii) Hypoparathyroidism and pseudohypoparathyroidism iii) Adjunct to the management of tertiary hyperparathyroidism iv) Rickets and osteomalacia v) Osteoporosis	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	A/KK
Alfacalcidol 2 mcg/ml Drops	A11CC03000D5001XX	i) Renal osteodystrophy in patients on haemodialysis ii) Hypoparathyroidism and pseudohypoparathyroidism iii) Adjunct to the management of tertiary hyperparathyroidism iv) Rickets and osteomalacia v) Osteoporosis	NEONATES : 0.1 mcg/kg/day	A*
Alfacalcidol 2 mcg/ml Injection	A11CC03000P3001XX	Treatment of: i) Renal osteodystrophy in patients on haemodialysis ii) Hypoparathyroidism and pseudohypoparathyroidism iii) Adjunct to the management of tertiary hyperparathyroidism iv) Rickets and osteomalacia v) Osteoporosis	Adult: Initially, 1 mcg daily. Maintenance: 0.25-1 mcg daily. Child: Premature infants and neonates: 0.05-0.1 mcg/kg daily; <20 kg: 0.05 mcg/kg daily. Elderly: 0.5 mcg daily.	A*
Alfentanil HCl 0.5 mg/ml Injection	N01AH02110P3001XX	For use as short acting narcotic analgesic in short procedures and day-care surgical procedures	Initial dose: 20 - 40 mcg/kg. Supplemental dose: 15 mcg/kg or infusion 0.5 - 1.0 mcg/kg/min	A*
Alfuzosin HCl 10 mg Tablet	G04CA01110T1001XX	Treatment of functional symptoms related with benign prostatic hypertrophy (BPH)	10 mg once a day pre bed	A*

Generic Name	MDC	Indications	Dosage	Category
Alglucosidase alfa 5 mg/ml Injection	A16AB07000P4001XX	Infantile-onset Pompe disease	20 mg/kg of body weight administered once every 2 weeks as an intravenous infusion. Monitoring It is suggested that patients be monitored periodically for IgG antibody formation. Patients who experience Infusion-associated reactions suggestive of hypersensitivity may be tested for IgE antibodies to alglucosidase alfa. Treated patients who experience a decrease in benefit despite continued treatment with Alglucosidase Alfa, in whom antibodies are suspected to play a role, may be tested for neutralization of enzyme uptake or activity.	A*
Alkaline Nasal Douche	R01A000999L5001XX	To remove nasal plug	To be diluted with an equal volume of warm water before use	B
Allopurinol 100 mg Tablet	M04AA01000T1002XX	i) Frequent and disabling attacks of gouty arthritis (3 or more attacks/year). ii) Clinical or radiographic signs of erosive gouty arthritis. iii) The presence of tophaceous deposits. iii) Urate nephropathy. iv) Urate nephrolithiasis. v) Impending cytotoxic chemotherapy or radiotherapy for lymphoma or leukaemia	Initial dose : 100-300 mg daily. Maintenance : 300-600 mg daily. Maximum: 900 mg daily	A/KK
Allopurinol 300 mg Tablet	M04AA01000T1001XX	i) Frequent and disabling attacks of gouty arthritis (3 or more attacks/year). ii) Clinical or radiographic signs of erosive gouty arthritis. iii) The presence of tophaceous deposits. iii) Urate nephropathy. iv) Urate nephrolithiasis. v) Impending cytotoxic chemotherapy or radiotherapy for lymphoma or leukaemia	Initial dose : 100-300 mg daily. Maintenance : 300-600 mg daily. Maximum: 900 mg daily	A/KK

Generic Name	MDC	Indications	Dosage	Category
All-Trans Retinoic Acid 10 mg Capsule	L01XX14000C1001XX	Acute promyelocytic leukaemia	Induction: 45 mg/m2 daily for 30 - 90 days. Maintenance: 45 mg/m2 daily for 2 weeks every 3 months. Renal/or hepatic insufficiency: 25mg/m2 daily for 30-90 days. Refer to protocols	A*
Alprazolam 0.25 mg Tablet	N05BA12000T1001XX	Anxiety disorders	0.25 - 0.5 mg 3 times daily (elderly or delibitated 0.25 mg 2-3 times daily), increased if necessary to a total dose of 3 mg/day. Not recommended for children	A/KK
Alprazolam 0.5 mg Tablet	N05BA12000T1002XX	Anxiety disorders	0.25 - 0.5 mg 3 times daily (elderly or delibitated 0.25 mg 2-3 times daily), increased if necessary to a total dose of 3 mg/day. Not recommended for children	A
Alprazolam 1 mg Tablet	N05BA12000T1003XX	Anxiety disorders	0.25 - 0.5 mg 3 times daily (elderly or delibitated 0.25 mg 2-3 times daily), increased if necessary to a total dose of 3 mg/day. Not recommended for children	A
Alprostadil 500 mcg/ml Injection	C01EA01000P3001XX	For treatment of congenital heart diseases which are ductus arteriosus dependent	0.05 - 0.1 mcg/kg/min by continuous IV infusion, then decreased to lowest effective dose	A*
Alteplase 50 mg per vial Injection	B01AD02000P4001XX	Thrombolytic treatment of acute ischaemic stroke.	0.9 mg/kg (maximum of 90 mg) infused over 60 minutes with 10% of the total dose administered as an initial intravenous bolus. Treatment must be started as early as possible within 4.5 hours after onset of stroke symptoms and after exclusion of intracranial haemorrhage by appropriate imaging technique.	A*
Aluminium Hydroxide 600 mg Tablet	A02AB01250T1001XX	Dyspepsia, hyperphosphataemia	600 mg- 1.2 g 4 times daily and at bedtime or as required	A

Generic Name	MDC	Indications	Dosage	Category
Amantadine HCl 100 mg Capsule	N04BB01110C1001XX	Parkinson's disease	Initial dose: 100 mg daily and is increased to 100 mg twice daily (not later than 4 p.m.) after a week. Elderly over 65 years: less than 100 mg or 100 mg at intervals of more than 1 day	B
Amikacin 125 mg/ml Injection	J01GB06183P3003XX	Infections due to susceptible organisms	ADULT: (IM or IV): 15 mg/kg/day 8 - 12 hourly for 7 - 10 days. Maximum: 1.5 g/day. CHILD: 15 mg/kg/day 8 - 12 hourly. Maximum: 1.5 g/day. Neonates: Initial loading dose of 10 mg/kg followed by 7.5 mg/kg/day 12 hourly. Maximum 15mg/kg/day	A
Amikacin 250mg/ml Injection	J01GB06183P3002XX	Infections due to susceptible organisms	ADULT: (IM or IV): 15 mg/kg/day 8 - 12 hourly for 7 - 10 days. Maximum: 1.5 g/day. CHILD: 15 mg/kg/day 8 - 12 hourly. Maximum: 1.5 g/day. Neonates: Initial loading dose of 10 mg/kg followed by 7.5 mg/kg/day 12 hourly. Maximum 15mg/kg/day	A
Amiloride HCl 5 mg & Hydrochlorothiazide 50 mg Tablet	C03EA01900T1001XX	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	B
Amino Acids Injection	B05BA01910P3001XX	Source of amino acids in patients needing IV nutrition	Dose to be individualised. ADULT usually 500-2000 ml by IV. ADULT usual requirement for amino acid: 1-2 g/kg/day	A
Amino Acids with Electrolytes Injection	B05BA10910P3002XX	Source of amino acids and electrolytes in patients needing IV nutrition	Dose to be individualised. ADULT usual requirement for amino acid 1-2 g/kg/day	A
Amino Acids with Glucose with Electrolytes Injection	B05BA10910P3003XX	Source of amino acids, carbohydrate and electrolytes in patients needing IV nutrition	Dose to be individualised. ADULT usual requirement for amino acid 1-2 g/kg/day, carbohydrate 4-6 g/kg/day	A

Generic Name	MDC	Indications	Dosage	Category
Amino Acids, Glucose and Lipid with Electrolytes Injection	B05BA10910P3001XX	Source of amino acids, carbohydrate, lipid and electrolytes in patients needing IV nutrition	Dose to be individualised. ADULT: 500 - 2000 ml daily given by IV. ADULT usual requirement for amino acid 1-2 g/kg/ day, carbohydrate 4-6 g/kg/day, lipid 2-3 g/kg/day	A
Aminophylline 25 mg/ml Injection	R03DA05000P3001XX	Reversible airways obstruction, acute severe brochospasm	Adult: Loading dose: 5 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. Child: Loading dose: same as adult dose. Maintenance dose: 6 mth-9 yr: 1 mg/kg/hr and 10-16 yr: 0.8 mg/kg/hr.	B
Amiodarone 200 mg Tablet	C01BD01110T1001XX	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	A*
Amiodarone 50 mg/ml Injection	C01BD01110P3001XX	Arrhythmias when other drugs are contraindicated or ineffective	Initial infusion of 5mg/kg via large venous access over 20-120 minutes with ECG monitoring; subsequent infusion given if necessary according to response up to a maximum of 1.2 g in 24 hours	A*
Amisulpride 100 mg Tablet	N05AL05000T1001XX	Treatment of psychoses, particularly acute or chronic schizophrenia disorders characterized by positive symptoms(e.g. delusion, hallucinations, thought disorders) and/or negative symptoms(e.g. blunted emotions, emotional and social withdrawal) including when the negative symptoms predominate	Predominantly negative episodes: 50-300 mg once daily adjusted according to the patient?s response. Mixed episodes with positive and negative symptoms: 400-800 mg/day in 2 divided doses adjusted according to the patient?s response. Should be taken on an empty stomach (Preferably taken before meals)	A*

Generic Name	MDC	Indications	Dosage	Category
Amisulpride 400 mg Tablet	N05AL05000T1002XX	Treatment of psychoses, particularly acute or chronic schizophrenia disorders characterized by positive symptoms(e.g. delusion, hallucinations, thought disorders) and/or negative symptoms(e.g. blunted emotions, emotional and social withdrawal) including when the negative symptoms predominate	Predominantly negative episodes: 50-300 mg once daily adjusted according to the patient?s response. Mixed episodes with positive and negative symptoms: 400-800 mg/day in 2 divided doses adjusted according to the patient?s response. Should be taken on an empty stomach (Preferably taken before meals)	A*
Amitriptyline HCl 25 mg Tablet	N06AA09110T1001XX	Depression	Initially 25mg 3 times a day. Maintenance: 25-100mg daily in divided doses. Hospitalized patient: 100mg/day &gradually increase to 200-300mg/day. ADOLESCENT and ELDERLY: initially 20-30mg/day in divided doses w/ gradual increments. CHILD under 16 years are not recommended	B
Amlodipine 10 mg and Valsartan 160 mg Tablet	C09DB01935T1003XX	Essential hypertension in patients whose blood pressure is not adequately controlled by monotherapy	Doses range from amlodipine besylate 5 mg/valsartan 160 mg to amlodipine besylate 10 mg/valsartan 320 mg ORALLY once daily, with dose titration occurring every 1 to 2 weeks if necessary. MAX amlodipine besylate 10 mg/valsartan 320 mg	A/KK
Amlodipine 10 mg Tablet	C08CA01000T1002XX	Hypertension	5 mg once daily. Max: 10 mg once daily	B
Amlodipine 5 mg and Valsartan 160 mg Tablet	C09DB01935T1002XX	Essential hypertension in patients whose blood pressure is not adequately controlled by monotherapy	Doses range from amlodipine besylate 5 mg/valsartan 160 mg to amlodipine besylate 10 mg/valsartan 320 mg ORALLY once daily, with dose titration occurring every 1 to 2 weeks if necessary. MAX amlodipine besylate 10 mg/valsartan 320 mg	A/KK
Amlodipine 5 mg Tablet	C08CA01000T1001XX	Hypertension	5 mg once daily. Max: 10 mg once daily	B

Generic Name	MDC	Indications	Dosage	Category
Amlodipine besylate 10mg, valsartan 160mg, hydrochlorothiazide 12.5mg tablet	C09DX01941T1001XX	Treatment of essential hypertension. This fixed combination drug is not indicated for the initial therapy of hypertension.	One tablet daily i) A patient whose blood pressure is not adequately controlled on dual therapy with amlodipine besylate/valsartan/HCTZ. ii) For convenience, patients receiving valsartan, amlodipine and HCTZ from seperate tablets may be switched to amlodipine besylate/valsartan/HCTZ containing the same component dosses. Dosage may be increased after 2 weeks. The maximum antihypertensive effect of amlodipine besylate/valsartan/HCTZ is reached within 2 weeks of change in dose. The maximum recommended dose of amlodipine besylate/valsartan/HCTZ is 10/320/25 mg. It can be taken with or without food. It is recommended to take it with some water.	A/KK

Generic Name	MDC	Indications	Dosage	Category
Amlodipine besylate 10mg, valsartan 160mg, hydrochlorothiazide 25mg tablet	C09DX01941T1002XX	Treatment of essential hypertension. This fixed combination drug is not indicated for the initial therapy of hypertension.	One tablet daily i) A patient whose blood pressure is not adequately controlled on dual therapy with amlodipine besylate/valsartan/HCTZ. ii) For convenience, patients receiving valsartan, amlodipine and HCTZ from seperate tablets may be switched to amlodipine besylate/valsartan/HCTZ containing the same component dosses. Dosage may be increased after 2 weeks. The maximum antihypertensive effect of amlodipine besylate/valsartan/HCTZ is reached within 2 weeks of change in dose. The maximum recommended dose of amlodipine besylate/valsartan/HCTZ is 10/320/25 mg. It can be taken with or without food. It is recommended to take it with some water.	A/KK

Generic Name	MDC	Indications	Dosage	Category
Amlodipine besylate 5mg,valsartan 160mg,hydrochlorothiazide 12.5mg tablet	C09DX01941T1004XX	Treatment of essential hypertension. This fixed combination drug is not indicated for the initial therapy of hypertension.	One tablet daily i) A patient whose blood pressure is not adequately controlled on dual therapy with amlodipine besylate/valsartan/HCTZ. ii) For convenience, patients receiving valsartan, amlodipine and HCTZ from seperate tablets may be switched to amlodipine besylate/valsartan/HCTZ containing the same component dosses. Dosage may be increased after 2 weeks. The maximum antihypertensive effect of amlodipine besylate/valsartan/HCTZ is reached within 2 weeks of change in dose. The maximum recommended dose of amlodipine besylate/valsartan/HCTZ is 10/320/25 mg. It can be taken with or without food. It is recommended to take it with some water.	A/KK
Amlodipine Camsylate 5 mg and Losartan Potassium 100 mg Tablet	C09DB06935T1002XX	Treatment of essential hypertension in adults patients whose blood pressure is not adequately controlled on either monotherapy	Amlodipine 5mg/losartan 50mg OR amlodipine 5mg/losartan 100mg orally once daily. MAXIMUM DOSE: amlodipine 5mg/losartan 100mg. No dosage adjustment in mild renal impairment. Not recommended in moderate to severe renal impairment or in patients on dialysis. Not recommended in patients who require lower dose of losartan (25mg). Not recommended in patients < 18 years as safety and efficacy is not established in this group	A/KK

Generic Name	MDC	Indications	Dosage	Category
Amlodipine Camsylate 5 mg and Losartan Potassium 50 mg Tablet	C09DB06935T1001XX	Treatment of essential hypertension in adults patients whose blood pressure is not adequately controlled on either monotherapy	Amlodipine 5mg/losartan 50mg OR amlodipine 5mg/losartan 100mg orally once daily. MAXIMUM DOSE: amlodipine 5mg/losartan 100mg. No dosage adjustment in mild renal impairment. Not recommended in moderate to severe renal impairment or in patients on dialysis. Not recommended in patients who require lower dose of losartan (25mg). Not recommended in patients < 18 years as safety and efficacy is not established in this group	A/KK
Ammonium Bicarbonate, Tincture Ipecac, etc Mixture	R05CA04900L2101XX	Cough	Adults, the elderly and children over 12 years: 10-20ml, repeated after 4 hours if required. Not more than 4 doses to be taken in any 24 hours.	C
Amorolfine 5 % Nail Lacquer	D01AE16110L5001XX	Fungal nail infections	Apply to affected nail once or sometimes twice a week after filling and cleansing, allow to dry, treat finger nail for 6 months, toe nail for 9 - 12 months (review at intervals of 3 months)	A*
Amoxicillin & Clavulanate 228 mg/5 ml Syrup	J01CR02961F2102XX	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	A/KK
Amoxicillin 1 g & Clavulanate 200 mg Injection	J01CR02961P4002XX	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	A
Amoxicillin 250 mg Capsule	J01CA04012C1001XX	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	B

Generic Name	MDC	Indications	Dosage	Category
Amoxicillin 500 mg & Clavulanate 125 mg Tablet	J01CR02961T1002XX	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.	A/KK
Amoxicillin 500 mg and Clavulanate 100 mg Injection	J01CR02961P4001XX	Infections caused by susceptible organisms. Respiratory tract, skin, soft tissue, GUT infection, septicaemia, peritonitis, post-operative infection and osteomyelitis	CHILD less than 3 months: 30mg/kg 12 hourly. 3 months - 12 years: 30 mg/kg 6 - 8 hourly. ADULT: 1.2 g by IV or intermittent infusion 6 - 8 hourly	A
Amoxicillin 500 mg Capsule	J01CA04012C1002XX	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	B
Amoxicillin Trihydrate 125 mg/5 ml Syrup	J01CA04012F1001XX	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	B
Amphotericin B 0.15% Eye Drops	S01A000801D2002XX	Fungal infection of the cornea	1 drop hourly or 2 hourly	A
Amphotericin B 0.25% Eye Drops	S01A000801D2003XX	Fungal infection of the cornea	1 drop hourly or 2 hourly	A
Amphotericin B 50 mg Injection	J02AA01801P4001XX	Systemic fungal infections	ADULT: 0.25 mg/kg/day by IV infusion, gradually increase if tolerated to 1 mg/kg/day. Maximum in severe cases: 1.5 mg/kg daily or on alternate days. For neonates, lower doses are recommended	A
Ampicillin Sodium & Sulbactam Sodium 250 mg/5 ml Suspension	J01CR01961F2101XX	Treatment of susceptible bacterial infections	ADULT: (1-) 2-6g daily CHILDREN: (25-) 50-100mg/kg daily PREMATURE AND NEWBORNS: 25-50mg/kg daily	A
Ampicillin Sodium & Sulbactam Sodium 375 mg Tablet	J01CR01961T1001XX	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	A/KK

Generic Name	MDC	Indications	Dosage	Category
Ampicillin Sodium 1g & Sulbactam Sodium 500mg Injection	J01CR01961P4002XX	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	A
Ampicillin Sodium 500 mg & Sulbactam Sodium 250 mg Injection	J01CR01961P4001XX	Treatment of susceptible bacterial infections	ADULT: 1.5 - 12 g/day in divided doses 6 - 8 hourly. Maximum: 4 g Sulbactam per day. CHILD: 150-300mg/kg/day 6 - 8 hourly. Prophylaxis: 1.5 -3 g at induction of anaesthesia. May be repeated 6 - 8 hourly	A
Ampicillin Sodium 500 mg Injection	J01CA01520P4001XX	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	B
Ampicillin Trihydrate 125 mg/5 ml Suspension	J01CA01012F2101XX	Treatment of susceptible bacterial infections (non beta-lactamase-producing organisms)	CHILD: 50 - 100 mg/kg/day 4 times daily. Under 1 year: 62.5 - 125 mg 4 times daily, 1 - 10 years: 125 - 250 mg 4 times daily	B
Anastrozole 1 mg Tablet	L02BG03000T1001XX	Treatment of hormone responsive metastatic or locally advanced breast cancer after failure of tamoxifen	1 mg daily	A*
Anidulafungin 100mg Injection	J02AX06000P3001XX	Treatment of invasive candidiasis, including candidemia in adults when intolerance or resistance to Amphotericin B or Fluconazole	Loading dose of 200 mg on day 1, then 100 mg once daily thereafter for at least 14 days after the last positive culture.	A*
Antazoline HCl, Tetrahydrozoline HCl and Benzalkonium Cloride Eye Drops	S01GA52110D2001XX	Hay fever, conjunctivitis, allergic conjunctivitis, vernal keratoconjunctivitis and eczematosa	ADULT : Instill 1 drop, 3 - 4 times daily, into the lower eyelid. CHILD 2 - 12 years : Instill 1 drop daily or twice daily	A/KK

Generic Name	MDC	Indications	Dosage	Category
Anti RhD Gamma Globulin 250 mcg/2 ml Injection (500 units=100 mcg)	J06BB01000P3001XX	Prevention of Rh(D) sensitisation by IM injection to rhesus-negative woman after delivery of rhesus-positive infant	50 - 100 mcg within 72 hours after incompatible blood transfusion: 25 mcg (125 units) per ml transfused blood, up to 1000 mcg	B
Antilymphocyte/Antithymocyte Immunoglobulin (from Horse) Injection	L04AA03000P3001XX	i) To be used when conventional anti-rejection therapy is not successful ii) Treatment of aplastic anaemia not responding to oxymethalone after 3 months, in which there is persistent pancytopenia with repeated attacks of septicaemia and bleeding. iii) Severe aplastic anaemia with the following parameters: a) Granulocyte less than 0.5x109/L b) Platelet less than 20x109/L c) Reticulocyte less than 20x109/L iv) As a conditioning regime prior to transplant. v) Graft-versus-host disease treatment	10 - 30 mg/kg body weight daily. Slow IV infusion (over at least 4 hours) diluted in 250 - 500 ml Normal Saline. For Graft versus host disease treatment:40 mg/kg/day	A*
Antirabies Immunoglobulin (Human) 300 iu/2ml	J06BB05000P3001XX	Treatment of rabies, post-exposure	20 iu/kg; half by IM and half by infiltration around the wound	B
Antithymocyte Immunoglobulin (from rabbit) Injection	L04AA04000P3001XX	i)Prophylaxis of acute graft rejection ii)Treatment of acute graft rejection iii)Prophylaxis of acute and chronic graft versus host disease iv)Treatment of steroid-resistant, acute graft versus host disease v)Treatment of aplastic anemia	i)1.0 - 1.5 mg/kg/day for 2 - 9 days after transplantation of a kidney, pancreas or liver, for 2 - 5 days after heart transplantation ii)1.5 mg/kg/day for 3 - 14 days iii)2.5 - 5.0 mg/kg/day for 4 days iv)2.5 - 5.0 mg/kg/day for 5 days v)2.5 - 3.5 mg/kg/day for 5 days	A*
Antivenene Cobra Injection	J06AA03000P3002XX	Treatment of patients who exhibit manifestations of systemic envenoming following a bite by Cobra (Naja kaouthia).	Initial dose of 100ml of reconstituted antivenene given by slow intravenous infusion (2ml/min). Subsequent dose can be given every 12 hours according to the clinical symptoms. As product may differ from batches and manufacturer, it is strongly recommended to refer to the	B

Generic Name	MDC	Indications	Dosage	Category
			product insert on dosing recommendation.	
Antivenene Pit Viper Injection	J06AA03000P3001XX	Treatment of patients who exhibit manifestations of systemic envenoming following a bite by Malayan Pit Viper (Calloselasma rhodostoma).	Initial dose of 30ml of reconstituted antivenene given by slow intravenous infusion (2ml/min). Subsequent dose can be given every 6 hours according to the clinical symptoms. As product may differ from batches and manufacturer, it is strongly recommended to refer to the product insert on dosing recommendation.	B
Antivenene Serum (Sea snake) 1000 units Injection	J06AA03000P3003XX	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	B
Antivenene Serum Snake polyvalent Injection	J06AA03000P3004XX	Treatment of patients who exhibit manifestations of systemic envenoming following a bite by Indian Cobra (Naja naja),Common Krait (Bungarus caeruleus), Russell's Viper (Daboia russelli) and Saw-scaled Viper (Echis carinatus)	Recommended initial dose is 20ml by intravenous infusion. The injection should be given very slowly as 5 minutes by direct slow intravenous route or 1hour by infusion. If symptoms continue, further doses are administered as required until symptoms completely disappear	B
Aprepitant 125 mg Capsule	A04AD12000C1002XX	In combination with other antiemetic agents for prevention of delayed nausea and vomiting associated with initial and repeat course of highly emetogenic chemotherapy	125 mg 1 hour prior to chemotherapy on Day 1. To be given as part of a 3-day regimen that includes a corticosteroid and a 5-HT3 antagonist	A*

Generic Name	MDC	Indications	Dosage	Category
Aprepitant 80 mg Capsule	A04AD12000C1001XX	In combination with other antiemetic agents for prevention of delayed nausea and vomitting associated with initial and repeat course of highly emetogenic chemotherapy	80 mg once daily in the morning on Days 2 and Day 3. To be given as part of a 3-day regimen that includes a corticosteroid & a 5-HT3 antagonist	A*
Aprotinin 10,000 KIU/ml Injection	B02AB01000P3001XX	Only for Open Heart Surgery (extracorporeal circulation)	All patients should receive a 1 ml IV test dose at least 10 minutes prior to loading dose. Initially 2 million KIU bolus followed by 2 million KIU in heart-lung machine followed by a slow infusion of 500,000 KIU/hr until end of surgery. CHILD: 20,000 KIU/kg/day	A*
Aqueous Cream	D02AX00000G1001XX	Dry skin	As a soap or apply to the skin as an emollient cream	C+
Aripiprazole 10mg Tablet	N05AX12000T1001XX	i) Treatment of acute episodes of schizophrenia and for maintenance of clinical improvement during continuation therapy. ii) Treatment of acute manic episodes associated with bipolar I disorder	Schizophrenia: 10 or 15 mg/day. Maintenance dose: 15 mg/day. Bipolar mania: Starting dose: 15 or 30 mg/day. Dose adjustment should occur at intervals of not less than 24 hour	A*
Aripiprazole 15mg Tablet	N05AX12000T1002XX	i) Treatment of acute episodes of schizophrenia and for maintenance of clinical improvement during continuation therapy. ii) Treatment of acute manic episodes associated with bipolar I disorder	Schizophrenia: 10 or 15 mg/day. Maintenance dose: 15 mg/day. Bipolar mania: Starting dose: 15 or 30 mg/day. Dose adjustment should occur at intervals of not less than 24 hour	A*
Arsenic Trioxide 1 mg/ml Injection	L01XX27550P3001XX	Relapsed acute promyelocytic leukaemia (APML). To be prescribed by consultant haematologist only	Induction : 0.15 mg/kg/day IV until bone marrow remission. Total induction dose ≤ 60 doses. Consolidation : 0.15 mg/kg/day IV for 25 doses in 5 weeks (5 days per week, followed by 2 days interruption; treatment should begin 3-6 weeks after completion of induction therapy).	A*

Generic Name	MDC	Indications	Dosage	Category
Artemether 20mg + Lumefantrine 120mg	P01BE52981T1001XX	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	B
Artesunate 100 mg and Mefloquine HCl 220 mg Tablet	P01BF02000T1002XX	Treatment of acute uncomplicated Plasmodium falciparummalaria, resulting either from P. falciparum mono-infection or mixed infection with P. vivax.	Weight 5-8kg, Age 6-11 months, Dose: One tablet 25/55mg OD x 3 days Weight : 9-17kg, Age 1-6 years, Dose : Two tablet 25/55mg OD x 3 days Weight :18-29kg, Age 7-12 years, Dose :One tablet 100/220mg OD x 3 days Weight ≥30kg, Age ≥13 years, Dose:Two tablet 100/220mg OD x 3 days	A
Artesunate 25 mg and Mefloquine HCl 55 mg Tablet	P01BF02000T1001XX	Treatment of acute uncomplicated Plasmodium falciparummalaria, resulting either from P. falciparum mono-infection or mixed infection with P. vivax.	Weight 5-8kg, Age 6-11 months, Dose: One tablet 25/55mg OD x 3 days Weight : 9-17kg, Age 1-6 years, Dose : Two tablet 25/55mg OD x 3 days Weight :18-29kg, Age 7-12 years, Dose :One tablet 100/220mg OD x 3 days Weight ≥30kg, Age ≥13 years, Dose:Two tablet 100/220mg OD x 3 days	A

Generic Name	MDC	Indications	Dosage	Category
Artesunate 60 mg Injection	P01BE03000P3001XX	Treatment of severe malaria caused by Plasmodium falciparum 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.	A
Ascorbic Acid 100 mg Tablet	A11GA01000T1002XX	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.	C+
Ascorbic Acid 500 mg Tablet	A11GA01000T1003XX	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.	C+
Ascorbic Acid 500 mg/2 ml Injection	A11GA01000P3001XX	For prevention and treatment of scurvy	Therapeutic: Not less than 250 mg daily in divided doses	B
Atenolol 100 mg Tablet	C07AB03000T1002XX	Hypertension, angina pectoris, myocardial infarction and arrhythmias	Hypertension and arrythmias; 50 - 100 mg daily, Angina; 100 mg daily, Myocardial infarction; individualised	B
Atenolol 50 mg Tablet	C07AB03000T1001XX	Hypertension, angina pectoris, myocardial infarction and arrhythmias	Hypertension and arrythmias; 50 - 100 mg daily, Angina; 100 mg daily, Myocardial infarction; individualised	B

Generic Name	MDC	Indications	Dosage	Category
Atomoxetine HCl 10 mg Capsule	N06BA09110C1001XX	Attention deficit hyperactivity disorder (ADHD) in children 6 years and older who do not respond to methylphenidate or who have intolerable effects or have tics. Diagnosis should be made according to DSM IV criteria or the guidelines in ICD-10	CHILD and ADOLESCENTS up to 70 kg: Initially 0.5 mg/kg/day for at least 7 days, then increased according to response. Maintenance: 1.2 mg/kg/day. ADULTS and ADOLESCENTS more than 70 kg: Initially 40 mg/day for at least 7 days then increased according to response. Maintenance: 80 mg/day. Max 100 mg/ day	A*
Atomoxetine HCl 18 mg Capsule	N06BA09110C1002XX	Attention deficit hyperactivity disorder (ADHD) in children 6 years and older who do not respond to methylphenidate or who have intolerable effects or have tics. Diagnosis should be made according to DSM IV criteria or the guidelines in ICD-10	CHILD and ADOLESCENTS up to 70 kg: Initially 0.5 mg/kg/day for at least 7 days, then increased according to response. Maintenance: 1.2 mg/kg/day. ADULTS and ADOLESCENTS more than 70 kg: Initially 40 mg/day for at least 7 days then increased according to response. Maintenance: 80 mg/day. Max 100 mg/ day	A*
Atomoxetine HCl 25 mg Capsule	N06BA09110C1003XX	Attention deficit hyperactivity disorder (ADHD) in children 6 years and older who do not respond to methylphenidate or who have intolerable effects or have tics. Diagnosis should be made according to DSM IV criteria or the guidelines in ICD-10	CHILD and ADOLESCENTS up to 70 kg: Initially 0.5 mg/kg/day for at least 7 days, then increased according to response. Maintenance: 1.2 mg/kg/day. ADULTS and ADOLESCENTS more than 70 kg: Initially 40 mg/day for at least 7 days then increased according to response. Maintenance: 80 mg/day. Max 100 mg/ day	A*

Generic Name	MDC	Indications	Dosage	Category
Atomoxetine HCl 40 mg Capsule	N06BA09110C1004XX	Attention deficit hyperactivity disorder (ADHD) in children 6 years and older who do not respond to methylphenidate or who have intolerable effects or have tics. Diagnosis should be made according to DSM IV criteria or the guidelines in ICD-10	CHILD and ADOLESCENTS up to 70 kg: Initially 0.5 mg/kg/day for at least 7 days, then increased according to response. Maintenance: 1.2 mg/kg/day. ADULTS and ADOLESCENTS more than 70 kg: Initially 40 mg/day for at least 7 days then increased according to response. Maintenance: 80 mg/day. Max 100 mg/ day	A*
Atomoxetine HCl 60mg Capsule	N06BA09110C1005XX	Attention deficit hyperactivity disorder (ADHD) in children 6 years and older who do not respond to methylphenidate or who have intolerable effects or have tics. Diagnosis should be made according to DSM IV criteria or the guidelines in ICD-10	CHILD and ADOLESCENTS up to 70 kg: Initially 0.5 mg/kg/day for at least 7 days, then increased according to response. Maintenance: 1.2 mg/kg/day. ADULTS and ADOLESCENTS more than 70 kg: Initially 40 mg/day for at least 7 days then increased according to response. Maintenance: 80 mg/day. Max 100 mg/ day	A*
Atorvastatin 20 mg Tablet	C10AA05000T1002XX	Hypercholesterolaemia and coronary heart disease intolerant or not responsive to other forms of therapy	10 mg once daily. Maximum: 80 mg daily	A/KK
Atorvastatin 40 mg Tablet	C10AA05000T1001XX	Hypercholesterolaemia and coronary heart disease intolerant or not responsive to other forms of therapy	10 mg once daily. Maximum: 80 mg daily	A/KK
Atorvastatin 80 mg Tablet	C10AA05000T1004XX	Hypercholesterolaemia and coronary heart disease intolerant or not responsive to other forms of therapy	10 mg once daily. Maximum: 80 mg daily	A/KK

Generic Name	MDC	Indications	Dosage	Category
Atosiban 7.5 mg/ml Injection	G02CX01122P3001XX	To delay imminent preterm birth in pregnant women with i)Regular uterine contractions of at least 30 seconds duration at a rate of ≥ 4 per 30 minutes ii) A cervical dilation of 1 to 3 cm (0 - 3 nulliparas) and effacement of ≥ 50% iii) Age ≥ 18 years iv) A gestational age from 28 until 33 completed weeks v) A normal foetal heart rate.	Initial intravenous bolus dose of 6.75mg (using 7.5mg/ml solution for injection). Immediately followed by a continuous high dose infusion (loading infusion 300 mcg/min using 7.5mg/ml concentrate for solution for infusion) during three hours, followed by lower infusion of 100mcg/min up to 45 hours. Duration of treatment should not exceed 48 hours. Total dose given during a full course should not exceed 330mg of the active substance.	A*
Atracurium Besylate 10 mg /ml in 2.5 ml Injection	M03AC04197P3001XX	Muscle relaxant in general anaesthesia, Endotracheal intubation, Aid controlled ventilation.	Adult & childn >2 mth 0.3-0.6 mg/kg IV. Endotracheal intubation dose: 0.5-0.6 mg/kg. Supplementary dose: 0.1-0.2 mg/kg as required. Continuous infusion rates of 0.3-0.6 mg/kg/hr to maintain neuromuscular block during long surgical procedure.	A*
Atracurium Besylate 10 mg /ml in 5 ml Injection	M03AC04197P3002XX	Muscle relaxant in general anaesthesia, Endotracheal intubation, Aid controlled ventilation.	Adult & childn >2 mth 0.3-0.6 mg/kg IV. Endotracheal intubation dose: 0.5-0.6 mg/kg. Supplementary dose: 0.1-0.2 mg/kg as required. Continuous infusion rates of 0.3-0.6 mg/kg/hr to maintain neuromuscular block during long surgical procedure.	A*
Atropine Sulphate 0.3%, Cocaine HCl 1.7%, Adrenaline Acid Tartrate 0.03% Mydriatic Injection	S01F000183P3001XX	Subconjunctival injection to dilate pupils resistant to topical mydriatics	1 - 2 drops	A
Atropine Sulphate 1% Eye Drops	S01FA01183D2001XX	Determination of refraction, strabismus, iritis and iridocyclitis, after extra or intracapsular extraction of lens	PREOPERATIVE MYDRIASIS : one drop of a 1% solution supplemented with one drop of 2.5 or 10% phenylephrine prior to surgery. ANTERIOR UVEITIS or POSTOPERATIVE MYDRIASIS : one drop of a 1% or 2% solution up to 3 times a day	B

Generic Name	MDC	Indications	Dosage	Category
Atropine Sulphate 1mg/ml Injection	A03BA01183P3001XX	i) Reduce vagal inhibition,salivary and bronchiol 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.	B
Azacitidine Powder for suspension for injection 100mg/vial	L01BC07000P4001XX	First line therapy for intermediate-2 and high risk MDS, CMMOL with 10-29% blasts with no transplant option and elderly AML with 20-30% blasts and multilineage dysplasia.	Recommended starting dose for the first treatment cycle, for all patients regardless of baseline haematology laboratory values, is 75mg/m2 of body surface area. Injected subcutaneously. Daily for 7 days, followed by a rest period of 21 days (28 day treatment cycle)	A*

Generic Name	MDC	Indications	Dosage	Category
Azathioprine 50 mg Tablet	L04AX01000T1001XX	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.	A
Azelaic Acid 20% Cream	D10AX03000G1001XX	Acne vulgaris	Apply twice daily (sensitive skin, once daily for 1st week). Treatment should not exceed 6 months	A*
Azithromycin 200 mg/5 ml Granules	J01FA10011F1001XX	Treatment of complicated respiratory tract infections not responding to standard macrolides	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	A*
Azithromycin 250 mg Tablet	J01FA10011T1001XX	i) Treatment of complicated respiratory tract infection not responding to standard macrolides ii) Adult treatment of uncomplicated genital infections due to Chlamydia trichomatis or susceptible Neisseria gonorrhoea iii) Prophylaxis against Mycobacterium avium complex in patients with advanced HIV	i) 500 mg daily for 3 days ii) 1 g as a single dose iii) 1 g weekly	A*
Azithromycin 500 mg Injection	J01FA10011P4001XX	Only for treatment of severe atypical pneumonia	500 mg IV as a single daily dose for a minimum of two days followed by 500 mg oral dose as a single daily dose to complete a 7 - 10 days course	A*

Generic Name	MDC	Indications	Dosage	Category
Bacampicillin 400 mg Tablet	J01CA06000T1001XX	Infections caused by ampicillin-sensitive gram positive& gram negative microorganisms	ADULT: 400 mg twice daily. Severe infection: 800 mg twice daily. CHILD more than 25 kg: 12.5 - 25 mg/kg 12 hourly	B
Baclofen 10 mg Tablet	M03BX01000T1001XX	Spasticity of the skeletal muscle	ADULT: 5 mg 3 times daily. Max: 80 mg daily. CHILD: 0.75 - 2 mg/kg daily (more than 10 years, maximum: 2.5 mg/kg daily)	B
Balanced Salt Solution	B05CB10907L5001XX	For irrigation during ocular surgery	Irrigate as directed	A
Balanced Salt Solution PLUS (fortified with sodium bicarbonate, glucose & glutathione)	B05CB10905L5001XX	For irrigation during intraocular surgery especially in patients with poor cornea endothelium and poorly controlled diabetes	Irrigate as directed	A
Barium Sulphate Suspension	V08BA01183L8001XX	For x-ray examination of the alimentary tract: i) Oesophagus ii) Stomach and duodenum iii) Colon	i) Up to 150 ml of a 50% - 200% suspension orally ii) Up to 300 ml of a 30% - 200% suspension orally iii) Up to 2 litre of a 30% - 200% suspension orally	B
Basiliximab 20 mg Injection	L04AC02000P3001XX	Prophylaxis of acute organ rejection in de novo renal transplantation.	ADULT & CHILD 2 years and above & 35 kg or more:20 mg /dose. 2 years or more but less than 35kg:10 mg/dose. First dose given within 2 hours before start of transplantation and second dose 4th day after transplant	A*
BCG 81 mg/3 ml	L03AX03000P3001XX	Superficial bladder cancer	81 mg intravesically once weekly for 6 weeks, followed by treatments at 3, 6, 12, 18, and 24 months after initial treatment	A*
BCG Vaccine Freeze-Dried Injection	J07AN01000P4001XX	For the prevention of tuberculosis	0.1 ml by intradermal injection. INFANT under 12 months: 0.05 ml	C+

Generic Name	MDC	Indications	Dosage	Category
Beclomethasone Dipropionate 100 mcg/dose Inhaler	R03BA01133A2101XX	Prophylaxis of asthma especially if not fully controlled by bronchodilators	Adults: The usual maintenance dose is one to two inhalations (200-400 mcg) twice daily.If needed,the dose can be increased up to 1600 mcg/day divided in two to four doses : Children 6-12 years old: One inhalation (200 mcg) two times daily and dose may be increased up to 800 mcg/day in divided two to four doses if necessary.	B
Beclomethasone dipropionate 100mcg and formoterol fumarate dehydrate 6mcg pressurized inhalation solution	R03AK07986A2101XX	Regular treatment of asthma where use of a combination product (inhaled corticosteroid and long-acting beta2 agonist) is appropriate in: i.Patients not adequately controlled with inhaled corticosteroids and ?as needed? inhaled short-acting beta2 agonist or ii.Patients already adequately controlled on both inhaled corticosteroids and long-acting beta2-agonists	Dose recommended for patients 18 years and above. One or two inhalations twice daily. The maximum daily dose is 4 inhalations daily. No need to adjust dose in elderly patients. There are no data available for use in patients with hepatic or renal impairment.	A/KK
Beclomethasone Dipropionate 200 mcg/dose Inhaler	R03BA01133A2102XX	Prophylaxis of asthma especially if not fully controlled by bronchodilators	ADULT : 1 - 2 puff twice daily. May increase to 2 puff 2 - 4 times daily CHILD : 1 puff twice daily. May increase to 1 puff 2 - 4 times daily	A/KK
Beclomethasone Dipropionate 50 mcg/dose Nasal Spray	R01AD01133A4101XX	Prophylaxis and treatment of perennial and seasonal allergic rhinitis and vasomotor rhinitis	ADULT and CHILD over 6 years : Apply 100 mcg (2 sprays) into each nostril twice daily or 50 mcg (1 spray) into each nostril 3 - 4 times/day. Maximum 400 mcg daily (8 sprays). When symptoms controlled, reduce dose to 50 mcg (1 spray) into each nostril twice daily	A/KK
Benzalkonium 0.01% Cream	D08AJ01000G1001XX	Prevention and treatment of nappy rash	Wash and dry baby's bottom. Apply by spreading the cream evenly paying particular attention to the fold of the skin, after every nappy change	B

Generic Name	MDC	Indications	Dosage	Category
Benzalkonium Chloride Disinfectant Solution	V07AV00100L9908XX	Low level disinfectant suitable for general cleaning and disinfection of hard surface	Cleaning purposes: Dilute 1 in 10. Disinfection, use undiluted	C
Benzathine Penicillin 2.4 MIU (1.8 g) Injection	J01CE08702P4001XX	i) Treatment of mild to moderately severe infections due to Penicillin G-sensitive organisms ii) Treatment of syphillis	i) ADULT: 1.2 mega units IM ii) For syphillis: 2.4 mega units weekly for 1 - 3 weeks	B
Benzhexol 2 mg Tablet	N04AA01110T1001XX	i) Parkinson's disease ii) Drug induced parkinsonism iii) Dystonias	ADULT: Initially 1 mg daily, increase gradually. Maintenance: 5 - 15 mg daily in 3 - 4 divided doses. (Max 15mg/day)	B
Benzoic Acid Compound Half Strength (Paed) Ointment	D01AE12952G5001XX	Tinea infections of the skin	Apply sparingly to affected area once or twice daily	C
Benzoic Acid Compound Ointment	D01AE12952G5002XX	Tinea infections of thickened skin of palms and soles	Apply sparingly to affected area once or twice daily	C
Benzoin Compound Tincture	D08AX00000L5001XX	Infected skin, lesions, cuts, abrasions, wounds and burns	Apply undiluted to the skin 1 or 2 times daily. Duration of therapy, may be weeks to months depending on the infection being treated	C
Benzoyl Peroxide 10% Gel	D10AE01241G3002XX	Mild to moderate acne vulgaris	Apply 1-2 times daily preferably after washing with soap and water	B
Benzoyl Peroxide 5% Gel	D10AE01241G3001XX	Mild to moderate acne vulgaris	Apply 1-2 times daily preferably after washing with soap and water	B
Benzydamine HCl 0.15% Solution	A01AD02110M2001XX	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	B

Generic Name	MDC	Indications	Dosage	Category
Benzydamine Hydrochloride 3.0 mg/ml throat spray	A01AD02110A4201XX	Temporary relief of painful conditions of the mouth and throat including tonsillitis, sore throat, radiation mucositis, aphthous ulcers, pharyngitis, swelling, redness, inflammatory conditions, post-orosurgical and periodontal procedures. (For pediatric and otorhinolaringology use. Restrict to patients who are not able to gargle)	ADULTS and CHILDREN OVER 12 YEARS: 2-4 sprays (1-2mg) directly onto the sore/inflamed area and swallow gently. Repeat every 1 1/2 to 3 hours as necessary. CHILDREN 6-12 YEARS: 2 sprays (1mg) directly onto sore/ inflamed area and swallow gently. Repeat every 11/2 to 3 hours as necessary. CHILDREN UNDER 6 YEARS: Not recommended. Uninterrupted treatment should not exceed seven days, unless under medical supervision	A*
Benzyl Benzoate 12.5 % Emulsion (Child)	P03AX01252L2001XX	Scabies and pediculosis, for child under 2 years	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	C
Benzyl Benzoate 25 % Emulsion (Adult)	P03AX01000L2002XX	Scabies and pediculosis	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	C+

Generic Name	MDC	Indications	Dosage	Category
Benzylpenicillin 1 mega unit (600 mg) Injection	J01CE01702P4001XX	i) Infections caused by susceptible organisms ii) Infective endocarditis	i) Adult: 600mg - 3600mg (1 - 6 mega units) daily, divided into 4 to 6 doses. Higher doses (24 mega units) in divided doses may be given in serious infections such as meningitis. Child 1 month to 12 years old: 100mg/kg/day in 4 divided doses, not exceeding 4g/day; Infants 1 -4 weeks: 75mg/kg/day in 3 divided doses; Newborn Infants: 50mg/kg/day in 2 divided doses ii)7.2 to 12g (12 - 20 mega units) maybe given daily in divided doses	B
Benzylpenicillin 10,000 units/ml Eye Drops	S01AA14702D2002XX	Eye infection	1-2 drops every 15 minutes or accordingly to needs of the patient	B
Benzylpenicillin 2,500 units/ml (1.5 mg/ml) Eye Drops	S01AA14702D2001XX	Eye infection	1-2 drops every 15 minutes or accordingly to needs of the patient	B
Benzylpenicillin 5 mega units (3 g) Injection	J01CE01702P4002XX	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	B
Beractant Intratracheal Suspension (200 mg phospholipids in 8 ml vial)	R07AA02000L8001XX	Treatment of newborn baby with birth weight of 700 g or greater undergoing mechanical ventilation for respiratory distress syndrome, whose heart rate and arterial oxygenation are continuously monitored	100 mg/kg (4 ml/kg) body weight intratracheally up to 4 doses in 1st 48 hr. Doses should not be given more frequently than 6 hrly. To be administered as soon as possible.	A*
Betahistine Dihydrochloride 16 mg Tablet	N07CA01110T1002XX	Vertigo, tinnitus and hearing loss associated with Meniere's disease	Given in doses of 8 to 16 mg orally 3 times daily (total 24 to 48 mg/day) preferably with food. CHILD not recommended	A/KK
Betahistine Dihydrochloride 24 mg Tablet	N07CA01110T1003XX	Vertigo, tinnitus and hearing loss associated with Meniere's disease	24-48mg in divided doses daily	A*

Generic Name	MDC	Indications	Dosage	Category
Betahistine Dihydrochloride 8 mg Tablet	N07CA01110T1001XX	Vertigo, tinnitus and hearing loss associated with Meniere's disease	Given in doses of 8 to 16 mg orally 3 times daily (total 24 to 48 mg/day) preferably with food. CHILD not recommended	A/KK
Betamethasone 0.5 mg Tablet	H02AB01000T1001XX	Suppression of inflammatory and allergic disorders, congenital adrenal hyperplasia, cerebral oedema	0.5 - 9 mg daily in divided doses. CHILD: 0.5 - 7.5 mg/m2/day divided every 6 - 12 hours	A
Betamethasone 17-Valerate 0.01-0.05% Cream	D07AC01256G1001XX	Eczemas, prurigo nodularis, limited psoriasis in appropriate in sites	Apply sparingly to affected area 2 - 3 times daily then reduced to once daily when improvement occurs	B
Betamethasone 17-Valerate 0.01-0.05% Ointment	D07AC01256G5001XX	Eczema, prurigo nodularis, limited psoriasis in appropriate in sites	Apply sparingly to affected area 2 - 3 times daily then reduced to once daily when improvement occurs	B
Betamethasone 17-Valerate 0.1% Cream	D07AC01256G1002XX	Eczemas, prurigo nodularis, psoriasis (excluding widespread plaque psoriasis)	Apply sparingly to affected area 2 - 3 times daily then reduced to once daily when improvement occurs	A
Betamethasone 17-Valerate 0.1% Ointment	D07AC01256G5002XX	Eczema, prurigo nodularis, psoriasis (excluding widespread plaque psoriasis)	Apply sparingly to affected area 2-3 times daily then reduced to once daily when improvement occurs	A
Betamethasone Disodium Phoshate 0.1% Ear Drops	S03BA03162D1001XX	Non-infected inflammatory conditions	Apply 2 - 3 drops every 2 - 3 hours, reduce frequency when relief obtained	B
Betamethasone Disodium Phoshate 0.5% Ear Drops	S03BA03162D1002XX	Non-infected inflammatory conditions	Apply 2 - 3 drops every 2 - 3 hours, reduce frequency when relief obtained	B
Betamethasone Disodium Phosphate 0.1% Eye Drops	S01BA06162D2001XX	Non-infected inflammatory conditions of the eyes	1 - 2 drops every 1 - 2 hours until controlled then reduce frequency	A
Betamethasone Disodium Phosphate 0.1% Eye Ointment	S01BA06162G5101XX	Non-infected inflammatory conditions of the eyes	2 - 4 times daily or at night when used with eye drops	A
Betamethasone Disodium Phosphate and Neomycin Sulphate 0.5% Ear Drops	S03CA06991D1001XX	Allergic dermatosis in the ear	Apply 2 - 3 drops 3 - 4 times daily, reduce frequency when relief obtained	B
Betamethasone Disodium Phosphate and Neomycin Sulphate Eye Drops	S01CA05991D2001XX	Infected inflammatory conditions of the eyes	2 - 3 drops every 2 - 3 hours	A

Generic Name	MDC	Indications	Dosage	Category
Betamethasone Sodium Phosphate 4 mg/ml Injection	H02AB01162P3001XX	Pre-operative and in serious trauma or illness, shock, as adjunctive therapy in rheumatoid disorders, ocular, dermatologic and respiratory allergic and inflammatory states	Usual intravenous doses are up to 9 mg/day of the sodium phosphate salt only. CHILD: IM: 0.5 - 7.7 mg base/m2/day divided every 6 - 12 hours. ADOLESCENT and ADULT, IM: 0.6 - 9 mg divided every 12 - 24 hours	B
Betaxolol 0.25% Eye Suspension	S01ED02110D2001XX	Chronic open-angle glaucoma, ocular hypertension	One to two drops in the affected eye(s) twice daily	A
Bicalutamide 50 mg Tablet	L02BB03000T1001XX	Advanced prostate cancer in combination with LHRH analogue therapy or surgical castration.	50 mg once daily. (morning or evening), with or without food. Take on the same time each day. Adult: When used with gonadorelin analogue: Usual dose: 50 mg once daily. May be started with or at least 3 days before starting gonadorelin analogue therapy.	A*
Bimatoprost 0.03% Ophthalmic Solution	S01EE03000D2001XX	Lowering of intraocular pressure in patients with open-angle glaucoma and ocular hypertension who are intolerant of other intraocular pressure lowering medications or insufficiently responsive to another intraocular pressure lowering medication	1 drop in affected eye(s) once daily at evening	A*
Bisacodyl 10 mg Suppository	A06AB02000S2002XX	i) Constipation ii) Bowel preparation for radiological procedures and surgery	i) ADULT and CHILD over 10 years: 10 mg, CHILD less than 10 years 5 mg insert rectally ii) ADULT 10-20 mg, CHILD over 4 years 5 mg the following morning before procedures insert rectally	C
Bisacodyl 5 mg Suppository	A06AB02000S2001XX	i) Constipation ii) Bowel preparation for radiological procedures and surgery	i) ADULT and CHILD over 10 years: 10 mg, CHILD less than 10 years 5 mg insert rectally ii) ADULT 10-20 mg, CHILD over 4 years 5 mg the following morning before procedures insert rectally	C

Generic Name	MDC	Indications	Dosage	Category
Bisacodyl 5 mg Tablet	A06AB02000T1001XX	i) Constipation ii) Bowel preparation for radiological procedures and surgery	i) ADULT and CHILD over 10 years 5-10 mg, CHILD 4-10 years 5 mg. To be taken at night for effect on the following morning ii) ADULT 10-20 mg the night before procedures, CHILD over 4 years 5 mg the night before procedures	C
Bismuth Subnitrate, Iodoform and Liquid Paraffin Paste	R01AX30984G6001XX	As a mild antiseptic for wounds and abscesses. Sterile gauze impregnated with paste for packing cavities after otorhinological surgery	As directed for local application	B
Bisoprolol Fumarate 2.5 mg Tablet	C07AB07000T1001XX	Treatment of stable moderate to severe congestive cardiac failure in addition to ACEI's and diuretics	1.25 mg once daily to 5 - 10 mg daily	B
Bisoprolol Fumarate 5 mg Tablet	C07AB07000T1002XX	Treatment of stable moderate to severe congestive cardiac failure in addition to ACEI's and diuretics	1.25 mg once daily to 5 - 10 mg daily	B
Bleomycin HCl 15 mg Injection	L01DC01110P4001XX	Squamous cell carcinoma, germ cell tumours, lymphomas. Routes: SC, IM, IV (either as bolus or as infusion over 24 hours), intra-arterial, intra-pleural	15 - 30 mg weekly in divided doses or 10 - 20 mg/m2 once or twice weekly or 10 mg/m2 slow bolus in 15 minutes D1 and D15. Total dosage:should not exceed 300 mg. CHILD: 10 - 15 mg/m2 over 6 hours every 3 - 4 weeks	A
Boric Acid with Spirit 2% w/v Ear Drops	S02AA03000D1001XX	Perforated eardrum	3 drops instilled into affected ear 3 - 4 times daily	C
Bortezomib 3.5 mg Injection	L01XX32000P3001XX	Treatment of multiple myeloma in patient who have received at least one prior therapy	1.3 mg/ m2/dose given as IV bolus injection twice weekly for two weeks (days 1, 4, 8, and 11) followed by a 10- day rest period (days 12-21). At least 3 days should elapse between consecutive doses of bortezomib	A*

Generic Name	MDC	Indications	Dosage	Category
Bosentan 125 mg tablet	C02KX01000T1001XX	For the treatment of pulmonary arterial hypertension (PAH) in patients with WHO Class III or IV symptoms, to improve exercise ability and decrease the rate of clinical worsening (To be used by those who are trained and specialized in treating and managing PAH)	Initially 62.5 mg bd for 4 weeks, then increase to the maintenance dose of 125 mg bd	A*
Brimonidine Tartrate 0.15% Ophthalmic	S01EA05123D2001XX	Lowering of intraocular pressure in patients with open-angle glaucoma or ocular hypertension	1 drop in the affected eye(s) 3 times daily	A*
Bromazepam 3 mg Tablet	N05BA08000T1002XX	Anxiety disorders	Adult: Initially, 6-18 mg daily in divided doses. Doses up to 60 mg daily have been used. Elderly: Max initial dose: 3 mg daily	A
Bromhexine HCl 4 mg/2 ml Injection	R05CB02110P3001XX	Secretolytic therapy in acute and chronic bronchopulmonary diseases associated with abnormal mucous secretion and impaired mucous transport	4 to 8 mg SC, IM or IV 2 - 3 times daily (maximum 24mg/ day). Elderly: Max initial dose: 3 mg daily.	A
Bromhexine HCl 4 mg/5 ml Elixir	R05CB02110L1001XX	Secretolytic therapy in acute and chronic bronchopulmonary diseases associated with abnormal mucous secretion and impaired mucous transport	1) Adults :10 ml three times a day.Can increase up to 15 ml four times a day. 2)Children 5 to 12 years : 5 ml four times a day 3)Children 2 to 5 years: 5 ml two times a day	B
Bromhexine HCl 8 mg Tablet	R05CB02110T1001XX	Secretolytic therapy in acute and chronic bronchopulmonary diseases associated with abnormal mucous secretion and impaired mucous transport	ADULT and CHILD more than 12 years : 8 mg 3 times daily, 6 - 12 years : 4 mg 3 times daily, 2 - 6 years : 4 mg 2 times daily	B
Bromocriptine Mesilate 10 mg Tablet	G02CB01196T1003XX	i) Hypogonadism or Galactorrhoea ii) Acromegaly	i) Initially 1 - 1.25 mg at bedtime increased gradually, usual dose: 7.5 mg daily in divided doses. Max 30 mg daily ii) 1.25 - 2.5 mg at bedtime for 3 days and may be increased by 1.25 - 2.5 mg every 3 - 7 days up to 30 mg a day in divided doses	A/KK

Generic Name	MDC	Indications	Dosage	Category
Bromocriptine Mesilate 2.5 mg Tablet	G02CB01196T1001XX	i) Hypogonadism or Galactorrhoea ii) Acromegaly	i) Initially 1 - 1.25 mg at bedtime increased gradually, usual dose: 7.5 mg daily in divided doses. Max 30 mg daily ii) 1.25 - 2.5 mg at bedtime for 3 days and may be increased by 1.25 - 2.5 mg every 3 - 7 days up to 30 mg a day in divided doses	A/KK
Bromocriptine Mesilate 5 mg Tablet	G02CB01196T1002XX	i) Hypogonadism or Galactorrhoea ii) Acromegaly	i) Initially 1 - 1.25 mg at bedtime increased gradually, usual dose: 7.5 mg daily in divided doses. Max 30 mg daily ii) 1.25 - 2.5 mg at bedtime for 3 days and may be increased by 1.25 - 2.5 mg every 3 - 7 days up to 30 mg a day in divided doses	A/KK
Budesonide 1 mg/2 ml Nebuliser Solution	R03BA02000A3002XX	Maintenance treatment of asthma as prophylactic therapy especially if not fully controlled by bronchodilators	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	B
Budesonide 100 mcg/dose Inhaler	R03BA02000A2101XX	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 taken orally in 2 - 4 divided doses	B

Generic Name	MDC	Indications	Dosage	Category
Budesonide 160 mcg and Formoterol 4.5 mcg Inhalation	R03AKO7989A2101XX	i)Regular treatment of asthma where use of a combination (inhaled corticosteroid & long-acting β2-agonist) is appropriate. ii) Symptomatic treatment of patients with severe COPD (FEV1<50% predicted normal) & a history of repeated exacerbations, who have significant symptoms despite regular therapy with long-acting bronchodilators.	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 ≥18 yr 320 mcg/day either as 160 mcg bd or 320 mcg 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. Childn & adolescent <18 yr Not recommended. COPD Adult ≥18 yr 320 mcg bd.	A/KK
Budesonide 200 mcg/dose Inhalation	R03BA02000A2102XX	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 taken orally in 2 - 4 divided doses	B

Generic Name	MDC	Indications	Dosage	Category
Budesonide 320 mcg and Formoterol 9 mcg Inhalation	R03AK07989A2102XX	i) Regular treatment of asthma where use of a combination (inhaled corticosteroid & long-acting β2-agonist) is appropriate. ii) Symptomatic treatment of patients with severe COPD (FEV1<50% predicted normal) & a history of repeated exacerbations, who have significant symptoms despite regular therapy with long-acting bronchodilators.	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 ≥18 yr 320 mcg/day either as 160 mcg bd or 320 mcg 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. Children & adolescent less than 18 yr: Not recommended. COPD; Adult more than or equal to 18 yr: 320 mcg bd.	A/KK
Budesonide 500 mcg/2 ml Nebuliser Solution	R03BA02000A3001XX	Maintenance treatment of asthma as prophylactic therapy especially if not fully controlled by bronchodilators	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	B
Budesonide 64mcg Nasal Spray	R01AD05000A4103XX	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	A

Generic Name	MDC	Indications	Dosage	Category
			nostril twice daily. Nasal polyps : 2 spray twice daily	
Bumetanide 0.5 mg/ml Injection	C03CA02000P3001XX	Oedema used in furosemide allergic patient	IV injection: 1 - 2 mg repeated after 20 mins. IV infusion: 2 - 5 mg over 30 - 60 mins	A*
Bumetanide 1 mg Tablet	C03CA02000T1001XX	Oedema used in furosemide allergic patient	1 mg in the early evening. Up to 5 mg daily in severe cases	A*
Bupivacaine 0.125% Epidural Injection	N01BB01110P3004XX	Epidural analgesia for postoperative pain relief.	Infuse at 6 - 15 ml/hour. Not to exceed 2 mg/kg in a single dose.	A
Bupivacaine 0.5 % Heavy Injection	N01BB01110P3003XX	Used for spinal anaesthesia	ADULT: 2 - 4 ml. Not to exceed 2 mg/kg in a single dose	A
Bupivacaine 0.5 % Injection	N01BB01110P3002XX	For peripheral sympathetic nerve and epidural (excluding caudal) anaesthesia and obstetrics anaesthesia	Regional nerve block or epidural block: 15 - 30 ml. Nerve block of finger or toe: 2 - 6 ml. Maximum: 2 mg/kg body weight in any 4 hours period, equivalent to 25 - 30 ml in adults of average weight	B
Bupivacaine 0.5 % with Adrenaline 1:200,000 Injection	N01BB51975P3001XX	Regional nerve block or epidural block.	10 - 40 ml (0.25 %) or maximum : 2 mg/kg body weight in any 4 hours period, equivalent to 25 - 30 ml of 0.5% solution	B
Buprenorphine 10mcg/hr transdermal patch	N02AE01110M7001XX	Treatment of non-malignant pain of moderate intensity when an opioid is necessary for obtaining adequate analgesia. Not suitable for the treatment of acute pain. Restrictions: For elderly patients or patients with comorbidities/difficult to swallow	Once weekly transdermal patch/for hospital use only. Patient aged 18 years and over. Initial dose: 5 mcg/hr For elderly: Renal impairment. No special dose adjustments necessary in patients with renal impairment Hepatic impairment Patients with hepatic insufficiency should be carefully monitored during the treatment with buprenorphine patch. Alternate therapy should be considered. Patch should be	A*

Generic Name	MDC	Indications	Dosage	Category
			used with cautions in severe hepatic impairment patient	
Buprenorphine 5mcg/hr transdermal patch	N02AE01110M7003XX	Treatment of non-malignant pain of moderate intensity when an opioid is necessary for obtaining adequate analgesia. Not suitable for the treatment of acute pain. Restrictions: For elderly patients or patients with comorbidities/difficult to swallow	Once weekly transdermal patch/for hospital use only. Patient aged 18 years and over. Initial dose: 5 mcg/hr For elderly: Renal impairment. No special dose adjustments necessary in patients with renal impairment Hepatic impairment Patients with hepatic insufficiency should be carefully monitored during the treatment with buprenorphine patch. Alternate therapy should be considered. Patch should be used with cautions in severe hepatic impairment patient	A*
Busulfan 2 mg Tablet	L01AB01000T1001XX	i) Chronic myeloid leukaemia (CML) and other myeloproliferative diseases ii) Haemopoietic stem cell transplant (HSCT)- refer to specific protocols	i) ADULT: Initial: 2 - 4 mg daily. Maintenance: 0.5 - 2 mg daily. Stop when white blood cell less than 20 x 109/L. CHILD: 60 mcg/kg body weight daily ii) CHILD: Induction 60 mcg/kg body weight daily (maximum 4 mg) if leucocytes more than 20,000/mm3 and platelets more than 100,000/mm3. Maintenance 10 - 30mcg/kg (maximum 2 mg daily)	A

Generic Name	MDC	Indications	Dosage	Category
Busulfan 6 mg/ml Injection	L01AB01000P3001XX	For use in combination with cyclophosphamide as a conditioning regimen prior to allogeneic hematopoietic stem cell transplantation (HSCT) for chronic myelogenous leukemia in selected cases with high risk of liver toxicity and intolerance to oral busulfan. To be prescribed by paediatric oncologist and consultant haematologist trained in transplant only.	0.8 mg/kg of ideal body weight or actual body weight, whichever is lower via central venous catheter as a 2-hour infusion on the basis of every 6 hours for 4 days, for a total of 16 doses. For obese or severely obese patients, IV Busulfan should be administered based on adjusted ideal body weight	A*
Cabergoline 0.5 mg Tablet	G02CB03000T1001XX	i) Treatment of hyperprolactinaemic disorders ii) Prevention of puerperal lactation and suppression of lactation in HIV infected mothers only	i)0.5mg per week given in 1 or 2 (one-helf of one 0.5mg tablet) doses per week ii) HIV mothers only : Prevent lactation 2 tab first day after delivery. Interruption of laction : 0.25mg 12 hourly for 2 days	A*
Calamine Cream	D04AX00000G1001X X	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	C+
Calamine Lotion	D04AX00000L8001XX	Soothes and relieves nappy rashes, prickly heat, minor skin irritations, insect bites and sunburn, Pruritic skin conditions.	Apply to the skin as required and allow to dry, 1-3 times daily	C+
Calamine with 0.25 - 0.5% Menthol Lotion	D04AX00952L6001XX	Soothes and relieves nappy rashes, prickly heat, minor skin irritations, insect bites and sunburn, Pruritic skin conditions.	Apply to the skin as required and allow to dry, 1 - 3 times daily	C
Calamine with 0.5% Phenol Cream	D04AX00952G1001X X	For use as a mild astringent	Apply to the affected area as required	C
Calamine with 2 - 6% Precipitated Sulphur Lotion	D04AX00952L6002XX	Acne vulgaris	Apply to the skin as required and allow to dry, 1 - 3 times daily	C

Generic Name	MDC	Indications	Dosage	Category
Calcipotriol 50 mcg/g Cream	D05AX02000G1001XX	Only for the treatment of Psoriasis Vulgaris	ADULT Apply to the affected skin lesions twice daily. Maintenance therapy may be achieved with less frequent application. The weekly dose should not exceed 100 g. CHILD over 6 years, apply twice daily. 6-12 years maximum 50gm weekly, over 12 years maximum 75gm weekly	A*
Calcipotriol 50 mcg/g Ointment	D05AX02000G5001XX	Only for the treatment of Psoriasis Vulgaris	ADULT Apply to the affected skin lesions twice daily. Maintenance therapy may be achieved with less frequent application. The weekly dose should not exceed 100 g. CHILD over 6 years, apply twice daily. 6-12 years maximum 50gm weekly, over 12 years maximum 75gm weekly	A*
Calcipotriol 50 mcg/ml Scalp Solution	D05AX02000L9901XX	Only for the treatment of Psoriasis Vulgaris	Apply to scalp twice daily. Maximum 60 mL weekly.	A*
Calcipotriol Hydrate 50 mcg/g & Betamethasone Dipropionate 0.5 mg/g Ointment	D05AX52952G5001XX	Resistant plaque psoriasis	Apply once daily up to 4 weeks with maximum weekly dose of 100g and maximum treatment area 30% of body surface	A*
Calcipotriol monohydrate 50 mcg/g and Betamethasone dipropionate 0.5 mg/g Gel	D05AX52952G3001XX	Topical treatment of scalp and non-scalp plaque psoriasis vulgaris in adults	Should be applied to affected areas once daily. The recommended treatment period is 4 weeks for scalp areas and 8 weeks for non-scalp areas. The body surface area treated with calcipotriol containing products should not exceed 30% and maximum dose should not exceed 15g or 100g/ week	A*
Calcitonin (synthetic Salmon) 100 IU Injection	H05BA01000P3002XX	Acute hypercalcaemia	5-10 IU per kg body weight in 500mL physiological saline daily by i.v. infusion over at least 6 hours or by slow i.v. injection in 2-4 divided doses spread over the day. Renal impairment: Dosage adjustment needed.	A*

Generic Name	MDC	Indications	Dosage	Category
Calcitonin (Synthetic Salmon) 200 IU Nasal Spray	H05BA01000A4101XX	Osteoporosis	200 units daily	A*
Calcitonin (Synthetic Salmon) 50 IU Injection	H05BA01000P3001XX	Acute hypercalcaemia	5-10 IU per kg body weight in 500mL physiological saline daily by i.v. infusion over at least 6 hours or by slow i.v. injection in 2-4 divided doses spread over the day. Renal impairment: Dosage adjustment needed.	A*
Calcitriol 0.25 mcg Capsule	A11CC04000C1001XX	i)Established postmenopausal osteoporosis ii) Renal osteodystrophy in patients on haemodialysis iii)Hypoparathyroidism and rickets iv)Secondary hyperparathyroidism in renal failure	"i) 0.25 mcg 2 times daily ii) 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 iii) 0.25 mcg/day given in the morning iv) ADULT and CHILD 3 years and older : Initially 0.25 mcg/ml. CHILD less than 3 years : 10 to 15 ng/kg/day "	A/KK
Calcitriol 1 mcg/ml Injection	A11CC04000P3001XX	Management of hypocalcaemia and/or secondary hyperparathyroidism in patients undergoing chronic renal dialysis	Initially dose, depending on severity, 1 mcg (0.02 mg/kg) to 2 mcg 3 times weekly, approximately every other day	A*
Calcitriol 2 mcg/ml Injection	A11CC04000P3002XX	Management of hypocalcaemia and/or secondary hyperparathyroidism in patients undergoing chronic renal dialysis	Initially dose, depending on severity, 1 mg (0.02 mg/kg) to 2 mg 3 times weekly, approximately every other day	A*
Calcium Carbonate 500 mg Capsule	A12AA04121C1001XX	i) Elemental calcium supplementation ii) Phosphate binder in chronic renal failure patients	ADULT:Typical oral doses of calcium carbonate range from aboyt 3gm to 7gm daily in divided dose. US National Foundation suggest the calcium-based phosphate binder should not exceed 1.5gm daily in those with kidney failure. CHILD (12-18 years old): 1.25gm 3 or 4 times daily with or before meals and adjusted as necessary.	A/KK

Generic Name	MDC	Indications	Dosage	Category
Calcium Carbonate 500 mg Tablet	A12AA04121T1001XX	To be used only for elemental calcium supplementation and phosphate binding activity in patients with chronic renal failure	Initial 2.5 g daily and increased up to 17 g daily	A/KK
Calcium Chloride Dihydrate, Sodium Chloride, Magnesium Chloride Hexahydrate, Sodium Acetate Trihydrate,Potassium Chloride, and Malic Acid Solution	B05BB01905P6002XX	Replacement of extracellular fluid losses in the case of isotonic dehydration, where acidosis is present or imminent.	The maximum infusion rate depends on the needs of the patient in fluid replacement and electrolytes, patient?s weight, clinical condition, and biological status. Adults, elderly, adolescents:500ml-3L/24hr. Babies, children: 20ml to 100ml/kg/24 hr.	A
Calcium Disodium Edetate 200 mg Injection	V03AB03999P3001XX	Lead Poisoning	IM (Lead encephalopathy): 1000 mg/m(2)/day IM in divided equal doses 8 to 12 hours apart, for 5 days. Therapy is interrupted for 2 to 4 days, and followed by an additional 5-day course of therapy, if indicated. Do not exceed the recommended daily dosage. IV: 1000 mg/m(2)/day administered IV over 8 to 12 hours for 5 days. Therapy is interrupted for 2 to 4 days, and followed by an additional 5-day course of therapy, if indicated.	A
Calcium Gluconate 10% Injection	A12AA03000P3001XX	i)Acute hypocalcaemia ii)Hypocalcaemic tetany iii)Cardiac resuscitation	i) 1-2 g (2.25-4.5 mmol). CHILD 50 mg/kg 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, 10 ml	B
Calcium Lactate 300 mg Tablet	A12AA05125T1001XX	For prophylaxis of calcium deficiency and treatment of chronic hypocalcaemia	ADULT 1-5 g daily in divided doses	C
Calcium Polystyrene Sulphonate Powder	V03AE01999F2101XX	Hyperkalemia resulting from acute or chronic renal failure	15 - 30g daily in 2-3 divided doses. Each dose should be suspended in 30 - 50ml of water and administered orally	A

Generic Name	MDC	Indications	Dosage	Category
Capecitabine 150 mg Tablet	L01BC06000T1002XX	i) Metastatic breast cancer in elderly and poor performance status patients and refractory to taxanes. ii) Metastatic colon cancer, first line in elderly and poor performance status patients. iii) Colon cancer, adjuvant therapy for stage III (Duke's Stage C) following surgery. iv) First line treatment of patients with advanced gastric cancer in combination with a platinum-based regimen	i) & ii) 1250 mg/m2 twice daily (morning and evening) for 2 weeks, every 21 days. iii) Recommended for a total of 24 weeks (8 cycles of 2 weeks of drug administration and 1 week rest period. Iv) In combination with a platinum on day 1, give capecitabine 1250 mg/m2 twice daily for 14 days. Repeated every 3 weeks for 8 cycles or optimum number of cycles	A*
Capecitabine 500 mg Tablet	L01BC06000T1001XX	i)Metastatic breast cancer in elderly and poor performance status patients and refractory to taxanes ii) Metastatic colon cancer, first line in elderly and poor performance status patients iii) Colon cancer, adjuvant therapy for stage III (Duke's Stage C) following surgery iv) First line treatment of patients with advanced gastric cancer in combination with a platinum-based regimen	i) & ii) 1250 mg/m2 twice daily (morning and evening) for 2 weeks, every 21 days iii) Recommended for a total of 24 weeks (8 cycles of 2 weeks of drug administration and 1 week rest period iv) In combination with a platinum on day 1, give capecitabine 1250 mg/m2 twice daily for 14 days. Repeated every 3 weeks for 8 cycles or optimum number of cycles	A*
Captopril 25 mg Tablet	C09AA01000T1002XX	i) Hypertension ii) Congestive heart failure iii) Post-myocardial infarction iv) Diabetic nephropathy	i) Initially 12.5 mg twice daily. Maintenance: 25-50 mg 2 - 3 times daily, may be increased to maximum 450 mg/day in divided doses ii) Initially 6.25 - 12.5 mg 3 times daily, increase after several days to 25 - 50 mg 3 times daily iii) Start 3 days after MI Initially 6.25 mg daily, gradually increased to 37.5 mg daily in divided doses. May increase after several week to 150 mg/day in divided doses if needed and tolerated iv)75 - 100 mg daily in divided dose.	B
Carbachol 0.01% Intraocular Solution	S01EB02100D2001XX	For intraocular use for miosis during surgery	Instill no more than 0.5 ml gently into the anterior chamber	A

Generic Name	MDC	Indications	Dosage	Category
Carbamazepine 100 mg/5 ml (2% w/v) Syrup	N03AF01000L9001XX	Epilepsy	ADULT: Initially, 100-200 mg once or twice daily gradually increased by increments of 100-200 mg every 2 week. Maintenance: 0.8-1.2 g daily in divided doses. CHILD: 10-15 years: 0.6-1 g daily; 5-10 years: 400-600 mg daily; 1-5 years: 200-400 mg daily; less than or equal to 1 year: 100-200 mg daily. Alternatively, 10-20 mg/kg body weight daily in divided doses. Max: Adult: 1.6 g daily	A
Carbamazepine 200 mg CR Tablet	N03AF01000T5001XX	Epilepsy	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	A
Carbamazepine 200 mg Tablet	N03AF01000T1001XX	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.	B

Generic Name	MDC	Indications	Dosage	Category
Carbamazepine 400 mg CR Tablet	N03AF01000T5002XX	Epilepsy	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	A
Carbamide (Urea) 10 % Cream	D02AE01000G1001XX	Contact irritant dermatitis, infantile eczemas, acute and chronic allergic eczemas, icthyosis, hyperkeratotic	Apply sparingly and rub into affected area 2 - 3 times daily and when required after cleansing skin	B
Carbetocin 100 mcg/ ml Injection	H01BB03000P2001XX	Prevention of uterine atony and postpartum hemorrhage following elective cesarean section under epidural or spinal anaesthesia	A single IV dose of 100mcg (1ml) is adminitered by bolus injection, slowly over 1minute, only when delivery of the infant has been completed by caesarean section under epidural or spinal anaesthesia, before or after delivery of the placenta.	A*
Carbimazole 5 mg Tablet	H03BB01000T1001XX	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	B
Carboplatin 150 mg Injection	L01XA02000P4001XX	Adult solid tumours, paediatric tumours. Salvage therapy for lymphoma	360 - 400 mg/m2 BSA, by IV infusion over 15 mins to 1 hour on Day 1 every 4 weeks. Alternatively, prescription may be based on Area Under Curve (AUC) calculations. CHILD: 500-600 mg/m2 over 1 hour once every 3 weeks. Salvage regimes in lymphomas - refer to specific protocols. Starting dose in renal impairment, please refer to product insert.	A*

Generic Name	MDC	Indications	Dosage	Category
Carboplatin 450 mg Injection	L01XA02000P4002XX	Adult solid tumours, paediatric tumours. Salvage therapy for lymphoma	360 - 400 mg/m2 BSA, by IV infusion over 15 mins to 1 hour on Day 1 every 4 weeks. Alternatively, prescription may be based on Area Under Curve (AUC) calculations. CHILD: 500-600 mg/m2 over 1 hour once every 3 weeks. Salvage regimes in lymphomas - refer to specific protocols. Starting dose in renal impairment, please refer to product insert.	A*
Carboprost Tromethamine 250 mcg Injection	G02AD04999P3001XX	Postpartum haemorrhage refractory to oxytocin	Initially 250 mcg deep IM inj. The dose may be repeated at intervals of 15-90 min if necessary. Max total dose: 2 mg.	A*
Cardioplegia solution containing Potassium Chloride, Magnesium chloride & Procaine HCl Injection	B05XA16934P3001XX	For myocardial preservation(prevent myocardial damage) during cardiac surgery	Dilute 20 ml to 1 L of Ringer solution (cooled to 2-8 °C prior to use). Initial rapid instillation into aortic root at 300 ml/m² body surface area/min for 3 minutes. Should myocardial activity persist or recur instill at 300ml/m² body surface area/min for 2 minutes	A*
Carvedilol 25 mg Tablet	C07AG02000T1002XX	Treatment of stable moderate to severe congestive cardiac failure in addition to ACEI's and diuretics	3.125 mg twice daily for 2 weeks, then 6.25 mg twice daily for 2 weeks, then 12.5 mg twice daily for 2 weeks then 25 mg twice daily (titrated up to the highest tolerated level). Max: <85 kg: 25 mg bid; >85 kg: 50 mg bid.	A/KK
Carvedilol 6.25 mg Tablet	C07AG02000T1001XX	Treatment of stable moderate to severe congestive cardiac failure in addition to ACEI's and diuretics	3.125 mg twice daily for 2 weeks, then 6.25 mg twice daily for 2 weeks, then 12.5 mg twice daily for 2 weeks then 25 mg twice daily (titrated up to the highest tolerated level). Max: <85 kg: 25 mg bid; >85 kg: 50 mg bid.	A/KK

Generic Name	MDC	Indications	Dosage	Category
Caspofungin Acetate 50 mg Injection	J02AX04122P4001XX	i) Confirmed systemic fungal infection in patients who are refractory or intolerant to other fungal therapies. ii) For pediatric patient (12 month and older) for the following indications : a) Empirical therapy for presumed fungal infections in febrile, neutropenic patients b) Treatment of invasive candidiasis, including candidemia and the following Candida infections ; intra-abdominal abscesses, peritonitis and pleural space infections c) Treatment of esophageal candidiasis d) Treatment of invasive Aspergillosis in patients who are refractory to or intolerant of others therapy (eg : Amphotericin B)	i) Invasive aspergillosis & invasive candidiasis: ADULT: Initially, 70 mg infused over 1 hour followed by subsequent doses of 50 mg/day. Oesophageal candidiasis: ADULT: 50 mg by slow IV infusion over approximately 1 hour ii) For all indications, a loading dose of 70mg/m2 on D1 followed by maintenance dose of 50mg/m2 od.	A*
Caspofungin Acetate 70 mg Injection	J02AX04122P4002XX	For adult and pediatric patient (12 month and older) for the following indications: a) Treatment of invasive candidiasis, including candidemia and the following Candida infections ; intra-abdominal abscesses, peritonitis and pleural space infections b) Treatment of invasive Aspergillosis in patients who are refractory to or intolerant of others therapy (eg : Amphotericin B) c) Treatment of esophageal candidiasis (need to follow the current indications)	i) Invasive aspergillosis & invasive candidiasis: ADULT: Initially, 70 mg infused over 1 hour followed by subsequent doses of 50 mg/day. Oesophageal candidiasis: ADULT: 50 mg by slow IV infusion over approximately 1 hour daily ii) Child (12months to 17 years) : For all indication) A single 70mg/m2 loading dose (not to exceed an actual dose of 70mg) by slow IV infusion over 1hour; followed by 50mg/m2 (not to exceed an actual dose of 70mg)	A*
Cefaclor 125 mg/5 ml Suspension	J01DC04000F2101XX	Infections caused by susceptible organisms including Staphylococcus aureus and H. influenzae, treatment of sinusitis and infections involving the respiratory tract, skin and skin structure, bone and joint, and urinary tract	CHILD:>1 mth: 20 mg/kg daily in 3 divided doses, increased to 40 mg/kg daily if necessary, <1 yr: 62.5 mg tid, 1-5 yr: 125 mg tid, >5 yr: 250 mg tid. Maximum: 1 g daily	A

Generic Name	MDC	Indications	Dosage	Category
Cefaclor 375 mg MR Tablet	J01DC04010T5001XX	i) Adult pharyngitis, tonsillitis, skin& soft tissue infections ii) Bronchitis iii) Pneumonia iv) Lower UTI	i) 375 mg twice daily ii) 375 mg or 500 mg twice daily iii) 750mg twice daily iv) 375mg twice daily or 500 mg once daily	A
Cefaclor 500 mg Capsule	J01DC04000C1002XX	Infections caused by susceptible organisms including Staphylococcus aureus and H. influenzae, treatment of sinusitis and infections involving the respiratory tract, skin and skin structure, bone and joint, and urinary tract	ADULT: 250 mg 3 times daily for 10 days. For severe infections, double the dosage. Maximum: 4 g daily. CHILD:>1 mth: 20 mg/kg daily in 3 divided doses, increased to 40 mg/kg daily if necessary, <1 yr: 62.5 mg tid, 1-5 yr: 125 mg tid, >5 yr: 250 mg tid . Maximum: 1 g daily	A
Cefazolin Sodium 1 g Injection	J01DB04520P3001XX	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	A
Cefepime 1 g Injection	J01DE01110P4002XX	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	A*
Cefepime 500 mg Injection	J01DE01110P4001XX	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	A*

Generic Name	MDC	Indications	Dosage	Category
Cefoperazone Sodium 1 g Injection	J01DD12520P4002XX	Infections due to gram-negative bacteria	ADULT: 1 - 2 g twice daily IM or IV. By IV, adult dose may be doubled. Maximum: 16 g daily in divided doses. CHILD & INFANT: 50 - 200 mg/kg/day in 2 - 4 divided doses. NEONATE less than 8 days: 50 - 200 mg/kg/day 12 hourly	A
Cefoperazone Sodium 2 g Injection	J01DD12520P4003XX	Infections due to gram-negative bacteria	ADULT: 1 - 2 g twice daily IM or IV. By IV, adult dose may be doubled. Maximum: 16 g daily in divided doses. CHILD & INFANT: 50 - 200 mg/kg/day in 2 - 4 divided doses. NEONATE less than 8 days: 50 - 200 mg/kg/day 12 hourly	A
Cefoperazone Sodium 500 mg & Sulbactam Sodium 500 mg Injection	J01DD62000P4001XX	i) Treatment of infections due to multi-drug resistance pathogens producing B-lactamase ii) Treatment of infections caused by Acinetobacter species	ADULT: 1 - 2 g twice daily. In severe or refractory infections the daily dosage of sulbactam/cefoperazone may be increased up to 8g (4g cefopreazone activity) CHILD: 40 - 80 mg/kg/day in 2 to 4 equally divided doses; in serious or refractory infections, may increase to 160mg/kg/d in 2 - 4 equally divided doses.	A
Cefoperazone Sodium 500 mg Injection	J01DD12520P4001XX	Infections due to gram-negative bacteria	ADULT: 1 - 2 g twice daily IM or IV. By IV, adult dose may be doubled. Maximum: 16 g daily in divided doses. CHILD & INFANT: 50 - 200 mg/kg/day in 2 - 4 divided doses. NEONATE less than 8 days: 50 - 200 mg/kg/day 12 hourly	A
Cefotaxime 1 g Injection	J01DD01520P4002XX	Infections due to gram-negative bacteria	ADULT: 1 g 12 hourly (up to 12 g/day in severe cases). CHILD: 50 - 180 mg/kg/day in 4 - 6 divided doses	A
Cefotaxime 500 mg Injection	J01DD01520P4001XX	Infections due to gram-negative bacteria	ADULT: 1 g 12 hourly (up to 12 g/day in severe cases). CHILD: 50 - 180 mg/kg/day in 4 - 6 divided doses	A

Generic Name	MDC	Indications	Dosage	Category
Ceftaroline Fosamil 600mg Powder for concentrate for solution for infusion	J01D102000P4001XX	Treatment of complicated skin and soft tissue infections (cSSTI) in adults Restriction: Restricted for only complicated SSTI in patients who are unable to tolerate or not responding to vancomycin.	600mg administered every 12 hours by intravenous infusion over 60 minutes for 5-14 days. Dose adjustment in renal impairment: - CrCl > 30 to ≤50 ml/min : 400mg every 12 hours - CrCl < 30ml/min is not recommended	A*
Ceftazidime 1 g Injection	J01DD02520P4003XX	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	A
Ceftazidime 2 g Injection	J01DD02520P4004XX	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	A
Ceftazidime 250 mg Injection	J01DD02520P4001XX	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	A
Ceftazidime 500 mg Injection	J01DD02520P4002XX	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	A
Ceftriaxone 0.25 g Injection	J01DD04520P4001XX	i) Gonorrhoea ii) Chancroid	i) 250 mg by deep IM injection ii) single IM injection 250 mg only. For severe infection up to 100 mg/kg/day	A/KK
Ceftriaxone 0.5 g Injection	J01DD04520P4002XX	Infections caused by susceptible organisms	ADULT: 1 - 2 g once daily. Severe infection: 4 g daily at 12 hour intervals. INFANT & CHILD, 3 weeks - 12 years: 20 - 80 mg/kg body weight daily. CHILD with body weight 50 kg or more: adult dose. NEONATE up to 2 weeks: 20 - 50 mg/kg body weight daily, not to exceed 50 mg/kg	A

Generic Name	MDC	Indications	Dosage	Category
Ceftriaxone 1g Injection	J01DD04520P4003XX	Infections caused by susceptible organisms	ADULT: 1 - 2 g once daily. Severe infection: 4 g daily at 12 hour intervals. INFANT & CHILD, 3 weeks - 12 years: 20 - 80 mg/kg body weight daily. CHILD with body weight 50 kg or more: adult dose. NEONATE up to 2 weeks: 20 - 50 mg/kg body weight daily, not to exceed 50 mg/kg	A
Cefuroxime Axetil 125 mg Tablet	J01DC02233T1001XX	Upper and lower respiratory tract, genito-urinary tract, skin & soft tissue and urinary tract infections (UTI)	ADULT: 250 mg twice daily ;UTI: 125 mg twice daily. CHILD:30 mg/kg/day in 2 divided doses, up to 500 mg daily	A/KK
Cefuroxime Axetil 125 mg/5 ml Suspension	J01DC02233F2101XX	Infections caused by susceptible organisms	30 mg/kg/day in 2 divided doses, up to 500 mg daily.	A
Cefuroxime Axetil 250 mg Tablet	J01DC02233T1002XX	Upper and lower respiratory tract, genito-urinary tract, skin & soft tissue and urinary tract infections (UTI)	ADULT: 250 mg twice daily ;UTI: 125 mg twice daily. CHILD:30 mg/kg/day in 2 divided doses, up to 500 mg daily	A/KK
Cefuroxime Sodium 1.5 g Injection	J01DC02520P4003XX	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	A
Cefuroxime Sodium 250 mg Injection	J01DC02520P4001XX	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	A
Cefuroxime Sodium 750 mg Injection	J01DC02520P4002XX	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	A

Generic Name	MDC	Indications	Dosage	Category
Celecoxib 200 mg Capsule	M01AH01000C1001XX	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	A
Celecoxib 400 mg Capsule	M01AH01000C1002XX	i) Osteoarthritis ii) Rheumatoid Arthritis iii) Acute pain iv) Ankylosing Spondylitis	i) ADULTS: 200 mg once daily. CHILD not recommended ii) 100 mg twice daily, increased if necessary to 200 mg 2 times daily; CHILD not recommended iii) 400 mg as a single dose on first day followed by 200 mg 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	A*
Cephalexin Monohydrate 125 mg/5 ml Syrup	J01DB01010F2101XX	Respiratory tract infections, ear, nose and throat infections, urinary tract infections, obstetric and gynaecologic infections	CHILD: 25 - 100 mg/kg/day every 6 hourly. Maximum: 4 g daily	B
Cephalexin Monohydrate 250 mg Capsule	J01DB01010C1001XX	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.	B

Generic Name	MDC	Indications	Dosage	Category
Cephalexin Monohydrate 250 mg Tablet	J01DB01010T1001XX	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.	B
Cephalexin Monohydrate 500 mg Capsule	J01DB01010C1002XX	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	B
Cephalexin Monohydrate 500 mg Tablet	J01DB01010T1002XX	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.	B
Cetirizine HCl 10 mg Tablet	R06AE07110T1001XX	Urticaria, allergic dermatoses (insect bites, atopic eczema), perennial rhinitis, allergic rhinitis	ADULT and CHILD over 6 years:10 mg daily or 5 mg twice daily. Child 2-6 years: 5 mg once daily or 2.5 mg twice daily	A/KK
Cetrimide 1-2% Lotion.	D08AJ04000L6001XX	As shampoo and cleansing agent	Apply to affected area	C+
Cetrorelix 0.25 mg Injection	H01CC02122P4001XX	Prevention of premature ovulation in patients undergoing a controlled ovarian stimulation, followed by oocyte pick-up and assisted reproductive techniques	Given by SC 0.25 mg/day, given either in the morning beginning on the day 5 or 6 of ovarian stimulation or in the evening beginning on day 5, and continued until ovulation induction	A*

Generic Name	MDC	Indications	Dosage	Category
Cetuximab 5 mg/ml Solution for Infusion	L01XC06000P5002XX	For neo-adjuvant treatment of KRAS wild type metastatic colorectal cancer with the aim of liver resection with the following conditions: i) The primary colorectal tumour has been resected or is potentially resected. ii)The metastatic disease is confined to the liver and is unresectable iii) The patient is fit enough to undergo surgery to resect the primary colorectal tumour and to undergo liver surgery if the metastases become resectable after treatment with cetuximab. iv)The treatment is limited to 16 weeks	Administered once a week. The very first dose is 400mg cetuximab per m2 body surface area with a recommended infusion period of 120 minutes. All subsequent weekly doses are 250mg per m2 body surface area each with a recommended infusion period of 60 minutes. The maximum infusion rate must not exceed 10mg/min.	A*
Charcoal, Activated 250 mg Tablet	A07BA01000T1001XX	i) Diarrhoea and food poisoning ii) Reduce absorption of drugs, plant, inorganic poison and chemicals in poisoning cases	i) ADULT 0.5-1 g given 3-4 times daily. CHILD half adult dose. ii) Need to be dissolved in liquid (slurry consistency). ADULT and CHILD over 12 years: initial 30-100 g or 1-2 g/kg; repeat initial dose as soon as possible or 20-50 g every 2-6 hours. CHILD over 1-12 years, 25-50 g or 1-2 g/kg; may repeat half the initial dose every 2-6 hour as needed. CHILD to 1 year of age, 1 g/kg; may repeat half the initial dose every 2-6 hours as needed. For maximum efficacy administer within 1 hour after ingestion of toxic compound	C
Charcoal, Activated 50 g Granules	A07BA01000F1001XX	Emergency treatment of acute oral poisoning and drug overdose	ADULT:Acute poisoning: 50 - 100g in suspension. Severe poisoning: 50 - 100g as an initial dose followed by 20g every 4 - 6 hours. CHILDREN: 1g/kg/dose	A

Generic Name	MDC	Indications	Dosage	Category
Chloral Hydrate 200 mg/5 ml Mixture	N05CC01010L2101XX	Preoperative sedation	ADULT : 0.5 - 1 g (max 2 g) with plenty of water at bedtime. CHILD : Neonate: 30-50 mg/kg; up to 100 mg/kg may be used with respiratory monitoring. 1 mth-12 yr: 30-50 mg/kg (max: 1 g); up to 100 mg/kg (max: 2 g) may be used; 12-18 yr: 1-2 g. Doses to be taken 45-60 minutes before procedure. May be given rectally if oral route is not available.	B
Chlorambucil 2 mg Tablet	L01AA02000T1001XX	Low grade lymphoma, chronic lymphocytic leukaemia. Ovarian cancer	General : Initial :0.1 -0.2 mg/kg body weight daily for 4 - 8 weeks maintanance : given either by reduced daily dosage or intermittent course of treatment. Chronic Lymphocytic Leukaemia: initial : 0.15mg/kg/day untill total leukocyte count has fallen to 10,000peruL, then resumed treatment untill 4 weeks after the end of the first course then continued at a dosage 0.1mg/kg/day.	A
Chloramphenicol 0.5% Eye Drops	S01AA01000D2001XX	Broad spectrum antibiotic in superficial eye infections	Instill 1 drop of a 0.5% solution every 2 hr. Increase dosage interval upon improvement. To continue treatment for at least 48 hr after complete healing	C
Chloramphenicol 1% Eye Ointment	S01AA01000G5101XX	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	C
Chloramphenicol 125 mg/5 ml Suspension	J01BA01126L8001XX	Typhoid fever, salmonella infections, meningitis, cholera, anaerobic and rickettsial infections	CHILD: 25 - 50 mg/kg/day in 4 divided doses. Severe infections, premature& full-term infants less than 2 weeks: 25mg/kg/day in divided doses. Full-term infants more than 2 weeks: up to 50mg/kg/day in divided doses	B

Generic Name	MDC	Indications	Dosage	Category
Chloramphenicol 250 mg Capsule	J01BA01126C1001XX	Treatment of typhoid, paratyphoid fevers, bronchopneumonia and enteric infection	ADULT: 500 mg 4 times daily or 50 mg/kg/day in 4 divided doses. Maximum dose: 4 g/day. CHILD: 25 - 100 mg/kg/day in 4 divided doses	B
Chloramphenicol 5% w/v Ear Drops	S02AA01000D1001XX	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	C
Chloramphenicol Sodium Succinate 1 g Injection	J01BA01520P4001XX	Treatment of typhoid, paratyphoid fevers, bronchopneumonia and enteric infection	Adult:50 to 100 mg/kg/day in 4 divided doses. Premature and full-term neonates: 25 mg/kg/day in 4 divided doses. Full-term infants >2 wk: 50 mg/kg/day in 4 divided doses. Children: 50-100 mg/kg/day in 4 divided doses	B
Chlorhexidine Gluconate 0.2 % Mouthwash	R02AA05137M2001XX	As a gargle	Rinse mouth with 10 ml for about 1 minute twice daily	C
Chlorhexidine Gluconate 2% in Alcohol 70% Solution	D08AC52137L9902XX	Use as disinfectant in central venous catheter care bundle	Skin Preparation:Use Chlorhexidine Gluconate 2% in Isopropyl Alcohol 70% and allow to dry. Catheter acces:Apply to catheter ports or hubs prior to accessing the line for administering fluids or injections	C
Chlorhexidine Gluconate 4% Scrub	D08AC02137M9901XX	Surgical hand scrub/disinfection, pre-op skin preparation	Surgical hand disinfection: Apply 5ml to clean hands and forearms for 1 min. Rinse and repeat with another 5ml for a further 2 mins and then rinse and dry. General skin disinfection: Apply appropriate quantity to wet area and scrub for 1 min. Rinse thoroughly & dry	C+
Chlorhexidine Gluconate 5% Solution	D08AC02137L9901XX	i) Preoperative skin disinfection ii) Wounds or burns iii) Emergency disinfection of instruments	i) & iii) 1 : 10 in 70 % Alcohol ii) 1 : 100	C+

Generic Name	MDC	Indications	Dosage	Category
Chlorhexidine Gluconate 5% Solution 1:10 in 70% alcohol with lanolin as emollient	D08AC52137L9901XX	To be used undiluted for hand and skin disinfections	Pre-op surgical hand disinfection: Spread 5ml throughly over both hands and forearms, rubbing vigorously. When dry apply a further 5ml and repeat procedure. Antiseptic hand disinfection on the ward: Spread 3ml throughly over the hands and wrist rubbing vigorously until dry. Disinfection of patient's skin: Prior to surgery, apply to a sterile swab and rub thoroughly over the operation site for a minimum of 2 mins	C+
Chlorinated Lime Powder	V07AV00000F9901XX	Antiseptic and disinfectants	Not applicable	C
Chlorinated Lime Solution & Buffered Acetate Solution	D08A000999G9901XX	Wound or ulcer	Apply to affected areas undiluted as a cleansing agent	C
Chloroquine Phosphate 250 mg Tablet (150 mg Chloroquine base)	P01BA01162T1001XX	Treatment of malaria - acute attack	ADULT 600 mg base stat, 300 mg 6 - 8 hours later and a further 300 mg on each of 2 following days. CHILD 3 - 4 years : 150 mg base stat, 75 mg 6 hours later, then 75 mg daily for 2 days. CHILD 5 - 8 years : 300 mg stat, 150 mg 6 hours later, then 150 mg daily for 2 days	C
Chlorpheniramine Maleate 10 mg/ml Injection	R06AB04253P3001XX	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	B
Chlorpheniramine Maleate 2 mg/5 ml Syrup	R06AB04253L9001XX	Symptomatic treatment of allergic conditions responsive to antihistamine	CHILD 1 - 2 years : 1 mg twice daily, 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)	C

Generic Name	MDC	Indications	Dosage	Category
Chlorpheniramine Maleate 4 mg Tablet	R06AB04253T1001XX	Symptomatic treatment of allergic conditions responsive to antihistamines	ADULT : 4 mg every 4 - 6 hours. Maximum 24 mg daily. CHILD 1 - 2 years : 1 mg twice daily, 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)	C
Chlorpromazine HCl 100 mg Tablet	N05AA01110T1002XX	Psychosis mania and agitation	ADULT : Initial dose - 25 mg 3 times daily according to response up to 1 g daily. PAEDIATRIC: Up to 5 years: 0.5 mg/kg body weight every 4 - 6 hours (Maximum 40 mg daily). CHILD 6 - 12 years: A third to half adult dose (Maximum 75 mg daily)	B
Chlorpromazine HCl 25 mg Tablet	N05AA01110T1001XX	Psychosis mania and agitation	ADULT : Initial dose - 25 mg 3 times daily according to response up to 1 g daily. PAEDIATRIC: Up to 5 years: 0.5 mg/kg body weight every 4 - 6 hours (Maximum 40 mg daily). CHILD 6 - 12 years: A third to half adult dose (Maximum 75 mg daily)	B
Chlortetracycline 1% Eye Ointment	S01AA02000G5101XX	Eye infections requiring a broad spectrum antibiotic	Apply thin strip (approximately 1 cm) to the conjuctiva 2 to 4 hourly or more frequently.	B
Chlortetracycline 1-3 % Cream	D06AA02000G1001XX	Bacterial skin infections	Apply directly to affected area twice daily as required for 1 - 2 weeks	B
Cholera Vaccine	J07AE01000P3001XX	Immunisation of cholera	Prophylactic ADULT: First dose of 0.5 ml SC/IM followed after 1 - 4 weeks by a second dose of 1 ml. CHILD: 1 - 5 years: 0.1 ml (1st dose), 0.3 ml (2nd dose). CHILD; 5 - 10 years: 0.3 ml (1st dose), 0.5ml (2nd dose). Booster: For optimum long-term protection, a booster dose is recommended for adults after 2 years. Children 2-6 years should receive a booster dose after 6 months.	B

Generic Name	MDC	Indications	Dosage	Category
Cholestyramine Resin 4 G	C10AC01000M4001XX	i) Hypercholesterolemia ii) Familial hypercholesterolemia - heterozygous iii) Generalized atherosclerosis iv) Diarrhoea due to bile acid malabsorption v) Pruritus of skin associated with partial biliary obstruction	Hypercholesterolemia: Adjunct: initial, 4 g orally 1-2 times daily, maintenance, 8 to 16 g in divided doses, max 24 g daily CHILD: 50 - 150 mg/kg 6 - 8 hourly oral	A
Choline Salicylate 8.7%, Cetylkonium Chloride 0.01% Dental Gel	N02BA03900G3001XX	For relief of the pain and discomfort in mouth ulcers and sores, infant teething and denture irritation	Apply to area 4 times daily	B
Choriogonadotropin Alfa 250 mcg/0.5 ml Injection in Prefilled Syringe	G03GA01000P5001XX	i)Women undergoing superovulation prior to assisted reproductive techniques such as in-vitro fertilization (IVF) ii)Anovulatory or oligo-ovulatory women	250 mcg 24-48 hour after the last administration of an FSH or hMG preparation, when optimal stimulation of follicular growth is achieved.	A*
Chorionic Gonadotrophin Human (HCG) 5000 IU Injection	G03GA01000P4001XX	i)Treatment of infertile women to induce ovulation ii) As a luteal support in controlled ovarian hyperstimulation cycles	i) & ii)Induction of ovulation: 5000 - 10,000 units one day following last dose of menotropin. Up to 3 repeat injections of 5000 units each may be given within the following 9 days to prevent insufficiency corpus luteum	A*
Ciclesonide 160mcg Inhaler	R03BA08000A2101XX	Prophylactic treatment of asthma in adults, adolescents and children over 6 years (follow current indication) Not meant for 6 yo)	For adults and adolescents over 12 years of age with mild to moderate asthma is 160 to 640mcg per day: severe asthma dose may be increased to 1280mcg per day.	A*

Generic Name	MDC	Indications	Dosage	Category
Ciclosporin 100 mg Capsule	L04AD01000C1002XX	Only for: 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 increased 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	A*

Generic Name	MDC	Indications	Dosage	Category
Ciclosporin 100 mg/ml Drink Solution	L04AD01000L5002XX	Only for : 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 anaemia, pure red cell aplasia vi) Cases of recalcitrant psoriasis and atopic eczema	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 increased 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	A*

Generic Name	MDC	Indications	Dosage	Category
Ciclosporin 25 mg Capsule	L04AD01000C1001XX	Only for: 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 increased 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	A*
Ciclosporin 50 mg/ml Injection	L04AD01000P3001XX	i) Post bone marrow transplant ii) Solid organ transplant	i) 3 - 5 mg/kg/day until tolerate orally ii) 2 - 3 mg/kg/day for recipients who are unable to take orally	A*
Cilostazol 100 mg Tablet	B01AC00000T1002XX	Improvement of the maximal and pain-free walking distances in patients with intermittent claudication, who do not have rest pain and who do not have evidence of peripheral tissue necrosis.	100 mg twice daily	A*
Cimicifuga Racemosa Rhizome Extract 20 mg Tablet	HG03WA5001T1001XX	Traditionally used for the relief of hot flushes, sweating, restlessness associated with menopause	20 mg twice daily	A
Cinnarizine 25 mg Tablet	N07CA02000T1001XX	Vestibular disorders	One tablet 3 times daily	B

Generic Name	MDC	Indications	Dosage	Category
Ciprofloxacin 100 mg/50 ml Injection	J01MA02125P3001XX	Treatment of infections due to susceptible bacterial strains	ADULT: the dosage range is 100-400mg twice daily Gonorrhoea: 100mg single dose Upper and Lower Urinary Tract Infection: 100mg bd Upper and Lower Respiratory Tract Infection: 200mg bd-400mg twice daily Cystic Fibrosis with psuedomonal Lower RTI: 400mg bd Others: 200-400mg bd inhalation Anthrax: 400mg bd	A
Ciprofloxacin 200 mg/100 ml Injection	J01MA02125P3002XX	Treatment of infections due to susceptible bacterial strains	Suggest to rephrase ADULT: the dosage range is 100-400mg twice daily Gonorrhoea: 100mg single dose Upper and Lower Urinary Tract Infection: 100mg bd Upper and Lower Respiratory Tract Infection: 200mg bd-400mg twice daily Cystic Fibrosis with psuedomonal Lower RTI: 400mg bd Others: 200-400mg bd inhalation Anthrax: 400mg bd	A
Ciprofloxacin 250 mg Tablet	J01MA02110T1001XX	Treatment of infections due to susceptible bacterial strains	ADULT: 125-750 mg twice daily. Acute gonorrhoea: a single dose of 250 mg	A
Ciprofloxacin 500 mg Tablet	J01MA02110T1002XX	Treatment of infections due to susceptible bacterial strains	ADULT: 125-750 mg twice daily. Acute gonorrhoea: a single dose of 250 mg	A
Ciprofloxacin HCl 0.3% Ophthalmic Solution	S01AX13110D2001XX	Treatment of bacterial infections caused by susceptible strains in i) corneal ulcers ii) bacterial conjunctivitis	i) 2 drops every 15 minutes for the first 6 hours, then 2 drops every 30 minutes for the rest of the first day. Second day : 2 drops every hour. Subsequent days (3rd - 14th day) : 2 drops every 4 hours. Treatment may be continued after 14 days if corneal re-epithelialization has not occured ii) 1 - 2 drops every 2 hours into the conjunctival sac while awake for 2 days and 1-2 drops	A*

Generic Name	MDC	Indications	Dosage	Category
			every 4 hours while awake for the next 5 days	
Cisatracurium Besylate 2 mg/ml Injection	M03AC11197P3001XX	As an adjunct to general anaesthesia to facilitate endotracheal intubation, to provide skeletal muscle relaxation during surgery and to facilitate mechanical ventilation. Restricted to patients with lung problem such as asthma.	Administered as bolus intravenous injection. May be administered as infusion in ICU patients at a rate of 3mcg/kg/min. Adult dose: a) Induction: 0.15mg/kg over 5-10 secs, b) Maintenance: 0.03 mg/kg. Children 2-12 years: a) Induction: 0.1 mg/kg over 5-10 secs, b) Maintenance: 0.02 mg/kg	A*
Cisplatin 10 mg Injection	L01XA01000P3001XX	Germ cell tumours, ovarian tumours, adult solid tumours, lymphomas	Germ cell tumours: 20 mg/m2 daily for 5 days every 3 weeks for 3 - 4 courses. Ovarian tumours: 75 mg/m2 once every 3 weeks as part of combination therapy with paclitaxel or 50-60mg/m2 IV once every 3 weeks as a single agent. Baseline creatinine clearance, pretreatment hydration and forced diuresis are mandatory. CHILD: 100mg/m2 over 6 hours once every 3 weeks. Lymphomas: Refer to protocols CHILD: 100mg/m2 over 6 hours once every 3 weeks. Lymphomas: Refer to protocols	A

Generic Name	MDC	Indications	Dosage	Category
Cisplatin 50 mg Injection	L01XA01000P3002XX	Germ cell tumours, ovarian tumours, adult solid tumours, lymphomas	Germ cell tumours: 20 mg/m2 daily for 5 days every 3 weeks for 3 - 4 courses. Ovarian tumours: 75 mg/m2 once every 3 weeks as part of combination therapy or 100 mg/m2 IV once every 3 weeks as a single agent. Baseline creatinine clearance, pretreatment hydration and forced diuresis are mandatory. CHILD: 100mg/m2 over 6 hours once every 3 weeks. Lymphomas: Refer to protocols CHILD: 100mg/m2 over 6 hours once every 3 weeks. Lymphomas: Refer to protocols	A
Clarithromycin 125 mg/5 ml Granules	J01FA09000F1001XX	Treatment of complicated respiratory tract infections not responding to standard macrolides	CHILD: 8 - 12 years: 30 - 40 kg 10 mL, 4 - 8 years: 20 - 29 kg 7.5 mL, 2 - 4 years: 12 - 19 kg 5 mL, 1 - 2 years: 8 - 11 kg 2.5 mL, less than 8 kg: 7.5 mg/kg. To be given twice daily. Maximum dose: 1g/day	A*
Clarithromycin 250 mg Tablet	J01FA09000T1001XX	Only for i) treatment of complicated respiratory tract infection not responding to standard macrolides ii) eradication of Helicobacter pylori infection	i) 250 - 500 mg twice daily. Up to 6 - 14 days ii) 500 mg twice daily with omeprazole & amoxicillin. Up to 2 weeks	A*
Clarithromycin 500 mg Injection	J01FA09000P3001XX	Only for treatment of complicated respiratory tract infection not responding to standard macrolides	Susceptible infections Adult: 500 mg bid for 2-5 days. Dose to be infused over 60 minutes in a 0.2% solution; revert to oral therapy whenever possible. Child: 1 mth-12 yr: 7.5 mg/kg every 12 hr. Dose to be given via infusion into proximal vein. Dosage Recommendation CrCl (ml/min)<30 : Half the dosage or double dosing interval	A*

Generic Name	MDC	Indications	Dosage	Category
Clindamycin HCl 300 mg Capsule	J01FF01110C1001XX	i) Skin and soft tissue infections, bone& joint infections ii) Cerebral toxoplasmosis iii) Children less than 8 years old:Treatment and prophylaxis of malaria in combination with quinine, as an alternative to doxycline	i) ADULT: 150 - 300 mg every 6 hours; up to 450 mg every 6 hours in severe infections; Max: 1.8g/day CHILD: 3 - 6 mg/kg every 6 hours. Children weighing <10 kg should receive at least 37.5 mg every 8 hr. ii) 600 mg 6 hourly for 6 weeks iii) 10mg/kg twice a day, in combination with quinine. The combination to be given for 7 days	A*
Clindamycin Phosphate 150 mg/ml Injection	J01FF01162P3001XX	i) Skin and soft tissue infections, bone & joint infections ii) Cerebral toxoplasmosis	i) ADULT: 0.6 - 2.7 g daily (in 2 - 4 divided doses); up to 4.8 g daily; CHILD over 1 month, 20 - 40 mg/kg/day or 350 mg/m2/day in 3 - 4 divided doses ii) 1200 mg every 6 hours for 3 weeks followed by 300 mg orally every 6 hours for another 3 weeks	A*
Clobazam 10 mg tablet	N05BA09000T1001XX	As adjunctive therapy in patients with epilepsy not adequately stabilised with their basic medication.	The initial dose in adults and adolescents >15 yr should be low (5 to15mg daily), if necessary, increased gradually to a maximum daily dose of about 80mg. Doses of up to 30mg may be taken as a single dose in the evening. The initial dose in children from 3 to15 yr is normally 5mg. A maintenance dose of 0.3 to 1.0mg/kg body weight daily is usually sufficient.	A*
Clobetasol Propionate 0.05% Cream	D07AD01133G1001XX	Short term treatment only of more resistant dermatoses eg. psoriasis, recalcitrant eczemas, lichen planus, discoid lupus erythematosus and other conditions which do not respond satisfactorily to less potent steroids	Apply sparingly once or twice daily, changing to lower potency therapy as soon as condition is controlled. For mild to moderate use maximum for 2 weeks. For moderate to severe maximum duration 4 consecutive weeks. Max: 50 g/week	A

Generic Name	MDC	Indications	Dosage	Category
Clobetasol Propionate 0.05% Ointment	D07AD01133G5001XX	Short term treatment only of more resistant dermatoses eg. psoriasis, recalcitrant eczemas, lichen planus, discoid lupus erythematosus and other conditions which do not respond satisfactorily to less potent steroids	Apply sparingly once or twice daily, changing to lower potency therapy as soon as condition is controlled. For mild to moderate use maximum for 2 weeks. For moderate to severe maximum duration 4 consecutive weeks. Max:50 g/week	A
Clobetasone Butyrate 0.05% Cream	D07AB01255G1001XX	Eczema and dermatitis of all types	Apply up to four times daily until condition improves, then reduce frequency	A/KK
Clobetasone Butyrate 0.05% Ointment	D07AB01255G5001XX	Eczema and dermatitis of all types	Apply up to four times daily until condition improves, then reduce frequency	A
Clodronate 800 mg Tablet	M05BA02011T1011XX	Treatment of hypercalcaemia due to malignancy	2 tablets in single or two divided doses	A*
Clofazimine 100 mg Capsule	J04BA01000C1002XX	i) Previously untreated leprosy patients ii) Leprosy patients resistant to sulphones iii) Suppression of lepra reactions	i) ADULT: 100 mg each other day or 50 mg daily with 100mg Dapsone & 300mg once a month with 600mg rifampicin under supervision. Maximum: 200 mg/day. CHILD: 10-14 yr: 50mg clofazimine on alternate days with 50mg dapsone & 150 mg clofazimine with 450 mg rifampicin once a month.Maximum: 100 mg/day. ii) 100 mg daily iii) 200-300mg usually effective. Treatment with minimum suppression dose continued for at least 6 months	B

Generic Name	MDC	Indications	Dosage	Category
Clofazimine 50 mg Capsule	J04BA01000C1001XX	i) Previously untreated leprosy patients ii) Leprosy patients resistant to sulphones iii) Suppression of lepra reactions	i) ADULT: 100 mg each other day or 50 mg daily with 100mg Dapsone & 300mg once a month with 600mg rifampicin under supervision. Maximum: 200 mg/day. CHILD: 10-14 yr: 50mg clofazimine on alternate days with 50mg dapsone & 150 mg clofazimine with 450 mg rifampicin once a month.Maximum: 100 mg/day. ii) 100 mg daily iii) 200-300mg usually effective. Treatment with minimum suppression dose continued for at least 6 months	B
Clomiphene Citrate 50mg Tablet	G03GB02136T1001XX	Anovulatory infertility	50 mg daily from 2nd - 6th or 5th - 9th day of menstrual cycle. Increase dose gradually by increments of 50 mg if there is no response until a dosage of 200 mg daily is achieved (starting as early as 30 days afer the previous course). Further treatment may not be recommended if pregnancy has not occurred after a total of 6 treatment cycles.	A
Clomipramine HCl 25 mg Tablet	N06AA04110T1001XX	Depression, obsessive-compulsive disorder.	Initially 10 mg daily, increased gradually as necessary to 30 - 150 mg daily in divided doses or as a single dose at bedtime; max 250 mg daily. ELDERLY initially 10 mg daily increased carefully over approximately 10 days to 30 - 75 mg daily;Child: ≥10 yr: Initially, 25 mg daily, increased gradually over 2 wk. Max: 3 mg/kg/day or 100 mg daily, whichever is smaller. Give in divided doses. Once titrated, dose may be given as a single dose at bedtime.	A

Generic Name	MDC	Indications	Dosage	Category
Clonazepam 0.5 mg Tablet	N03AE01000T1001XX	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.	B
Clonazepam 2 mg Tablet	N03AE01000T1002XX	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.	B

Generic Name	MDC	Indications	Dosage	Category
Clonidine HCl 0.025 mg Tablet	N02CX02110T1001XX	Rapid opiod detoxification combination use with naltrexone	Rapid detoxification in 4-5 days (use with naltrexone): 6 mcg/kg ORALLY divided in 3 doses 6 to 8 hours apart the first day, increasing to 11 mcg/kg divided in 3 doses given day two, tapering to 0.6 mcg/kg the third day. Rapid opioid detoxification for 7 days (use with naltrexone) : 0.1 to 0.2 mg every 4 hours as needed	A
Clopidogrel 75 mg Tablet	B01AC04192T1001XX	Prevention of myocardial infarct, stroke or established peripheral arterial disease. As second/third line treatment in patients who are sensitive to acetylsalicylic acid & intolerant to ticlopidine	75 mg once daily	A*
Clostridium Botulinum Toxin Type A 100 units	M03AX01000P4001XX	i) Focal dystonias ii) Hemifacial spasm iii) Spasticity including cerebral palsy	20 - 200 units 3 months once	A*
Clostridium Botulinum Type A toxin haemagglutinin complex 300 units/vial powder for injection	M03AX01000P4003XX	i) Focal dystonias ii) Hemifacial spasm iii) Spasticity including cerebral palsy	Initially 20 U/kg divided between both calf muscles. May be titrated 10-30 U/kg up to max of not >1000 U/patient. Should only be used in children > 2 years of age. Repeat injections given not less than 3 months from previous injection.	A*
Clostridium botulinum Type A toxin haemagglutinin complex 500U/vial powder for injection	M03AX01000P4002XX	i) Focal dystonias ii) Hemifacial spasm iii) Spasticity including cerebral palsy	Initially 20 U/kg divided between both calf muscles. May be titrated 10-30 U/kg up to max of not >1000 U/patient. Should only be used in children > 2 years of age. Repeat injections given not less than 3 months from previous injection.	A*
Clotrimazole 1% Cream	D01AC01000G1001XX	Cutaneous candidiasis, Tinea corporis, Tinea cruris, Tinea pedis and Tinea versicolor	Rub in gently onto affected and surrounding skin 2 or 3 times daily continuing for about 2 weeks beyond the dissapearance of all symptoms	B

Generic Name	MDC	Indications	Dosage	Category
Clotrimazole 1% Ear Drop	S02AA00000D1002XX	Otomycosis; concomitant therapy with antibiotics and corticosteroid ear drops	4 to 5 drops 3 to 4 times daily	B
Clotrimazole 1% Solution	D01AC01000L6001XX	Cutaneous candidiasis, tinea orporis, tinea cruris, tinea pedis and tinea versicolor	Apply gently onto affected and surrounding skin area 2 or 3 times daily continuing for 2-4 weeks	A
Clotrimazole 200 mg Vaginal Tablet	G01AF02000S1002XX	Vaginal candidiasis	200 mg once daily, preferably at bedtime for three consecutive days	B
Clotrimazole 500 mg Vaginal Tablet	G01AF02000S1003XX	Vaginal candidiasis	500 mg as a single one-time dose	B
Cloxacillin Sodium 125 mg/5 ml Suspension	J01CF02520L8001XX	Treatment of susceptible bacterial infections, notably penicillinase-producing staphylococci	Child: 50-100 mg/kg in divided doses every 6 hr	B
Cloxacillin Sodium 250 mg Capsule	J01CF02520C1001XX	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.	B
Cloxacillin Sodium 250 mg Injection	J01CF02520P4001XX	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	B
Cloxacillin Sodium 500 mg Capsule	J01CF02520C1002XX	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.	B
Cloxacillin Sodium 500 mg Injection	J01CF02520P4002XX	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	B
Clozapine 100 mg Tablet	N05AH02000T1002XX	Treatment of resistant schizophrenia	Initial dose : 12.5 mg (once or twice) daily, increase slowly in steps of 25 - 50 mg up to 300 mg daily within 2 - 3 weeks. Maximum 900 mg/day	A

Generic Name	MDC	Indications	Dosage	Category
Clozapine 25 mg Tablet	N05AH02000T1001XX	Treatment of resistant schizophrenia	Initial dose : 12.5 mg (once or twice) daily, increase slowly in steps of 25 - 50 mg up to 300 mg daily within 2 - 3 weeks. Maximum 900 mg/day	A
Coal Tar 1- 6 % in Betamethasone 17 - Valerate 0.01 % Ointment	D05AA00946G5003XX	Dandruff, seborrhoeic dermatitis, atopic dermatitis, eczema and psoriasis	Apply to the affected areas sparingly 1-2 times daily	B
Coal Tar 1-9% Ointment	D05AA00000G5001XX	Dandruff, seborrhoeic dermatitis, atopic dermatitis, eczema and psoriasis. Used as a mild astringent for the skin, as a soothing and protective application in eczema and as a protective to slight excoriation	Apply sparingly to the affected area 1-3 times daily starting with low strength preparations	B
Coal Tar 20% Solution	D05AA00000L5201XX	Dandruff, seborrhoeic dermatitis, atopic dermatitis, eczema and psoriasis	Use 100 ml in a bath	B
Coal Tar and Salicylic Acid (various concentrations) Ointment	D05AA00946G5002XX	Dandruff, seborrhoeic dermatitis, atopic dermatitis, eczema and psoriasis	Apply to the affected areas	B
Coal Tar with Salicylic Acid (various concentrations) Solution	D05AA00000L5202XX	Dandruff, seborrhoeic dermatitis, atopic dermatitis, eczema and psoriasis	Apply to the affected areas or as in product leaflet	B
Cocaine 10% Solution	N01BC01110L5001XX	To produce local anaesthesia or vasoconstriction during endoscopic nasal surgery, turbinectomy septoplasty, polypectomy etc	Maximum total dose recommended for application to the nasal mucosa in healthy adult is 1.5 to 2 mg/kg of a 10% cocaine solution	B
Cocois Co. Ointment	D05AA00946G5001XX	Scalp psoriasis and severe seborrhoeic dermatitis	Rub a small amount into the scalp gently	B

Generic Name	MDC	Indications	Dosage	Category
Colchicine 0.5 mg Tablet	M04AC01000T1001XX	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) Initial dose, 0.5-1.2 mg, then 0.5-0.6 mg every hour until relief of pain is obtained or vomiting or diarrhoea occurs (Maximum : 8 mg). The course should not be repeated within 3 days. Prevention of attacks during initial treatment with allopurinol or uricosuric drugs: 0.5 mg 1-3 times daily. ii) 0.5 mg 1-3 times daily depends on disease and severity, up to a maximum of 3 mg/day	B
Colloidal Bismuth Subcitrate 120 mg Tablet	A02BX05136T1001XX	Eradication therapy for Helicobacter Pylori in combination with antibiotics and antisecretory drugs	240 mg twice daily for 1-2 weeks	A
Compound Sodium Lactate (Hartmanns Solution)	B05XA30125P6001XX	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
Conjugated estrogens 0.3 mg Tablet	G03CA57000T1003XX	i) Osteoporosis associated with oestrogen deficiency ii) Female hypoestrogenism iii) Vasomotor symptoms associated with oestrogen deficiency iv)atrophic vaginitis and 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	A
Conjugated Estrogens 0.625 mg & Medroxyprogesterone Acetate 2.5 mg Tablet	G03FA12295T1002XX	Management of moderate to severe vasomotor symptoms associated with menopause, prevention and management of postmenopausal osteoporosis, atropic vaginitis and atropic urethritis in post menopausal woman with intact uterus	1 tablet daily	A
Conjugated Oestrogens 0.625 mg Tablet	G03CA57000T1001XX	i) Osteoporosis associated with oestrogen deficiency ii) Female hypoestrogenism iii) Vasomotor symptoms associated with oestrogen deficiency iv)atrophic vaginitis and 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	A

Generic Name	MDC	Indications	Dosage	Category
Conjugated Oestrogens 0.625 mg/g Cream	G03CA57000G1001XX	Atrophic vaginitis and post menopausal atrophic urethritis	Intravaginally or topically 0.5-2g daily depending on severity of condition. Administration should be cyclic, with 3 weeks on conjugated estrogens and one week off. Estrogens should be used for the shortest duration possible when treating atrophic vaginitis. Every 3 to 6 months attempts should be made to taper or discontinue therapy and conjugated estrogens should be titrated to give the lowest possible dosage to control symptoms	A
Continuous Ambulatory Peritoneal Dialysis (CAPD) Solution containing 2.3% glucose (Calcium 1.75mmol/L) & (Calcium 1.25mmol/L)	B05DB00908H2504XX	For chronic renal diseases requiring dialysis and acute therapy-resistance renal failure eg. prior to transfer to a dialysis centre	Dose depending on clinical cases	B
Continuous Ambulatory Peritoneal Dialysis Solution containing 1.5% Dextrose	B05DB00908H2501XX	For chronic renal diseases requiring dialysis and acute therapy-resistance renal failure eg. prior to transfer to a dialysis centre	Dose depending on clinical cases	B
Continuous Ambulatory Peritoneal Dialysis Solution containing 2.5% Dextrose	B05DB00908H2502XX	For chronic renal diseases requiring dialysis and acute therapy-resistance renal failure eg. prior to transfer to a dialysis centre	Dose depending on clinical cases	B
Continuous Ambulatory Peritoneal Dialysis Solution containing 4.25% Dextrose	B05DB00908H2503XX	For chronic renal diseases requiring dialysis and acute therapy-resistance renal failure eg. prior to transfer to a dialysis centre	Dose depending on clinical cases	B
Copper 250 mm2 Intrauterine Device	G02BA02000M9001XX	Intrauterine contraception	One unit intrauterine device to be inserted into the uterine cavity on the last day of the menstrual flow or in the first days afterwards. It is advised that the Multiload Cu 250 devices are replaced every 3 years	B

Generic Name	MDC	Indications	Dosage	Category
Copper 375 mm2 Intrauterine Device	G02BA02000M9002XX	Contraception	One unit intrauterine device to be inserted into the uterine cavity on the last day of the menstrual flow or in the first days afterwards. It is advised that the Multiload Cu 375 devices are replaced every 5 years	B
Copper Sulphate Crystal	D08A000183F9901XX	Wounds	The tip of the crystal should be moistened by dipping in water and applied carefully to the lesion	C
Corifollitropin Alfa 100mcg/0.5ml solution for injection	G03GA09000P5001XX	Controlled Ovarian Stimulation (COS) in combination with a GnRH antagonist for the development of multiple follicles in woman participating in an Assisted Reproductive Technology (ART) program Restriction: As second line treatment alternative to other recombinant FSH	Women with Body Weight ≤60 kg: A single dose of 100 mcg should be administered. Women with Body Weight >60 kg: A single dose of 150 mcg should be administered. Details : Refer to Product Information	A*
Corifollitropin Alfa 150mcg/0.5ml solution for injection	G03GA09000P5002XX	Controlled Ovarian Stimulation (COS) in combination with a GnRH antagonist for the development of multiple follicles in woman participating in an Assisted Reproductive Technology (ART) program Restriction: As second line treatment alternative to other recombinant FSH	Women with Body Weight ≤60 kg: A single dose of 100 mcg should be administered. Women with Body Weight >60 kg: A single dose of 150 mcg should be administered. Details : Refer to Product Information	A*
Cortisone Acetate 5 mg Tablet	H02AB10122T1002XX	For salt losing congenital adrenal hyperplasia in newborn and paediatric patients	20-30 mg/m2 daily. Doses may be divided with two-thirds in the morning and one-third late in the afternoon	B
Crotamiton 10 % Cream	P03A000000G1001XX	i) Pruritus ii) Scabies iii) Insect bite reactions	i) and iii) Massage into affected area until the medication is completely absorbed. Repeat as needed. Apply 2 or 3 times daily ii) Apply to the whole body from below the chin. 2nd application is applied 24 hr later. May need to use once daily for up to 5 days.	A/KK

Generic Name	MDC	Indications	Dosage	Category
Cyanocobalamin 0.1 mg Injection	B03BA01000P3001XX	i) Prophylaxis of anaemia 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: 100 mcg monthly. CHILD 30-50 mcg daily for 2 or more weeks (to a total dose of 1-5mg). Maintenance: 100 mcg monthly to sustain remission	B
Cyanocobalamin 1 mg Injection	B03BA01000P3002XX	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: 100 mcg monthly. CHILD 30-50 mcg daily for 2 or more weeks (to a total dose of 1-5mg).	B
Cyanocobalamin 50 mcg Tablet	B03BA01000T1002XX	Vitamin B12 deficiency of dietary origin	ADULT 50-150 mcg daily. CHILD 50-105 mcg daily in 1-3 divided doses	B
Cyclopentolate 0.2% with Phenylephrine 1% Eye Drops	S01GA55990D2001XX	Dilating agent for premature babies	1 drop every 5 - 10 minutes; not exceeding three times to produce rapid mydriasis. Observe infants closely for at least 30 minutes	A
Cyclopentolate 0.5% Eye Drops	S01FA04000D2001XX	Mydriasis and cycloplegia	1 drop of solution in eye(s); may repeat after 5 to 10 minutes if needed. INFANT : Single instillation of 1 drop of 0.5% solution in the eye; apply pressure to nasolacrimal sac for 2 to 3 minutes; observe infant closely for at least 30 minutes for signs or symptoms of systemic absorption	A

Generic Name	MDC	Indications	Dosage	Category
Cyclopentolate 1% Eye Drops	S01FA04000D2002XX	Mydriasis and cycloplegia	ADULT : 1 drop of solution in eye(s); may repeat after 5-10 minutes if needed. CHILD : 1 drop of solution in eye(s); may repeat after 5-10 minutes if needed. Pre-treatment on the day prior to examination is usually not necessary. If desirable, 1 or 2 drops may be instilled the evening prior to examination.	A
Cyclophosphamide 1 g Injection	L01AA01000P4002XX	i) Solid tumours (adult and paediatric), leukaemia, non-Hodgkin's lymphoma, multiple myeloma ii) Severe lupus nephritis (Class III and IV) iii) Other systemic vasculitis iv) Systemic lupus erythematosus, rheumatoid arthritis, polyarteritis nodosa, wegener granulomatosis v) Pemphigus vulgaris	i) ADULT: 600 - 750 mg/m2 IV once every 3 weeks as part of combination regime. CHILD: Dose variable depending on disease and protocol. Range 600 mg/m2 to 2 g/m2 infusion over 1 hour to 6 hours (lower doses can be given as bolus). Care with pre and post-hydration. Mesna to be given with doses more than 1 g/m2. Higher doses are used in haematopoetic stem cell transplant-refer to specific protocols ii) 750 mg/m2 BSA monthly for 18 months iii) 750 mg/m2 BSA monthly for 6 months. Dose can be adjusted up to 1,000 mg/m2 BSA to achieve adequate leucocyte suppression iv) 500 - 1000 mg intravenously (Regime varies according to indication). Starting dose may be given fortnightly then at monthly intervals followed by 3 monthly intervals v) 500 mg infusion on the 2nd day of the dexamethasone-cyclophosphamide pulsed regime, the cycle is repeated every 4 weeks up to 6 cycles or till remission followed by oral cyclophosphamide	A

Generic Name	MDC	Indications	Dosage	Category
Cyclophosphamide 200 mg Injection	L01AA01000P4001XX	i) Solid tumours (adult and paediatric), leukaemia, non-Hodgkin's lymphoma, multiple myeloma ii) Severe lupus nephritis (Class III and IV) iii) Other systemic vasculitis iv) Systemic lupus erythematosus, rheumatoid arthritis, polyarteritis nodosa, wegener granulomatosis v) Pemphigus vulgaris	i) ADULT: 600 - 750 mg/m2 IV once every 3 weeks as part of combination regime. CHILD: Dose variable depending on disease and protocol. Range 600 mg/m2 to 2 g/m2 infusion over 1 hour to 6 hours (lower doses can be given as bolus). Care with pre and post-hydration. Mesna to be given with doses more than 1 g/m2. Higher doses are used in haematopoetic stem cell transplant-refer to specific protocols ii) 750 mg/m2 BSA monthly for 18 months iii) 750 mg/m2 BSA monthly for 6 months. Dose can be adjusted up to 1,000 mg/m2 BSA to achieve adequate leucocyte suppression iv) 500 - 1000 mg intravenously (Regime varies according to indication). Starting dose may be given fortnightly then at monthly intervals followed by 3 monthly intervals v) 500 mg infusion on the 2nd day of the dexamethasone-cyclophosphamide pulsed regime, the cycle is repeated every 4 weeks up to 6 cycles or till remission followed by oral cyclophosphamide	A
Cyclophosphamide 50 mg Tablet	L01AA01000T1001XX	i) Solid tumours, leukaemia, lymphoma, autoimmune disorders, autoimmune bullous diseases, connective tissue disease, pyoderma gangrenosum ii) For severe lupus nephritis (Class III & IV), systemic vasculitis and steroid resistant/dependent nephrotic syndrome iii) Systemic lupus erythematosus (SLE), rheumatoid arthritis, polyarteritis nodosa, wegener granulomatosis	i) ADULT: 50 - 100 mg/day. Monitor full blood count (FBC), liver function, urine microscopy and renal function. CHILD, up to 1 year: 10 - 20 mg daily, 1 - 5 years: 30 - 50 mg daily, 6 - 12 years: 50 - 100 mg daily ii) 2 mg/kg/day for 3 - 4 months iii) 1 - 1.5 mg/kg/day orally in divided doses	A

Generic Name	MDC	Indications	Dosage	Category
Cycloserine 250 mg Capsule	J04AB01000C1001XX	Multi-Drug Resistance Tuberculosis treatment failure. (For respiratory physicians)	ADULT: Initial: 250 mg every 12 hours for 14 days, then administer 0.5 - 1 g daily in 2 divided doses for 18 - 24 months (maximum daily dose: 1 g). CHILD: 2-12 yr: 5 mg/kg bid; 12-18 yr: 250 mg bid for 2 wk then adjusted to a max dose of 1 g daily	A*
Cyclosporine Ophthalmic Emulsion 0.05%	S01XA18000D2001XX	To increase tear production in patients whose tear production is presumed to be suppressed due to ocular inflammation associated with keratoconjunctivitis sicca. Increased tear production was not seen in patients currently taking anti inflammatory drugs or using punctal plugs.	1 drop twice a day in each eye approximately 12 hours apart.	A*
Cyproterone Acetate 2 mg & Ethinyloestradiol 0.035 mg Tablet	G03HB01954T1001XX	Androgen dependent diseases in women	1 tablet daily for 21 days on the first day of the cycle, followed by 7 tab free days. Starting on day 2 to 5 is allowed, but during the first cycle a barrier method is recommended for the first 7days of tablet taking.	A*
Cyproterone Acetate 50 mg Tablet	G03HA01122T1001XX	Carcinoma of prostate	i) After orchidectomy, 100 mg once daily or twice daily ii) If used together with LHRH agonists, the initial dose is 100 mg twice daily for 5 to 7 days before the start of LHRH agonist, then 100 mg twice daily for 3 to 4 weeks together with the LHRH agonist	A*

Generic Name	MDC	Indications	Dosage	Category
Cytarabine 1 g Injection	L01BC01000P4004XX	i) Central nervous system lymphoma ii) Meningeal leukemia iii) Non Hodgkin's Lymphoma iv) High dose cytarabine as conditioning to cytoreduce the disease before stem cell transplant for relapsed or refractory leukemia v) As salvage for acute lymphocytic leukemia vi) As salvage for acute myeloid leukemia vii) As palliative chemotherapy in elderly acute myeloid leukemia/ myelodysplastic syndrome	Standard doses 100 - 200 mg/m2 daily over 5 - 10 days. Higher doses for intensification/consolidation: 1000 - 3000 mg/m2 daily over 3 - 5 days depending on specific protocols. CHILD: Dose variable depending on disease and protocol. Range from 100 mg/m2 to 3 g/m2 twice daily. May be given as SC, IV bolus or infusion. Intrathecal dose: Less than 1 year: 15 mg, 1 - 2 years: 20 mg, 2 - 3 years: 25 mg, more than 3 years: 30 mg. (ENSURE THAT PREPARATION IS SUITABLE FOR INTRATHECAL USE)	A
Cytarabine 100 mg Injection	L01BC01000P4002XX	i) Central nervous system lymphoma ii) Meningeal leukemia iii) Non Hodgkin's Lymphoma iv) High dose cytarabine as conditioning to cytoreduce the disease before stem cell transplant for relapsed or refractory leukemia v) As salvage for acute lymphocytic leukemia vi) As salvage for acute myeloid leukemia vii) As palliative chemotherapy in elderly acute myeloid leukemia/ myelodysplastic syndrome	Standard doses 100 - 200 mg/m2 daily over 5 - 10 days. Higher doses for intensification/consolidation: 1000 - 3000 mg/m2 daily over 3 - 5 days depending on specific protocols. CHILD: Dose variable depending on disease and protocol. Range from 100 mg/m2 to 3 g/m2 twice daily. May be given as SC, IV bolus or infusion. Intrathecal dose: Less than 1 year: 15 mg, 1 - 2 years: 20 mg, 2 - 3 years: 25 mg, more than 3 years: 30 mg. (ENSURE THAT PREPARATION IS SUITABLE FOR INTRATHECAL USE)	A

Generic Name	MDC	Indications	Dosage	Category
Cytarabine 500 mg Injection	L01BC01000P4003XX	i) Central nervous system lymphoma ii) Meningeal leukemia iii) Non Hodgkin's Lymphoma iv) High dose cytarabine as conditioning to cytoreduce the disease before stem cell transplant for relapsed or refractory leukemia v) As salvage for acute lymphocytic leukemia vi) As salvage for acute myeloid leukemia vii) As palliative chemotherapy in elderly acute myeloid leukemia/ myelodysplastic syndrome	Standard doses 100 - 200 mg/m2 daily over 5 - 10 days. Higher doses for intensification/consolidation: 1000 - 3000 mg/m2 daily over 3 - 5 days depending on specific protocols. CHILD: Dose variable depending on disease and protocol. Range from 100 mg/m2 to 3 g/m2 twice daily. May be given as SC, IV bolus or infusion. Intrathecal dose: Less than 1 year: 15 mg, 1 - 2 years: 20 mg, 2 - 3 years: 25 mg, more than 3 years: 30 mg. (ENSURE THAT PREPARATION IS SUITABLE FOR INTRATHECAL USE)	A
Dabigatran Etexilate 110 mg Capsule	B01AE07999C1002XX	i) Prevention of venous thromboembolic events in patients who have undergone total knee replacement or total hip replacement surgery ii) Reduction of the risk of stroke and systemic embolism in patients with non-valvular atrial fibrillation (AF)	i) Following total knee replacement: Initially ADULT 110mg (ELDERLY, 75 mg) within 1- 4 hours after surgery, then 220 mg (ELDERLY, 150 mg) once daily thereafter for 6-10 days Following total hip replacement: Initially ADULT 110 mg (ELDERLY, 75 mg) within 1- 4 hours after surgery, then 220 mg (ELDERLY, 150 mg) once daily thereafter for 28-35 days ii) Recommended daily dose is 300mg taken orally as 150mg hard capsule twice daily. Therapy should be continued lifelong. Patients aged 80 years and above should be treated with a dose of 220mg daily , taken orally as one 110mg capsule twice daily. Special patient population for Renal Impairment : Renal function should be assessed by calculating the creatinine clearance (CrCl) prior to initiation of treatment with Dabigatran to exclude patients for treatment with	A*

Generic Name	MDC	Indications	Dosage	Category
			severe renal impairment (i.e. CrCl < 30 ml/min)	
Dabigatran Etexilate 75 mg Capsule	B01AE07999C1001XX	Prevention of venous thromboembolic events in patients who have undergone total knee replacement or total hip replacement surgery	Following total knee replacement: Initially ADULT 110 mg (ELDERLY, 75 mg) within 1- 4 hours after surgery, then 220 mg (ELDERLY, 150 mg) once daily thereafter for 6-10 days Following total hip replacement: Initially ADULT 110 mg (ELDERLY, 75 mg) within 1- 4 hours after surgery, then 220 mg (ELDERLY, 150 mg) once daily thereafter for 28-35 days	A*

Generic Name	MDC	Indications	Dosage	Category
Dabigatran Etexilate150 mg Capsule	B01AE07999C1003XX	Reduction of the risk of stroke and systemic embolism in patients with non-valvular atrial fibrillation (AF)	Recommended daily dose is 300mg taken orally as 150mg hard capsule twice daily. Therapy should be continued lifelong. Patients aged 80 years and above should be treated with a dose of 220mg daily , taken orally as one 110mg capsule twice daily. Special patient population for Renal Impairment : Renal function should be assessed by calculating the creatinine clearance (CrCl) prior to initiation of treatment with Dabigatran to exclude patients for treatment with severe renal impairment (i.e. CrCl < 30 ml/min).	A*
Dacarbazine 100 mg Injection	L01AX04000P4001XX	i) Malignant melanoma, sarcomas, neuroblastomas and other childhood solid tumours ii) Hodgkin's Disease	i) 250 mg/m2 for 5 days, may be repeated every 3 weeks ii) 375 mg/m2 IV every 2 weeks	A*
Danazol 100 mg Capsule	G03XA01000C1001XX	i)Endometriosis and gynaecomastia ii)Menorrhagia iii)Prophylaxis of hereditary angioedema	i)200 - 800 mg daily for max of 9 months ii)200 mg daily for 12 weeks ii)400 mg daily. Reduce to 200 mg daily after 2 months attack free period	A/KK
Danazol 200 mg Capsule	G03XA01000C1002XX	i)Endometriosis and gynaecomastia ii)Menorrhagia iii)Prophylaxis of hereditary angioedema	i)200 - 800 mg daily for max of 9 months ii)200 mg daily for 12 weeks ii)400 mg daily. Reduce to 200 mg daily after 2 months attack free period	A/KK
Dapsone 100 mg Tablet	J04BA02000T1001XX	i)Leprosy ii) Dermatitis herpetiformis	i) ADULT: 6 - 10 mg/kg weekly/ 1.4mg/kg daily (around 50 - 100 mg daily). CHILD: 1 - 2 mg/kg/day. Maximum: 100 mg/day ii) ADULT: 50 - 300 mg daily	B

Generic Name	MDC	Indications	Dosage	Category
Daunorubicin HCl 20 mg Injection	L01DB02110P4001XX	i) Acute myeloblastic leukaemia (AML) ii) Acute lymphoblastic leukemia (ALL)	i) 45 - 60 mg/m2 IV daily for 3 - 5 days ii) 25 - 45 mg/m2 once a week for first 4 weeks during induction phase. Caution: Total cumulative dose of daunorubicin and doxorubicin must not exceed 500 mg/m2 due to risk of cardiotoxicity. CHILD: 30-45 mg/m2/dose infusion over 6 hours. Schedule depends on protocol. Need to check cardiac function closely by echocardiography every cumulative dose of 100mg/m2 to max. 360 mg/m2	A*
Decitabine 50 mg Injection	L01BC08000P3001XX	Myelodysplastic syndromes (MDS) including: Previously treated and untreated de novo and secondary MDS of all French-American-British subtypes (refractory anemia, refractory anemia with ringed sideroblasts, refractory anemia with excess blasts, refractory anemia with excess blasts in transformation, and chronic myelomonocytic leukemia) and Intermediate-1, Intermediate-2, and High-Risk International Prognostic Scoring System (IPSS) groups	15 mg/m2 by continuous IV infusion over 3 hours repeated every 8 hours for 3 days. Repeat this treatment cycle every 6 weeks for a minimum of 4 cycles. However, complete or partial response may take longer than 4 cycles. Treatment may be continued as long as there is continued	A*
Deferasirox 125 mg Dispersible Tablet	V03AC03000T4001XX	Treatment of chronic iron overload due to blood transfusions (transfusional haemosiderosis) in adult and pediatric patients aged 2 years and above	Initial 20 mg/kg/day. Starting dose can also be based on transfusion rate and existing iron burden. Max is 30 mg/kg/day	A*
Deferasirox 500 mg Dispersible Tablet	V03AC03000T4002XX	Treatment of chronic iron overload due to blood transfusions (transfusional haemosiderosis) in adult and pediatric patients aged 2 years and above	Initial 20 mg/kg/day. Starting dose can also be based on transfusion rate and existing iron burden. Max is 30 mg/kg/day	A*

Generic Name	MDC	Indications	Dosage	Category
Deferiprone 500 mg Tablet	V03AC02000T1001XX	Treatment of iron overload in patients with thalassemia major for whom desferrioxamine therapy is contraindicated or inadequate. Add on therapy to desferrioxamine for thalassemia patients with cardiac complication	25 mg/kg 3 times a day for total daily dose of 75 mg/kg. Doses greater 100 mg/kg are not recommended	A*
Denosumab in 1.0 mL solution (60 mg/mL) Pre-filled syringe (subcutaneous injection)	M05BX04000P4001XX	Post-Menopausal Osteoporosis.	A single subcutaneous injection of 60 mg administered once every 6 months. Patients should receive calcium and vitamin D supplements whilst undergoing treatment.	A*
Desferrioxamine B Methanesulphonate 0.5 g Injection	V03AC01196P3001XX	i) Acute iron poisoning in children ii) Investigation and treatment of haemochromatosis iii) Diagnosis and treatment of aluminium toxicity in patients with renal failure and dialysis iv) Chronic iron toxicity or overload	i) 2 g by IM immediately and 5 g by mouth after gastric lavage ii) 0.5 - 1.5 g by IM injection daily iii) Diagnosis: 5 mg per kg by slow intravenous infusion during the last hour of haemodialysis. Treatment: 5 mg per kg once a week by slow intravenous infusion during the last hour of dialysis iv) 30 - 50 mg/kg	A
Desflurane Liquid	N01AB07000L5001XX	i) Induction and maintenance of anaesthesia in adult ii) Maintenance of anaesthesia in infants & children	ADULT: Induction , initially 3% in oxygen or nitrous oxide/oxygen and increased by 0.5%-1% every 2-3 breaths or as tolerated (up to 11%), until loss of consciousness. Maintenance: 2.5%-8.5% with or without concomitant nitrous oxide CHILD: maintenance, inhaled in concentrations of 5.2%-10% with or without concomitant nitrous oxide	A
Desloratadine 5 mg Tablet	R06AX27000T1001XX	Allergic rhinitis and chronic idiopathic urticaria	ADULT & CHILD more than 12 years : 5 mg once daily. CHILD: 6-11 yr: 2.5 mg; 1-5 yr: 1.25 mg; 6-11 mth: 1 mg. Doses to be taken once daily	A*

Generic Name	MDC	Indications	Dosage	Category
Desmopressin 0.1 mg Tablet	H01BA02122T1001XX	i)Central diabetes insipidus ii)Primary nocturnal enuresis iii)Treatment of nocturia associated with nocturnal polyuria in adult	i)ADULT and CHILD : 0.1-0.2mg 3 times daily, up to 0.1-1.2mg daily ii) ADULT & Child≥5 yr 0.2-0.4mg at night iii)Initially 0.1 mg at night. May be increased to 0.2 mg and then to 0.4 mg by means of weekly increase	A
Desmopressin 0.2 mg Tablet	H01BA02122T1002XX	i)Central diabetes insipidus ii)Primary nocturnal enuresis iii)Treatment of nocturia associated with nocturnal polyuria in adult	i)ADULT and CHILD : 0.1-0.2mg 3 times daily, up to 0.1-1.2mg daily ii) ADULT & Child≥5 yr 0.2-0.4mg at night iii)Initially 0.1 mg at night. May be increased to 0.2 mg and then to 0.4 mg by means of weekly increase	A
Desmopressin 100 mcg/ml Nasal Spray	H01BA02122A4101XX	i) Diabetes Insipidus ii) Primary nocturnal enuresis	i) ADULT : 10 - 20 mcg 1-2 times daily. CHILD: 5 - 10mcg 1-2 times daily ii) 10-40 mcg nocte	A
Desmopressin Acetate 4 mcg/ml Injection	H01BA02122P3001XX	Diabetes insipidus	ADULT : 1 - 4 mcg IV daily. CHILD :0.4 mcg daily	A
Desogestrel 0.075 mg Tablet	G03AC09000T1001XX	Contraception. Only for women who should not take combined oral contraceptives (COCs) eg Obese, smoker, migraine, breast feeding	Tablets must be taken in the order directed on the package every day at about the same time with some liquid as needed. One tablet is to be taken daily for 28 consecutive days. Each subsequent pack is started immediately after finishing the previous pack.	A*
Desogestrel 150 mcg & Ethinylestradiol 20 mcg Tablet	G03AA09954T1002XX	Oral contraception	One tablet daily for 21 days starting on 1st day of menses followed by 7 tablet-free days.	A/KK
Desogestrel 150 mcg & Ethinylestradiol 30 mcg Tablet	G03AB05954T1001XX	Contraception	1 tablet daily for 21 days, subsequent courses repeated after 7 day interval (during which withdrawal bleeding occurs)	C+
Desvenlafaxine Succinate 50 mg Extended Release Tablet	N06AX23999T5002XX	Major depression	Recommended dose is 50mg once daily, with or without food.	A*

Generic Name	MDC	Indications	Dosage	Category
Dexamethasone 0.5 mg Tablet	H02AB02000T1001XX	Croup, septic shock, cerebral oedema and respiratory distress syndrome including status asthmaticus	0.5 - 9 mg daily, depending upon the disease being treated. Up to 15 mg daily in severe disease	A
Dexamethasone and Neomycin Sulphate and Polymyxin B Eye Ointment	S01CA01990G5101XX	Treatment of ocular inflammation when concurrent use of an antimicrobial is judged necessary	Apply 1 - 1.5 cm 3 - 4 times daily, may be used adjunctively with drops at bedtime	A
Dexamethasone and Neomycin Sulphate and Polymyxin B Sulphate Ophthalmic Suspension	S01CA01990D2001XX	Treatment of ocular inflammation when concurrent use of an antimicrobial is judged necessary	1 - 2 drops hourly for severe cases and 4 - 6 hourly for mild infection	A
Dexamethasone Sodium Phosphate 0.1% Eye Drops	S01BA01162D2001XX	Acute steroid responsive inflammatory and allergic conditions	1 - 2 drops 4 - 6 times a day	A
Dexamethasone Sodium Phosphate 4 mg/ml Injection	H02AB02162P3001XX	Croup, septic shock, cerebral oedema and respiratory distress syndrome including status asthmaticus	Initially 0.5 - 9 mg IM, IV or infusion daily, depending upon the disease being treated	B
Dexchlorpheniramine Maleate 2 mg Tablet	R06AB02253T1001XX	Symptomatic treatment of allergic rhinitis and allergic dermatoses	ADULT : 2 mg 3 times daily. CHILD : 1 - 12 years : 2 mg 3 times daily	B
Dexchlorpheniramine Maleate 2 mg/5 ml Syrup	R06AB02253L9001XX	Symptomatic treatment of allergic rhinitis	CHILD 2 - 5 years : 0.5 mg every 4 - 6 hours; 6 - 11 years : 1 mg every 4 - 6 hours	B
Dexmedetomidine HCl 100 mcg/ml Injection	N05CM18110P4001XX	i) Sedation of intubated and mechanically ventilated ICU patients. For use only by specialist anaesthetist ii) For sedation of non-intubated patients prior to and/or during surgical and other procedures	i) Not to be infused for more than 24 hours, 1 mcg/kg over 10 minutes as loading dose. Maintenance dose: 0.2 - 0.7 mcg/kg/hr ii) Not to be infused for more than 24 hours, 1 mcg/kg over 10 minutes as loading dose. Maintenance dose: 0.2 - 0.7 mcg/kg/hr	A*
Dextran 40 Injection	B05AA05000P6001XX	Condition associated with peripheral local slowing of the blood flow, prophylaxis of post surgical thromboembolic disease	Initially 500-1000 ml by infusion, further doses are given according to the patient's condition	A*
Dextrose 10% Injection	B05BA03000P6002XX	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	B

Generic Name	MDC	Indications	Dosage	Category
Dextrose 20% Injection	B05BA03000P6003XX	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	B
Dextrose 30% Injection	B05BA03000P3004XX	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	B
Dextrose 5% Injection	B05BA03000P6001XX	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	B
Dextrose 50% Injection	B05BA03000P3005XX	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	B
Dextrose Powder	V04CA02000F2101XX	Use as a diagnostic agent for diabetes	75 g stat	B
Diatrizoate Meglumine and Sodium Amidotrizoate Solution	V08AA01254L9901XX	i) Contrast medium for the radiological examination of the gastrointestinal tract (primarily in cases in which barium sulphate is contraindicated) ii) Computerised tomography in abdominal region iii) Treatment of Mecolinium ileus	i) ADULT and CHILD more than 10 year, ORALLY: 60 - 100 ml RECTALLY, contrast medium should be diluted with 3-4 times its volume of water. ORALLY: CHILD less than 10 years,: 15- 30 ml NEWBORN, INFANT contrast medium should be diluted with 3 times its volume of water. RECTALLY: CHILD more than 5 years, contrast medium should be diluted with 4-5 times its volume of water. Younger patients a dilution with 5 times its volume is recommended ii) Adult, orally, 25-77 mL in 1000 mL tap water 15-30 minutes prior to imaging	A

Generic Name	MDC	Indications	Dosage	Category
Diazepam 2 mg Tablet	N05BA01000T1001XX	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 delibitated) half adult dose. CHILD (night terrors), 1 - 5 mg at bedtime	B
Diazepam 5 mg Rectal Solution	N05BA01000G2001XX	Status epilepticus, 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	C
Diazepam 5 mg Tablet	N05BA01000T1002XX	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 delibitated) half adult dose. CHILD (night terrors), 1 - 5 mg at bedtime	B

Generic Name	MDC	Indications	Dosage	Category
Diazepam 5 mg/ml Injection	N05BA01000P3001XX	i) Status epilepticus ii) Skeletal muscle spasm iii) Anxiety disorders	i) Status epilepticus, by slow IV: 5-10 every 10-15 minute (rate not more than 5 mg/min), to a total dose of 30 mg, may repeat in 2 hour if needed. Infants 30 days to 5 years, 0.05-0.3 mg/kg/dose given over 2-3 minutes, every 15-30 minutes to a total dose of 5 mg, repeat in 2-4 hours if necessary. CHILD more than 5 years, 1 mg by slow IV, every 2-5 minutes, maximum 10 mg, repeat in 2-4 hours if necessary ii) Skeletal muscle spasm, by slow IV or IM, 5-10 mg repeated if necessary in 3-4 hours. CHILD (tetanus): 30 days - 5 years, 1-2 mg IM or IV slowly every 3-4 hours as needed. 5 years and above, 5-10 mg IM or IV slowly every 3-4 hours if needed iii) Anxiety disorders, 2-10 mg by slow IV (not more than 5 mg/min). Repeat if necessary every 3-4 hours	B
Diclofenac 1% Gel	M02AA15520G3001XX	Post-traumatic inflammation of the tendons,ligaments & joints. Localised forms of soft tissue rheumatism and degenerative rheumatism	Apply 3 - 4 times daily and gently rubbed in	A
Diclofenac 100mg Suppository	M01AB05520S2004XX	Pain and inflammation in rheumatic disease and juvenile arthritis	Diclofenac Suppositories are normally inserted one, two or three times a day up to a maximum total daily dose of 150 mg.	A
Diclofenac 12.5 mg Suppository	M01AB05520S2001XX	Pain and inflammation in rheumatic disease and juvenile arthritis	ADULT: 75 - 150 mg daily in divided doses. CHILD 1-12 years, 12.5- 25 mg daily	A
Diclofenac 25 mg Suppository	M01AB05520S2002XX	Pain and inflammation in rheumatic disease and juvenile arthritis	ADULT: 75 - 150 mg daily in divided doses. CHILD 1-12 years, 12.5- 25 mg daily	A

Generic Name	MDC	Indications	Dosage	Category
Diclofenac 50 mg Tablet	M01AB05520T1001XX	Pain and inflammation in rheumatic disease	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. PAEDS more than 6 months : 1 - 3 mg/kg body weight daily in divided doses. Maximum 3mg/kg/day (Max 150mg/day).	B
Diclofenac Sodium 50 mg Suppository	M01AB05520S2003XX	Pain and inflammation in rheumatic disease and juvenile arthritis	ADULTS: 75 - 150 mg daily in divided doses. Maximum 150mg/day. PAEDS more than 6 months : 1 - 3 mg/kg body weight daily in divided doses. Maximum 3mg/kg/day (Max 150mg/day).	A
Diclofenac Sodium 75 mg/3 ml Injection	M01AB05520P3001XX	Pain and inflammation in rheumatic disease	IM 75 mg once daily (2 times daily in severe cases) for not more than 2 days. Max 150mg/day. Not suitable for children.	A/KK
Didanosine 100 mg Tablet (ddI)	J05AF02000T1002XX	HIV infection, in combination with other antiretrovirals	ADULT less than 60 kg: 125 mg twice daily or 250 mg once daily; more than 60 kg: 400 mg once daily or 200 mg twice daily. CHILD: 2 weeks to less than 3 months: 50mg/m2 twice daily; 3-8 months: 100mg/m2 twice daily	A*
Didanosine 2 g Oral Solution (ddI)	J05AF02000F2101XX	HIV infection, in combination with other antiretrovirals	ADULT less than 60 kg: 125 mg twice daily or 250 mg once daily; more than 60 kg: 400 mg once daily or 200 mg twice daily. CHILD: 2 weeks to less than 3 months: 50mg/m2 twice daily; 3-8 months: 100mg/m2 twice daily	A*
Didanosine 25 mg Tablet (ddI)	J05AF02000T1001XX	HIV infection, in combination with other antiretrovirals	ADULT less than 60 kg: 125 mg twice daily or 250 mg once daily; more than 60 kg: 400 mg once daily or 200 mg twice daily. CHILD: 2 weeks to less than 3 months: 50mg/m2 twice daily; 3-8 months: 100mg/m2 twice daily	A*

Generic Name	MDC	Indications	Dosage	Category
Didanosine 250 mg Enteric Coated Capsule	J05AF02000C1001XX	HIV infection, in combination with other antiretrovirals	ADULT less than 60 kg: 250 mg once daily; 60 kg or greater: 400 mg once daily. Dose may varies if taken in combination with tenofovir	A*
Didanosine 400 mg Enteric Coated Capsule	J05AF02000C1002XX	HIV infection, in combination with other antiretrovirals	ADULT less than 60 kg: 250 mg once daily; 60 kg or greater: 400 mg once daily. Dose may varies if taken in combination with tenofovir	A*
Dienogest 2mg tablet	G03DB08000T1001XX	Treatment of endometriosis	One tablet daily. Treatment can be started on any day of menstrual cycle. Tablets must be taken continously without regard to vaginal bleeding.	A/KK
Diethylcarbamazine Citrate 50 mg Tablet	P02CB02136T1001XX	i) Bancrofti filariasis, onchocerciasis, loasis, creeping eruption ii) Ascariasis iii) Tropical eosinophilia	i) 1 mg/kg on the first day and increased gradually over 3 days to 6 mg/kg daily in divided doses. This dosage is maintained for 21 days. ii) 13 mg/kg once daily for 7 days. CHILD : 6 - 10 mg/kg 3 times daily for 7 days iii) 6 mg/kg/day in 3 divided doses for 21 days	B
Digoxin 0.25 mg Tablet	C01AA05000T1001XX	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)	B
Digoxin 250 mcg/ml Injection	C01AA05000P3001XX	Heart failure with atrial fibrillation, supraventricular arrhythmias (particularly atrial fibrillation)	Rapid digitilisation: ADULT & CHILD over 10 years, initially 0.75 - 1.5 mg, followed by 250 mcg 6 hourly until digitilisation is complete	A

Generic Name	MDC	Indications	Dosage	Category
Digoxin 50 mcg/ml Elixir	C01AA05000L1001XX	Heart failure, supraventricular arrhythmias (particularly atrial fibrillation)	Rapid digitalization, give in divided doses; PREMATURE: 20-30 mcg/kg; FULLTERM: 25-35 mcg/kg; CHILD 1-2 years : 35 to 60 mcg/kg; CHILD 2-5 years: 30-40 mcg/kg; CHILD 5-10 years: 20- 35 mcg/kg; CHILD over 10 years: 10-15 mcg/kg. For daily maintenance doses or for gradual digitalization, give 20% to 30% of oral digitalizing dose for premature infants or 25% to 35% of oral digitalizing dose for all other pediatric patients	B
Digoxin 62.5 mcg Tablet	C01AA05000T1002XX	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 dailly (higher dose may be divided) according to renal fuction, and in atrial fibrillation, on heart-response; usual range :125 - 250 mcg daily (lower doses may be appropriate in the elderly)	B
Dihydrocodeine Tartrate 30 mg Tablet	N02AA08123T1001XX	For the control of moderate to severe chronic pain	ADULT: 30 - 60 mg every 4 - 6 hours. PAED, over 4 yrs: 0.5 - 1 mg/kg body weight every 4-6 hours	B
Dihydroergocristine or Co-dergocrine Mesilate 1 mg Tablet	C04AE01196T1001XX	Adjunct in elderly with mild to moderate dementia, prevention of migraine and vascular headache	3-6 mg daily in divided doses	A/KK
Diltiazem HCl 30 mg Tablet	C08DB01110T1001XX	Treatment of angina pectoris in the following cases: i) inadequate response or intolerance to beta-blockers and Isosorbide Dinitrate ii) contraindication to beta-blockers iii) coronary artery spasm	Initially 30mg tds, may increase to 60mg tds (elderly initially twice daily; increased if necessary to 360 mg daily.	B

Generic Name	MDC	Indications	Dosage	Category
Dimercaprol 50 mg/ml Injection	V03AB09000P3001XX	Poisoning by antimony, arsenic, bismuth, gold, mercury, possibly thallium; adjunct (with calcium disodium edetate) in lead poisoning	By IM: 2.5 - 3 mg/kg every 4 hours for 2 days, 2 - 4 times on the third day, then 1 - 2 times daily for 10 days or until recovery. For ophthalmic use : instillation of 50 mg/ml oily solution in conjunctival sac, within 5 minutes of contamination	B
Dinoprostone (Prostagladin E2) 3 mg Vaginal Tablet	G02AD02000S1001XX	Induction of labour	3 mg vaginal tablet to be inserted high into the posterior formix. A second 3 mg tablet may be inserted after 6-8 hours if labour is not established. Max 6 mg	A
Diosmin 450 mg and Hesperidin 50 mg Tablet	C05CA53931T1001XX	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	A/KK
Diphenhydramine Hydrochloride 10 mg/5 ml Oral solution	R06AA02110L1001XX	Cough and allergic rhinitis	Allergic rhinitis :1) Adults & Children over 12 years of age : 25 to 50 mg 3 to 4 times a day 2) Children 6 to 12 years of age: 10 mg 3 to 4 times a day 3) Children 1 to 6 years of age: 5 mg 3 to 4 times a day. Maximum daily dosage <300 mg (adults and children) Cough and cold : 1)Adults: 25 mg every 4 hrs. Not to exceed 150 mg in 24 hours 2) Children (6 to 12years): 12.5 mg every 4 hours. Not to exceed 75 mg in 24 hours 3) Children (2 to 6 years): 6.25 mg every 4 hours. Not to exceed 25 mg in 24 hours	C
Diphenhydramine Hydrochloride 14 mg/5 ml Expectorant	R06AA52110L2101XX	Cough	ADULT : 5 - 10 ml 2 - 3 times daily. CHILD : 2.5 - 5 ml 2 - 3 times daily (not to be used in children less than 2 years of age)	C

Generic Name	MDC	Indications	Dosage	Category
Diphenhydramine Hydrochloride 7 mg/5 ml Expectorant	R06AA52110L9003XX	Cough	ADULT : 5 - 10 ml 2 - 3 times daily. CHILD : 2.5 - 5 ml 2 - 3 times daily (not to be used in children less than 2 years of age)	C
Diphenoxylate with Atropine Sulphate Tablet	A07DA01922T1001XX	Acute diarrhoea	ADULT initially 4 tablet followed by 2 tablet 4 times daily until diarrhoea is controlled	B
Diphtheria and Tetanus Vaccine Injection	J07AM51963P3001XX	Immunisation against diphtheria and tetanus	Prophylactic: 2 or 3 doses by deep SC or IM injection, 0.5 or 1 ml. Each second dose at 4 - 6 weeks then 4 - 6 months. Booster at 4 - 6 years	C+
Diphtheria Antitoxin Injection	J07AF01000P3001XX	Diphtheria	Therapeutic: 10,000 - 30,000 units by IM or IV. Increase to 40,000 - 100,000 units in severe cases. Doses up to 30,000 units may be given IM	B
Diphtheria, Pertussis, Tetanus and Conjugated Haemophilus Type B 10 mcg Vaccine	J07AG52000P3001XX	Immunisation of children against Haemophilus Type B infections, diphtheria, tetanus and pertussis	0.5 ml given by IM	C
Diphtheria, Pertussis, Tetanus and Hepatitis B Vaccine	J07CA05963P3001XX	Active immunisation against diphtheria, tetanus, pertussis and hepatitis B in infants from 6 weeks onwards	Primary vaccination: 3 doses of 0.5 ml each within the first 6 months of life. Administer each dose at intervals of at least 4 weeks. A booster dose can be administered in the second year of life	C+
Diphtheria, Pertussis, Tetanus Vaccine Injection	J07AJ52963P3001XX	Prophylactic immunisation against diphtheria, pertussis and tetanus	By deep SC or IM injection: 3 doses each of 0.5 or 1 ml with intervals of 6 - 8 weeks and 4 - 6 months respectively between the doses. Booster 1 and 5 years after primary immunisation	C
Diphtheria, Tetanus, Acellular Pertussis, Inactivated Polio Virus, Haemophilus Influenza Type B (DTaP-IPV-HiB) Vaccine Injection (Single Dose)	J07CA06963P3001XX	Immunisation of children against Diphtheria, Tetanus, Acellular Pertussis, Polio and Haemophilus Influenza Type B infection	Primary : 0.5 ml by IM at 1 - 2 months intervals Booster : Second year of life	C+

Generic Name	MDC	Indications	Dosage	Category
Dipyridamole 75 mg Tablet	B01AC07000T1001XX	As an adjunct to oral anticoagulation/ antiplatelet therapy in the prophylaxis of cerebrovascular events	75-150 mg 3 times daily to be taken 1 hour before meals	B
Distigmine Bromide 5 mg Tablet	N07AA03320T1001XX	i) Myasthenia gravis ii) Prevention and treatment of post-operative intestinal atony, urinary retention and neurogenic bladder	i) ADULT : 5 mg daily 30 minutes before breakfast. Increase at intervals of 3 - 4 days if necessary to maximum of 20 mg daily. CHILD : Up to 10 mg daily according to age ii) Urinary retention : 5 mg daily 30 minutes before breakfast. Neurogenic bladder : 5 mg daily or on alternate days 30 minutes before breakfast	A
Dithranol 0.1 - 5% in Vaseline/ Ointment	D05AC01000G5001XX	Short contact treatment for plaque psoriasis and alopecia areata	For application to skin or scalp. 0.1-0.5% suitable for overnight treatment. 1-2% for max 1 hour.	A
Dithranol 1 % in Lassars Paste	D05AC01000G6001XX	Treatment of quiescent or chronic psoriasis of the skin, scalp and alopecia areata	Apply liberally and carefully to the lesions with a suitable applicator. A dressing may be applied	A
Dobutamine 12.5 mg/ml Injection	C01CA07110P3001XX	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	A

Generic Name	MDC	Indications	Dosage	Category
Docetaxel 40mg/ml Injection	L01CD02000P3002XX	i) Adjuvant treatment of patients with high risk node-positive breast cancer in combination with doxorubicin and cyclophosphamide ii) Breast cancer, locally advanced or metastatic, not previously on cytotoxic therapy, in combination with doxorubicin iii) First line therapy in non small cell lung cancer in stage 3- 4 and performance status 0-1, in combination with cisplatin iv) Inoperable locally advanced squamous cell carcinoma of head and neck, in combination with cisplatin and 5-FU for induction treatment v) Prostate cancer, in combination with prednisolone	i) 75 mg/m2 IV over 1 hour after doxorubicin 50 mg/m2 and cyclophosphamide 500 mg/m2 every 3 weeks for 6 cycles ii) 75 mg/m2 IV over 1 hour every 3 week in combination with doxorubicin 50 mg/m2 iii) Administer IV over 1 hour every 3 weeks. Chemotherapy-naive patients 75 mg/m2 immediately followed by 75 mg/m2 cisplatin over 30-60 mins or carboplatin (AUC 6 mg/mL/min) over 30-60 minutes. Monotherapy of non small cell lung cancer (NSCLC) after failure of prior platinum-based chemotherapy 75 mg/m2 iv) 75 mg/m2 as a 1 hour infusion followed by cisplatin 75 mg/m2 over 1 hour, on day one, followed by 5-fluorouracil as a continuous infusion at 750 mg/m2 per day for five days. This regimen is administered every 3 weeks for 4 cycles.	A*
Domperidone 1 mg/ml Suspension	A03FA03000L8001XX	Nausea, vomiting, dyspepsia, gastro-esophageal reflux	Chronic dyspepsia : CHILD 2.5 mL/10 kg body weight 3 times daily and once more in the evening if necessary. Dosage may be doubled in adults & childs over 1 year. Acute and subacute conditions (particularly nausea and vomiting). CHILD: 5 mL/10 kg bodyweight. All to be taken 3-4 times daily	B
Domperidone 10 mg Tablet	A03FA03253T1001XX	Nausea, vomiting, dyspepsia, gastro-esophageal reflux	Chronic dyspepsia ADULT 10 mg 3 times daily. Acute and subacute conditions (particularly nausea and vomiting):ADULT 20 mg 3-4 times daily	B

Generic Name	MDC	Indications	Dosage	Category
Donepezil HCl 10 mg Tablet	N06DA02110T1002XX	Treatment of mild to moderate dementia in Alzheimer's disease, as well as in patients with severe Alzheimer's disease. [psychiatrists and neurologists only]	5 - 10 mg once daily at bedtime. Maximum 10 mg daily	A
Donepezil HCl 5 mg Tablet	N06DA02110T1001XX	Treatment of mild to moderate dementia in Alzheimer's disease, as well as in patients with severe Alzheimer's disease.	5 - 10 mg once daily at bedtime. Maximum 10 mg daily	A
Donepezil Hydrochloride 10mg Orodispersible Tablet	N06DA02110T4002XX	Treatment of mild to moderate dementia in Alzheimer's disease, as well as in patients with severe Alzheimer's disease. [psychiatrists and neurologists only]	Initiated at 5mg/day (one a day dosing), should be maintained for at least 1 month in order to allow the earliest clinical responses and to allow steady state concentration to be achieved. The maximum recommended daily dose is 10 mg.	A*
Donepezil Hydrochloride 5mg Orodispersible Tablet	N06DA02110T4001XX	Treatment of mild to moderate dementia in Alzheimer's disease, as well as in patients with severe Alzheimer's disease. [psychiatrists and neurologists only]	Initiated at 5mg/day (one a day dosing), should be maintained for at least 1 month in order to allow the earliest clinical responses and to allow steady state concentration to be achieved. The maximum recommended daily dose is 10 mg.	A*
Dopamine HCl 40 mg/ml Injection	C01CA04110P3001XX	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	B
Doripenem Monohydrate 500 mg Injection	J01DH04000P4001XX	Ventilator-associated pneumonia (VAP) patients at risk or involving multidrug resistant pathogens especially Pseudomonas aeruginosa infections	500mg every 8 hours as a one hour infusion for 5 to 14 days according to severity, site of infection and the patient's clinical response.	A*

Generic Name	MDC	Indications	Dosage	Category
Dorzolamide HCl 2% Ophthalmic Solution	S01EC03110D2001XX	All glaucoma patients where beta-blockers are contraindicated and when intraocular pressure is not well controlled by other drugs	Monotherapy : 1 drop 3 times daily. Adjunctive therapy with an ophthalmic beta-blocker : 1 drop 2 times daily. When substituting for another ophthalmic antiglaucoma agent with this product, discontinue the other agent after proper dosing on one day and start Trusopt on the next day. If more than 1 topical ophthalmic drug is used, the drugs should be administered at least 10 mins apart	A*
Dothiepin HCl 25 mg Capsule	N06AA16110C1001XX	Depression of any aetiology	Initially 75 mg (ELDERLY 50-75 mg) daily in divided doses or single dose at bedtime, increased gradually as necessary to 150 mg daily (ELDERLY 75 mg may be sufficient), up to 225 mg daily in some circumstances. CHILD is not recommended	A
Dothiepin HCl 75 mg Tablet	N06AA16110T1001XX	Depression of any aetiology	Initially 75 mg (ELDERLY 50-75 mg) daily in divided doses or single dose at bedtime, increased gradually as necessary to 150 mg daily (ELDERLY 75 mg may be sufficient), up to 225 mg daily in some circumstances. CHILD is not recommended	A
Doxazosin Mesilate 4 mg CR Tablet	C02CA04196T5001XX	Benign Prostatic Hyperplasia	4 mg once daily to maximum 8mg/day	A*

Generic Name	MDC	Indications	Dosage	Category
Doxorubicin HCl 10 mg Injection	L01DB01110P4001XX	i) Solid tumours, leukaemia, non-Hodgkin's lymphoma ii) Leukaemia (ALL induction) iii) Multiple myeloma	i) 30 - 75 mg/m2 IV as a single dose at 21 day intervals ii) 25 - 45 mg/m2 once a week for the first 4 weeks during induction or re-induction phase (refer to specific protocol. Caution: Total cumulative dose of doxorubicin must not exceed 550 mg/m2 due to risk of cardiotoxicity. CHILD: 30 mg/m2/dose over 6 - 24 hours for 1 - 2 days. Need to check cardiac function closely by echocardiography every cumulative dose of 100 mg/m2 to maximum 360 mg/m2 iii) 9 mg/m2 over 24 hours infusion for 4 days at monthly intervals	A
Doxorubicin HCl 50 mg Injection	L01DB01110P4002XX	i) Solid tumours, leukaemia, non-Hodgkin's lymphoma ii) Leukaemia (ALL induction) iii) Multiple myeloma	i) 30 - 75 mg/m2 IV as a single dose at 21 day intervals ii) 25 - 45 mg/m2 once a week for the first 4 weeks during induction or re-induction phase (refer to specific protocol. Caution: Total cumulative dose of doxorubicin must not exceed 550 mg/m2 due to risk of cardiotoxicity. CHILD: 30 mg/m2/dose over 6 - 24 hours for 1 - 2 days. Need to check cardiac function closely by echocardiography every cumulative dose of 100 mg/m2 to maximum 360 mg/m2 iii) 9 mg/m2 over 24 hours infusion for 4 days at monthly intervals	A
Doxycycline 100 mg Capsule	J01AA02000C1001XX	Infections due to susceptible organisms	ADULT: 200 mg on the first day followed by 100 mg daily. Severe infections: 200 mg daily	B
Doxycycline 100 mg Tablet	J01AA02000T1001XX	Infections due to susceptible organisms	ADULT: 200 mg on the first day followed by 100 mg daily. Severe infections: 200 mg daily	B

Generic Name	MDC	Indications	Dosage	Category
D-Penicillamine 0.25 g Capsule	M01CC01000C1001XX	i) Treatment of severe lead poisoning, it is used as adjunctive treatment following initial treatment with another chelating agent. May also be used as sole therapy in the treatment of asymptomatic patients with moderately elevated blood concentrations ii) Wilson's Disease: to aid in elimination of copper ions	i) Heavy metal poisoning: 900mg-1800mg daily. Duration of treatment is dictated by the urinary heavy metal excretion. Simultaneous oral vitamin B6 replacement with at least 40mg daily is essential ii) Wilson's disease: 0.25g - 1.5g daily on an incremental basis. Maximal daily dose: 2g. Maintenance dose: 0.75g - 1g daily	A
Duloxetine 30 mg Capsule	N06AX21110C1001XX	Major depressive disorder, diabetic peripheral neuropathic pain	ADULT: 60 mg once daily up to a maximum dose of 120mg/day (in divided doses) CHILD and ADOLESCENT under 18 years not recommended	A*
Duloxetine 60 mg Capsule	N06AX21110C1002XX	Major depression, diabetic peripheral neuropathic pain	ADULT: 60 mg once daily up to a maximum dose of 120mg/day (in divided doses) CHILD and ADOLESCENT under 18 years not recommended	A*
Dutasteride 0.5 mg Capsule	G04CB02000C1001XX	Benign prostatic hyperplasia in men with an enlarged prostate gland	0.5 mg daily	A*
Dutasteride 0.5mg and Tamsulosin 0.4mg Capsule	G04CA52953C1001XX	Combination therapy for the treatment of moderate to severe symptoms of BPH with: i) Large prostate (>30g) ii) Poor risk or not fit for surgery iii)Those who are awaiting their turn for surgery	One capsule daily	A*

Generic Name	MDC	Indications	Dosage	Category
Dydrogesterone 10 mg Tablet	G03DB01110T1001XX	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 oestrogen once daily for 5 - 7 days, To prevent bleeding : 10 mg bd with an oestrogen 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	A/KK
Edrophonium Chloride 10 mg/ml Injection	N07AA00100P3001XX	i) For reversal of neuromuscular block ii) Diagnosis of myasthenia gravis	i) Intravenous injection on over several minutes, 500 - 700 mcg/kg (after or with atropine sulphate 600 mcg) ii) Intravenous injection 2 mg followed by 8 mg if no response occurs within 30 seconds. CHILD: 20 mcg followed by 80 mcg/kg after 30 seconds	B
Efavirenz 100 mg Capsule	J05AG03000C1002XX	Combination therapy for HIV infections with a protease inhibitor and or Nucleoside Reverse Transcriptase Inhibitors (NRTIs)	ADULT: 600 mg once daily. ADOLESCENT & CHILD less than 17 years, more than 40 kg: 600 mg once daily, 32.5 - less than 40 kg: 400 mg once daily, 25 - less than 32.5 kg: 350 mg once daily, 20 - less than 25 kg: 300 mg once daily, 15 - less than 20 kg: 250 mg once daily, 13 - less than 15 kg: 200 mg once daily. No studies in children less than 3 years or less than 13 kg. Formulation unsuitable for children less than 40 kg	A*

Generic Name	MDC	Indications	Dosage	Category
Efavirenz 200 mg Capsule	J05AG03000C1003XX	Combination therapy for HIV infections with a protease inhibitor and or Nucleoside Reverse Transcriptase Inhibitors (NRTIs)	ADULT: 600 mg once daily. ADOLESCENT & CHILD less than 17 years, more than 40 kg: 600 mg once daily, 32.5 - less than 40 kg: 400 mg once daily, 25 - less than 32.5 kg: 350 mg once daily, 20 - less than 25 kg: 300 mg once daily, 15 - less than 20 kg: 250 mg once daily, 13 - less than 15 kg: 200 mg once daily. No studies in children less than 3 years or less than 13 kg. Formulation unsuitable for children less than 40 kg	A*
Efavirenz 50 mg Capsule	J05AG03000C1001XX	Combination therapy for HIV infections with a protease inhibitor and or Nucleoside Reverse Transcriptase Inhibitors (NRTIs)	ADULT: 600 mg once daily. ADOLESCENT & CHILD less than 17 years, more than 40 kg: 600 mg once daily, 32.5 - less than 40 kg: 400 mg once daily, 25 - less than 32.5 kg: 350 mg once daily, 20 - less than 25 kg: 300 mg once daily, 15 - less than 20 kg: 250 mg once daily, 13 - less than 15 kg: 200 mg once daily. No studies in children less than 3 years or less than 13 kg. Formulation unsuitable for children less than 40 kg	A*
Efavirenz 600 mg Tablet	J05AG03000T1001XX	Combination therapy for HIV infections with a protease inhibitor and or Nucleoside Reverse Transcriptase Inhibitors (NRTIs)	ADULT: 600 mg once daily. ADOLESCENT & CHILD less than 17 years, more than 40 kg: 600 mg once daily, 32.5 - less than 40 kg: 400 mg once daily, 25 - less than 32.5 kg: 350 mg once daily, 20 - less than 25 kg: 300 mg once daily, 15 - less than 20 kg: 250 mg once daily, 13 - less than 15 kg: 200 mg once daily. No studies in children less than 3 years or less than 13 kg. Formulation unsuitable for children less than 40 kg	A/KK

Generic Name	MDC	Indications	Dosage	Category
Eltrombopag Olamine 25 mg Film-coated Tablet	B02BX05999T1001XX	Short term use in idiopathic thrombocytopenic purpura patients as bridging therapy for splenectomy or surgery and in cases of severe bleeding.	Individualised dosage based on the patient's platelet count. Adult Initially 50 mg once daily. East Asian patient 25 mg once daily. Then, adjust dose to maintain platelet count ≥50,000/microliter. Max: 75 mg daily.	A*
Emulsificants Ointment	D02AC00952G5001XX	Xerosis and ichthyosis	Use as a soap and emollient	C
Enalapril 10 mg Tablet	C09AA02253T1002XX	i) Hypertension ii) Congestive heart failure	i) Initially 5 mg daily, (ELDERLY 2.5 mg once daily), usual maintenance dose 10 - 20 mg daily. Maximum: 40 mg/day in 1 - 2 divided doses ii) Initially 2.5 mg daily, usual maintenance dose 20 mg daily in 1 - 2 divided doses; maximum: 40 mg/day	B
Enalapril 20 mg Tablet	C09AA02253T1003XX	i) Hypertension ii) Congestive heart failure	i) Initially 5 mg daily, (ELDERLY 2.5 mg once daily), usual maintenance dose 10 - 20 mg daily. Maximum: 40 mg/day in 1 - 2 divided doses ii) Initially 2.5 mg daily, usual maintenance dose 20 mg daily in 1 - 2 divided doses; maximum: 40 mg/day	B
Enalapril 5 mg Tablet	C09AA02253T1001XX	i) Hypertension ii) Congestive heart failure	i) Initially 5 mg daily, (ELDERLY 2.5 mg once daily), usual maintenance dose 10 - 20 mg daily. Maximum: 40 mg/day in 1 - 2 divided doses ii) Initially 2.5 mg daily, usual maintenance dose 20 mg daily in 1 - 2 divided doses; maximum: 40 mg/day	B

Generic Name	MDC	Indications	Dosage	Category
Enoxaparin Sodium 20 mg Injection	B01AB05520P5001XX	i) Prevention of Deep Vein Thrombosis(DVT) especially in perioperative and high risk surgical cases ii) Treatment of DVT iii) Unstable angina and non Q wave Myocardial Infarction	i) Prophylaxis fo DVT especially in surgical patients: moderate risk, 20 mg SC approximately 2 hours before surgery then 20 mg every 24 hours for minimum 7 - 10 days, high risk (eg orthopaedic surgery, medical patients, 40mg every 24 hours for at least 6 days until patient ambulant, max 14 days. ii) Treatment of DVT or pulmonary embolism, 1.5 mg/kg every 24 hours, usually for 5 days and until adequate oral anticoagulation established. iii) Unstable angina and non-ST-segment-elevation myocardial infarction 1 mg/kg every 12 hours, usually for 2 - 8 days	A*
Enoxaparin Sodium 40 mg Injection	B01AB05520P5002XX	i) Prevention of Deep Vein Thrombosis(DVT) especially in perioperative and high risk surgical cases ii) Treatment of DVT iii) Unstable angina and non Q wave Myocardial Infarction	i) Prophylaxis for DVT especially in surgical patients: moderate risk, 20 mg SC approximately 2 hours before surgery then 20 mg every 24 hours for minimum 7 - 10 days, high risk (eg orthopaedic surgery, medical patients, 40mg every 24 hours for at least 6 days until patient ambulant, max 14 days. ii) Treatment of DVT or pulmonary embolism, 1.5 mg/kg every 24 hours, usually for 5 days and until adequate oral anticoagulation established. iii) Unstable angina and non-ST-segment-elevation myocardial infarction 1 mg/kg every 12 hours, usually for 2 - 8 days	A*

Generic Name	MDC	Indications	Dosage	Category
Enoxaparin Sodium 60 mg Injection	B01AB05520P5003XX	i) Prevention of Deep Vein Thrombosis(DVT) especially in perioperative and high risk surgical cases ii) Treatment of DVT iii) Unstable angina and non Q wave Myocardial Infarction	i) Prophylaxis fo DVT especially in surgical patients: moderate risk, 20 mg SC approximately 2 hours before surgery then 20 mg every 24 hours for minimum 7 - 10 days, high risk (eg orthopaedic surgery, medical patients, 40mg every 24 hours for at least 6 days until patient ambulant, max 14 days. ii) Treatment of DVT or pulmonary embolism, 1.5 mg/kg every 24 hours, usually for 5 days and until adequate oral anticoagulation established. iii) Unstable angina and non-ST-segment-elevation myocardial infarction 1 mg/kg every 12 hours, usually for 2 - 8 days	A*
Entacapone 200 mg Tablet	N04BX02000T1001XX	Parkinson's Disease. An adjunct to standard levodopa/benserazide or levodopa/carbidopa for use in patients with parkinson's disease and end of dose motor fluctuations, who cannot be stabilised on those combinations	200 mg to be taken with each daily dose of levodopa/dopa-decarboxylase inhibitor. Max 2g daily. May be taken with or without food	A
Entecavir 0.5 mg Tablet	J05AF10000T1001XX	First line treatment of Chronic Hepatitis B in patients who satisfy the criteria for treatment and require long-term therapy or have a very high baseline viral load	0.5-1mg once daily. Renal Dose Adjustment: 0.5-1mg every 48hours (30-49ml/min); 0.5-1mg every 72hours (10-29ml/min); 0.5mg-1mg every 5-7 days (<10ml/min; HD or CAPD).	A*
Eperisone HCl 50 mg Tablet	M03BX09110T1001XX	Myotonic symptoms associated with cervical syndrome, periarthritis of shoulder and lumbago spastic paralysis	50 mg 3 times daily	A
Ephedrine 0.5% w/v Nasal Drops	R01AA03110D6001XX	Decongestion of the upper respiratory tract	2 drops 3 times daily. Maximum use for 1 week	A/KK

Generic Name	MDC	Indications	Dosage	Category
Ephedrine HCl 30 mg/ml Injection	R03CA02110P3001XX	Treatment of bronchial spasm in asthma, adjunct to correct haemodynamic imbalances and treat hypotension in epidural and spinal anaesthesia	By IM, SC or IV. Severe, acute bronchospasm : 12.5-25 mg. Further dosage should be determine by patient response. When used as a pressor agent : ADULT 25 - 50 mg SC/IM. If necessary, a second IM dose of 50 mg or an IV dose of 25 mg may be given. Direct IV injection, 10 - 25 mg may be given slowly. Maximum parenteral ADULT dose : 150 mg in 24 hours. CHILD : 3 mg/kg or 100 mg/m2 SC or IV daily, in 4 - 6 divided doses	B
Epirubicin 10 mg Injection	L01DB03110P4001XX	Breast cancer, Non-Hodgkin's lymphoma, Leukaemia (ALL induction), gastric cancer, ovarian cancer	i) 75 - 90mg/m2 body area injected IV in 3 - 5 min, repeated at 21 day intervals.Higher doses up to 135mg/m2 as single agent and 120mg/m2 as combination (effective in treatment of breast cancer) CHILD: 50 mg/m2 over 6 hours. Schedule depends on protocol.	A*
Epirubicin 50 mg Injection	L01DB03110P4002XX	Breast cancer, Non-Hodgkin's lymphoma, Leukaemia (ALL induction), gastric cancer, ovarian cancer	i) 75 - 90mg/m2 body area injected IV in 3 - 5 min, repeated at 21 day intervals.Higher doses up to 135mg/m2 as single agent and 120mg/m2 as combination (effective in treatment of breast cancer) CHILD: 50 mg/m2 over 6 hours. Schedule depends on protocol.	A*

Generic Name	MDC	Indications	Dosage	Category
Erlotinib 100 mg Tablet	L01XE03110T1003XX	i) As monotherapy for maintenance treatment in patients with locally advanced or metastatic non-small cell lung cancer (NSCLC) with stable disease after 4 cycles of standard platinum-based first-line chemotherapy. ii) For the treatment of patients with locally advanced or metastatic NSCLC after failure of at least one prior chemotherapy regimen. Restricted to non-smoker, female, epidermal growth factor receptor (EGFR) positive and Asian patients only	150 mg taken at least one hour before or two hours after the ingestion of food once daily. Reduce in steps of 50 mg when necessary. Continue treatment until disease progression or unacceptable toxicity occurs. May require dose modifications when coadministered with strong CYP3A4 inhibitors or inducers; or in cigarette smoking patients.	A*
Erlotinib 150 mg Tablet	L01XE03110T1002XX	i) As monotherapy for maintenance treatment in patients with locally advanced or metastatic non-small cell lung cancer (NSCLC) with stable disease after 4 cycles of standard platinum-based first-line chemotherapy. ii) For the treatment of patients with locally advanced or metastatic NSCLC after failure of at least one prior chemotherapy regimen. Restricted to non-smoker, female, epidermal growth factor receptor (EGFR) positive and Asian patients only.	150 mg taken at least one hour before or two hours after the ingestion of food once daily. Reduce in steps of 50 mg when necessary. Continue treatment until disease progression or unacceptable toxicity occurs. May require dose modifications when coadministered with strong CYP3A4 inhibitors or inducers; or in cigarette smoking patients.	A*
Ertapenem 1 g Injection	J01DH03520P4001XX	i) Patient with confirm ESBL producing gram-negative infection. ii) Empiric treatment for severe community acquired pneumonia or other infections when Pseudomonas aeruginosa is not suspected.	ADULT: 1 g once daily. CHILD 3 month to 12 years: 15 mg/kg twice daily. Not to exceed 1 g/ day	A*
Erythromycin Ethylsuccinate 200 mg/5 ml Suspension	J01FA01238F2101XX	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.	B

Generic Name	MDC	Indications	Dosage	Category
Erythromycin Ethylsuccinate 400 mg Tablet	J01FA01238T1001XX	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.	B
Erythromycin Ethylsuccinate 400 mg/5 ml Suspension	J01FA01238F2102XX	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.	B
Erythromycin Lactobionate 500 mg Injection	J01FA01129P3001XX	Only for treatment of i) certain forms of meningitis ii) septicaemia not responding to usual antibiotics iii) mycoplasma pneumonia iv) infection with gram-positive organisms (e.g. tetanus, streptococcal infection) associated with Penicillin allergy, only when oral erythromycin cannot be given	Adult & Child: 25 - 50mg/kg /day infusion every 6 hours. Maximum: 4 g/day.	A*
Erythromycin Stearate 250 mg Tablet	J01FA01258T1001XX	Infections due to susceptible organism	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.	B

Generic Name	MDC	Indications	Dosage	Category
Erythropoietin Human Recombinant 10,000 IU/ml Injection	B03XA01000P5005XX	i) Treatment of anaemia associated with chronic renal failure. Dialysis patients who are haemoglobin less than 8 g or exhibiting symptoms of anaemia although haemoglobin more than 8 g and pre-transplant cases ii) Anaemia in cancer (non-myeloid malignancies) with concomitant chemotherapy	i) ADULT by IV injection over 1-5 minutes, initially 50 units/kg 3 times weekly adjusted according to response in step of 25 units/kg 3 times weekly at interval of at least 4 weeks. CHILD initially as for adult. Maintenance, bodyweight under 10 kg usually 75-150 units/kg 3 times weekly, bodyweight 10-30 kg usually 60-150 units/kg 3 times weekly, bodyweight over 30 kg usually 30-100 units/kg 3 times weekly ii) ADULT by SC injection (max. 1 ml per injection site), initially 150 units/kg 3 times weekly, increased if appropriate rise in haemoglobin not achieved after 4 weeks to 300 units/kg 3 times weekly. Discontinue if inadequate response after 4 weeks at higher dose	A*
Erythropoietin Human Recombinant 1000 IU/0.5ml Injection	B03XA01000P5001XX	i) Treatment of anaemia associated with chronic renal failure. Dialysis patients who are haemoglobin less than 8 g or exhibiting symptoms of anaemia although haemoglobin more than 8 g and pre-transplant cases ii) Anaemia in cancer (non-myeloid malignancies) with concomitant chemotherapy	i) ADULT by IV injection over 1-5 minutes, initially 50 units/kg 3 times weekly adjusted according to response in step of 25 units/kg 3 times weekly at interval of at least 4 weeks. CHILD initially as for adult. Maintenance, bodyweight under 10 kg usually 75-150 units/kg 3 times weekly, bodyweight 10-30 kg usually 60-150 units/kg 3 times weekly, bodyweight over 30 kg usually 30-100 units/kg 3 times weekly ii) ADULT by SC injection (max. 1 ml per injection site), initially 150 units/kg 3 times weekly, increased if appropriate rise in haemoglobin not achieved after 4 weeks to 300 units/kg 3 times weekly. Discontinue if inadequate response after 4 weeks at higher dose	A*

Generic Name	MDC	Indications	Dosage	Category
Erythropoietin Human Recombinant 2000 IU/0.5ml Injection	B03XA01000P5002XX	i) Treatment of anaemia associated with chronic renal failure. Dialysis patients who are haemoglobin less than 8 g or exhibiting symptoms of anaemia although haemoglobin more than 8 g and pre-transplant cases ii) Anaemia in cancer (non-myeloid malignancies) with concomitant chemotherapy	i) ADULT by IV injection over 1-5 minutes, initially 50 units/kg 3 times weekly adjusted according to response in step of 25 units/kg 3 times weekly at interval of at least 4 weeks. CHILD initially as for adult. Maintenance, bodyweight under 10 kg usually 75-150 units/kg 3 times weekly, bodyweight 10-30 kg usually 60-150 units/kg 3 times weekly, bodyweight over 30 kg usually 30-100 units/kg 3 times weekly ii) ADULT by SC injection (max. 1 ml per injection site), initially 150 units/kg 3 times weekly, increased if appropriate rise in haemoglobin not achieved after 4 weeks to 300 units/kg 3 times weekly. Discontinue if inadequate response after 4 weeks at higher dose	A
Erythropoietin Human Recombinant 3000 IU/0.3ml Injection	B03XA01000P5003XX	i) Treatment of anaemia associated with chronic renal failure. Dialysis patients who are haemoglobin less than 8 g or exhibiting symptoms of anaemia although haemoglobin more than 8 g and pre-transplant cases ii) Anaemia in cancer (non-myeloid malignancies) with concomitant chemotherapy	i) ADULT by IV injection over 1-5 minutes, initially 50 units/kg 3 times weekly adjusted according to response in step of 25 units/kg 3 times weekly at interval of at least 4 weeks. CHILD initially as for adult. Maintenance, bodyweight under 10 kg usually 75-150 units/kg 3 times weekly, bodyweight 10-30 kg usually 60-150 units/kg 3 times weekly, bodyweight over 30 kg usually 30-100 units/kg 3 times weekly ii) ADULT by SC injection (max. 1 ml per injection site), initially 150 units/kg 3 times weekly, increased if appropriate rise in haemoglobin not achieved after 4 weeks to 300 units/kg 3 times weekly. Discontinue if inadequate response after 4 weeks at higher dose	A*

Generic Name	MDC	Indications	Dosage	Category
Erythropoietin Human Recombinant 4000 IU/0.4ml Injection	B03XA01000P5004XX	i) Treatment of anaemia associated with chronic renal failure. Dialysis patients who are haemoglobin less than 8 g or exhibiting symptoms of anaemia although haemoglobin more than 8 g and pre-transplant cases ii) Anaemia in cancer (non-myeloid malignancies) with concomitant chemotherapy	i) ADULT by IV injection over 1-5 minutes, initially 50 units/kg 3 times weekly adjusted according to response in step of 25 units/kg 3 times weekly at interval of at least 4 weeks. CHILD initially as for adult. Maintenance, bodyweight under 10 kg usually 75-150 units/kg 3 times weekly, bodyweight 10-30 kg usually 60-150 units/kg 3 times weekly, bodyweight over 30 kg usually 30-100 units/kg 3 times weekly ii) ADULT by SC injection (max. 1 ml per injection site), initially 150 units/kg 3 times weekly, increased if appropriate rise in haemoglobin not achieved after 4 weeks to 300 units/kg 3 times weekly. Discontinue if inadequate response after 4 weeks at higher dose	A
Escitalopram 10 mg Tablet	N06AB10124T1001XX	i) Major depression ii) Treatment of panic disorder with or without agoraphobia	i) 10 mg once daily; may be increased to max 20 mg daily. ii) Panic disorder with or without agoraphobia :Initially 5 mg for the first week, thereafter increased to 10 mg daily. Max 20 mg daily, ELDERLY initially half the adult dose, lower maintenance dose may be sufficient. CHILD and ADOLESCENT under 18 years not recommended	A*
Esmolol HCl 10 mg/ml Injection	C07AB09110P3001XX	Tachycardia and hypertension in perioperative period	By IV infusion usually within range of 50 - 200 mcg/kg/min	A*
Esomeprazole 20 mg Tablet	A02BC05000T1002XX	i)Gastro-oesophageal reflux disease ii)H. pylori eradication	i)20mg daily for 4-8 weeks ii)40mg daily for 10 days in combination with amoxicillin 1g twice daily or clarithromycin 500mg twice daily	A*

Generic Name	MDC	Indications	Dosage	Category
Esomeprazole 40 mg Injection	A02BC05000P3001XX	i) Acute erosive/ ulcerative oesophagitis ii) Non -variceal upper gastrointestinal bleed	i) 20- 40 mg once daily for 2-5 days ii) 80 mg by IV bolus followed by 8mg/hour infusion for 72 hours	A*
Esomeprazole 40 mg Tablet	A02BC05000T1001XX	i)Gastro-oesophageal reflux disease ii)H. pylori eradication	i)20mg daily for 4-8 weeks ii)40mg daily for 10 days in combination with amoxicillin 1g twice daily or clarithromycin 500mg twice daily	A*
Essential Phospholipids, nicotinamide, cyanocobalamine, tocopheryl, pyridoxine, thiamine, riboflavine capsule	A05BA00924C1001XX	Nutritional supplement in liver disorders	Please refer to product leaflet	A/KK
Estradiol 1 mg & Estradiol 1 mg with Dydrogesterone 10 mg	G03FB08954T1001XX	Hormone Replacement Therapy for women with disorders due to natural or surgically induced menopause with intact uterus.	One tablet daily without pill-free interval, starting with 1 mg of Estradiol for first 14 days, followed by 1mg Estradiol with 10 mg Dydrogestrone daily for the next 14 days	A*
Estradiol 1 mg & Norethisterone Acetate 0.5 mg Tablet	G03FA01122T1001XX	Hormone replacement therapy for oestrogen deficiency symptoms in women more than 1 year after menopause and prevention of osteoporosis in post menopausal women	1 tablet per day without interruption	A*
Estradiol 1 mg with Dydrogesterone 5 mg Tablet	G03FB08954T1002XX	i) Hormone replacement therapy for the relief of symptoms due to oestrogen deficiency ii) Prevention of postmenopausal osteoporosis in women with a uterus	One tablet daily, taken continuously without interruption. Should be used only in postmenopausal women more than 12 month after menopause	A*
Estradiol Valerate 1 mg Tablet	G03CA03256T1002XX	Oestrogen replacement therapy - only those who cannot tolerate Premarin	1 mg daily continuously or 21 day regimen with 1 week of tablet free interval	A*
Estradiol Valerate 2 mg and Norgestrel 500 mcg with Estradiol Valerate 2 mg Tablet	G03FB01953T1001XX	Pre and post menopausal syndrome, primary and secondary amenorrhea, menstrual irregularities. Deficiency symptoms after oophorectomy or radiological castration for noncarcinomatous disease	Start on the 5th day of menstrual cycle - 1 tab daily for 21 days then stop for 7 days. If patient forgets dose at usual time, it should be taken within following 12 hours	B

Generic Name	MDC	Indications	Dosage	Category
Etanercept 25 mg Injection	L04AA11000P4001XX	i)Moderately to severe rheumatoid arthritis as monotherapy or in combination with methotrexate in patients with inadequate response to methotrexate alone. ii)Active polyarticular-course juvenile idiopathic arthritis in children 2-17 years with inadequate response to, or who have proved intolerant of methotrexate. iii)Psoriatic arthritis as monotherapy or in combination with methotrexate in patients inadequate response to methotrexate alone. iv)Active ankylosing spondylitis in adults v)Moderate to severe plaque psoriasis who failed to respond to, or who have a contraindication to, or are intolerant to other systemic therapy including cyclosporine, methotrexate or PUVA	Adult & geriatric dose: Rheumatoid arthritis, psoriatic arthritis, ankylosing spondylitis; 50 mg SC once-weekly for once-weekly dosing or 25 mg SC twice weekly (individual doses should be separated by 72 to 96 hours) for twice-weekly dosing. Plaque psoriasis; Initial: 50 mg SC twice weekly, 72 to 96 hours apart; maintain initial dose for 3 months (starting doses of 25 or 50 mg once weekly have also been used successfully). Maintenance dose: 50 mg SC once weekly. Paediatric dose (2 to 17 years): Juvenile idiopathic arthritis; 0.8 mg/kg (max. 25 mg/dose) SC once weekly for once-weekly dosing or 0.4 mg/kg (max. 25 mg/dose) SC twice weekly (individual doses should be separated by 72 to 96 hours) for twice-weekly dosing.	A*

Generic Name	MDC	Indications	Dosage	Category
Etanercept 50 mg Injection	L04AB01000P4002XX	i) Moderately to severe rheumatoid arthritis as monotherapy or in combination with methotrexate in patients with inadequate response to methotrexate alone. ii) Active polyarticular-course juvenile idiopathic arthritis in children 2-17 years with inadequate response to, or who have proved intolerant of methotrexate. iii) Psoriatic arthritis as monotherapy or in combination with methotrexate in patients inadequate response to methotrexate alone. iv) Active ankylosing spondylitis in adults v) Moderate to severe plaque psoriasis who failed to respond to, or who have a contraindication to, or are intolerant to other systemic therapy including cyclosporine, methotrexate or PUVA	Adult & geriatric dose: Rheumatoid arthritis, psoriatic arthritis, ankylosing spondylitis; 50 mg SC once-weekly for once-weekly dosing or 25 mg SC twice weekly (individual doses should be separated by 72 to 96 hours) for twice-weekly dosing. Plaque psoriasis; Initial: 50 mg SC twice weekly, 72 to 96 hours apart; maintain initial dose for 3 months (starting doses of 25 or 50 mg once weekly have also been used successfully). Maintenance dose: 50 mg SC once weekly. Paediatric dose (2 to 17 years): Juvenile idiopathic arthritis; 0.8 mg/kg (max. 25 mg/dose) SC once weekly for once-weekly dosing or 0.4 mg/kg (max. 25 mg/dose) SC twice weekly (individual doses should be separated by 72 to 96 hours) for twice-weekly dosing.	A*
Ethambutol HCl 200 mg Tablet	J04AK02110T1001XX	Tuberculosis	Adult: 15-25mg/kg daily (max 1200mg) or 50mg/kg biweekly (max2000mg). Children: 15-25mg/kg daily or 50 mg/kg twice weekly.	B
Ethambutol HCl 400 mg Tablet	J04AK02110T1002XX	Tuberculosis	Adult: 15-25mg/kg daily (max 1200mg) or 50mg/kg biweekly (max2000mg). Children: 15-25mg/kg daily or 50 mg/kg twice weekly.	B
Ether Solvent	N01AA01000L9901XX	To remove adhesive plaster from the skin	Dose depending on the route and procedure	C
Ethinylestradiol 20 mcg & Drospirenone 3 mg Tablet	G03AA12954T1002XX	i)Oral contraception ii)Treatment of acne vulgaris in women seeking oral contraception. iii) Treatment of symptoms of premenstrual dysphoric disorder (PMDD) in women who choose to use an oral contraceptive as their method of contraception.	1 tab daily for 28 consecutive days starting on 1st day of menstrual bleeding.	A*

Generic Name	MDC	Indications	Dosage	Category
Ethinylestradiol 20 mcg & Gestodene 75 mcg Tablet	G03AA10954T1001XX	Oral contraception	1 tablet to be taken daily for 21 executive days starting on the first day of menses. Each subsequent pack is started after a 7 days tablet free interval.	A/KK
Ethinylestradiol 20 mcg & Levonorgestrel 100 mcg Tablet	G03AA07954T1002XX	i)Prevention of pregnancy ii)Treatment of moderate acne vulgaris not controlled by conventional therapy (e.g topical preparations and oral antibiotics) in post-menarchal, premenopausal women more than or 14 years who accept contraception.	Beginning on day 1 of cycle, 1 tablet daily for 21 days followed by 7 tablet-free days.	A/KK
Ethionamide 250 mg Tablet	J04AD03000T1001XX	As second-line therapy in the treatment of Multi Drug Resistant Tuberculosis only in combination with other efficacious agents and only when therapy with isoniazid, rifampicin, or other first-line agents has failed.	ADULT: 15-20mg/kg daily, in divided doses if necessary; maximum dose 1g/day. CHILD: 10-20mg/kg in 2-3 divided doses or 15mg/kg/24hrs as a single daily dose.	A*
Ethosuximide 250 mg/5 ml Syrup	N03AD01000L9001XX	Absence seizures	ADULT: Initially, 500 mg daily. Increased by 250 mg at intervals of 4-7 days to usual dose of 1-1.5 g daily. Maximum: Up to 2 g, under strict supervision. CHILD: Greater than or equal to 6 years: Same as adult dose; less than 6 years: Initially, 250 mg daily. Increased gradually to usual dose of 20 mg/kg daily. Maximum: Children greater than or equal to 6 years: Same as adult dose; less than 6 years: Up to 1 g	B
Ethyl Chloride 100ml Spray	N01BX01000A4001XX	For minor surgical procedures including lancing boils, incision and drainage of small abscesses, pain due to athletic injuries and pain due to injection administration	Spray to affected area at a distance of about 30cm until a fine white film is produced	C

Generic Name	MDC	Indications	Dosage	Category
Etomidate 20 mg/10 mg Injection	N01AX07000P3001XX	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.	A*
Etonogestrel 68 mg Implant	G03AC08000P1001XX	Contraception	A single implant inserted subdermally and can be left in place for three years. The implant can be removed at any time but not later than three years after the date of insertion.	A/KK
Etoposide 100 mg/5 ml Injection	L01CB01000P3001XX	i) For treatment of children with solid tumours, juvenile myelomonocytic leukemia (JMML) and Langerhan cell histiocytosis ii) Leukaemia, lymphoma iii) Testicular cancer, lung cancer, gestational trophoblastic disease, gastric cancer, sarcoma	i) CHILD: 60-120 mg/m2/day by IV for 3 - 5 days every 3 - 6 weeks depending on protocols ii) Maintenance or palliative chemotherapy for elderly acute myeloid leukemia, consolidation therapy for acute lymphoblastic leukemia, stem cell mobilization (Refer to protocol) iii) 100 mg/m2 by IV every other day for 3 doses repeated every 3-4 weeks	A*
Etoposide 50mg capsule	L01CB01000C1003XX	Treatment of small cell lung cancer and malignant lymphomas	Normal adult dose is 175mg-200mg daily for 5 consecutive days orally, followed by recession (withdrawal) interval of 3 weeks. Repeat administration as necessary. Increase or reduce dose as appropriate, according to the particular disease or symptoms.	A*
Etoricoxib 120 mg Tablet	M01AH05000T1002XX	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: 90 mg once daily 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)	A*

Generic Name	MDC	Indications	Dosage	Category
Etoricoxib 60 mg Tablet	M01AH05000T1003XX	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: 90 mg once daily 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)	A*
Etoricoxib 90 mg Tablet	M01AH05000T1001XX	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: 90 mg once daily 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)	A*
Everolimus 0.25mg tablet	L04AA18000T1001XX	Indicated for the prophylaxis of organ rejection in adult patients at low to moderate immunological risk receiving an allogeneic renal or cardiac transplant in combination with ciclosporin for microemulsion and corticosteroids.	An initial dose regimen of 0.75 mg b.i.d., which is recommended for the general kidney and heart transplant population. The daily dose of everolimus should always be given orally in two divided doses (b.i.d.).	A*
Everolimus 0.75mg tablet	L04AA18000T1003XX	Indicated for the prophylaxis of organ rejection in adult patients at low to moderate immunological risk receiving an allogeneic renal or cardiac transplant in combination with ciclosporin for microemulsion and corticosteroids.	An initial dose regimen of 0.75 mg b.i.d., which is recommended for the general kidney and heart transplant population. The daily dose of everolimus should always be given orally in two divided doses (b.i.d.).	A*
Exemestane 25 mg Tablet	L02BG06000T1001XX	Treatment of post-menopausal women with advanced breast cancer whose disease has progressed following tamoxifen and non-steroidal aromatase inhibitors	25 mg once daily	A*
Ezetimibe 10 mg & Simvastatin 20 mg Tablet	C10BA02000T1001XX	Primary hypercholesterolemia	Usual starting dose: 10/20 mg/day	A*

Generic Name	MDC	Indications	Dosage	Category
Ezetimibe 10 mg Tablet	C10AX09000T1001XX	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	A*
Factor IX Injection	B02BD04000P9901XX	Prevention and control of bleeding in patients with factor IX deficiency due to haemophilia B	Dose varies according to the patient and the circumstances of the bleeding. i) Mild haemorrhage: initial dose of 30 units/kg body weight. ii) Moderate haemorrhage: initial dose of 50 units/kg iii) Major haemorrhage/surgery: Initial dose of 75 - 100 units/kg. Half of these doses may be repeated after 18-24 hrs if necessary.	A

Generic Name	MDC	Indications	Dosage	Category
Factor IX, Factor II, Factor VII and Factor X In Combination Injection	B02BD01000P4001XX	i) Treatment and perioperative prophylaxis of bleeding in acquired deficiency of the prothrombin complex coagulation factors, such as deficiency caused by treatment with vitamin K antagonists, or in case of overdose of vitamin K antagonists, when rapid correction of the deficiency is required. ii) Treatment and perioperative prophylaxis of bleeding in congenital deficiency of any of the vitamin K dependent coagulation factors only if purified specific coagulation factor product is not available.	Amount and frequency of administration should be calculated on an individual patient basis. Individual dosage requirements can only be identified on the basis of regular determinations of the individual plasma levels of the coagulation factors of interest or on the global tests of the prothrombin complex levels (INR, Quick's test) and a continuous monitoring of the clinical condition of the patient. An approximate calculation is as follows: Required dose (IU) = body weight (kg) x desired factor rise (IU/dl or % of normal) x reciprocal of the estimated recovery, i.e. Factor II = 53 Factor VII = 59 Factor IX = 77 Factor X = 56 As product may differ from one to another, it is strongly advised to refer to the manufacturer (product insert) in regards to dosing calculation.	A*
Factor VIIa (Recombinant) eptacog alfa (activated) 100 KIU (2 mg) Injection	B02BD08000P4005XX	Treatment of bleeding episodes and prevention of excessive bleeding in connection with surgery in patients with inherited or acquired haemophilia with inhibitors to coagulation factors VIII or IX	Initially 4.5 KIU (90 mcg)/kg body weight IV bolus over 2-5 minutes, followed by 3-6 KIU (60-120 mcg)/kg body weight depending on type & severity of haemorrhage or surgery performed. Dosing interval: initially 2-3 hour to obtain haemostasis and until clinically improved. If continued therapy is needed, dose interval can be increased successively to every 4, 6, 8 or 12 hours	A*

Generic Name	MDC	Indications	Dosage	Category
Factor VIIa (Recombinant) eptacog alfa (activated) 50 KIU (1 mg) Injection	B02BD08000P4004XX	Treatment of bleeding episodes and prevention of excessive bleeding in connection with surgery in patients with inherited or acquired haemophilia with inhibitors to coagulation factors VIII or IX	Initially 4.5 KIU (90 mcg)/kg body weight IV bolus over 2-5 minutes, followed by 3-6 KIU (60-120 mcg)/kg body weight depending on type & severity of haemorrhage or surgery performed. Dosing interval: initially 2-3 hour to obtain haemostasis and until clinically improved. If continued therapy is needed, dose interval can be increased successively to every 4, 6, 8 or 12 hours	A*
Factor VIII (Human blood coagulation factor) & Von Willebrand factor Injection	B02BD06000P4002XX	i)The treatment and prophylaxis of haemorrhage or surgical bleeding in Von Willebrand Disease (VWD) when 1-deamino-8-D-arginine vasopressin (desmopressin, DDAVP) treatment alone is ineffective or contraindicated. ii)The treatment and prophylaxis of bleeding associated with factor VIII deficiency due to haemophilia A.	i. Von Willebrand Disease: Spontaneous Bleeding Episodes: Initially, factor VIII 12.5-25 IU/kg and ristocetin cofactor 25-50 IU/kg followed by factor VIII 12.5 IU/kg and ristocetin cofactor 25 IU/kg subsequently every 12-24 hrs. Minor Surgery: Factor VIII 30 IU/kg and ristocetin cofactor 60 IU/kg daily. Major Surgery: Initially, factor VIII 30-40 IU/kg and ristocetin cofactor 60-80 IU/kg followed by factor VIII 15-30 IU/kg and ristocetin cofactor 30-60 IU/kg subsequently every 12-24 hrs. Prophylaxis: Factor VIII 12.5-20 IU/kg and ristocetin cofactor 25-40 IU/kg 3 times weekly. ii. Hemophilia A therapy: Minor haemorrage: 10-15 IU/kg every 12-24 hours. Moderate to severe haemorrhage: 15-40 IU/kg every 8 to 24 hours. Minor surgery: Loading dose 20-30 IU/kg, maintenance dose 15-30 IU/kg. Major surgery: Loading dose 40-50 IU/kg, maintenance dose 10-40 IU/kg. Prophylaxis: 25-40 IU/kg three times weekly As product may differ from one to another, it is strongly advised to refer to the manufacturer (product insert)	A*

Generic Name	MDC	Indications	Dosage	Category
			in regards to dosing calculation.	
Factor VIII (Recombinant) Octocog Alfa 250 IU Injection	B02BD02000P4001XX	i)Control and prevention of bleeding episodes in adults and children (0-16 years) with hemophilia A. ii)Surgical prophylaxis in adults and children with hemophilia A. iii)Routine prophylactic treatment to reduce the frequency of bleeding episodes and the risk of joint damage in children with no pre-existing joint damage. Not indicated fot the treatment of von willebrand's disease.	The dosage and duration of treatment should be individualised and taking into account the severity of factor VIII deficiency, location and extent of bleeding and patient's clinical condition. Dose can be calculated by using: i. Required dose (IU) = body weight (kg) x desired factor VIII rise (IU/dl or % of normal) x 0.5 (IU/kg) or ii. Expected factor VIII rise (% of normal) = 2 x (dose administered)/ bodyweight (kg) Dose administered should be titrated to patient's clinical response	A*

Generic Name	MDC	Indications	Dosage	Category
Factor VIII (Recombinant) Octocog Alfa 500 IU Injection	B02BD02000P4002XX	i)Control and prevention of bleeding episodes in adults and children (0-16 years) with hemophilia A. ii)Surgical prophylaxis in adults and children with hemophilia A. iii)Routine prophylactic treatment to reduce the frequency of bleeding episodes and the risk of joint damage in children with no pre-existing joint damage. Not indicated for the treatment of von willebrand's disease.	The dosage and duration of treatment should be individualised and taking into account the severity of factor VIII deficiency, location and extent of bleeding and patient's clinical condition. Dose can be calculated by using: i. Required dose (IU) = body weight (kg) x desired factor VIII rise (IU/dl or % of normal) x 0.5 (IU/kg) or ii. Expected factor VIII rise (% of normal) = 2 x (dose administered)/ bodyweight (kg) Dose administered should be titrated to patient's clinical response.	A*
Factor VIII Inhibitor Bypassing Activity Injection	B02BD03000P4001XX	i)Treatment and prophylaxis of hemorrhages in hemophilia A and B patients with inhibitors. ii) Treatment and prophylaxis of hemorrhages in non-hemophilic patients who have developed inhibitors to Factors VIII, IX and XI. iii)Treatment of patients with acquired inhibitors to Factors X and XIII. iv)In the combination with Factor VIII concentrate for a long-term therapy to achieve a complete and permanent elimination of the Factor VIII inhibitor so as to allow for regular treatment with Factor VIII concentrate as in patients without inhibitor.	As a general guideline, a dose of 50 to 100IU/kg body weight is recommended, not exceeding an individual dose of 100IU/kg bw and a maximum daily dose of 200IU/kg bw.	A

Generic Name	MDC	Indications	Dosage	Category
Factor VIII Injection	B02BD02999P9901XX	Prevention and control of bleeding in patients with factor VIII deficiency due to classical haemophilia A	Dose varies according to the patient and the circumstances of the bleeding. i) Mild to moderate: Usually a single dose of 10-15units/kg. ii) More serious haemorrhage/minor surgery:Initially 15-25 units/kg followed by 10-15 units/kg every 8 - 12 hours if required iii) Severe haemorrhage/major surgery: Initial : 40 - 50 units/kg followed by 20 - 25 units/kg every 8-12 hrs.	A
Fat Emulsion 10% for IV Infusion Injection	B05BA02000P6001XX	Source of lipid in patients needing IV nutrition	Dose to be individualised. ADULT usual lipid requirement 2-3 g/kg/day. INFANT 0.5 - 1 g/kg/day	A
Fat Emulsion 20% for IV Infusion Injection	B05BA02000P6002XX	Source of lipid in patients needing IV nutrition	Dose to be individualised. ADULT usual lipid requirement 2-3 g/kg/day. INFANT 0.5-1 g/kg/day	A
Felodipine 10 mg Tablet	C08CA02000T1002XX	Hypertension	Initiate at 5 mg once daily. Usual dose, 5 - 10 mg once daily in the morning	A/KK
Felodipine 5 mg Tablet	C08CA02000T1001XX	Hypertension	Initiate at 5 mg once daily. Usual dose, 5 - 10 mg once daily in the morning	A/KK
Fenofibrate 145 mg tablet	C10AB05000T1002XX	As second line therapy after failed gemfibrozil in patients: i) Hypercholesterolemia and hypertriglyceridemia alone or combined [type IIa,IIb,III and V dysplipidemias] in patients unresponsive to dietary and other non-pharmacological measures especially when there is evidence of associated risk factors ii) Treatment of secondary hyperlipoproteinemias if hyperlipoprotenemia persists despite effective treatment of underlying disease iii) Dyslipidemia in Type 2 Diabetes Mellitus	145mg once daily, with or without food	A/KK

Generic Name	MDC	Indications	Dosage	Category
Fentanyl 12mcg/h Transdermal Patch	N02AB03136M7005XX	As a second line drug in the management of chronic severe cancer pain not responding to non-narcotic analgesic. Not to be used in opiod naive patients.The use is to be restricted to pain specialists, palliative medicine specialists and oncologists	ADULT and CHILD over 2 years previously treated with a strong opioid analgesic, initial dose based on previous 24-hour opioid requirement (consult product literature). If necessary dose should be adjusted at 72-hour intervals in steps of 12-25 mcg/hr	A*
Fentanyl 25 mcg/h Transdermal Patch	N02AB03136M7001XX	As a second line drug in the management of chronic cancer pain. The use is to be restricted to pain specialists, palliative medicine specialists and oncologists.	Patients who have not previously received a strong opioid analgesic, initial dose , one 25 mcg/hour patch to be replaced after 72 hours. Patients who have received a strong opioid analgesic, initial dose based on previous 24 hours opioid requirement (oral morphine sulphate 90 mg over 24 hours = one 25 mcg/hour patch). Not recommended in children.	A*
Fentanyl 50 mcg/h Transdermal Patch	N02AB03136M7002XX	As a second line drug in the management of chronic cancer pain. The use is to be restricted to pain specialists, palliative medicine specialists and oncologists	Patients who have not previously received a strong opioid analgesic, initial dose , one 25 mcg/hour patch to be replaced after 72 hours. Patients who have received a strong opioid analgesic, initial dose based on previous 24 hours opioid requirement (oral morphine sulphate 90 mg over 24 hours = one 25 mcg/hour patch). Not recommended in children.	A*

Generic Name	MDC	Indications	Dosage	Category
Fentanyl Citrate 50 mcg/ml Injection	N01AH01136P3001XX	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 additinal 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.	A
Ferric Ammonium Citrate 800 mg/10 ml Paediatric Mixture	B03AB06136L2101XX	Prevention and treatment of iron-deficiency anaemias	CHILD up to 1 year 5 ml, 1 - 5 years 10 ml, taken well diluted with water	C
Ferrous controlled release 500 mg, Vitamin B1, Vitamin B2, Vitamin B6, Vitamin B12, Vitamin C, Niacinamide, Calcium Pantothenate, Folic Acid 800 mcg Tablet	B03AE10903T1001XX	Anemia due to iron deficiency, megaloblastic anemia where there is an associated deficiency of Vitamin C and Vitamin B-complex particularly in pregnancy. In primary health clinic, the indication is restricted to anemia due to iron deficiency in pregnant women ONLY.	One tablet daily	A/KK
Ferrous Fumarate 200 mg Tablet	B03AA02138T1001XX	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	C+

Generic Name	MDC	Indications	Dosage	Category
Filgrastim (G-CSF) 30 MU/ml Injection	L03AA02000P3001XX	i) Reduction in the duration of neutropenia and incidence of febrile neutropenia in cytotoxic chemotherapy for malignancy except chronic myeloid leukemia and myelodysplastic syndrome ii) Haemopoeitic stem cell transplantation (HSCT)/stem cell harvesting	i) Adult: SC or IV 5 mcg/kg/day. Initiation: 24 - 72 hours after chemotherapy. Duration: Until a clinically adequate neutrophil recovery is achieved (absolute neutrophil count of at least 1 x 109/L on 2 consecutive days) ii) Refer to protocol	A*
Filgrastim 30 MU in 0.5 ml Injection	L03AA02000P5001XX	i) Reduction in the duration of neutropenia and incidence of febrile neutropenia in cytotoxic chemotherapy for malignancy except chronic myeloid leukemia and myelodysplastic syndrome ii) Haemopoeitic stem cell transplantation (HSCT)/stem cell harvesting	i) ADULT: 5 mcg/kg/day by SC or IV. Initiation: 24 - 72 hours after chemotherapy. Duration: Until a clinically adequate neutrophil recovery is achieved (absolute neutrophil count of at least 1 x 109/L on 2 consecutive days) ii) Refer to protocol	A*
Finasteride 5 mg Tablet	G04CB01000T1001XX	Treatment and control of benign prostatic hyperplasia	5 mg a day as a single dose. Clinical responses occur within 12 weeks - 6 months of initiation of therapy. Long-term administration is recommended for maximal response	A*
Fingolimod 0.5mg Capsule	L04AA27110C1001XX	Treatment of patients with relapsing forms of multiple sclerosis to reduce the frequency of clinical exacerbations and to delay the accumulation of physical disability	0.5mg orally once daily	A*
Flavoxate HCl 100 mg Tablet	G04BD02110T1001XX	Urinary frequency and incontinence, dysuria, urgency, bladder spasm due to catheterisation	ADULT: 200 mg 3 times daily. CHILD under 12 years not recommended	A
Flecainide Acetate 100 mg Tablet	C01BC04122T1001XX	i) Sustained monomorphic ventricular tachycardias ii) Preexcited atrial fibrillation associated with Wolff-Parkinson White Syndrome iii) Reciprocating Atrio-Ventricular tachycardias (AVT) associated with Wolff-Parkinson White Syndrome iv) Supraventricular tachycardias due to Intra-Atrio Ventricular Nodul Reentry	Ventricular arrhythmias: 100 mg twice daily, maximum 400 mg/day (usually reserved for rapid control or in heavily built patients), reduced after 3 - 5 days if possible. Supraventricular arrhythmias: 50 mg twice daily, increased if required to maximum of 150 mg twice daily	A*

Generic Name	MDC	Indications	Dosage	Category
Fluconazole 100 mg Capsule	J02AC01000C1002XX	i) Oropharyngeal candidiasis, atrophic oral candidiasis associated with dentures, other candidal infections of mucosa ii) Tinea pedis, corporis, cruris, versicolor and dermal candidiasis iii) Invasive candidal & cryptococcal infections (including meningitis) iv) Prevention of relapse of cryptococcal meningitis in AIDS patients after completion of primary therapy v) Prevention of fungal infections in immunocompromised patients considered at risk as a consequence of HIV infections or neutropenia following cytotoxic chemotherapy, radiotherapy or bone marrow transplant	i) Oropharyngeal candidiasis: 50 - 100 mg daily for 7 - 14 days (Maximum 14 days) except in severely immunocompromised patients, treatment can be continued for longer periods. Atrophic oral candidiasis associated with dentures: 50 mg daily for 14 days. Other candidal infections of mucosa: 50 - 100 mg daily for 14 - 30 days. CHILD: 3 - 6 mg/kg on first day then 3 mg/kg daily (every 72 hours in NEONATE up to 2 weeks old, every 48 hours in NEONATE 2 - 4 weeks old) ii) 50 mg daily for 2 - 4 weeks, maximum 6 weeks iii) 400 mg initially then 200 - 400 mg daily for 6 - 8 weeks. CHILD: 6 - 12 mg/kg daily (every 72 hours in NEONATE up to 2 weeks old, every 48 hours in NEONATE 2 -4 weeks old) iv) 100 - 200 mg daily v) 50 - 400 mg daily. CHILD: 3 - 12 mg/kg daily (every 72 hours in NEONATE up to 2 weeks old, every 48 hours in NEONATE 2 - 4 weeks old)	A

Generic Name	MDC	Indications	Dosage	Category
Fluconazole 2 mg/ml Injection	J02AC01000P9901XX	i) Oropharyngeal candidiasis, atrophic oral candidiasis associated with dentures, other candidal infections of mucosa ii) Tinea pedis, corporis, cruris, versicolor and dermal candidiasis iii) Invasive candidal& cryptococcal infections (including meningitis) iv) Prevention of relapse of cryptococcal meningitis in AIDS patients after completion of primary therapy v) Prevention of fungal infections in immunocompromised patients considered at risk as a consequence of HIV infections or neutropenia following cytotoxic chemotherapy, radiotherapy or bone marrow transplant	i) 50 - 100 mg daily for 7 - 14 days (Maximum 14 days) except in severely immunocompromised patients, treatment can be continued for longer periods. Atrophic oral candidiasis associated with dentures: 50 mg daily for 14 days. Other candidal infections of mucosa: 50 - 100 mg daily for 14 - 30 days. CHILD: 3 - 6 mg/kg on first day then 3 mg/kg daily (every 72 hours in NEONATE up to 2 weeks old, every 48 hours in NEONATE 2 - 4 weeks old) ii) 50 mg daily for 2 - 4 weeks, maximum 6 weeks iii) 400 mg initially then 200 - 400 mg daily for 6 - 8 weeks. CHILD: 6-12 mg/kg daily (every 72 hours in NEONATE up to 2 weeks old, every 48 hours in NEONATE 2 - 4 weeks old) iv) 100 - 200 mg daily v) 50 - 400 mg daily. CHILD: 3 - 12 mg/kg daily (every 72 hours in NEONATE up to 2 weeks old, every 48 hours in NEONATE 2 - 4 weeks old)	A

Generic Name	MDC	Indications	Dosage	Category
Fluconazole 50 mg Capsule	J02AC01000C1001XX	i) Oropharyngeal candidiasis, atrophic oral candidiasis associated with dentures, other candidal infections of mucosa ii) Tinea pedis, corporis, cruris, versicolor and dermal candidiasis iii) Invasive candidal & cryptococcal infections (including meningitis) iv) Prevention of relapse of cryptococcal meningitis in AIDS patients after completion of primary therapy v) Prevention of fungal infections in immunocompromised patients considered at risk as a consequence of HIV infections or neutropenia following cytotoxic chemotherapy, radiotherapy or bone marrow transplant	i) Oropharyngeal candidiasis: 50 - 100 mg daily for 7 - 14 days (Maximum 14 days) except in severely immunocompromised patients, treatment can be continued for longer periods. Atrophic oral candidiasis associated with dentures: 50 mg daily for 14 days. Other candidal infections of mucosa: 50 - 100 mg daily for 14 - 30 days. CHILD: 3 - 6 mg/kg on first day then 3 mg/kg daily (every 72 hours in NEONATE up to 2 weeks old, every 48 hours in NEONATE 2 - 4 weeks old) ii) 50 mg daily for 2 - 4 weeks, maximum 6 weeks iii) 400 mg initially then 200 - 400 mg daily for 6 - 8 weeks. CHILD: 6 - 12 mg/kg daily (every 72 hours in NEONATE up to 2 weeks old, every 48 hours in NEONATE 2 -4 weeks old) iv) 100 - 200 mg daily v) 50 - 400 mg daily. CHILD: 3 - 12 mg/kg daily (every 72 hours in NEONATE up to 2 weeks old, every 48 hours in NEONATE 2 - 4 weeks old)	A
Flucytosine 2.5 g/250 ml Injection	J02AX01000P9901XX	Treatment of systemic fungal infection	ADULT: 100 - 200 mg/kg daily in 4 divided doses by IV infusion over 20 - 40 minutes not more than 7 days	A*
Flucytosine 500 mg Tablet	J02AX01000T1001XX	Only for the treatment of fungal meningitis	ADULT: 50 - 150 mg/kg/day in 4 divided doses	A*
Fludarabine Phosphate 10 mg Tablet	L01BB05162T1001XX	B-cell chronic lymphocytic leukemia who have not responded to or whose disease had progressed during or after treatment with at least one standard alkylating-agent containing regimen	40 mg /m2 given daily for 5 consecutive days every 28 days. Courses may be repeated every 28 days, usually for up to 6 cycles. Duration of treatment depends on treatment success and tolerability of the drug	A*

Generic Name	MDC	Indications	Dosage	Category
Fludarabine Phosphate 50 mg Injection	L01BB05162P4001XX	B-cell chronic lymphocytic leukaemia who have not responded to or whose disease had progressed during or after treatment with at least one standard alkylating-agent containing regimen	25 mg/m2 daily for 5 consecutive days every 28 days. May be administered up to the achievement of a maximal response (usually 6 cycles) and then the drug should be discontinued. Reduce dose by up to 50% in patients with mild to moderate renal impairment (30-70ml/min)	A*
Fludrocortisone Acetate 0.1 mg Tablet	H02AA02122T1001XX	As an adjunct to glucocorticoids in the management of primary adrenocortical insufficiency in Addison's disease and treatment of salt-losing adrenogenital syndrome	Adrenocorticoid insufficiency (chronic): ADULT 1 tablet daily. Salt-losing adrenogenital syndrome: ADULT 1 - 2 tablets daily. CHILD and INFANT 0.5 - 1 tablet daily	A
Flumazenil 0.1 mg/ml Injection	V03AB25000P3001XX	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-minutes 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-seconds 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 resedation, repeated	B

Generic Name	MDC	Indications	Dosage	Category
			doses may be given at 20-minutes 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	
Flunarizine HCl 5 mg Capsule	N07CA03110C1001XX	i) Migraine prophylaxis ii) Maintenance treatment of vestibular disturbances and of cerebral and peripheral disorders	i) ADULT: 5 - 10 mg daily preferably at night. ELDERLY more than 65 years: 5 mg at night. Maintenance 5-day treatment at the same daily dose ii) 5 - 10 mg at night. If no improvement after 1 month, discontinue treatment	B
Fluorescein 1 mg Ophthalmic Strip	S01JA01520M9901XX	Diagnostic fluorescein angiography or angioscopy of the fundus and of the iris vasculature	Moisten tip with tear fluid from lower fornix, sterile water or ophthalmic solution and gently stroke across the conjunctiva	B
Fluorescein Sodium 10% in 5 ml Injection	S01JA01520P3001XX	Diagnostic fluorescein angiography or angioscopy of the fundus and of the iris vasculature	500 mg IV	A

Generic Name	MDC	Indications	Dosage	Category
Fluorometholone 0.1% Ophthalmic Suspension	S01BA07000D2001XX	Treatment of steroid responsive ocular inflammation	1-2 drops qds. During the initial 24-48 hr, dose may be increased to 2 drops 2 hrly.	A*
Fluorouracil 1 g/20 ml Injection	L01BC02000P4002XX	Cancers of gastro-intestinal tract, breast and pancreas, head and neck. Ophtalmological indication: trabeculectomy	500 - 600 mg/m2 IV in combination with other cytotoxic agents, repeated every 3 weeks or 300 - 450 mg/m2 IV slow bolus daily for 5 days in combination with biological response modifiers, repeated every 4 weeks or 3000 - 3750 mg/m2 as a continuous infusion over 5 days in combination with a platinum compound every 3 to 4 weeks	A*
Fluorouracil 100 mg Tablet	L01BC02000T1001XX	Colorectal cancer	15 mg/kg (max: 1 g/day), may be given once weekly for maintenance. Max: 1 g/week.	A
Fluorouracil 50 mg / ml in 5 ml Injection	L01BC02000P4001XX	Cancers of gastro-intestinal tract, breast and pancreas, head and neck. Ophtalmological indication: trabeculectomy	Intravenous Infusion: 15 mg/kg bodyweight (to a maximum of 1 g daily) diluted in 300-500mL of 5% glucose given over a period of 4 hours. 12 mg/kg bodyweight daily for 3 consecutive days. Providing there are no signs of toxic effects, the patient may then be given 6mg/kg I.V. on the 5th, 7th and 9th days. If after the 9th day there is still no sign of toxicity, the patient may be placed on maintenance therapy. Maintenance Therapy: 5 - 10mg/kg bodyweight by I.V. injection once a week.	A*

Generic Name	MDC	Indications	Dosage	Category
Fluoxetine HCl 20 mg Capsule	N06AB03110C1001XX	i) Depression ii) Obsessive-compulsive disorder	i) 20 mg once daily increased after 3 weeks if necessary, usual dose 20 - 60 mg (ELDERLY 20 - 40 mg) once daily max 80 mg once daily (ELDERLY max 60 mg once daily). ii) Initially 20 mg once daily increased after 2 weeks if necessary, usual dose 20 - 60 mg (ELDERLY 20 - 40 mg) once daily, max 80 mg (ELDERLY max 60 mg) once daily, discontinue if no improvement within 10 weeks. CHILD and ADOLESCENT under 18 years are not recommended	A
Flupenthixol Decanoate 20mg/ml Injection	N05AF01135P2001XX	Chronic psychoses	By deep IM, initial test dose of 5-20 mg, then after at least 7 days. 20 - 40 mg repeated at intervals of 2 - 4 weeks. Maximum 400 mg weekly. Usual maintenance dose 50 mg every 4 weeks to 300 mg every 2 weeks. ELDERLY, initially quarter to half adult dose. CHILD not recommended. Deep IM recommended. Not for IV use	B
Fluphenazine Decanoate 25 mg/ml Injection	N05AB02135P3001XX	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	B
Flutamide 250 mg Tablet	L02BB01000T1001XX	Metastatic prostatic carcinoma	250 mg 3 times daily	A*
Fluticasone Furoate 27.5 mcg/dose Nasal Spray	R01AD08139A4101XX	Treatment of nasal symptoms (rhinorrhea, nasal congestion, nasal itching and sneezing) and ocular symptoms (itching/burning, tearing/watering, and redness of the eye) of seasonal and perennial allergic rhinitis.	Adults/Adolescents (≥12 years) : 1-2 sprays (27.5 mcg/spray) in each nostril once daily. Children (2-11 years) : 1-2 sprays (27.5 mcg/spray) in each nostril once daily	A*

Generic Name	MDC	Indications	Dosage	Category
Fluticasone Propionate 125 mcg/dose Inhaler	R03BA05133A2101XX	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. CHILD 4 - 11 years, 50 mcg twice daily (maximum 100 mcg twice daily), CHILD 1-4 years, 50-100mcg microgram twice daily	B
Fluvoxamine 100 mg Tablet	N06AB08253T1002XX	Depression	For depression, initially 50 - 100 mg daily in the evening, increased if necessary to 300 mg daily (over 150 mg in divided doses); usual maintenance dose 100 mg daily. CHILD and ADOLESCENT under 18 years not recommended	B
Fluvoxamine 50 mg Tablet	N06AB08253T1001XX	Depressive disorder	For depression, initially 50 - 100 mg daily in the evening, increased if necessary to 300 mg daily (over 150 mg in divided doses); usual maintenance dose 100 mg daily. CHILD and ADOLESCENT under 18 years not recommended	B
Folic Acid 5 mg Tablet	B03BB01000T1001XX	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	C+

Generic Name	MDC	Indications	Dosage	Category
Follitropin Alpha (Recombinant Human FSH) 300 IU/0.5 ml Injection	G03GA05000P3002XX	i) Infertility treatment in anovulatory women who have been unresponsive to treatment with clomiphene citrate ii) Stimulation of follicular development for intra-uterine cycles iii) Stimulation of follicular development in assisted reproductive technology in the management of infertility	i) 75 - 150 IU daily, should commence within the first 7 days of the menstrual cycle and increased by 37.5 IU or 75 IU at 7 or 14 days interval. Max daily dose 225 IU ii) 150 - 225 IU daily commencing on days 2 or 3 of the cycle. Max daily dose 450 IU	A*
Follitropin Alpha (Recombinant Human FSH) 75 IU Injection	G03GA05000P3001XX	i) Infertility treatment in anovulatory women who have been unresponsive to treatment with clomiphene citrate ii) Stimulation of follicular development for intra-uterine cycles iii) Stimulation of follicular development in assisted reproductive technology in the management of infertility	i) 75 - 150 IU daily, should commence within the first 7 days of the menstrual cycle and increased by 37.5 IU or 75 IU at 7 or 14 days interval. Max daily dose 225 IU ii) 150 - 225 IU daily commencing on days 2 or 3 of the cycle. Max daily dose 450 IU	A*
Follitropin Beta (Recombinant Human FSH) 300 IU Injection	G03GA06000P3002XX	Infertility treatment in anovulatory women who have been unresponsive to treatment with clomiphene citrate. Stimulation of follicular development for intra-uterine insemination cycles and assisted reproductive technology in the management of infertility.	To be individualized. Give in multiples of 50 IU. Starting dose can be 50 IU - 200 IU daily. It can be a step-up regime or a step-down, depending on the protocol and the ovarian response	A*
Follitropin Beta (Recombinant Human FSH) 50 IU Injection	G03GA06000P3001XX	Infertility treatment in anovulatory women who have been unresponsive to treatment with clomiphene citrate. Stimulation of follicular development for intra-uterine insemination cycles and assisted reproductive technology in the management of infertility.	To be individualized. Give in multiples of 50 IU. Starting dose can be 50 IU - 200 IU daily. It can be a step-up regime or a step-down, depending on the protocol and the ovarian response	A*

Generic Name	MDC	Indications	Dosage	Category
Fondaparinux Sodium 12.5 mg/ml Injection in Prefilled Syringe	B01AX05520P5002XX	i) Treatment of acute Deep Vein Thrombosis (DVT). ii) Treatment of Pulmonary Embolism (PE)	The recommended dose to be administered by SC injection once daily is: 5mg for body weight less than 50kg, 7.5mg for body weight 50 to 100kg, 10mg for body weight greater than 100kg. Treatment should be continued for at least 5 days and until adequate oral anticoagulation is established (INR 2 to 3). Concomitant treatment with vitamin K antagonists should be initiated as soon as possible, usually within 72 hours. The usual duration of treatment is 5 to 9 days	A*
Fondaparinux Sodium 2.5 mg/0.5 ml Injection	B01AX05520P5001XX	i) Prevention of venous thromboembolic events (VTE) in orthopedic surgery (e.g. hip fracture, major knee or hip replacement surgery), abdominal surgery in patients at risk of thromboembolic complication. ii) Treatment of unstable angina or non-ST segment elevation myocardial infarction [UA/NSTEMI] in patients for whom urgent invasive management (PCI) is not indicated. iii) Treatment of ST segment elevation myocardial infarction (STEMI) in patients managed with thrombolytics or are not receiving other forms of reperfusion therapy	i) 2.5 mg once daily given by SC, administered 6 hr following surgical closure provided homeostasis has been established. Usual duration of therapy is 5 to 9 days; for hip fracture patients, an extended course of up to 24 days is recommended. ii) 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. iii) 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	A*

Generic Name	MDC	Indications	Dosage	Category
			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	
Formoterol Fumarate Dihydrate 4.5 mcg /dose Inhaler	R03AC13138A2101XX	i) Moderate persistent and severe persistent asthma ii) COPD	i) ADULT and ELDERLY : 6 - 12 mcg (1 - 2 puff) once - twice daily, maximum daily dose 8 puff. CHILD over 6 years : 2 puff once - twice daily ii) ADULT and ELDERLY : 2 puff once - twice daily, maximum 4 puff once or twice daily	A*
Formoterol Fumarate Dihydrate 9 mcg/dose Turbuhaler	R03AC13138A2102XX	i) Moderate persistent and severe persistent asthma ii) COPD	i) ADULT and ELDERLY : 1 puff once - twice daily, maximum daily dose 4 - 6 puff. CHILD over 6 years : 1 puff once - twice daily, maximum dose : 2 puff daily ii) ADULT and ELDERLY : 1 puff, once - twice daily, maximum dose : 2 - 4 puff daily	A*

Generic Name	MDC	Indications	Dosage	Category
Framycetin Sulphate 0.5%, Dexamethasone 0.05% and Gramicidin 0.005% Ear Drops	S01CA01991D1001XX	Otitis externa	Apply 2 - 3 drops 3 to 4 times daily	A/KK
Frusemide 10 mg/ml Injection	C03CA01000P3001XX	Pulmonary oedema	Initially 20 -40 mg IM or slow IV (rate not exceeding 4 mg/min). CHILD: 0.5 - 1.5 mg/kg. Max: 20 mg daily	B
Frusemide 40 mg Tablet	C03CA01000T1001XX	Pulmonary oedema	ADULT: Initial 40 - 80 mg on morning if required, can be increased to a max of 1 g/day in certain cases especially in chronic renal failure. CHILD : 1 - 3 mg/kg daily	B
Fuller's Earth Powder	V03AB00000F2101XX	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)	C
Fusafungine 1% Nasal Spray	R02AB03000A4101XX	Local antibiotic, anti-inflammatory treatment of infectious and inflammatory syndromes of the respiratory mucosa	ADULT : 1 oral or 1 nasal inhalation 4 hourly, withdraw if no improvement after 7 days. CHILD : 1 oral or 1 nasal inhalation 6 hourly, withdraw if no improvement after 7 days	A
Fusidate, Sodium 250 mg Tablet	J01XC01520T1001XX	Treatment of infections caused by susceptible organisms especially Staphylococcal infections including Methicillin Resistant Staphylococcus aureus (MRSA)	ADULT: 500 mg 3 times daily, skin and soft tissue infection: 250 - 500 mg twice daily	A*
Fusidic Acid 1% Eye Drops	S01AA13000D2001XX	For staphylococcal infections	1 drop in conjunctival sac 12 hourly. To be continued for 2 days after the eye appears normal. On the first day of treatment, may be applied more frequently : 1 drop 4 hourly. Surgical prophylaxis : 1 drop every 12 hours, 24 - 48 hours before operation	A

Generic Name	MDC	Indications	Dosage	Category
Fusidic Acid 2% Cream	D06AX01000G1001XX	Skin infections caused by staphylococci, streptococci, corynebacterium minutissumun and other sodium fusidate-sensitive organisms	Apply to affected area 2 - 3 times daily	A
Fusidic Acid 2% in Betamethasone Valerate 0.1% Cream	D07CC01948G1001XX	Inflammatory dermatosis where bacterial infection is likely to occur eg atopic eczema, discoid eczema, stasis eczema, seborrhoic dermatitis, contact dermatitis, lichen simplex chronicus, psoriasis, discoid lupus erythematosus	Uncovered lesion- Apply 2 to 3 times daily. Covered lesions- Less frequent applications may be adequate	A/KK
Fusidic Acid 50 mg/ml Suspension	J01XC01000L8001XX	Treatment of infections caused by staphylococcal especially Methicillin Resistant Staphylococcus aureus (MRSA)	ADULT : 15 ml 3 times daily. CHILD 1 - 5 years: 5 ml 3 times daily; 5 - 12 years: 10 ml 3 times daily. INFANT : 1 ml/kg body weight daily in 3 - 4 divided doses	A*
Fusidic Acid 500 mg Injection	J01XC01520P4001XX	Treatment of severe staphylococcal infections especially Methicillin Resistant Staphylococcus aureus (MRSA). To be used in combination therapy only	ADULT : 500 mg 3 times daily diluted to 250 - 500 ml infused slowly over 2 hours. Maximum : 2 g daily. CHILD and INFANT : 20 mg/kg/day divided into 3 equal doses infused slowly over 2 - 4 hours	A*
Gabapentin 100 mg Tablet	N03AX12000T1002XX	i) Add-on therapy for intractable partial epilepsy, refractory to standard anti-epileptic drugs ii) 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 administering 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, then dose 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	A*

Generic Name	MDC	Indications	Dosage	Category
Gabapentin 300 mg Capsule	N03AX12000C1001XX	i) Add-on therapy for intractable partial epilepsy, refractory to standard anti-epileptic drugs ii) 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	A*
Gabapentin 600 mg Tablet	N03AX12000T1001XX	i) Add-on therapy for intractable partial epilepsy, refractory to standard anti-epileptic drugs ii) Treatment of various types of neuropathic pain, both peripheral (which includes diabetic neuropathy, post-herpetic neuralgia, trigeminal neuralgia) in adult over 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	A*

Generic Name	MDC	Indications	Dosage	Category
Gadobenate Dimeglumine Injection Solution	V08CA08996P3001XX	i) MRI of the liver for the detection of focal liver lesions in patients with known or suspected primary liver cancer (e.g. Hepatocellular carcinoma) or metastatic disease; ii) MRI of the brain and spine where it improves the detection of lesion and provides diagnostic information additional to that obtained with unenhanced MRI; iii) Contrast-enhanced MR-angiography where it improves the diagnostic accuracy for detecting clinically significant steno-occlusive vascular disease in patients with suspected or known vascular disease of the abdominal or peripheral arteries.	i) MRI of liver: 0.05ml/kg body weight. This corresponds to 0.1ml/kg of the 0.5M solution ii) MRI of brain & spine: 0.1mmol/kg body weight. This corresponds to 0.2ml/kg of the 0.5M solution iii) MRA: 0.1mmol/kg body weight. This corresponds to 0.2ml/kg of the 0.5M solution	A*
Gadobutrol 1 mmol/ml injection	V08CA09000P3001XX	In adults, adolescents and children aged 2 years and older with diagnostic difficulty especially in patients with renal impairment for: i) Contrast enhancement in cranial and spinal magnetic resonance imaging (MRI). ii) Contrast enhanced MRI of liver or kidneys in patients with high suspicion or evidence of having focal lesion to classify these lesions as benign or malignant. iii)Contrast enhancement in Magnetic Resonance Angiography (CE-MRA).	A single intravenous injection of 0.1 mmol/kg (equivalent to 0.1 ml/kg body weight). Max: 0.3 mmol/kg (equivalent to 0.3 ml/kg body weight)	A*

Generic Name	MDC	Indications	Dosage	Category
Gadopentetate Dimeglumine 469 mg/ml	V08CA01000P3001XX	i) Cranial and spinal magnetic resonance imaging ii) Whole body magnetic resonance imaging	The usual dose in adults, children, and neonates is 0.2 mL/kg (0.1 mmol/kg) intravenously. For cranial and spinal imaging, a further dose of 0.2 mL/kg (0.1 mmol/kg) may be given within 30 minutes if necessary; in adults this second dose may be 0.4 mL/kg (0.2 mmol/kg). For whole body imaging in adults and children over 2 years, a dose of 0.4 mL/kg (0.2 mmol/kg) may be needed in some cases to produce adequate contrast and in special circumstances a dose of 0.6 mL/kg (0.3 mmol/kg) may be used in adults	A
Gadoterate Meglumine (Gadoteric Acid) 0.5 mmol/ ml Injection	V08CA02254P3001XX	High risk patients undergoing Magnetic Resonance Imaging for cerebral and spinal disease, diseases of the vertebral column and other whole body pathology	The recommended dose is 0.1 mmol/kg (equivalent to 0.2 mL/kg in adults, children and infants. In angiography, depending on the results of the examination being performed, a second injection may be administered during the same session if necessary	A
Gadoxetic acid disodium 0.25 mmol/ml solution for injection (10ml pre-filled syringe)	V08CA10520P3001XX	For use in adults for the enhancement of magnetic resonance imaging (MRI) of focal liver lesions	0.1ml/kg body weight (equivalent to 25 µmol per kg body weight). Not recommended for patients younger than 18 years	A*
Gamma Benzene Hexachloride 0.1 % Lotion	P03AB02100L6001XX	Scabies	Apply lotion to entire body from neck down for 8 to 12 hours, then rinse	C
Gamma Benzene Hexachloride 0.1% in Oil Solution	P03AB02100L9901XX	Head lice	Apply a sufficient quantity of shampoo onto clean, dry hair; generally 1 ounce is sufficient, no more than 2 ounces should be used. Work the shampoo into hair thoroughly and allow to remain on hair for 4 minutes. Add small quantities of water and massage until a good lather forms. Rinse	C

Generic Name	MDC	Indications	Dosage	Category
			thoroughly and towel dry briskly	
Gamma Benzene Hexachloride 1% Cream	P03AB02100G1002XX	Only for scabies in adult	Scabies Adult: Apply a thin layer of 1% topical preparation onto all skin areas from the neck to toes. Completely wash off from the body with warm water after 8-12 hr.	A/KK
Ganciclovir Sodium 50 mg/ ml Injection	J05AB06520P3001XX	Treatment of cytomegalovirus (CMV) disease in immunocompromised patients, prevention of CMV disease during immunosuppressive therapy following organ transplantation	Initial: 5 mg/kg infused over 1 hour 12 hourly for 14 - 21 days (CMV retinitis treatment) or 7 - 14 days (CMV disease prevention). Long term maintenance: 6 mg/kg daily for 5 days/week or 5 mg/kg daily for 7 days/week	A*
Ganirelix 0.25 mg/0.5 ml Injection	H01CC01000P2001XX	Prevention of premature luteinizing hormone surges in women undergoing controlled ovarian hyperstimulation for assisted reproduction technique	Given by SC 0.25 mg once daily, starting on day 6 of ovarian stimulation and continued until ovulation induction	A*
Gefitinib 250 mg tablet	L01XE02000T1001XX	For the treatment of patients with locally advanced or metastatic non-small cell lung cancer (NSCLC) who have previously failed chemotherapy, and who have activating mutation of epidermal growth factor receptor (EGFR). Restricted to non-smoker, female, EGFR positive and Asian patients only.	250mg tablet once a day, taken with or without food	A*

Generic Name	MDC	Indications	Dosage	Category
Gemcitabine HCl 1 g Injection	L01BC05110P4002XX	i) Locally advanced or metastatic non-small cell lung cancer ii) Locally advanced or metastatic pancreatic cancer iii) In combination with carboplatin in the treatment of patients with recurrent epithelial ovarian carcinoma, who have relapsed more than six months, following platinum-based therapy iv) In combination with paclitaxel for treatment of patients with metastatic breast cancer who have relapsed following adjuvant/ neoadjuvant chemotherapy. Prior chemotherapy should have included an anthracycline unless clinically contraindicated	i) Alone or with cisplatin: 1000 mg/m2 day 1 & 8 every 3 weeks or 1000 mg/m2 day 1, day 8, day 15 every 4 weeks ii) Initially 1000 mg/m2 weekly for 7 weeks followed by 1 week rest. Subsequent cycles 1000 mg/ m2 weekly for 3 weeks followed by 1 week rest iii) Gemcitabine 1000 mg/m2 as 30 minutes IV infusion day 1 & 8 of each 21-day cycle followed by carboplatin on day 1 to attain a target AUC of 4 mg/ml/minute iv) 1250 mg/m2 on days 1 and 8 of each 21-day cycle with paclitaxel 175 mg/m2 given as a 3-hour infusion before gemcitabine on day 1 of each 21-day cycle	A*
Gemcitabine HCl 200 mg Injection	L01BC05110P4001XX	i) Locally advanced or metastatic non-small cell lung cancer ii) Locally advanced or metastatic pancreatic cancer iii) In combination with carboplatin in the treatment of patients with recurrent epithelial ovarian carcinoma, who have relapsed more than six months, following platinum-based therapy iv) In combination with Paclitaxel, for treatment of patients with metastatic breast cancer who have relapsed following adjuvant/ neoadjuvant chemotherapy. Prior chemotherapy should have included an anthracycline unless clinically contraindicated	i) Alone or with cisplatin: 1000 mg/m2 day 1 & 8 every 3 weeks or 1000 mg/m2 day 1, day 8, day 15 every 4 weeks ii) Initially 1000 mg/m2 weekly for 7 weeks followed by 1 week rest. Subsequent cycles 1000 mg/ m2 weekly for 3 weeks followed by 1 week rest iii) Gemcitabine 1000 mg/m2 as 30 minutes IV infusion day 1 & 8 of each 21-day cycle followed by carboplatin on day 1 to attain a target AUC of 4 mg/ml/minute iv) 1250 mg/m2 on days 1 and 8 of each 21-day cycle, with paclitaxel 175 mg/m2 given as a 3-hour infusion before gemcitabine on day 1 of each 21-day cycle	A*
Gemeprost (Prostagladin E1 Synthetic Analogue) 1 mg Pessary	G02AD03000S1001XX	Inducing abortion in the first trimester	Cervical dilatation: 1 pessary 3 hourly before surgery to a max of 5 pessaries over 24 hours	A

Generic Name	MDC	Indications	Dosage	Category
Gemfibrozil 300 mg Capsule	C10AB04000C1001XX	Treatment of hyperlipoprotinaemias (TYPES IIA, 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	A/KK
Gentamicin 0.1% Cream	D06AX07183G1001XX	For localised infections	Apply 2 - 3 times daily	A*
Gentamicin 0.3% Eye Drops	S01AA11183D2001XX	Broad spectrum antibiotic in superficial eye infections and also for Pseudomonas aeruginosa	1 - 2 drops every 4 hours, in severe infection dosage may be increased up to 2 drops every hour	A/KK
Gentamicin 0.3% Eye Ointment	S01AA11183G5101XX	Conjunctivitis, blepharitis, blepharo-conjunctivitis, keratitis, keratoconjunctivitis, episcleritis, dacrocystitis, corneal ulcers, styes and infected eye socket	Apply into the conjunctival sac 3 - 4 times daily	A/KK
Gentamicin 3% Fortified Eye Drops	S01AA11183D2002XX	Broad spectrum antibiotic in superficial eye infections and also for Pseudomonas aeruginosa	Dose according to the needs of the patient	A
Gentamicin 7.5 mg Beads	J01GB03183P1001XX	Treatment of chronic osteomyelitis of post-traumatic, post-operative or hematogenous origin	7.5 - 22.5 mg chains to fill affected cavity	A
Gentamicin Sulphate 10 mg/ml Injection	J01GB03183P3002XX	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	B
Gentamicin Sulphate 40 mg/ml Injection	J01GB03183P3003XX	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	B
Gentamicin Sulphate and Betamethasone Disodium Phosphate Eye Drops	S01CA05990D2001XX	Inflammatory and allergic conditions involving superficial eye structures and when bacterial infection is present : conjunctivitis, blepharitis, keratitis, episcleritis, dacryocystitis, hordeolum, meibomianitis, injuries involving anterior segment of the eye	2 drops 3 - 4 times daily	A/KK

Generic Name	MDC	Indications	Dosage	Category
Gentamicin Sulphate and Betamethasone Disodium Phosphate Eye Ointment	S01CA05990G5101XX	Inflammatory and allergic conditions involving superficial eye structures and when bacterial infection is present : conjunctivitis, blepharitis, keratitis, episcleritis, dacryocystitis, hordeolum, meibomianitis, injuries involving anterior segment of the eye	Thin coating of ointment 3 - 4 times daily	A
Glibenclamide 5 mg Tablet	A10BB01000T1001XX	Diabetes mellitus type 2. Restriction : Use only in patient under 65 years old	Range: 2.5 - 15 mg daily (with or immediately after breakfast). Initially 2.5 mg daily increasing by 2.5 mg required for metabolic control. Max: 20mg daily.	B
Gliclazide 30 mg Modified Release Tablet	A10BB09000T5002XX	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	B
Gliclazide 60 mg Modified Release Tablet	A10BB09000T5001XX	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 (except in patients whose blood glucose level was not reduced after 2 weeks of treatment). Max daily dose: 120mg	B
Gliclazide 80 mg Tablet	A10BB09000T1001XX	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.	B
Glucagon (Lyophilised) 1 mg/ml Injection	H04AA01000P4001XX	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.	B

Generic Name	MDC	Indications	Dosage	Category
Glutaraldehyde Solution 2%	V07AV00000L9905XX	2% formulation - High level disinfection for heat sensitive equipments such as endoscopes	20 minutes or more immersion is recommended for endoscopes before the session and between patients after thorough cleaning based on manufacturer recommendation	A
Glycerin	A06AX01000L5001XX	As a lubricant and osmotic dehydrating agent	Apply to area when required	C+
Glycerin 25% and Sodium Chloride 15% Enema	A06AG20921G2001XX	Constipation	1 enema as required	C+
Glyceryl Trinitrate 0.5 mg Sublingual Tablet	C01DA02221T1001XX	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.	C
Glyceryl Trinitrate 5 mg/ml Injection	C01DA02221P3001XX	Prophylaxis and treatment of angina, left ventricular failure. Not for direct IV injection.	Initial 5 mcg/min delivered via infusion pump. Subsequent titration must be adjusted to clinical situation with dose increment becoming more cautious as partial response is seen.	A
Glyceryl Trinitrate Aerosol Spray 400mcg (metered dose)	C01DA02221A1001XX	Prophylaxis and treatment of angina and left ventricular failure	At the onset of an attack, one or two metered sprays should be administered on or under the tongue. A spray maybe repeated approximately every 5 minutes as needed. No more than 3 metered sprays are recommended within 15 minute period. If chest pain persists after a total of 3 sprays, prompt medical attention is recommended. Aerosol may be used prophylactically 5 to 10 minutes before engaging in activities that might precipitate an acute attack	B
Glycine 1.5% Irrigating Solution	B05CX03000H3001XX	Bladder irrigation during genitourinary surgery	The dosage depends on the extent of the procedure and its duration	A

Generic Name	MDC	Indications	Dosage	Category
Glycopyrrolate 200 mcg/ml Injection	A03AB02320P3001XX	i) To reduce secretions (respiratory tract) for certain types of surgery ii) Reversal of neuromuscular block in patients where atropine is contraindicated	i) Pre-op: 4 mcg/kg via IM administration 30-60 mins before procedure. Intraoperative: 0.1 mg via IV administration, repeat at 2-3 min intervals when needed. Max: 400 mcg/dose. ii) 0.2 mg by IV for each 1 mg of neostigmine or 5 mg pyridostigmine	A*
Glycopyrronium 50mcg, Inhalation Powder Hard Capsules	R03BB06320A2001XX	For maintenance bronchodilator treatment to relieve symptoms in adult patients with chronic obstructive pulmonary disease (COPD). COPD diagnosis is confirmed by spirometry.	One capsule daily. The recommended dose is the inhalation of the content of one capsule once daily using inhaler. It is recommended to be administered, at the same time of the day each day. No relevant use of glycopyrronium in pediatric population (<18 years) for COPD.	A/KK
Golimumab 50mg (0.5ml) solution for injection in a pre-filled syringe	L04AB06000P5001XX	i) Rheumatoid arthritis (RA): In combination with methotrexate (MTX), is indicated for: - The treatment of moderate to severe active rheumatoid arthritis in adult patients when the response to DMARD therapy including MTX has been inadequate. - The treatment of active, severe and progressive rheumatoid arthritis in adult patients not previously treated with MTX. ii) Psoriatic arthritis (PsA): Golimumab alone or in combination with MTX, is indicated for: The treatment of active psoriatic arthritis in adult patients when the response to previous DMARD therapy has been inadequate. iii) Ankylosing spondylitis (AS): Golimumab(used alone) is indicated for: The treatment of active ankylosing spondylitis in adult patients when the response to conventional therapy has been inadequate.	i) Rheumatoid arthritis 50mg given as a subcutaneous injection once a month, on the same date each month. ii)Psoriatic arthritis 50mg given as a subcutaneous injection once a month, on the same date each month. iii) Ankylosing spondylitis 50mg given as a subcutaneous injection once a month, on the same date each month.	A*

Generic Name	MDC	Indications	Dosage	Category
Goserelin 10.8 mg Depot Injection	L02AE03000P2002XX	Prostate cancer,endometriosis,leiomyoma uteri and assissted reproduction,breast cancer in premenopausal and perimenopausal women suitable for hormonal manipulation	One 10.8mg depot injected subcutaneously into the anterior abdominal wall, every 12 weeks.	A
Goserelin 3.6 mg Depot Injection	L02AE03000P2001XX	Prostate cancer,endometriosis,leiomyoma uteri and assissted reproduction,breast cancer in premenopausal and perimenopausal women suitable for hormonal manipulation	3.6 mg depot injection every 28 days	A
Granisetron HCl 1 mg Tablet	A04AA02110T1001XX	Prevention and treatment of nausea and vomiting associated with chemotherapy and radiotherapy	ADULT 1 mg twice daily or 2 mg once daily with the first dose to be administered within 1 hour prior to cytostatic therapy and can be given for up to 1 week following radiotherapy. Maximum 9 mg/day	A
Granisetron HCl 1 mg/ml Injection	A04AA02110P3001XX	i) Prevention and treatment of nausea and vomiting associated with chemotherapy and radiotherapy ii) Post-operative nausea and vomiting	i) ADULT 1-3 mg as an IV bolus not not less than 30 seconds; maximum 9 mg/day. CHILD over 2 years; single dose of 10-40 mcg/kg as an IV infusion; maximum 3 mg/day ii) ADULT 1 mg by slow IV injection over 30 seconds prior to induction of anaesthesia	A
Griseofulvin (Ultramicrosize 125 mg = 250 mg Microsize) Tablet	D01BA01000T1001XX	Dermatophyte infections of the skin, scalp, hair and nails, where topical therapy has failed or inappropriate	ADULT: 500 mg daily up to 1 g daily in divided doses, 2-8 wk in hair and skin infections, 6 mth in fingernail infections and 12 mth or more for toenail infections. CHILD: 10 mg/kg daily in divided doses or as a single dose	B
Haemodialysis Concentrate with Acetate	B05ZA00908H1001XX	For acute renal failure, chronic renal failure, overhydration, intoxication, adjustment of acid-base and electrolyte balance	Dose depending on clinical cases	A

Generic Name	MDC	Indications	Dosage	Category
Haemodialysis Concentrate with Bicarbonate	B05ZA00908H1002XX	For acute renal failure, chronic renal failure, overhydration, intoxication, adjustment of acid-base and electrolyte balance	Dose depending on clinical cases	A
Haemophilus Influenza Type B Conjugate Vaccine Injection (Single Dose)	J07AG01000P4001XX	Immunisation of infants against Haemophilus Influenzae Type B	0.5 ml IM	C
Haloperidol 1.5 mg Tablet	N05AD01000T1001XX	Schizophrenia and other psychoses	Adult: 0.5-5 mg bid/tid, may increase up to 100 mg daily in severe or resistant cases. Usual maintenance: 3-10 mg daily. Child: >3 yr: Initially, 25-50 mcg/kg daily in 2 divided doses, increased gradually if necessary. Max: 10 mg/day.	B
Haloperidol 5 mg Tablet	N05AD01000T1002XX	Schizophrenia and other psychoses	Adult: 0.5-5 mg bid/tid, may increase up to 100 mg daily in severe or resistant cases. Usual maintenance: 3-10 mg daily. Child: >3 yr: Initially, 25-50 mcg/kg daily in 2 divided doses, increased gradually if necessary. Max: 10 mg/day.	B
Haloperidol 5 mg/ml Injection	N05AD01000P3001XX	Acute psychoses and mania	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	B

Generic Name	MDC	Indications	Dosage	Category
Heparin 1000 units/ml Injection	B01AB01520P3001XX	i) Prophylaxis and treatment of venous thrombosis and pulmonary embolism. ii) Treatment of myocardial infarction and arterial embolism. iii) Prevention of clotting in arterial and heart surgery and for prevention of cerebral thrombosis	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. ii) As i), for unstable angina and acute peripheral arterial occlusion. 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	B

Generic Name	MDC	Indications	Dosage	Category
Heparin 5000 units/ml Injection	B01AB01520P3002XX	i) Prophylaxis and treatment of venous thrombosis and pulmonary embolism. ii) Treatment of myocardial infarction and arterial embolism. iii) Prevention of clotting in arterial and heart surgery and for prevention of cerebral thrombosis	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. ii) As i), for unstable angina and acute peripheral arterial occlusion. 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	B
Heparin Sodium 50 units in Sodium Chloride Injection	B01AB01930P3001XX	To maintain patency of peripheral venous catheters	Flush with 5 ml (50 units) every 4 hours or as required	B
Hepatitis A, Inactivated Vaccine 160 antigen units Injection	J07BC02000P5001XX	Vaccination against hepatitis A especially in those at risk of exposure to hepatitis A virus such as: i) Visitors ii) Chronic hepatitis B and C patient iii) Those requiring vaccination against hepatitis A	0.5 ml per injection. ADULT and CHILD more than 15 years: A single primary dose followed by a booster dose 6 - 12 months later. CHILD 2 - 15 years: A single primary dose followed by a booster dose 6 - 12 months later	A

Generic Name	MDC	Indications	Dosage	Category
Hepatitis B Immunoglobulin (Human) Injection	J06BB04000P3001XX	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	A
Hepatitis B Vaccine Injection	J07BC01000P4001XX	Immunisation against infections caused by Hepatitis B virus	ADULTS over 20 years: 10 mcg/dose. ADOLESCENT 11 - 19 years: 5 mcg/dose. NEWBORN and CHILD up to 10 years: 2.5 mcg/dose. INFANTS born to HBsAg positive mothers: 3 doses of 0.5 ml each. Second dose to be given after 1 month and booster dose after 6 months	C+
Homatropine 2% Eye Drops	S01FA05330D2003XX	i) Mydriasis and cycloplegia for refraction ii) Treatment of anterior segment inflammation	i) Adult: Instill 1 or 2 drops of 2% solution immediately before the procedure, repeat at 5-10-minute intervals if necessary. Child: Instill 1 drop of 2% soln immediately before the procedure, repeat at 10-min intervals if necessary. ii) Adult: Instill 1-2 drops of 2% bd-tds up to every 3-4 hr as needed. Child: 3 mth- 2 yr: instill 1 drop of 0.5% soln once daily or on alternate days. >2 yr: instill 1 drop of 1% or 2% soln bd.	B

Generic Name	MDC	Indications	Dosage	Category
Human Albumin Injection	B05AA01000P3001XX	i) Acute hypovolemic shock ii) Hypoproteinaemia iii) Neonatal hyperbilirubinaemia	i) ADULT 25 g. CHILD 0.6 g/kg body weight ii) Maximum daily dose is 2g iii) 1 g/kg before exchange transfusion. Dose is given at rate of 1 ml of 25% solution per minute	B
Human Normal Globulin Injection	J06BA02000P3001XX	i) Hypogammaglobulinaemia and other deficiency states ii) Severe refractory idiopathic thrombocytopenia purpura (platelet less than 20,000) with internal bleeding, particularly central nervous system iii) Septicaemia in immunocompromised patients or patients not responding to antibiotics iv) Chronic lymphocytic leukaemia not responding to conventional therapy	i) 50 mg/kg body weight daily for 5 days, then 25 - 50 mg/kg weekly for maintenance according to the severity of the condition ii) 400 mg/kg daily for 5 days with a further dose of 400 mg/kg as required iii) Septicaemia in immunocompromised patients or patients not responding to antibiotics iv) 250 mg/kg per month Dose varies depending on brand used	A
Human Papillomavirus (Types 16, 18) Vaccine Injection	J07BM02000P3001XX	For the prevention of cervical cancer due to papilloma virus. To be used as part of the public health program only	Given by IM into deltoid region. ADULT and CHILD 10 - 25 years, 3 doses of 0.5 mL, at 0, 1 and 6 months	C+
Human Papillomavirus (Types 6, 11, 16, 18) Vaccine Injection	J07BM01000P3001XX	For the prevention of cervical cancer due to papilloma virus. To be used as part of the public health program only	Given by IM into deltoid region or higher anterolateral thigh. ADULT and CHILD 9 - 26 years, 3 doses of 0.5 mL, at 0, 2 and 6 months	C+
Hydralazine HCl 20 mg Injection	C02DB02110P3001XX	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 mcg/minutes	B

Generic Name	MDC	Indications	Dosage	Category
Hydrochlorothiazide 25 mg Tablet	C03AA03000T1001XX	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	B
Hydrochlorothiazide 50 mg Tablet	C03AA03000T1002XX	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	B
Hydrocortisone 1% & Neomycin 0.5% Cream	D07CA01952G1001XX	Inflammatory and pruritic manifestations of corticosteroid responsive dermatoses	Apply to affected part 2-3 times daily (occasionally may cause sensitisation to Neomycin)	B
Hydrocortisone 1% Cream	D07AA02000G1001XX	Inflammatory and pruritic manifestations of corticosteroid responsive dermatoses	Apply sparingly to affected area 2 - 3 times daily until condition improve, then reduce frequency	B
Hydrocortisone 1% Ointment	D07AA02000G5001XX	Inflammatory and pruritic manifestations of corticosteroid responsive dermatoses	Apply sparingly to affected area 2 - 3 times daily until condition improve, then reduce frequency	B
Hydrocortisone 10 mg Tablet	H02AB09000T1001XX	Glucocorticoid replacement therapy in primary or secondary adrenal insufficiencies and long term management of congenital adrenal hyperplasia in children	ADULT: 20 - 30 mg daily in divided doses. CHILD: 10 - 30 mg daily in divided doses	B

Generic Name	MDC	Indications	Dosage	Category
Hydrocortisone Enema 0.1%	A07EA02000G2001XX	Adjunctive treatment for ulcerative colitis and proctitis	ADULT 100 mg 1-2 times/day for 2-3 weeks. If used for longer than 3 weeks, taper treatment over 2-3 weeks	B
Hydrocortisone Sodium Succinate 100 mg Injection	H02AB09520P4001XX	Conditions responsive to systemic or local glucocorticoid injection therapy especially in emergencies	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	C
Hydrogen Peroxide 1.5% Ear Drops	S02AA06241D1001XX	To soften impacted ear wax	Instill 1 - 2 drops into the ear as required (leave for a few minutess)	C
Hydrogen Peroxide 20 volume Solution	D08AX01241L9901XX	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 nescessary. 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	C
Hydroxychloroquine Sulphate 200 mg Tablet	P01BA02183T1001XX	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)	A
Hydroxyethyl Cellulose Jelly	V07AY00250G4001XX	For lubricating purpose	Apply sufficiently for lubricating purpose	B
Hydroxyethyl Starch 6% Injection	B05AA07000P9901XX	Therapy and prophylaxis of hypovolaemia and shock in connection with surgery trauma, infections and burns	ADULT daily dose up to 20 ml/kg/day. Normally 500-1500 ml. The rate of infusion may approach 20 ml/kg/hour in acute haemorrhagic shock, slower rates in burns and septic shock. CHILD under 10	B

Generic Name	MDC	Indications	Dosage	Category
			years do not exceed 15 ml /kg/hour.	
Hydroxyprogesterone Caproate 250 mg/ml Injection	G03DA03128P2001XX	Habitual and threatened abortion	250 - 500 mg once weekly by IM injection	A
Hydroxyurea 500 mg Capsule	L01XX05000C1001XX	i)Solid tumours ii) Chronic myelocytic leukaemia and myeloproliferative disease iii)Severe psoriasis eg. Extensive plaque psoriasis, erythrodermic psoriasis, pustular psoriasis -as third line therapy.	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 dly. 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, therapy should be interrupted if the white blood cell count drops below 2500/mm3, or the platelet count below 100,000/mm3. iii) 500 mg tds.	A
Hydroxyzine HCl 25 mg Tablet	N05BB01110T1001XX	Allergic pruritus	Initially 25 mg at night, increased if necessary up to 25 mg 3-4 times daily. ADULT and CHILD more than 10 years : 50 - 75 mg; 6 - 10 years: 25 - 50 mg; 1 - 5 years: 12.5 - 25 mg; to be taken daily in divided doses	A
Hyoscine Hydrobromide 400 mcg/ml Injection	A04AD01330P3001XX	To reduce oral secretions before surgery	200-600 mcg given as SC or IM 60 minutes before induction of anaesthesia. CHILD: 15 mcg/kg	B

Generic Name	MDC	Indications	Dosage	Category
Hyoscine N-Butylbromide 1 mg/ml Liquid	A03BB01320L5001XX	Gastrointestinal tract and genito-urinary tract spasm, dyskinesia of the biliary system	ADULT 40mg 4 times a day. CHILD 6-12 years old: 10mg 3 times a day.	B
Hyoscine N-Butylbromide 10 mg Tablet	A03BB01320T1001XX	Gastrointestinal tract and genito-urinary tract spasm, dyskinesia of the biliary system	ADULT 40mg 4 times a day. CHILD 6-12 years old: 10mg 3 times a day.	B
Hyoscine N-Butylbromide 20 mg/ml Injection	A03BB01320P3001XX	Gastrointestinal tract and genito-urinary tract spasm, dyskinesia of the biliary system	20 mg IM/IV repeated after 30 min if needed. Max: 100 mg daily.	B
Hypromellose 0.3% Eye Drops	S01XA20000D2002XX	Tear deficiency, ophthalmic lubricant; for relief of dry eyes and eye irritation	1 - 2 drops several times a day	B
Hypromellose 0.3%, Carbomer 980 Ophthalmic Gel	S01KA02000G3201XX	Symptomatic relief of severe dry eye conditions and as lens lubricant during ophthalmic diagnostic procedures	Instill 1-2 drops in affected eye(s) as needed	B
Ibandronic Acid 150 mg Tablet	M05BA06000T1003XX	Treatment of postmenopausal osteoporosis to reduce the risk of fracture. Review treatment after 2 years and if there is positive response, treatment may be continued up to 5 years and then re-evaluate. Treatment should be stopped if there is no positive response after 5 years. Otherwise, patient needs to be given drug holiday for 1 to 2 years and then continue treatment shall the benefit outweigh the risk.	150 mg once monthly	A*
Ibuprofen 200 mg Tablet	M01AE01000T1001XX	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.	B
Ichthammol Glycerin 10% Ear Drops	S02AA30000D1001XX	Ear wick for otitis externa with oedema	2 - 3 drops 3 - 4 times daily and in ear wick for otitis externa	C

Generic Name	MDC	Indications	Dosage	Category
Idarubicin 10 mg Injection	L01DB06110P4002XX	i) Acute promyelocytic leukaemia ii) Relapse Acute myeloid leukemia (with sibling match) iii) Acute myeloid leukemia, acute lymphoblastic leukemia (salvage therapy)	i) Induction phase: 12 mg/m2 IV slow bolus on Days 3, 5 and 7. Consolidation phase, month 1: 12 mg/m2 IV on Days 1 and 2. Repeat monthly for 3 courses ii) 12 mg/m2 D1-3 iii) 12 mg/m2 D1-3 as part of FLAG-IDA regimen. Children: 10mg/m2 IV daily for 3 days	A*
Idarubicin 5 mg Injection	L01DB06110P4001XX	i) Acute promyelocytic leukaemia ii) Relapse Acute myeloid leukemia (with sibling match) iii) Acute myeloid leukemia, acute lymphoblastic leukemia (salvage therapy)	i) Induction phase: 12 mg/m2 IV slow bolus on Days 3, 5 and 7. Consolidation phase, month 1: 12 mg/m2 IV on Days 1 and 2. Repeat monthly for 3 courses ii) 12 mg/m2 D1-3 iii) 12 mg/m2 D1-3 as part of FLAG-IDA regimen. Children: 10mg/m2 IV daily for 3 days	A*
Idursulfase 2 mg/ml Injection	A16AB09000P3001XX	Hunter syndrome (Mucopolysaccharidosis II, MPS II).	0.5 mg/kg of body weight administered every week as an intravenous infusion.	A*
Ifosfamide 1 g Injection	L01AA06000P4001XX	i) Solid tumours ii) Leukaemia iii) Lymphoma	i) 1.2 - 2.4 g/m2/day for 3 - 7 days as a 30 - 120 minutes infusion. Alternatively, can also be given as a single high dose, eg. 5 g/m2 in a 24 hour infusion. Cycles may be repeated every 3 - 4 weeks ii) CHILD: 400 - 3000 mg/m2/day for 3 - 5 days according to protocol iii) Refer to protocols	A*
Imatinib Mesylate 100 mg Tablet	L01XE01196T1001XX	i) ADULT and CHILD: Philadelphia positive (Ph+) chronic myeloid leukaemia in chronic phase and in early acceleration after failure of interferon therapy ii) Treatment of patients with unresectable and/or metastatic malignant gastrointestinal stromal tumours (GIST) who are positive for CD117/c-kit	i) ADULT: Chronic phase chronic myeloid leukemia: 400 mg once daily. Accelerated phase or blast crisis chronic myeloid leukemia: 600 mg once daily. CHILD more than 2 years, chronic and advanced phase chronic myeloid leukemia: 340 mg/m2 daily. Max: 800 mg/day ii) ADULT : 400mg/day	A*

Generic Name	MDC	Indications	Dosage	Category
Imatinib Mesylate 400 mg Tablet	L01XE01196T1002XX	i) ADULT and CHILD: Philadelphia positive (Ph+) chronic myeloid leukaemia in chronic phase and in early acceleration after failure of interferon therapy ii) Treatment of patients with unresectable and/or metastatic malignant gastrointestinal stromal tumours (GIST) who are positive for CD117/c-kit	i) ADULT: Chronic phase chronic myeloid leukemia: 400 mg once daily. Accelerated phase or blast crisis chronic myeloid leukemia: 600 mg once daily. CHILD more than 2 years, chronic and advanced phase chronic myeloid leukemia: 340 mg/m2 daily. Max: 800 mg/day ii) ADULT : 400mg/day	A*
Imiglucerase 400 IU Injection	A16AB02000P4002XX	Non-neuronopathic (Type 1) or chronic neuronopathic (Type 3) Gaucher disease and who exhibit clinically significant non-neurological manifestations of the disease. The non-neurological manifestations of Gaucher disease include one or more of the following conditions: - anemia, after exclusion of other causes, such as iron deficiency - thrombocytopenia - bone disease, after exclusion of other causes, such as Vitamin D deficiency - hepatomegaly or splenomegaly	Dosage should be individualized to each patient. Initial dosages range from 2.5 units/kg of body weight 3 times a week to 60 units/kg once every 2 weeks. Administered by intravenous infusion over 1-2 hours.	A*
Imipenem 500 mg and Cilastatin 500 mg Injection	J01DH51961P4002XX	Severe infections caused by susceptible pathogens especially useful in infections involving ESBL organisms. Not to be used for prophylaxis	Based on type or severity of infection, susceptibility of pathogen(s) and patient condition including body weight and renal function. ADULT: 1 - 2 g/day in 3 - 4 divided doses. Maximum: 4 g/day or 50 mg/kg/day. Infusion rate: less than 500 mg dose: over 20 - 30 minutes, more than 500 mg: dose over 40 - 60 minutes. CHILDREN: ≥ 40kg body weight should receive adult doses. CHILDREN AND INFANTS: <40kg body weight should receive 15mg/kg at six hour intervals. The total daily dose should not exceed 2g.	A*

Generic Name	MDC	Indications	Dosage	Category
Imipramine HCl 25 mg Tablet	N06AA02110T1001XX	Depression	Initially up to 75 mg daily in divided doses increased gradually to 150 - 200 mg (up to 300 mg in hospital patients); up to 150 mg may be given as a single dose at bedtime. ELDERLY initially 10 mg daily; increased gradually to 30 - 50 mg daily; CHILD is not recommended	B
Imiquimod 5 % w/w Cream	D06BB10000G1001XX	Treatment of external genital and perianal warts or condyloma acuminata in adults	Apply to affected area at bedtime for 3 times a week for up to 16 weeks; leave on skin for 6-10 hours	A*
Immunoglobulin Tetanus Human 250 Units/Vial Injection	J06BB02000P3001XX	Passive immunization against tetanus	Prophylaxis of tetanus: IM 250 units. Treatment of tetanus: IM 30 - 300 units/kg	B
Indacaterol Maleate 150 mcg Inhalation Capsule	R03AC18253C9901XX	Maintenance bronchodilator treatment of airflow obstruction in adult patients with chronic obstructive pulmonary disease (COPD).	Once-daily inhalation of the content of one 150/300 microgram capsule. Maximum dose is 300 microgram once-daily.	A*
Indacaterol Maleate 300 mcg Inhalation Capsule	R03AC18253C9902XX	Maintenance bronchodilator treatment of airflow obstruction in adult patients with chronic obstructive pulmonary disease (COPD).	Once-daily inhalation of the content of one 150/300 microgram capsule. Maximum dose is 300 microgram once-daily.	A*
Indinavir Sulfate 400 mg Capsule	J05AE02183C1001XX	i) Post-exposure prophylaxis (PEP) among healthcare workers in high-risk HIV occupational exposure ii) For therapy as part of combination antiretroviral treatment on adult HIV patients ie Highly Active Anti-Retroviral Therapy (HAART)	ADULT: 800 mg every 8 hours. CHILD (investigational): 500 mg/m2 every 8 hours (patients with smaller body surface area (BSA) may require lower doses of 300 - 400 mg/m2 every 8 hours). Dosage may varies depending on types of combination therapy used.	A*
Indomethacin 100 mg Suppository	M02AA23000S2001XX	Pain and inflammation in rheumatic arthritis	Adult: As supp: 100 mg to be inserted at night and repeated in the morning if necessary.	B
Indomethacin 25 mg Capsule	M01AB01000C1001XX	Pain and inflammation in rheumatic disease	50 - 200 mg daily in divided doses, with food. Child not recommended.	B

Generic Name	MDC	Indications	Dosage	Category
Infliximab 100 mg Injection	L04AB02000P4001XX	i) Rheumatoid arthritis (moderate to severe), in combination with methotrexate ii) Ankylosing spondylitis in patients with active disease despite treatment with methotrexate iii) Crohn's Disease in patients who have an inadequate response to conventional therapies. iv) Fistulizing Crohn's Disease in patients who have an inadequate response to conventional therapies v) Ulcerative Colitis in patients who have an inadequate response to conventional therapies	i) Rheumatoid arthritis: ADULT over 18 years old: 3 mg/kg at 0, 2, 6 weeks, then every 8 weeks; May increase to 10 mg/kg or increase dosing frequency to 4 weekly for patients with incomplete response. Discontinue if no response by 12 weeks of initial infusion or after dose adjustment ii) Ankylosing spondylitis: ADULT over 18 years: 5 mg/kg IV over 2 hour given at week 0, 2, and 6 then every 6-8 weeks. Discontinue if no response by 6 weeks of initial infusion. iii), iv) & v)5 mg/kg given as an intravenous infusion over a 2-hour period followed by additional 5 mg/kg infusion doses at 2 and 6 weeks after the first infusion, then every 8 weeks thereafter	A*
Influenza Vaccine (Inactivated, trivalent) Injection (containing 3 strains, two type A subtypes, of which one must include pandemic A (H1N1) and one Type B subtype)	J07BB02963P3001XX	Prophylaxis of influenza for frontliners (KKM staff and essential services personnel) and in high risk groups	CHILD 6-35 months: Single dose of 0.5 ml IM or deep SC; 3-8 years: 1-2 doses of 0.5 ml IM ADULT & CHILD more than 9 years: Single dose of 0.5 ml IM	B
Influenzae Vaccine (Inactivated,Trivalent) Type A (H1N1) 15 mcg, Type A (H3N2) 15 mcg & Type B 15 mcg Haemagglutinin Injection	J07BB02963P5002XX	Prevention of influenza and influenza related complications in high risk adult patients, in particular individuals who have chronic cardiovascular, pulmonary, metabolic or renal disease, or who are immunocompromized and elderly patients	19 to 59 years: Single dose of 0.1ml 9mcg/strain intradermally. ≥ 60 years: Single dose of 0.1ml 15mcg/strain intradermally	B

Generic Name	MDC	Indications	Dosage	Category
Influenzae Vaccine (Inactivated,Trivalent) Type A (H1N1) 9 mcg, Type A (H3N2) 9 mcg & Type B 9 mcg Haemagglutinin Injection	J07BB02963P5001XX	Prevention of influenza and influenza related complications in high risk adult patients, in particular individuals who have chronic cardiovascular, pulmonary, metabolic or renal disease, or who are immunocompromized and elderly patients	18 to 59 years: Single dose of 0.1ml 9mcg/strain intradermally. ≥ 60 years: Single dose of 0.1ml 15mcg/strain intradermally	B
Insulin Aspart 100 IU/ml Injection	A10AB05000P3001XX	Diabetic Type 1 and 2 in patients that still experienced hypoglycaemia with use of human insulin	Dose to be individualised. The average daily insulin requirement is between 0.5 to 1.0 units/kg body weight	A*
Insulin Aspart 30% and Protaminated Insulin Aspart 70% 100 U/ml Injection	A10AD05000P3001XX	Diabetic type 1 and 2 in patients that still experienced hypoglycaemia with use of human insulin	Dose to be individualised. The average daily insulin requirement is between 0.5 to 1.0 units/kg body weight	A/KK
Insulin Detemir 100 IU/ml Injection in Prefilled syringe/cartridge	A10AE05000P5001XX	i)Type 1 Diabetes patients on basal bolus regimen, whom experience hypoglycemia 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 hypoglycemia 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.	A*
Insulin Glargine 300IU/3ml Prefilled Pen for Injection	A10AE04000P5001XX	i) Diabetes mellitus type I in adults and child over 6 years ii) Diabetes mellitus type II in adult	ADULT and CHILD over 6 years: individualised dose given by SC, once daily at the same time every day. Adult patients who are insulin naïve may be initiated with 10IU daily.	A/KK
Insulin Glulisine 100u/ml solution for injection in pre-filled pen 3ml	A10AB06000P5001XX	Treatment of adults, adolescents and children 6 years or older with diabetes mellitus, where treatment with insulin is required.	Glulisine should be given shortly (0-15 min) before or soon after meals. Apidra should be used in regimens that include an intermediate or long acting insulin or basal insulin analogue and can be used with oral hypoglycaemic agents. The dosage of Apidra should be individually adjusted.	A*

Generic Name	MDC	Indications	Dosage	Category
Insulin Lispro 100 IU/ml Injection in Prefilled syringe/cartridge	A10AB04000P5001XX	i) As initial therapy in children with Type 1 diabetes ii)Type 1 diabetes patients on basal bolus regimen, not controlled or experience hypoglycaemia with conventional insulin, to be used in combination with long-acting insulin iii)Type 2 diabetes patients on basal bolus or premixed regimen, not controlled or experience hypoglycaemia with conventional insulin, to be used in combination with intermediate-acting insulin or long-acting insulin iv)Patients with diabetes in pregnancy with poor postprandial control or experience hypoglycaemia with conventional short-acting insulin	Dose to be individualized. The average daily insulin requirement is between 0.5 to 1.0 units/kg body weight, given within 15 minutes before meal.	A*
Insulin Lispro 25% & Insulin Lispro Protamine 75% 100 IU/ml Injection in Prefilled syringe/cartridge	A10AD04000P5001XX	Patients with Type 2 diabetes whom experience hypoglycemia with the use of human premixed insulin.	Dose to be individualized. The average daily insulin requirement is between 0.5 to 1.0 units/kg body weight	A*
Insulin Recombinant Neutral Human Short Acting 100 IU/ml Injection in 10ml vial	A10AB01000P3001XX	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.	B
Insulin Recombinant Neutral Human Short-acting 100IU/ml Penfill and Refill	A10AB01000P5001XX	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.	B

Generic Name	MDC	Indications	Dosage	Category
Insulin Recombinant Synthetic Human Intermediate-Acting 100IU/ml in Vial for Injection	A10AC01000P3001XX	Diabetes mellitus	Dose to be individualised. The daily insulin requirement is usually between 0.3 and 1.0IU/kg /day	B
Insulin Recombinant Synthetic Human Premixed 100IU/ml in Vial for Injection	A10AD01000P3001XX	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.	B
Insulin Recombinant Synthetic Human, Intermediate-Acting 100 IU/ml Penfill and Refill	A10AC01000P5001XX	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	B
Insulin Recombinant Synthetic Human, Premixed 100 IU/ml Penfill and Refill	A10AD01000P5001XX	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	B

Generic Name	MDC	Indications	Dosage	Category
Interferon Alfa - 2a 3 MIU Injection	L03AB04000P3001XX	For the treatment of i) Hairy cell leukaemia ii) Chronic myelogenous leukaemia iii) AIDS related Kaposi's Sarcoma iv) Chronic hepatitis B v) Chronic hepatitis C vi) Advanced renal cell carcinoma	i) Initial : 3 MIU SC daily. If intolerant, 1.5 MIU daily or 3 MIU 3 times a week or 1.5 MIU 3 times a week. Maintenance : 1.5-3 MIU SC 3 times a week ii) Patient > 18 years : 3 MIU daily (days 1-3), 6 MIU daily (days 4-6), 9 MIU daily (days 7-84) iii) Patient > 18 years : Initially escalating dose to 18-36 MIU SC/IM for 10-12 weeks. Maintenance: up to 36 MIU 3 times a week iv)2.5-5 MIU/m2 SC 3 times a week for 4-6 months. CHILD: up to 10 MIU/m2 BSA v) Monotherapy : Initial : 3 - 6 MIU SC 3 times a week for 6 months. Maintenance : 3 MIU 3 times a week for an additional 6 months. vi) As an adjunct to cytotoxic chemotherapy: An escalating dose of 3 MIU 3 times a week for 1 week, then 9 MIU 3 times a week for 1 week, then 18 MIU 3 times a week thereafter for 3-12 months SC	A*

Generic Name	MDC	Indications	Dosage	Category
Interferon Alfa-2b 18 MIU Multidose Injection Pen	L03AB05000P5001XX	For the treatment of i) Hairy cell leukaemia ii) Chronic myelogenous leukaemia iii) AIDS related Kaposi's sarcoma iv) Chronic hepatitis B v) Chronic hepatitis C vi) Advanced renal cell carcinoma	i) 2 MIU SC or IM 3 times a week ii) Patient more than 18 years: 3 - 9 MIU 3 - 5 times a week or daily depending on response iii) Patient more than 18 years. Initially escalating dose to 18-36 MIU SC/IM for 10-12 weeks. Maintenance: up to 36 MIU 3 times weekly iv) 2.5-5 MIU/m2 SC 3 times weekly for 4-6 month. CHILD: up to 10 MIU/m2 BSA v) 3 MIU for 12 months vi) As an adjunct to cytotoxic chemotherapy: An escalating dose of 3 million IU 3 times/week for 1 week, then 9 million IU 3 times/week for 1 week, then 18 million IU 3 times/week thereafter for 3-12 month SC or IM	A
Interferon Alfa-2b 30 MIU Multidose Injection Pen	L03AB05000P5002XX	For the treatment of i) Hairy cell leukaemia ii) Chronic myelogenous leukaemia iii) AIDS related Kaposi's sarcoma iv) Chronic hepatitis B v) Chronic hepatitis C vi) Advanced renal cell carcinoma	i) 2 MIU SC or IM 3 times a week ii) Patient more than 18 years: 3 - 9 MIU 3 - 5 times a week or daily depending on response iii) Patient more than 18 years. Initially escalating dose to 18-36 MIU SC/IM for 10-12 weeks. Maintenance: up to 36 MIU 3 times weekly iv) 2.5-5 MIU/m2 SC 3 times weekly for 4-6 month. CHILD: up to 10 MIU/m2 BSA v) 3 MIU for 12 months vi) As an adjunct to cytotoxic chemotherapy: An escalating dose of 3 million IU 3 times/week for 1 week, then 9 million IU 3 times/week for 1 week, then 18 million IU 3 times/week thereafter for 3-12 month SC or IM	A

Generic Name	MDC	Indications	Dosage	Category
Interferon Alpha - 2a 4.5 MIU Injection	L03AB04000P3002XX	For the treatment of i) Hairy cell leukaemia ii) Chronic myelogenous leukaemia iii) AIDS related Kaposi's Sarcoma iv) Chronic hepatitis B v) Chronic hepatitis C vi) Advanced renal cell carcinoma	i) 2 MIU SC or IM 3 times a week ii) Patient more than 18 years: 3 - 9 MIU 3 - 5 times a week or daily depending on response iii) Patient more than 18 years. Initially escalating dose to 18-36 MIU SC/IM for 10-12 weeks. Maintenance: up to 36 MIU 3 times weekly iv) 2.5-5 MIU/m2 SC 3 times weekly for 4-6 month. CHILD: up to 10 MIU/m2 BSA v) 3 MIU for 12 months vi) As an adjunct to cytotoxic chemotherapy: An escalating dose of 3 million IU 3 times/week for 1 week, then 9 million IU 3 times/week for 1 week, then 18 million IU 3 times/week thereafter for 3-12 month SC or IM	A*
Interferon Alpha 2b 3 MIU Injection	L03AB05000P3001XX	For the treatment of i) Hairy cell leukaemia ii) Chronic myelogenous leukaemia iii) AIDS related Kaposi's sarcoma iv) Chronic hepatitis B v) Chronic hepatitis C vi) Advanced renal cell carcinoma	i) 2 MIU/m2 SC or IM 3 times a week ii) 4 - 5 MIU/m2 SC daily. Treatment must be discontinued after 8 to 12 weeks of treatment if at least a partial haematological remission or a clinically meaningful cytoreduction has not been achieved iii) Patient > 18 years : 30 MIU/m2 SC or IM three times a week until disease progression or maximal response has been achieved after 16 weeks of treatment. iv) 5 MIU daily or 10 MIU three times a week for 16 weeks. CHILD : 3 MIU/m2 three times a week for the first week of therapy followed by dose escalation to 6 MIU/m2 (maximum of 10MIU) three times a week SC for a total duration of 16 to 24 weeks v) 3 MIU SC or IM 3 times a week.	A*

Generic Name	MDC	Indications	Dosage	Category
Interferon beta -1b 250mcg (8MIU) Injection	L03AB08000P4001XX	i)Relapsing-remitting multiple sclerosis (RRMS): Reduction of frequency and degree of severity of clinical relapses in ambulatory patients characterized by at least two attacks of neurological dysfunction over the preceding two year period, followed by complete or incomplete recovery ii)Secondary progressive multiple sclerosis (SPMS):Reduction of frequency and severity of clinical relapses and for slowing the progression of disease	0.25 mg (8 MIU) by SC injection every other day	A*
Interferon Beta-1a 22 mcg	L03AB07000P5001XX	Multiple sclerosis of the relapsing remitting type with 2 or more relapses within the last 2 years	22 mcg 3 times weekly	A*
Interferon Beta-1a 44 mcg	L03AB07000P5002XX	Multiple sclerosis of the relapsing remitting type with 2 or more relapses within the last 2 years	44 mcg 3 times weekly	A*
Iodamide Injection	V08AA03000P3001XX	For hysterosalpingography	According to the procedure and route of administration	A
Iodine and Potassium Iodide Solution	H03CA00200L9901XX	i) Pre-operative treatment of thyrotoxicosis ii) Thyrotoxicosis crisis	i) 1 ml daily in divided doses ii) 2 - 3 ml daily	B
Iodixanol 320 mg I/ml Injection	V08AB09000P3001XX	X-ray contrast medium for cardioangiography, cerebral angiography, peripheral arteriography, abdominal angiography, uroloraphy, venography, CT enhancement, lumbar, thoracic and cervical myelography	Depending on type of examination	A

Generic Name	MDC	Indications	Dosage	Category
Iohexol Injection	V08AB02000P3001XX	X-ray contrast medium for use in adults and children for cardioangiography, arteriography, urography, phlebography and CT-enhancement. Lumbar, thoracic, cervical myelography and computed tomography of the basal cisterns, following subarachnoid injection. Arthrography, endoscopic retrograde pancreatography (ERCP), herniography, hysterosalpingography, sialography and studies of the gastrointestinal tract	Dose depending on the route and procedure	A
Iopamidol 30.62 g in 50 ml Injection	V08AB04000P3001XX	i) Neuroradiology : myeloradiculography, cisternography and ventriculography ii) Angiograph : cerebral arteriography, thoracic aortography, abdominal aortography, angiocardiography, selective visceral arteriography, peripheral arteriography, venography, digital subtraction angiography (DSA), DSA of cerebral arteries, DSA of peripheral arteries, DSA of abdominal arteries iii) Urography : intravenous urography iv) Contrast enhancement in CT Scanning, arthrography, fistulography	For angiography and cardiac cases- dose depending on the route and procedure. For selected vascular examination - bottles of 30 ml and 100 ml; dose depending on the route and procedure	A
Iopromide 300mg injection (623 mg of iopromide with 300 mg of iodine per mL)	V08AB05000P3001XX	i) For angiography, urography, aortography and the visualization of body cavities ii) Contrast enhancement during computerized tomography iii) To check functioning of a dialysis shunt	Dose depending on the route and procedure	A

Generic Name	MDC	Indications	Dosage	Category
Iopromide 370mg injection (769 mg of iopromide with 370 mg of iodine per mL)	V08AB05000P3002XX	i) For angiography, urography, aortography and the visualization of body cavities ii) Contrast enhancement during computerized tomography iii) To check functioning of a dialysis shunt	Dose depending on the route and procedure	A
Ipratropium Bromide 0.0125% Nebulising Solution (125 mcg/ml)	R03BB01320A3001XX	Only for treatment of : i) Patients with ischaemic heart disease who develop extrasystole with salbutamol or terbutaline ii) Patients with chronic bronchitis who have airway obstruction and who do not respond to salbutamol or terbutaline. Reversible airways obstruction, particularly in chronic obstructive pulmonary disease	ADULT : 500 mcg up to 4 times daily. CHILD 5 - 12 years : 125 - 250 mcg up to 4 times daily, 12 years : 250 - 500 mcg up to 4 times daily	B
Ipratropium Bromide 0.025% Nebulising Solution (250 mcg/ml)	R03BB01320A3002XX	Only for treatment of : i) Patients with ischaemic heart disease who develop extrasystole with salbutamol or terbutaline ii) Patients with chronic bronchitis who have airway obstruction and who do not respond to salbutamol or terbutaline. Reversible airways obstruction, particularly in chronic obstructive pulmonary disease	ADULT : 500 mcg up to 4 times daily. CHILD 5 - 12 years : 125 - 250 mcg up to 4 times daily, 12 years : 250 - 500 mcg up to 4 times daily	B
Ipratropium Bromide 0.5 mg and Salbutamol 2.5 mg per UDV	R03AK04320A3001XX	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, patient should consult a doctor immediately. Maintenance : 1 unit dose vial 3 - 4 times daily	B

Generic Name	MDC	Indications	Dosage	Category
Ipratropium Bromide 20 mcg and Fenoterol 50 mcg/dose Inhaler	R03AK03986A2101XX	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)	B
Ipratropium Bromide 20 mcg and Salbutamol base 100 mcg/dose Inhalation	R03AK04320A1001XX	Management of reversible bronchospasm associated with obstructive airway diseases	ADULT and ELDERLY : 2 inhalations 4 times daily. Maximum : 12 inhalations daily. CHILD under 12 years not recommended	B
Ipratropium Bromide 20 mcg/dose Nebuliser solution	R03BB01320A1001XX	Only for treatment of : i) Patients with chronic bronchitis who have airway obstruction and who do not respond to Salbutamol or Terbutaline ii) Patients with ischaemic heart disease who develop extrasystole with Salbutamol or Terbutaline	20 - 40 mcg 3 - 4 times daily. In the early treatment, up to 80 mcg 3 - 4 times daily. CHILD up to 6 years : 20 mcg 3 times daily, 6 - 12 years : 20 - 40 mcg 3 times daily	B
Irbesartan 150 mg and Hydrochlorothiazide 12.5 mg Tablet	C09DA04000T1003XX	Hypertension in patients who cannot tolerate ACE inhibitors because of cough	1 tablet daily	A/KK
Irbesartan 150 mg Tablet	C09CA04000T1001XX	Hypertension, diabetic nephropathy (in patients who cannot tolerate ACE inhibitors because of cough)	150 mg to 300 mg daily	A/KK
Irbesartan 300 mg & Hydrochlorothiazide 12.5 mg Tablet	C09DA04000T1001XX	Hypertension in patients who cannot tolerate ACE inhibitors because of cough	1 tablet daily	A/KK
Irbesartan 300 mg Tablet	C09CA04000T1002XX	Hypertension, diabetic nephropathy (in patients who cannot tolerate ACE inhibitors because of cough)	150 mg to 300 mg daily	A/KK

Generic Name	MDC	Indications	Dosage	Category
Irinotecan HCl Trihydrate 20 mg/ml Injection	L01XX19110P3002XX	Only for patients with colorectal cancer who: i) have relapsed within 6 months after the end of adjuvant chemotherapy with 5-fluorouracil-based regime ii) have progressive disease despite 5-fluorouracil chemotherapy for advanced disease iii) good performance status (WHO of 2 or less) The treatment must be given in a tertiary oncology centre or have clearance in writing by an oncologist	In combination therapy (for previously untreated patients): 180 mg/m2 once every 2 weeks as an IV infusion over 90 mins followed by infusion with folinic acid and 5-fluorouracil. In monotherapy (for previously treated patients): 350 mg/m2 administered as an intravenous infusion over 90 minutes period once every 3 weeks	A*
Irinotecan HCl Trihydrate 40 mg/2 ml Injection	L01XX19110P3001XX	Only for patients with colorectal cancer who: i) have relapsed within 6 months after the end of adjuvant chemotherapy with 5-fluorouracil-based regime ii) have progressive disease despite 5-fluorouracil chemotherapy for advanced disease iii) good performance status (WHO of 2 or less) The treatment must be given in a tertiary oncology centre or have clearance in writing by an oncologist	In combination therapy (for previously untreated patients): 180 mg/m2 once every 2 weeks as an IV infusion over 90 mins followed by infusion with folinic acid and 5-fluorouracil. In monotherapy (for previously treated patients): 350 mg/m2 administered as an intravenous infusion over 90 minutes period once every 3 weeks	A*
Iron (III)-hydroxide polymaltose complex (IPC) 100mg iron and 0.35mg folic acid chewable tablet	B03AD04250T2001XX	Treatment of latent and manifest iron deficiency and prevention of iron and folic acid deficiency before, during after pregnancy (during lactation)	Dosage and duration of therapy are dependent upon the extent of iron deficiency. Manifest iron deficiency: 1 chewable tablet two to three times daily until a normalization of the hemoglobin value is achieved. Afterwards the therapy should be continued with 1 chewable tablet daily at least until the end of pregnancy to replenish the iron stores. Latent iron deficiency and prevention of iron and folic acid deficiency: 1 chewable tablet daily	A/KK

Generic Name	MDC	Indications	Dosage	Category
Iron Dextran 50 mg Fe/ml Injection	B03AC06000P3001XX	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	B
Iron Sucrose 100 mg/5 ml Injection	B03AC02250P3001XX	Dialysis patients on erythropoietin therapy, second and third trimester pregnancy and post partum anaemia patients with iron deficiency: i) who are not responsive to oral iron therapy ii) who may be at risk of allergic reactions to iron dextran injection	Individualised dosage. 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. By IV drip infusion, slow IV injection or directly into the venous limb of the dialyser. Total cumulative dose: 1000 mg	A/KK
Isoflurane Liquid	N01AB06000L5001XX	i) Induction and ii) Maintenance of anaesthesia	i) Induction- Initiate at a concentration of 0.5 % ii) Maintenance- 1 - 2.5 % in oxygen or nitrous oxide mixture. 0.5 - 0.75 % with oxygen and nitrous oxide for Caesarian section	B
Isoniazid 100 mg Tablet	J04AC01000T1001XX	i) Tuberculosis ii)Tuberculous meningitis	i) & ii) ADULT 5-8mg/kg daily (Max 300mg) or 15-20mg/kg biweekly (max 1200mg)	B
Isoniazid 400 mg Tablet	J04AC01000T1002XX	i) Tuberculosis ii)Tuberculous meningitis	i) & ii) ADULT 5-8mg/kg daily (Max 300mg) or 15-20mg/kg biweekly (max 1200mg)	B
Isoprenaline HCl 0.2 mg/ml Injection	C01CA02110P3001XX	Complete heart block (third-degree artrioventricular block) not responding to atropine, while waiting for cardiac pacing	If given as IM: Initially 0.2 mg (1 ml of 1:5000 solution), followed by 0.02-1 mg depending on clinical response. If given as SC: 0.2 mg (1 ml of 1:5000 solution), followed by 0.15-0.2 mg depending on clinical response. If given as IV : 1-2 mg in 500 ml of dextrose 5%, infused at a rate of 0.5-2 ml/min while the patient's EKG is being monitored. The dose should be titrated to produce the desired clinical response	B

Generic Name	MDC	Indications	Dosage	Category
Isoprenaline HCl 1 mg/5 ml Injection	C01CA02110P3002XX	Complete heart block (third-degree artrioventricular block) not responding to atropine, while waiting for cardiac pacing	If given as IM: Initially 0.2 mg (1 ml of 1:5000 solution), followed by 0.02-1 mg depending on clinical response. If given as SC: 0.2 mg (1 ml of 1:5000 solution), followed by 0.15-0.2 mg depending on clinical response. If given as IV : 1-2 mg in 500 ml of dextrose 5%, infused at a rate of 0.5-2 ml/min while the patient's EKG is being monitored. The dose should be titrated to produce the desired clinical response	B
Isosorbide Dinitrate 1 mg/ml Injection	C01DA08221P3001XX	Treatment for angina pectoris and left ventricular failure	2-10 mg/hour IV infusion after dilution, higher doses up to 20 mg/hour may be required	A
Isosorbide Dinitrate 10 mg Tablet	C01DA08221T1001XX	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	B
Isosorbide Mononitrate 50 mg SR Capsule	C01DA14221C2001XX	Prophylaxis and treatment of angina pectoris	50 mg daily	A
Isosorbide-5-Mononitrate 30 mg SR Tablet	C01DA14221T5001XX	Prophylaxis and treatment of angina pectoris	Initiate at 30 mg for 1st 2-4 days to avoid headache. Usual dose: 60 mg once daily, may be increased to 120 mg once daily	A
Isosorbide-5-Mononitrate 60 mg SR Tablet	C01DA14221T5002XX	Prophylaxis and treatment of angina pectoris	60mg once daily, increase to 120 mg daily	A
Isotretinoin 10 mg Capsule	D10BA01000C1001XX	Only for treatment of i) Severe nodulo-cystic acne ii) Acne conglobata iii) Acne fulminans iv) Severe acne vulgaris failing conventional treatment.	0.5-1 mg/kg of body weight per day (in two divided doses) for 15 to 20 weeks; the maximum recommended dose is 2mg/kg of body weight per day. After about 4 weeks, therefore, dosage for the maintenance treatment should be adjusted within the range 0f 0.1-1mg/kg daily to meet individual need. Treatment usually lasts a total of 16 weeks. There should be an interval of at	A*

Generic Name	MDC	Indications	Dosage	Category
			least 8 weeks before re-starting treatment.	
Isotretinoin 20 mg Capsule	D10BA01000C1002XX	Only for treatment of i) Severe nodulo-cystic acne ii) Acne conglobata iii) Acne fulminans iv) Severe acne vulgaris failing conventional treatment WARNING: THIS DRUG IS TERATOGENIC	0.5-1 mg/kg of body weight per day (in two divided doses) for 15 to 20 weeks; the maximum recommended dose is 2mg/kg of body weight per day. After about 4 weeks, therefore, dosage for the maintenance treatment should be adjusted within the range 0f 0.1-1mg/kg daily to meet individual need. Treatment usually lasts a total of 16 weeks. There should be an interval of at least 8 weeks before re-starting treatment.	A*
Itopride HCl 50 mg Tablet	A03FA00110T1001XX	Treatment of gastrointestinal symptoms of functional, non-ulcer dyspepsia (chronic gastritis) i.e sensation of bloating, early satiety, upper abdominal pain or discomfort, anorexia, heartburn, nausea and vomiting	50 mg 3 times daily before meal	A*

Generic Name	MDC	Indications	Dosage	Category
Itraconazole 10 mg/ml Oral Solution	J02AC02000L9901XX	Treatment of: i) oral and/or oesophageal candidiasis ii) fluconazole resistant and/or oesophageal candidiasis	i) 200 mg daily for 1 week. If no response after 1 week, continue treatment for another week ii) 100 - 200 mg twice daily for 2 weeks. If no response after 2 weeks, continue treatment for another 2 weeks. The 400 mg daily dose should not be used for more than 14 days if there are no signs of improvement	A*
Itraconazole 100 mg Capsule	J02AC02000C1001XX	i) Dermatomycosis including pityriasis versicolor ii) Oral candidiasis iii) Palmar tinea manus and plantar tinea pedis iv) Fingernail onychomycosis v) Toenail onychomycosis vi) Vulvovaginal candidiasis	i) 200 mg once daily for 7 days ii) 100 mg daily for 15 days iii) 200 mg twice daily for 7 days iv) 200mg twice daily for 1 week per month for 2 months v) 200 mg twice daily for 1 week per month for 3 months vi)200 mg morning and evening for 1 day or 200 mg once daily for 3 days	A/KK

Generic Name	MDC	Indications	Dosage	Category
Ivabradine 5 mg Tablet	C01EB17110T1001XX	i) Symptomatic treatment of chronic stable angina pectoris in patients with normal sinus rhythm, who have a contraindication or intolerance to beta blockers ii) Treatment of coronary artery disease. Symptomatic treatment of chronic stable angina pectoris in coronary artery disease patients with normal sinus rhythm. Ivabradine is indicated : - in patients unable to tolerate or with a contraindication to the use of beta-blockers - or in combination with beta-blockers in patients inadequately controlled with an optimal beta-blocker dose and whose heart rate is > 60 bpm. Treatment of chronic heart failure. Ivabradine is indicated in chronic heart failure NYHA II to IV class with sinus rhythm and whose heart rate is ≥75bpm, in combination with standard beta-blocker therapy or when beta-blocker therapy is contraindicated or not tolerated.	Initial dose 5 mg twice daily. May increase dose after 3-4 weeks to 7.5 mg twice daily depending on response. ELDERLY, initial dose 2.5 mg twice daily and titrate to a maximum of 7.5 mg twice daily	A*

Generic Name	MDC	Indications	Dosage	Category
Ivabradine 7.5 mg Tablet	C01EB17110T1002XX	i) Symptomatic treatment of chronic stable angina pectoris in patients with normal sinus rhythm, who have a contraindication or intolerance to beta blockers ii) Treatment of coronary artery disease. Symptomatic treatment of chronic stable angina pectoris in coronary artery disease patients with normal sinus rhythm. Ivabradine is indicated : - in patients unable to tolerate or with a contraindication to the use of beta-blockers - or in combination with beta-blockers in patients inadequately controlled with an optimal beta-blocker dose and whose heart rate is > 60 bpm. Treatment of chronic heart failure. Ivabradine is indicated in chronic heart failure NYHA II to IV class with sinus rhythm and whose heart rate is ≥75bpm, in combination with standard beta-blocker therapy or when beta-blocker therapy is contraindicated or not tolerated.	Initial dose 5 mg twice daily. May increase dose after 3-4 weeks to 7.5 mg twice daily depending on response. ELDERLY, initial dose 2.5 mg twice daily and titrate to a maximum of 7.5 mg twice daily	A*
Kanamycin 1 g Injection	J01GB04183P4001XX	i) Treatment of gonorrhoea and neonatal meningitis ii) Treatment of TB patients who require reserved second line drugs but have no pre-existing renal complications	i) ADULT: 1 - 2 g daily IM in 1 - 2 equally divided doses. CHILD: 30 - 50 mg/kg/day in 1 - 2 divided doses ii) ADULT: 2 g daily IM in 2 equally divided doses twice a week or 1 g once daily 3 days a week	A*
Ketamine 10 mg/ml Injection	N01AX03110P3001XX	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 anesth for 5-10 mins. IM Initially, 6.5-13 mg/kg IM, a dose of 10 mg/kg produces anesth for 12-25 mins.	B

Generic Name	MDC	Indications	Dosage	Category
Ketamine 50 mg/ml Injection	N01AX03110P3002XX	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 anesthesia for 5-10 mins. IM Initially, 6.5-13 mg/kg IM, a dose of 10 mg/kg produces anesthesia for 12-25 mins.	B
Ketoconazole 2% Shampoo	D01AC08000L5201XX	Resistant dandruff only	Apply twice weekly for 2 - 4 weeks. Prophylaxis: Once every 1 - 2 weeks	A/KK
Ketoconazole 200 mg Tablet	J02AB02000T1001XX	i) Pityriasis versicolor ii) Systemic mycosis (other skin mycoses) iii) Nail infections	i) 200 mg with meal once daily for 10 days ii) 200 - 400 mg daily for 4 weeks - 6 months iii) 200 - 400 mg daily for 6 - 12 months.	A/KK
Ketoprofen 2.5% Gel	M02AA10000G3001XX	As a short term treatment for traumatic lesions, sprains, tendinitis, oedema, bruises	Apply onto affected areas 2-4 times daily up to 10 days.	A
Ketoprofen 200 mg Slow Release Capsule	M01AE03000C2002XX	Pain and inflammation in rheumatic disease	200mg in the morning or evening. Should be taken with food: Take immediately after meals.	A/KK
Ketoprofen 30 mg Transdermal Plaster	M02AA10000M7001XX	Treatment of signs & symptoms of arthritis deformans, periarthritis humero-scapularis, tendinitis, peritendinitis, sore muscle, swelling, pain resulting from trauma (eg. contusion, distorsion, sprain).	Apply 1 plaster to the affected area twice daily	A
Ketoprofen 50 mg/ml Injection	M01AE03000P3001XX	To be used only in treatment of acute inflammatory conditions	By deep IM into gluteal muscle, 50-100 mg every 4 hours. Maximum 200 mg in 24 hours for up to 3 days. Child not recommended	A*
Ketorolac Tromethamine 0.5% Eye drops	S01BC05239D2001XX	i) Ocular itching due to allergic conjunctivitis ii) Prophylaxis and reduction of inflammation and associated symptoms following ocular surgery	Prophylaxis and reduction of inflammation and associated symptoms following ocular surgery: 1 drop 3 times daily starting 24 hours pre-operatively and continuing up to 3 weeks post-operatively.	A
Ketorolac Tromethamine 30 mg/ml Injection	M01AB15239P3001XX	Short term management of moderate to severe postoperative pain	ADULT : 60mg as a single dose via IM inj or 30mg as a single IV dose. Alternatively, 30mg every 6 hr via IM or IV admin up to a max of 120mg daily.	A*

Generic Name	MDC	Indications	Dosage	Category
Labetalol HCl 100 mg Tablet	C07AG01110T1001XX	Hypertension (including in pregnancy)	ADULT: 100 mg (50 mg in elderly) daily with food, increased at intervals of 14 days to usual dose of 200 mg twice daily, up to 800 mg twice daily (3 - 4 divided doses if higher dose). Max: 2.4 g daily	B
Labetalol HCl 200 mg Tablet	C07AG01110T1002XX	Hypertension (including in pregnancy)	ADULT: 100 mg (50 mg in elderly) daily with food, increased at intervals of 14 days to usual dose of 200 mg twice daily, up to 800 mg twice daily (3 - 4 divided doses if higher dose). Max: 2.4 g daily	B
Labetalol HCl 5 mg/ml Injection	C07AG01110P3001XX	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.	B
Lactobacillus acidophilus 100 million viable cells and estriol 0.03mg vaginal tablet	G03CC06953T1001XX	i)Atrophic vaginitis due to estrogen deficiency during menopause and post-menopause, or as co-medication to systemic hormone replacement therapy ii)Restoration of the Lactobacillus flora after local and/or systemic treatment with anti-infective agents or chemotherapeutic agents	Atrophic vaginitis : 1 vaginal tablet daily for 6-12 days followed by a maintenance dose of 1 vaginal tablet for 1-2 days per week Restoration therapy: 1-2 vaginal tablet daily for 6-12 days Administration The vaginal tablets should be inserted deeply into the vagina in the evenings before bedtime. ?In cases of a very dry vagina, vaginal tablet can be moistened with 1 or 2 drops of water before insertion into the vagina. ?During menstruation, treatment should be interrupted and resumed afterwards Should not use vaginal douches or rinses during treatment	A/KK

Generic Name	MDC	Indications	Dosage	Category
Lactulose 3.35 g/5 ml Liquid	A06AD11000L5001XX	i) Constipation ii) Hepatic encephalopathy	i) ADULT 15 ml twice daily adjusted to patient's need. CHILD 0.5 ml/kg/dose once or twice daily ii) 30-50 ml 3-4 times daily, dose adjusted to produce 2-3 soft stools daily. CHILD 1 ml/kg/dose 3-4 times daily	C+
Lamivudine 10 mg/ml Oral Solution	J05AF05000L9901XX	HIV infection in combination with other antiretroviral agents	ADULT: 150 mg twice daily or 300 mg once daily. INFANT under 1 month: 2 mg/kg twice daily. CHILD 3 month or over: 4 mg/kg twice daily. Maximum 300 mg daily	A*
Lamivudine 100 mg Tablet	J05AF05000T1001XX	Management of chronic hepatitis B infection associated with evidence of hepatitis B viral replication and active liver inflammation	Adult: 100 mg once daily. For patients with concomitant HIV infection: 300 mg once daily or in 2 divided doses. Child: >2 yr: 3 mg/kg once daily. Max: 100 mg/day.	A*
Lamivudine 150 mg Tablet	J05AF05000T1002XX	HIV infection in combination with other antiretroviral agents	ADULT: 150 mg twice daily or 300 mg once daily. INFANT under 1 month: 2 mg/kg twice daily. CHILD 3 month or over: 4 mg/kg twice daily. Maximum 300 mg daily	A/KK
Lamotrigine 100 mg Tablet	N03AX09000T1002XX	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	A
Lamotrigine 25 mg Dispersible/Chewable Tablet	N03AX09000T2001XX	Add-on therapy in intractable partial seizures	25 mg daily - 50 mg twice daily	A

Generic Name	MDC	Indications	Dosage	Category
Lamotrigine 5 mg Dispersible/Chewable Tablet	N03AX09000T2002XX	Management of seizures in children aged 2 - 12 years	a) Add-on therapy in patients not taking Valproate: week 1 and 2: 2 mg/kg/day twice daily, week 3 and 4: 5 mg/kg/day twice daily. Maintenance: 5 - 15 mg/kg/day twice daily b) Add-on therapy in patients taking Valproate or other anti-epileptic drugs, week 1 and 2: 0.2 mg/kg/day as a single dose (children less than 25 kg may take 5 mg on alternate days), week 3 and 4: 0.5 mg/kg/day as a single dose. Maintenance dose: 1 -5 mg/kg/day once daily or twice daily	A
Lamotrigine 50 mg Tablet	N03AX09000T1001XX	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	A
Lansoprazole 30 mg Tablet	A02BC03000T1001XX	i) Peptic ulcer disease ii) Reflux oesophagitis iii) Zollinger-Ellison Syndrome iv) For eradication of Helicobacter pylori in combination with antibiotic	i) 30mg daily in the morning for up to 4 weeks (duodenal ulcer) or up to 8 weeks (gastric ulcer). Maintenance: 15mg/day.ii) 30mg OD in the morning for up to 8 weeks if not healed. Maintenance: 15mg OD. iii) Initially 60mg OM & adjust as required. Daily doses >120mg should be given in 2 divided doses. iv) 30 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	A*

Generic Name	MDC	Indications	Dosage	Category
Lanthanum Carbonate 1000mg Chewable Tablet	V03AE03130T2004XX	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	A*
Laronidase 2.9 mg/5ml Injection	A16AB05000P3001XX	Hurler and Hurler-Scheie forms of Mucopolysaccharidosis I (MPS I) and for patients with the Scheie form who have moderate to severe symptoms	0.58 mg/kg of body weight administered once-weekly as an intravenous infusion	A*
L-Asparaginase 10,000 IU Injection	L01XX02000P3001XX	i) Acute lymphoblastic leukemia ii) Non-hodgkin's lymphoma	i) 5,000 iu/m2 for 10 days during induction, 10,000 iu/m2 also used with high dose methotrexate rescue in consolidation phase of acute lymphoblastic leukemia ii) CHILD: 5,000 - 25,000 iu/m2 per dose depending on protocol	A*
Latanoprost 0.005% and timolol maleate 0.5% eye drops	S01ED51990D2004XX	For reduction of Intraocular Pressure (IOP) in patients with Open-angle Glaucoma (OAG) and Ocular Hypertension (OH) who are insufficiently responsive to topical beta-blocker.	1 drop in the affected eye(s) once daily	A*
Latanoprost 0.005% Eye Drops	S01EE01000D2001XX	Reduction of elevated intraocular pressure in patients with open-angle glaucoma	The recommended dosage is one drop (1.5 µg) in the affected eye(s) once daily in the evening. If more than one topical ophthalmic drug is being used, the drugs should be administered at least five (5) minutes apart	A*
Leflunomide 10 mg Tablet	L04AA13000T1001XX	i) Persistent active rheumatoid arthritis ii) Active psoriatic arthritis	Loading dose: 100 mg once daily for 3 days. Maintenance: 10-20 mg once daily	A*
Leflunomide 20 mg Tablet	L04AA13000T1002XX	i) Persistent active rheumatoid arthritis ii) Active psoriatic arthritis	Loading dose: 100 mg once daily for 3 days. Maintenance: 10-20 mg once daily.	A*

Generic Name	MDC	Indications	Dosage	Category
Lenalidomide 10 mg Capsule	L04AX04000C1002XX	In combination with dexamethesone is indicated for the treatment of multiple myeloma patients who have received at least one prior therapy	Recommended starting dose: 25 mg once daily on days 1 to 21 of repeated 28 day cycle with dexamethasone 40 mg once daily on days 1 to 4, 9 to 12 and 17 to 20 of each 28 day cycle for the first 4 cycles of therapy, thereafter dexamethasone 40 mg once daily on day 1 to 4 every 28 day cycle	A*
Lenalidomide 15 mg Capsule	L04AX04000C1003XX	In combination with dexamethesone is indicated for the treatment of multiple myeloma patients who have received at least one prior therapy	Recommended starting dose: 25 mg once daily on days 1 to 21 of repeated 28 day cycle with dexamethasone 40 mg once daily on days 1 to 4, 9 to 12 and 17 to 20 of each 28 day cycle for the first 4 cycles of therapy, thereafter dexamethasone 40 mg once daily on day 1 to 4 every 28 day cycle	A*
Lenalidomide 25 mg Capsule	L04AX04000C1004XX	In combination with dexamethesone is indicated for the treatment of multiple myeloma patients who have received at least one prior therapy	Recommended starting dose: 25 mg once daily on days 1 to 21 of repeated 28 day cycle with dexamethasone 40 mg once daily on days 1 to 4, 9 to 12 and 17 to 20 of each 28 day cycle for the first 4 cycles of therapy, thereafter dexamethasone 40 mg once daily on day 1 to 4 every 28 day cycle	A*
Lenalidomide 5 mg Capsule	L04AX04000C1001XX	In combination with dexamethesone is indicated for the treatment of multiple myeloma patients who have received at least one prior therapy	Recommended starting dose: 25 mg once daily on days 1 to 21 of repeated 28 day cycle with dexamethasone 40 mg once daily on days 1 to 4, 9 to 12 and 17 to 20 of each 28 day cycle for the first 4 cycles of therapy, thereafter dexamethasone 40 mg once daily on day 1 to 4 every 28 day cycle	A*

Generic Name	MDC	Indications	Dosage	Category
Letrozole 2.5 mg Tablet	L02BG04000T1001XX	i) Treatment of hormone responsive metastatic or locally advance breast cancer after failure of tamoxifen ii) Adjunct for node positive postmenopausal women with early breast cancer (positive or unknown oestrogen or positive progesterone receptor status / receptor status) who have received 5 years of adjuvant tamoxifen therapy	2.5 mg once daily	A*
Leucovorin Calcium (Calcium Folinate) 15 mg Tablet	V03AF03390T1001XX	Treatment of folic acid antagonist overdose	15 mg every 6 hours for the next 48 - 72 hours	A
Leucovorin Calcium (Calcium Folinate) 3 mg Injection	V03AF03237P3001XX	i) Biochemical modulator for 5-Fluorouracil in the treatment of colorectal cancer ii) As rescue for high dose methotrexate iii) Megaloblastic anaemias due to deficiency of folic acid	i) 200mg/m2 by slow IV injection over a minimum 3 minutes, followed by 5-Fluorouracil or 20mg/m2 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/m2) every 6 hours for 10 doses, starting 24 hours after the beginning of the methotrexate infusion iii) Up to 1 mg daily	A

Generic Name	MDC	Indications	Dosage	Category
Leucovorin Calcium (Calcium Folinate) 50 mg Injection	V03AF03237P3002XX	i) Biochemical modulator for 5-Fluorouracil in the treatment of colorectal cancer ii) As rescue for high dose methotrexate iii) Gestational trophoblastic disease	i) 200mg/m2 by slow IV injection over a minimum 3 minutes, followed by 5-Fluorouracil or 20mg/m2 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/m2) every 6 hours for 10 doses, starting 24 hours after the beginning of the methotrexate infusion iii) 6 - 12 mg exactly 30 hours after each dose of methotrexate. In EMA-CO regime for high risk gestational trophoblastic disease, use 30 mg IM	A
Leuprolide Acetate 11.25 mg Injection	L02AE02122P5002XX	i) Endometriosis ii) Hormonal therapy in advanced prostate cancer	11.25 mg every 3 months	A*
Leuprolide Acetate 3.75 mg Injection	L02AE02122P5001XX	i) Endometriosis ii) Hormonal therapy in advanced prostate cancer	i) 3.75 mg monthly for 3 - 6 months ii) 3.75 mg IM or SC injection monthly	A*

Generic Name	MDC	Indications	Dosage	Category
Levetiracetam 100 mg/ml Injection	N03AX14000P3001XX	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. To be initiated when conventional IV antiepileptic drugs failed to achieve control, or oral form is temporarily not feasible in seizure emergencies	i) 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 weeks depending upon the clinical response. Max: 1500 mg twice daily. ii) ADULT more than 18 years and ADOLESCENT (12 to 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 to 4 weekly. CHILD (4 to 11 years) and ADOLESCENT (12 to 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	A*
Levetiracetam 100 mg/ml Oral Solution	N03AX14000L9901XX	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	A*

Generic Name	MDC	Indications	Dosage	Category
Levetiracetam 250 mg Tablet	N03AX14000T1001XX	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	A*

Generic Name	MDC	Indications	Dosage	Category
Levetiracetam 500 mg Tablet	N03AX14000T1002XX	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	A*
Levobupivacaine 5mg/ml Injection	N01BB10110P3001XX	Production of local or regional anesthesia for surgery and obstetrics, and for postoperative pain management	Surgical anesthesia : Lumber epidural : 10 - 20 ml (50 - 150 mg) , caesarean section : 15 - 30 ml (75 - 150 mg), intrathecal: 3 ml (15 mg), peripheral nerve block : 1 - 40 ml, ilioinguinal/iliohypogastric block. CHILD : 0.25 - 0.5 ml/kg (1.25-2.5 mg/kg)	A
Levocetirizine Dihydrochloride 5 mg Tablet	R06AE09110T1001XX	Symptomatic treatment of allergic rhinitis (including persistent allergic rhinitis) and chronic idopathic urticaria	Children above 6 years and adults: 5 mg orally once daily (Swallow whole, do not chew/crush).	A*

Generic Name	MDC	Indications	Dosage	Category
Levodopa 100 mg and Benserazide 25 mg Dispersible Tablet	N04BA02977T4001XX	Parkinson's Disease	Initially 1 cap tds. Max initial dose: 6 caps/day. Patients previously on immediate-release Levodopa/Benserazide preparations: Initially dose should substitute every 100mg of Levodopa with 1 controlled-released cap, given at same dosage frequency as before. Increase every 2-3 days.	A*
Levodopa 100 mg and Carbidopa 25 mg Tablet	N04BA02000T1001XX	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	B
Levodopa 100 mg, Benserazide 25 mg HBS capsule	N04BA02977C1001XX	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	B

Generic Name	MDC	Indications	Dosage	Category
Levodopa 100 mg, Carbidopa 25 mg and Entacapone 200 mg Tablet	N04BA03977T1002XX	Idiopathic Parkinson's disease	The optimum daily dosage must be determined by careful titration of levodopa in each patient. The daily dose should preferably be optimised using 1 of the 4 available tablet strengths (50/12.5/200mg, 100/25/200mg, 150/37.5/200mg or 200/50/200mg levodopa/carbidopa/entacapone). Patients should be instructed to take only 1 tablet/dose administration. While the experience with total daily dosage >200 mg carbidopa is limited, the maximum recommended daily dose of entacapone is 2000 mg and therefore the maximum dose, for the strengths of 50/12.5/200 mg, 100/25/200 mg and 150/37.5/200 mg, is 10 tablets/day. Ten (10) tablets of the strength 150/37.5/200 mg equals carbidopa 375 mg/day. Therefore, using a maximum recommended daily dose of carbidopa 375 mg, the maximum daily dose of 200/50/200 mg is 7 tablets per day. The maximum total daily levodopa dose administered should not exceed 1500 mg.	A*

Generic Name	MDC	Indications	Dosage	Category
Levodopa 150 mg, Carbidopa 37.5 mg and Entacapone 200 mg Tablet	N04BA03977T1003XX	Idiopathic Parkinson's disease	The optimum daily dosage must be determined by careful titration of levodopa in each patient. The daily dose should preferably be optimised using 1 of the 4 available tablet strengths (50/12.5/200mg, 100/25/200mg, 150/37.5/200mg or 200/50/200mg levodopa/carbidopa/entacapone). Patients should be instructed to take only 1 tablet/dose administration. While the experience with total daily dosage >200 mg carbidopa is limited, the maximum recommended daily dose of entacapone is 2000 mg and therefore the maximum dose, for the strengths of 50/12.5/200 mg, 100/25/200 mg and 150/37.5/200 mg, is 10 tablets/day. Ten (10) tablets of the strength 150/37.5/200 mg equals carbidopa 375 mg/day. Therefore, using a maximum recommended daily dose of carbidopa 375 mg, the maximum daily dose of 200/50/200 mg is 7 tablets per day. The maximum total daily levodopa dose administered should not exceed 1500 mg.	A*
Levodopa 200 mg, Benserazide 50 mg Tablet	N04BA02977T1001XX	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	B

Generic Name	MDC	Indications	Dosage	Category
Levodopa 200 mg, Carbidopa 50 mg & Entacapone 200 mg Tablet	N04BA03977T1004XX	Idiopathic Parkinson's disease	The optimum daily dosage must be determined by careful titration of levodopa in each patient. The daily dose should preferably be optimised using 1 of the 4 available tablet strengths (50/12.5/200mg, 100/25/200mg, 150/37.5/200mg or 200/50/200mg levodopa/carbidopa/entacapone). Patients should be instructed to take only 1 tablet/dose administration. While the experience with total daily dosage >200 mg carbidopa is limited, the maximum recommended daily dose of entacapone is 2000 mg and therefore the maximum dose, for the strengths of 50/12.5/200 mg, 100/25/200 mg and 150/37.5/200 mg, is 10 tablets/day. Ten (10) tablets of the strength 150/37.5/200 mg equals carbidopa 375 mg/day. Therefore, using a maximum recommended daily dose of carbidopa 375 mg, the maximum daily dose of 200/50/200 mg is 7 tablets per day. The maximum total daily levodopa dose administered should not exceed 1500 mg.	A*
Levodopa 250 mg and Carbidopa 25 mg Tablet	N04BA02000T1002XX	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 previous being taken	B

Generic Name	MDC	Indications	Dosage	Category
Levodopa 50 mg, Carbidopa 12.5 mg & Entacapone 200 mg Tablet	N04BA03977T1001XX	Idiopathic Parkinson's disease	The optimum daily dosage must be determined by careful titration of levodopa in each patient. The daily dose should preferably be optimised using 1 of the 4 available tablet strengths (50/12.5/200mg, 100/25/200mg, 150/37.5/200mg or 200/50/200mg levodopa/carbidopa/entacapone). Patients should be instructed to take only 1 tablet/dose administration. While the experience with total daily dosage >200 mg carbidopa is limited, the maximum recommended daily dose of entacapone is 2000 mg and therefore the maximum dose, for the strengths of 50/12.5/200 mg, 100/25/200 mg and 150/37.5/200 mg, is 10 tablets/day. Ten (10) tablets of the strength 150/37.5/200 mg equals carbidopa 375 mg/day. Therefore, using a maximum recommended daily dose of carbidopa 375 mg, the maximum daily dose of 200/50/200 mg is 7 tablets per day. The maximum total daily levodopa dose administered should not exceed 1500 mg.	A*
Levofloxacin 250 mg Tablet	J01MA12000T1001XX	Community acquired pneumonia	500 mg daily for 7 - 14 days	A*
Levofloxacin 500 mg Injection	J01MA12000P3001XX	Community Acquired Pneumonia	500 mg daily for 7 - 14 days	A*
Levofloxacin 500 mg Tablet	J01MA12000T1002XX	Community acquired pneumonia	500 mg daily for 7 - 14 days	A*
Levonorgestrel 1.5 mg Tablet	G03AC03000T1001XX	Emergency contraception within 72 hours of unprotected sexual intercourse for the female victim of sexual violence to prevent unwanted pregnancy	1.5 mg as a single dose as soon as possible after coitus [preferably within 12 hours but no later than after 72 hours]	A*

Generic Name	MDC	Indications	Dosage	Category
Levonorgestrel 150 mcg and Ethinyloestradiol 30 mcg Tablet	G03AA07954T1001XX	Contraception	1 tablet daily for 21 days from first day of the cycle, followed by 7 tab free days	C+
Levonorgestrel 52 mg Intrauterine System	G02BA03000P1001XX	i) Contraception (Initial release rate of 20 mcg/24 hours). ii) Idiopathic menorrhagia	i) & ii):One unit intrauterine device to be inserted into the uterine cavity within 7 days of the onset of menstruation or immediately after first trimester abortion. Postpartum insertion should be postponed until 6 weeks after delivery.Can be inserted at any time of amenorrheic woman. One unit IUD is effective for 5 years	A*
Levothyroxine Sodium 100 mcg Tablet	H03AA01520T1001XX	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	B

Generic Name	MDC	Indications	Dosage	Category
Levothyroxine Sodium 25 mcg Tablet	H03AA01152T1003XX	Hypothyroidism	Start at low dose and increase at 2-4 weeks interval. Usual recommended dose for 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/m2 body surface area iv) Concomitant supplementation during anti-thyroid drug treatment of hyperthyroidism: 50-100mcg v) Suppression therapy in thyroid cancer: 150-300mcg	B
Levothyroxine Sodium 50 mcg Tablet	H03AA01520T1002XX	Hypothyroidism	Start at low dose and increase at 2-4 weeks interval. Usual recommended dose for 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/m2 body surface area iv) Concomitant supplementation during anti-thyroid drug treatment of hyperthyroidism: 50-100mcg v) Suppression therapy in thyroid cancer: 150-300mcg	B

Generic Name	MDC	Indications	Dosage	Category
Lidocaine 25mg and Prilocaine 25mg Cream	N01BB52974G1001XX	Used for painless venepunctures, radial artery cannulations before extradural/spinal and other regional blocks in children above 1 year old and adults. Also used in chronic renal failure patients for insertion of A-V fistulas and shunts for haemodialysis.	Apply a thick layer under occlusive dressing at least 1 hour before the procedure	A
Lidocaine Medicated Plaster 5% w/w	N01BB02110M6001XX	Indicated for the symptomatic relief of neuropathic pain associated with previous herpes zoster infection (post-herpetic neuralgia, PHN). Restrictions: i) For elderly patients with polymedication status whom certain treatment was contraindicated or not tolerated. ii)Prescribed by pain specialist only.	1 patch /day (Adults & elderly. Cover the painful area once daily for up to 12 hr w/in 24-hr period. Subsequent plaster-free interval: At least 12 hr. Not more than 3 plasters should be used at the same time)	A*
Lignocaine 10 % w/w Spray	N01BB02110A4001XX	For surface anaesthesia in dental practice, in otorhinolaryngology and paracentesis	Spray to affected part	B
Lignocaine 2 % with Adrenaline (1:80,000) Injection	N01BB52974P3001XX	For local anaesthesia including infiltration, nerve and plexus blocks	By infiltration: 0.5 - 1 ml; not to exceed 7 mg/kg body weight	B
Lignocaine 2% Jelly	N01BB02110G4001XX	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, etc	B
Lignocaine 2% Viscous Solution	N01BB02110L5001XX	For post-tonsilectomy, sore throat, dumping syndrome, hiccough, reflux vomiting, painful lesions of the mouth, cardiospasm, instrumentation of the respiratory and digestive tract	As 2% soln: For pain: 300 mg rinsed and ejected for mouth and throat pain; or gargled and swallowed if necessary for pharyngeal pain. Not to be used more frequently than every 3 hr. Max (topical oral soln): 2.4 g/day.	A

Generic Name	MDC	Indications	Dosage	Category
Lignocaine 2% with Chlorhexidine 0.05% Gel	N01BB52974G3001XX	To provide local anaesthesia and lubrication during catheterization, exploration by sound and other endourethral operations and examinations, cytoscopy and symptomatic treatment of painful cystitis and urethritis	Adult Male Instil 20 mL slowly into the urethra until it reaches external sphincter, proximal to the prostrate. Subsequently, apply compression at the corona for several mins. Fill the length of the urethra w/ the remaining gel. Sounding procedure or cytoscopy Instill 40 mL (in 3-4 portions) into the insertion area then allow 5-10 mins for anaesth to take effect. Adult Female Prior to urological procedure, instill 5-10 mL in small portions to fill the whole urethra & allow anaesth to take effect in 3-5 mins.Childn <12 yr Up to 6 mg/kg.	B
Lignocaine 4 % Solution	N01BB02110L5002XX	For anaesthesia of mucous membranes of the oropharyngeal, tracheal and bronchial areas eg. in laryngoscopy and bronchoscopy	Bronchoscopy, 2 - 3 ml with suitable spray; biopsy in mouth, 3 - 4 ml with suitable spray or swab (with adrenaline if necessary); maximum 7.5 ml	B
Lignocaine HCl (Lidocaine) 10 mg/ml Injection	C01BB01110P3002XX	Ventricular tachycardia and ventricullar fibrillation. 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	B
Lignocaine HCl (Lidocaine) 2% Injection	N01BB02110P3001XX	Local anesth by infiltration IV regional anesthesia and nerve block. Emergency management of ventricular arrhythmias particularly after myocardial infarction and cardiac surgery	Local anesthesia : ADULT Maximum: 100 mg; CHILD Maximum: 3 mg/kg Cardiac arrhythmias : ADULT 50-100 mg IV. Maximum: 200-300 mg/hour; CHILD Loading dose: 0.5-1 mg/kg IV repeated if necessary up to 3-5 mg/kg followed by a continuous infusion of 10-50 mcg/kg/min	B
Lignocaine HCl (Lidocaine) 20 mg/ml Injection	C01BB01110P3001XX	Ventricular tachycardia and ventricullar fibrillation. 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	B

Generic Name	MDC	Indications	Dosage	Category
Lignocaine HCl 1% Injection	N01BB02110P3002XX	Local or regional anaesthesia for episiotomy repairs	According to patients weight and nature of procedures, maximum 200mg. For most obstetric procedures, the preparation is diluted to 0.5%, which gives the maximum effect with the least toxicity. [lignocaine 1%, 1 part and normal saline or sterile distilled water, 1 part]	C+
Lignocaine HCl 5% and Phenylephrine HCl 0.5% Nasal Spray	N01BB02984A4101XX	Preparation of nasal mucosa for surgery (eg. Cautery to Little?s area), aid the treatment of acute nose bleeds and removal of foreign bodies from the nose, topical anaesthesia of the pharynx prior to direct or indirect laryngoscopy, topical anaesthesia and local vasoconstriction prior to endoscopy of the upper airways	Adults and children over 12 years : 5 squirts per nostril. Children: 8 to 12 years 3 squirts per nostril, 4 to 8 years 2 squirts per nostril, 2 to 4 years 1 squirt per nostril. Doses are to be administered once only.	A*
Lignocaine, Aluminium Acetate, Zinc Oxide and Hydrocortisone Ointment	C05AX03931G5001XX	Anorectal pain, pruritis, inflammation and irritation	Apply once or twice daily. Not for prolonged use	A/KK
Lignocaine, Aluminium Acetate, Zinc Oxide and Hydrocortisone Suppository	C05AX03931S2001XX	Anorectal pain, pruritis, inflammation and irritation	1 suppository to be used once or twice daily. Not for prolonged use	B
Linagliptin 5 mg tablet	A10BH05000T1001XX	Management of diabetes in patients with renal failure where metformin/sulphonylurea is contraindicated/untolerated and elderly with multiple co morbidities that always experience hypoglycemia with other antidiabetic. Not to be used in diabetic patient whose HBA1c is more than 9%.	Adults: 5 mg once daily. When linagliptin is added to metformin, the dose of metformin should be maintained and linagliptin administered concomitantly.	A*
Linezolid 2 mg/ml Injection	J01XX08000P3001XX	MRSA patient with severe sepsis requiring intensive care and not clinically responding to vancomycin	ADULT: 600 mg twice daily for 10 - 14 days. CHILD: 10 mg/kg 3 times daily. PREMATURE NEONATES less than 7 days: 10 mg/kg twice daily	A*
Linezolid 20 mg/ml Suspension	J01XX08000L8001XX	MRSA patients with severe sepsis requiring intensive care and not clinically responding to vancomycin	CHILD: 10 mg/kg 3 times daily. PREMATURE NEONATES less than 7 days: 10 mg/kg twice daily	A*

Generic Name	MDC	Indications	Dosage	Category
Linezolid 600 mg Tablet	J01XX08000T1001XX	MRSA patient with severe sepsis requiring intensive care and not clinically responding to vancomycin.	ADULT: Above 12 years 600 mg every 12 hours for 10-14 days. CHILD :10 mg/kg 3 times daily. PREMATURE NEONATES less than 7 days: 10 mg/kg twice daily	A*
Liquid Paraffin	A06AA01000L5001XX	Constipation	ADULT 10-30 ml daily at night but should not be taken immediately before going to bed. CHILD not recommended	C
Lithium Carbonate 300 mg Tablet	N05AN01121T1001XX	i) Prophylaxis and treatment of acute mania and hypomania episodes ii)Prophylaxis of manic depression in bipolar illness or bipolar depression and recurrent depression	Dose depends on the preparation used. Doses should be adjusted to produce a serum-lithium concentration of 0.4-1 mmol/l.	A
Loperamide 2 mg Capsule	A07DA03110C1001XX	Adjunct to rehydration in acute diarrhoea in adult also in chronic diarrhoea in adult	Acute diarrhoea: ADULT: 4 mg stat, followed by 2 mg after each unformed stool (up to 5 days). Usual 6- 8 mg daily. Max: 16 mg daily. Chronic diarrhoea: Initially 4-8 mg daily in divided doses, adjust according to response. Max: 16 mg daily	B
Lopinavir 200 mg and Ritonavir 50 mg Tablet	J05AE06964T1001XX	As second line protease inhibitor if intolerant to indinavir/ ritonavir as part of HAART regimen	Adult: (Therapy-naive patients) 400/100 mg bd or 800/200 mg once daily; (Therapy-experienced patients): 400/100 mg bd. Concomitant therapy (efavirenz, nevirapine, amprenavir, fosamprenavir or nelfinavir) 400/100 mg bd. Children >40 kg or w/ BSA >1.4 m2 as adult dose.	A*

Generic Name	MDC	Indications	Dosage	Category
Lopinavir/Ritonavir Oral Solution	J05AE06964L9901XX	Management of patients with asymptomatic and symptomatic (early or advanced) HIV Infection with CD4 cell counts <50 cubic mm	Tab Adult Therapy-naive patients 400/100 mg bd or 800/200 mg once daily. Therapy-experienced patients 400/100 mg bd. Concomitant therapy (efavirenz, nevirapine, amprenavir, fosamprenavir or nelfinavir) 400/100 mg bd. Can be used w/ no dose adjustment. Childn >40 kg or w/ BSA >1.4 m2 Adult dose. Oral Soln Childn 6 mth-12 yr, 15-40 kg 10/2.5 mg/kg bd; 7 to <15 kg 12/3 mg/kg bd. Max: 5 mL bd in childn >40 kg. W/ efavirenz or nevirapine 15-45 kg 11/2.75 mg/kg bd; 7 to <15 kg 13/3.25 mg/kg.	A
Loratadine 1 mg/ml Syrup	R06AX13000L9001XX	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	A
Loratadine 10 mg Tablet	R06AX13000T1001XX	Allergic rhinitis and allergic dermatoses	ADULT and CHILD over 6 years 10 mg once daily. CHILD 2 - 6 years: 5 mg once daily	B
Loratadine 5 mg and Pseudoephedrine Sulphate 120 mg Tablet	R01BA52988T1001XX	For treatment of allergic rhinitis and allergic dermatoses	ADULT and CHILD over 12 years 1 tablet twice daily	A/KK
Lorazepam 1 mg Tablet	N05BA06000T1001XX	i) Severe anxiety ii) Insomnia	i) 1 - 4 mg increase to 10 mg daily in divided doses. ELDERLY (or delibitated) half adult dose ii) 1 - 2 mg at bedtime Not recommended in children	A/KK

Generic Name	MDC	Indications	Dosage	Category
Losartan 50 mg Tablet	C09CA01500T1001XX	Patients intolerant of ACE inhibitors, only in the treatment of i) Hypertensive patient with left ventricular hypertrophy ii) Hypertension in diabetics with proteinuria or nephropathy	Hypertension: Usual starting and maintenance dose: 50 mg once daily. Maximum increasing the dose to 100 mg once daily. Patients with intravascular volume-depletion starting dose of 25 mg once daily. Renal protection in Type 2 diabetic patients with proteinuria and hypertension, starting dose: 50 mg once daily, may be increased to 100 mg once daily based on blood pressure response	A/KK
Losartan Potassium 100 mg & Hydrochlorothiazide 25 mg Tablet	C09DA01935T1004XX	Hypertension in patients who cannot tolerate ACE inhibitors because of cough, hypertensive patient with left ventricular hypertrophy	Fixed dose combination is not indicated for initial therapy. i. Usual starting & maintenance dose: 1 tab of losartan & HCTZ 50/12.5 mg once daily. May be increased to 2 tab of losartan & HCTZ 50/12.5 mg or 1 tab of losartan & HCTZ 100/25mg once daily if blood pressure remain uncontrolled after about 3 weeks of combination therapy with losartan & HCTZ 50/12.5mg. Max: 1 tab of losartan & HCTZ 100/25mg once daily or 2 tab of Losartan & HCTZ 50/12.5 mg once daily. ii. Usual starting dose: 50 mg losartan once daily, may be titrated with a combination of losartan 50mg & HCTZ 12.5 mg, maybe substituted with losartan 100mg & HCTZ 12.5mg, followed by losartan 100 mg & HCTZ 25 mg once daily.	A*

Generic Name	MDC	Indications	Dosage	Category
Losartan Potassium 100 mg and Hydrochlorothiazide 12.5 mg Tablet	C09DA01935T1003XX	Hypertension in patients who cannot tolerate ACE inhibitors because of cough, hypertensive patient with left ventricular hypertrophy	Fixed dose combination is not indicated for initial therapy. i. Usual starting & maintenance dose: 1 tab of losartan & HCTZ 50/12.5 mg once daily. May be increased to 2 tab of losartan & HCTZ 50/12.5 mg or 1 tab of losartan & HCTZ 100/25mg once daily if blood pressure remain uncontrolled after about 3 weeks of combination therapy with losartan & HCTZ 50/12.5mg. Max: 1 tab of losartan & HCTZ 100/25mg once daily or 2 tab of Losartan & HCTZ 50/12.5 mg once daily. ii. Usual starting dose: 50 mg losartan once daily, may be titrated with a combination of losartan 50mg & HCTZ 12.5 mg, maybe substituted with losartan 100mg & HCTZ 12.5mg, followed by losartan 100 mg & HCTZ 25 mg once daily.	A*
Losartan Potassium 100 mg Tablet	C09CA01500T1002XX	Patients intolerant of ACE inhibitors, only in the treatment of: i) Hypertensive patient with left ventricular hypertrophy ii)Hypertension in diabetics with proteinuria or nephropathy	Usual starting dose: 50 mg once daily. May be increased to 100 mg once daily.	A/KK
Losartan Potassium 50 mg and Hydrochlorothiazide 12.5 mg Tablet	C09DA01935T1001XX	Hypertension in patients who cannot tolerate ACE inhibitors because of cough, hypertensive patient with left ventricular hypertrophy	1 tablet once daily, may increase to maximum dose losartan 100 mg/ hydrochlorothiazide 25 mg once daily	A/KK
Magnesium Sulphate 45% Paste	D11AX05183G6001XX	Inflammatory skin conditions such as boils and carbuncles	Apply under dressing	C

Generic Name	MDC	Indications	Dosage	Category
Magnesium Sulphate 50% Injection	B05XA05183P3001XX	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)Mild 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	C
Magnesium Trisilicate Mixture	A02AA10912L2101XX	Heartburn, dyspepsia	10-20 ml 3-4 times daily before meals	C
Magnesium Trisilicate Tablet	A02AA10912T1001XX	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	C
Magnesium, Aluminium Hydroxide and Simethicone Suspension	V07AB00900L8001XX	As a buffering agent for reconstituting didanosine powder for oral administration so as to prevent acid degradation of didanosine which is used for the treatment of paediatric patients (more than 6 months old) with symptomatic HIV infection	DDI should be mixed with water and diluted with the appropriate dose of antacids to a final concentration of 10 mg per ml	C
Malathion 1 % Shampoo	P03AX03000L5201XX	Lice infestation	Wet hair, apply shampoo and work up lather. Leave for 15 minutes and rinse, comb. Repeat if necessary after 7 - 9 days	C+
Mannitol 10% Injection (10 g/100 ml)	B05BC01000P3001XX	Cerebral oedema	0.25- 2 g/kg IV of a 15% to 25% solution over 30-60 minutes. Safety and efficacy	A

Generic Name	MDC	Indications	Dosage	Category
			not established in children under 12 years of age	
Mannitol 20% Injection (20 g/100 ml)	B05BC01000P3002XX	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	A
Measles and Rubella Virus Vaccine Live, Attenuated (Freeze-dried) 10 doses/vial	J07BD52963P4002XX	For active immunization against measles and rubella in infants, children, adolescents and young adults at risk. Immunization of susceptible non-pregnant adolescent and adult females is indicated if certain precautions are observed. The vaccine can be safely and effectively given simultaneously with DTP, DT, TT, Td, BCG, Polio Vaccine (OPV and IPV), Haemophilus influenza type B, Hepatitis B, Yellow fever vaccine and vitamin A supplementation.	The vaccine should be reconstituted only with the diluent supplied (sterile water for injection) using a sterile syringe and needle. With gentle shaking the dried cake is easily dissolved. After reconstitution the vaccines should be used immediately. A single dose of 0.5ml should be administered by deep SC injection into the anterolateral aspect of upper thigh in infants and upper arm in older children. If the vaccines is not used immediately then it should be stored in the dark at 20C and 80C for no longer than 6 hours.	C
Measle's Vaccine Injection (10 doses)	J07BD01000P4001XX	Prophylaxis against measles and to prevent development of infection (if given within 72 hours of contact)	By SC or IM injection, 0.5 ml as a single dose at 12 - 15 months of age	C+
Measles, Mumps and Rubella (MMR) Vaccine Injection (Single Dose)	J07BD52963P4001XX	For immunisation of children against measles, mumps and rubella	Subcutaneous or by intramuscular injection, 0.5 ml	C+
Mebeverine HCl 135 mg Tablet	A03AA04110T1002XX	Irritable bowel syndrome	135 mg 3 times daily	B
Meclozine HCl 25 mg and Pyridoxine 50 mg Tablet	R06AE55919T1001XX	Nausea and vomiting of pregnancy	1 - 2 tablet 2 - 3 times daily in severe cases	B
Mecobalamin 500 mcg Tablet	M09AX00000T1001XX	Peripheral neuropathies	1 tablet 3 times daily. The dosage should be adjusted according to age of patient and severity of symptoms	B

Generic Name	MDC	Indications	Dosage	Category
Medroxyprogesterone Acetate 10 mg Tablet	G03DA02122T1002XX	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	B
Medroxyprogesterone Acetate 100 mg Tablet	L02AB02122T1002XX	Breast carcinoma, endometrial carcinoma, renal carcinoma	200-500 mg orally daily	A
Medroxyprogesterone Acetate 5 mg Tablet	G03DA02122T1001XX	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	B
Medroxyprogesterone Acetate 50 mg/ml Injection	G03AC06122P3001XX	Prevention of pregnancy and to provide long term contraception	150mg to be administered once every 3 month	B
Medroxyprogesterone Acetate 500 mg Tablet	L02AB02122T1001XX	Breast carcinoma, endometrial carcinoma, renal carcinoma	200-500 mg orally daily	A
Mefenamic Acid 250 mg Capsule	M01AG01000C1001XX	Mild to moderate pain	ADULT: 250 - 500 mg 3 times daily after meals. CHILD over 6 months: 6.5 - 25 mg/kg daily 3 - 4 times daily for not longer than 7 days except in juvenile arthritis	B
Mefenamic Acid 250 mg Tablet	M01AG01000T1001XX	Mild to moderate pain	ADULT: 250 - 500 mg 3 times daily after meals. CHILD over 6 months: 6.5 - 25 mg/kg daily 3 - 4 times daily for not longer than 7 days except in juvenile arthritis	B
Mefloquine HCl 250 mg Tablet	P01BC02110T1001XX	For multi-drug resistant cases of malaria only	Treatment of malaria : ADULT and CHILD 25 mg/kg usually given over 2-3 days. Prophylaxis of malaria : ADULT 250 mg once a week. CHILD over 5 kg : 5 mg/kg once a week; prophylaxis should start 1-3 weeks before departure and continue for 4 weeks after last exposure	A*

Generic Name	MDC	Indications	Dosage	Category
Meloxicam 7.5 mg Tablet	M01AC06000T1001XX	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	A/KK
Melphalan 2 mg Tablet	L01AA03000T1001XX	i) Multiple myeloma ii) Neuroblastoma, rhabdomyosarcoma iii) Recurrent neuroblastoma (palliative)	i) 8 - 10 mg/m2 for 4 days every 4 weeks ii) 10 - 35 mg/m2 once every month For dose regimes, refer to protocols	A
Melphalan 50 mg Injection	L01AA03000P4001XX	High dose conditioning therapy for stem cell transplantation in multiple myeloma	200 mg/ m2 IV infusions in divided doses for Day 1 to day 3 followed by IV infusions of autologous stem cells	B
Memantine HCl 10 mg Tablet	N06DX01110T1001XX	As monotherapy or as adjunctive therapy with cholinesterase inhibitors for the symptomatic treatment of patients with moderate to severe Alzheimer?s disease.	Adult Initially 5 mg/day on the 1st week, 5mg twice a day on the 2nd week, then 15 mg/day (10mg in the morning and 5mg in the evening) on the 3rd week. From the 4th week on, continue treatment with maintenance dose of 20 mg/day (10mg twice a day). Max: 20 mg/day.	A*
Memantine HCl 20 mg Tablet	N06DX01110T1002XX	As monotherapy or as adjunctive therapy with cholinesterase inhibitors for the symptomatic treatment of patients with moderate to severe Alzheimer?s disease.	Adult Initially 5 mg/day on the 1st week, 5mg twice a day on the 2nd week, then 15 mg/day (10mg in the morning and 5mg in the evening) on the 3rd week. From the 4th week on, continue treatment with maintenance dose of 20 mg/day (10mg twice a day). Max: 20 mg/day.	A*
Meningococcal A, C, Y, W 135 Vaccine Injection	J07AH04000P4001XX	Immunisation against meningococcal diseases caused by Neisseria meningitis Group A, Group C, Group Y or Group W-135	Prophylaxis: 0.5 ml intramuscular injection.	B
Menotrophin 150 IU Injection (Follicle Stimulating Hormone 150 IU and Luteinizing Hormone 150 IU)	G03GA02954P4002XX	Treatment of infertility where clomifene has fail or stimulation of follicle growth as part of an assisted reproductive technology (ART)	SC or IM injection according to patients response	A*

Generic Name	MDC	Indications	Dosage	Category
Menotrophin 75 IU Injection (Follicle Stimulating Hormone 75 IU and Luteinizing Hormone 75 IU)	G03GA02954P4001XX	Treatment of infertility where clomifene has fail or stimulation of follicle growth as part of an assisted reproductive technology (ART)	SC or IM Injection according to patient's response	A*
Menotrophin, Highly Purified 75 IU Injection (Follicle Stimulating Hormone 75 IU and Luteinizing Hormone 75 IU)	G03GA02954P4003XX	Anovulation in women who have been unresponsive to treatment with clomiphene citrate or stimulation of follicle growth as part of an assisted reproductive technology (ART)	The recommended initial dose of MENOPUR is 75-150 IU daily. The subsequent dosing should be adjusted according to individual patient response. Adjustments in dose should not be made more frequently than every 7 days. The recommended dose increment is 37.5 IU per adjustment and should not exceed 75 IU. The maximum daily dose should not be higher than 225 IU.	A*
Menthol 1.6% in Industrial Methylated Spirit Inhalation	R01AX30000A9901XX	Decongestion of the upper respiratory tract	As directed for local use	C
Mepivacaine HCl 2% with Adrenaline (1:100,000) Injection	N01BB53974P3001XX	For local anaesthesia including infiltration and nerve blocks	Adult: Single site in the jaw: 36 mg (1.8ml). Entire oral cavity: 180 mg (9 ml). Max: 400 mg (20 ml) per single dental procedure	B
Mepivacaine HCl 3% Injection	N01BB03110P3001XX	For dental local anaesthesia including infiltration and nerve blocks on patients in whom adrenalin might be contraindicated	Adult: Single site in the jaw: 54 mg (1.8 ml). Entire oral cavity: 270 mg (9 ml). Max: 400 mg (13.3 ml) per single dental procedure	B
Mercaptopurine 50 mg Tablet	L01BB02000T1001XX	i) Langerhan's cell histocytosis ii) Acute lymphoblastic leukaemia iii) Acute promyelocytic leukaemia APML (maintenance)	"Leukaemia adults: 2.5mg/kg or 80-00mg/m2 p.o per day, given as a single dose. To be increased at the end of 4 weeks, If necessary, up to 5mg/kg p.o per day. Maintainance dosage are 1.5mg/kg -2.5mg/kg p.o per day Children age 5 and older: Induction: 2.5mg/kg/day p.o once daily. Maintanance dose: 1.5mg/kg -2.5mg.kg p.o once daily or 70-100mg/m2 p.o once daily."	A

Generic Name	MDC	Indications	Dosage	Category
Meropenem 1 g Injection	J01DH02000P4002XX	i. Emperical treatment for presume infections in patients (adult and children) with febrile neutropenia, used as monotherapy or in combination with anti-virals or antifungal agent ii. Septicaemia iii. Serious infections in renal impaired patients	ADULT: 0.5g - 1g 8 hourly CHILD: (aged 3 months and over): 10-40mg/kg 8 hourly, if body weight over 50kg, adult dosage should be used	A*
Meropenem 500 mg Injection	J01DH02000P4001XX	i. Emperical treatment for presume infections in patients (adult and children) with febrile neutropenia, used as monotherapy or in combination with anti-virals or antifungal agent ii. Septicaemia iii. Serious infections in renal impaired patients	ADULT: 0.5g - 1g 8 hourly CHILD: (aged 3 months and over): 10-40mg/kg 8 hourly, if body weight over 50kg, adult dosage should be used	A*
Mesalazine 1 g Suppository	A07EC02259S2002XX	Inflammatory bowel disease of ulcerative colitis and Crohn's disease.	Ulcerative colitis : 1 g suppository insert rectally once daily at bedtime. The dose may be increased to 500 mg 3 times daily if the response is inadequate after 2 weeks of therapy. To achieve maximum benefit, it is recommended that the suppository be retained in the rectum for a minimum of 1 to 3 hours or longer. The usual course of therapy, depending upon response, may last from 3 to 6 weeks. CHILD not recommended	A

Generic Name	MDC	Indications	Dosage	Category
Mesalazine 250 mg Suppository	A07EC02259S2001XX	Inflammatory bowel disease of ulcerative colitis and Crohn's disease.	Ulcerative colitis : 1 g suppository insert rectally once daily at bedtime. The dose may be increased to 500 mg 3 times daily if the response is inadequate after 2 weeks of therapy. To achieve maximum benefit, it is recommended that the suppository be retained in the rectum for a minimum of 1 to 3 hours or longer. The usual course of therapy, depending upon response, may last from 3 to 6 weeks. CHILD not recommended	A
Mesalazine 250mg MR Tablet	A07EC02259T1001XX	Inflammatory bowel disease of ulcerative colitis and Crohn's disease.	ADULT: 250 - 500 mg 3 - 4 times daily for 3 - 6 weeks. CHILD up 2 years with Crohn's disease: 20 - 30 mg/daily in divided doses	A
Mesalazine 500mg MR Tablet	A07EC02259T1002XX	Inflammatory bowel disease of ulcerative colitis and Crohn's disease.	ADULT: 250 - 500 mg 3 - 4 times daily for 3 - 6 weeks. CHILD up 2 years with Crohn's disease: 20 - 30 mg/daily in divided doses	A
Mesalazine 6.67% w/w Enema	A07EC02259G2001XX	Inflammatory bowel disease of ulcerative colitis and Crohn's disease.	60 ml (4g) at bedtime, retained overnight, approximately 8 hours	A
Mesna 100 mg/ml Injection	V03AF01520P3001XX	For prevention of urotoxic effects of oxazaphosphorines e.g. ifosfamide and cyclophosphamide	IV injection at a dosage of 20% of the corresponding oxazaphosphorine dose at the times 0 hour (concurrently with the oxazaphosphorine), 4 hours and 8 hours thereafter. CHILD: Dose given at greater frequency (e.g. 6 times) and a shorter intervals (e.g. 3 hours)	A

Generic Name	MDC	Indications	Dosage	Category
Metformin 500 mg and Glibenclamide 2.5 mg Tablet	A10BD02926T1001XX	As second-line therapy when diet, exercise and initial treatment with sulphonylurea or metformin do not result in adequate glycemic control in patients with type 2 diabetes mellitus	Initial dose:1.25 mg/250 mg ORALLY once daily; titrate in increments of 1.25 mg/250 mg per day every 2 weeks,2.5 mg/500 mg to 5 mg/500 mg ORALLY twice daily; titrate in increments of 5 mg/500 mg up to MAX 20 mg/2000 mg once daily	B
Metformin 500 mg and Glibenclamide 5 mg Tablet	A10BD02926T1002XX	As second-line therapy when diet, exercise and initial treatment with sulphonylurea or metformin do not result in adequate glycemic control in patients with type 2 diabetes mellitus	Initial dose:1.25 mg/250 mg ORALLY once daily; titrate in increments of 1.25 mg/250 mg per day every 2 weeks,2.5 mg/500 mg to 5 mg/500 mg ORALLY twice daily; titrate in increments of 5 mg/500 mg up to MAX 20 mg/2000 mg once daily	B
Metformin HCl 500 mg Extended Release Tablet	A10BA02110T5001XX	Diabetes mellitus who experienced gastrointestinal side effects with normal metformin	500 mg once daily. Maximum dose 2000 mg once daily with evening meal	A/KK
Metformin HCl 500 mg Tablet	A10BA02110T1001XX	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.	B
Metformin HCl 750 mg Extended Release Tablet	A10BA02110T5003XX	Diabetes mellitus who experienced gastrointestinal side effects with normal metformin	500 mg once daily. Maximum dose 2000 mg once daily with evening meal	A/KK
Methadone 5mg/ml Syrup	N07BC02110L9001XX	Detoxification treatment of narcotic addiction	Initial 10-20mg per day, increasing by 10-20mg per day until there are no signs of withdrawal or intoxication. Usual dose 40-60mg/day	A/KK

Generic Name	MDC	Indications	Dosage	Category
Methotrexate 2.5 mg Tablet	L01BA01000T1001XX	i) Acute lymphoblastic leukaemia and acute promyelocytic leukemia (maintenance) ii) Extensive plaque psoriasis, erythrodermic psoriasis, pustular psoriasis, Reiter's syndrome, connective tissue disease	i) ADULT: 20 mg/m2 weekly. CHILD: 20 - 30 mg/m2 weekly according to protocol ii) Relapsed acute lymphoblastic leukaemia (ALL): 100 mg/m2/day for 5 days 6 weekly according to protocol iii) Dose used by dermatologist: 5 - 25 mg weekly. Liver biopsy after cumulative dose of 1.5 gram and repeat liver biopsy with additional gram received. Maximum cumulative dose is 4 gram. Monitor full blood count (FBC), renal and liver function iv) Rheumatoid arthritis, psoriatic arthropathy: dose used by rheumatologist: 2.5 mg/week orally starting dose, increasing to 7.5 - 20 mg/weekly	A

Generic Name	MDC	Indications	Dosage	Category
Methotrexate 50 mg Injection	L01BA01520P3001XX	i) Solid tumours ii) Gestational trophoblastic disease iii) Acute leukaemia/lymphomas iv) Rheumatoid arthritis, psoriatic arthropathy, severe/erythrodermic psoriasis	i) 50 mg/m2 once every 2 - 3 weeks in combination with other drugs ii) 50 mg IV Day 1, 3, 5, 9 every 3 weeks. For high risk gestational trophoblastic disease, use 100 mg/m2 as part of EMA-CO regime iii) High dose regimes: 500 - 3000 mg/m2 per dose may be used, employing the 500 mg preparations. CHILD: Central nervous system prophylaxis for acute leukaemia 2 gm/m2 over 24 hours with folinic acid rescue, 3 doses for B-cell lineage. 4 doses for T-lineage all every 3 weeks. Relapse acute lymphoblastic leukaemia (ALL): 1 gm/m2 over 36 hours with folinic acid rescue every 3 weeks for 9 doses, maintenance: 50 mg/m2 every 2 weeks. B-cell lymphoma: 3 gm/m2 over 3 hours with folinic acid rescue for three doses. Methotrexate level monitoring recommended when using high dose regimens. The 500 mg strength is not for intrathecal (IT) use. Dosage for intrathecal treatment and prophylaxis in leukaemia: less than 1 year: 5 mg, 1 - 2 years: 7.5 mg, 2 - 3 years: 10 mg, more than 3 years: 12.5 mg. IT preparation must be clearly stated/verified. ENSURE THAT PREPARATION IS SUITABLE FOR INTRATHECAL USE iv) Dose used by rheumatologist: 10 - 15 mg IM injection or oral weekly. Dose used by dermatologist: 10 - 25 mg IM injection weekly	A

Generic Name	MDC	Indications	Dosage	Category
Methotrexate 500 mg/20 ml Injection	L01BA01520P3002XX	i) Solid tumours ii) Gestational trophoblastic disease iii) Acute leukaemias, lymphomas	i) 50 mg/m2 once every 3 weeks in combination with other drugs (for this dose, use the 50 mg preparation) ii) 50 mg IV Day 1, 3, 5, 9 every 3 weeks. For high risk gestational trophoblastic disease, use 100 mg/m2 as part of EMA-CO regime iii) High dose regimes: 500 - 3000 mg/m2 per dose may be used, employing the 500 mg preparations. CHILD: Central nervous system prophylaxis for acute leukaemia 2 gm/m2 over 24 hours with folinic acid rescue, 3 doses for B-cell lineage. 4 doses for T-lineage all every 3 weeks. Relapse acute lymphoblastic leukaemia (ALL): 1 gm/m2 over 36 hours with folinic acid rescue every 3 weeks for 9 doses, maintenance: 50 mg/m2 every 2 weeks. B-cell lymphoma: 3 gm/m2 over 3 hours with folinic acid rescue for three doses. Methotrexate level monitoring recommended when using high dose regimens. THE 500 MG STRENGTH IS NOT FOR INTRATHECAL USE	A
Methoxsalen 1% Lotion	D05AD02000L6001XX	Repigmenting agent in vitiligo in conjuction with controlled doses of UVA or sunlight	Apply 0.1% lotion to area to be exposed to the UVA light (need to dilute the 1% lotion to 0.1% lotion, otherwise the skin will burn)	A
Methoxsalen 10 mg Capsule	D05BA02000C1001XX	Protection before exposure to sunlight, psoriasis and vitiligo	0.2 - 0.6 mg/kg/body weight. For repigmentation of larger lesions (greater than 6 cm sq): 20 mg/day 2 hours before exposure. Take with food or milk	A

Generic Name	MDC	Indications	Dosage	Category
Methoxy Polyethylene Glycol-epoetin Beta 100 mcg/0.3 ml Injection in Prefilled Syringe	B03XA03000P5001XX	Treatment of anaemia associated with chronic renal failure in the following circumstances: i)Patients who require 2 or more subcutaneous erythropoietin injections per week and need to travel to obtain the injections. ii)Patients who are on high doses of subcutaneous erythropoietin injections eg. 6000 units or more per time and require more than 1 injection of conventional erythropoietin per time. iii)Patients who require 2 or more erythropoietin injections per week and where compliance is an issue.	Non Erythropoiesis Stimulating Agent (ESA)-treated patients : 0.6 mcg/kg, once every two weeks (IV or SC). When the Hb is >11g/dl, administration can be reduced to once monthly using the dose equal to twice the previous two weekly dose. ESA-treated patients : 120-360 mcg once monthly or 60-180 mcg every two weeks.	A*
Methoxy Polyethylene Glycol-epoetin Beta 120 mcg/0.3 ml Injection in Prefilled Syringe	B03XA03000P5005XX	Treatment of anaemia associated with chronic renal failure in the following circumstances: i)Patients who require 2 or more subcutaneous erythropoietin injections per week and need to travel to obtain the injections. ii)Patients who are on high doses of subcutaneous erythropoietin injections eg. 6000 units or more per time and require more than 1 injection of conventional erythropoietin per time. iii)Patients who require 2 or more erythropoietin injections per week and where compliance is an issue.	Non Erythropoiesis Stimulating Agent (ESA)-treated patients : 0.6 mcg/kg, once every two weeks (IV or SC). When the Hb is >11g/dl, administration can be reduced to once monthly using the dose equal to twice the previous two weekly dose. ESA-treated patients : 120-360 mcg once monthly or 60-180 mcg every two weeks.	A*

Generic Name	MDC	Indications	Dosage	Category
Methoxy Polyethylene Glycol-epoetin Beta 150 mcg/0.3 ml Injection in Prefilled Syringe	B03XA03000P5006XX	Treatment of anaemia associated with chronic renal failure in the following circumstances: i)Patients who require 2 or more subcutaneous erythropoietin injections per week and need to travel to obtain the injections. ii)Patients who are on high doses of subcutaneous erythropoietin injections eg. 6000 units or more per time and require more than 1 injection of conventional erythropoietin per time. iii)Patients who require 2 or more erythropoietin injections per week and where compliance is an issue	Non Erythropoiesis Stimulating Agent (ESA)-treated patients : 0.6 mcg/kg, once every two weeks (IV or SC). When the Hb is >11g/dl, administration can be reduced to once monthly using the dose equal to twice the previous two weekly dose. ESA-treated patients : 120-360 mcg once monthly or 60-180 mcg every two weeks	A*
Methoxy Polyethylene Glycol-epoetin Beta 200 mcg/0.3 ml Injection in Prefilled Syringe	B03XA03000P5007XX	Treatment of anaemia associated with chronic renal failure in the following circumstances: i)Patients who require 2 or more subcutaneous erythropoietin injections per week and need to travel to obtain the injections. ii)Patients who are on high doses of subcutaneous erythropoietin injections eg. 6000 units or more per time and require more than 1 injection of conventional erythropoietin per time. iii)Patients who require 2 or more erythropoietin injections per week and where compliance is an issue.	Non Erythropoiesis Stimulating Agent (ESA)-treated patients : 0.6 mcg/kg, once every two weeks (IV or SC). When the Hb is >11g/dl, administration can be reduced to once monthly using the dose equal to twice the previous two weekly dose. ESA-treated patients : 120-360 mcg once monthly or 60-180 mcg every two weeks.	A*

Generic Name	MDC	Indications	Dosage	Category
Methoxy Polyethylene Glycol-epoetin Beta 50 mcg/0.3 ml Injection in Prefilled Syringe	B03XA03000P5002XX	Treatment of anaemia associated with chronic renal failure in the following circumstances: i)Patients who require 2 or more subcutaneous erythropoietin injections per week and need to travel to obtain the injections. ii)Patients who are on high doses of subcutaneous erythropoietin injections eg. 6000 units or more per time and require more than 1 injection of conventional erythropoietin per time. iii)Patients who require 2 or more erythropoietin injections per week and where compliance is an issue.	Non Erythropoiesis Stimulating Agent (ESA)-treated patients : 0.6 mcg/kg, once every two weeks (IV or SC). When the Hb is >11g/dl, administration can be reduced to once monthly using the dose equal to twice the previous two weekly dose. ESA-treated patients : 120-360 mcg once monthly or 60-180 mcg every two weeks	A*
Methoxy Polyethylene Glycol-epoetin Beta 75 mcg/0.3 ml Injection in Prefilled Syringe	B03XA03000P5004XX	Treatment of anaemia associated with chronic renal failure in the following circumstances: i)Patients who require 2 or more subcutaneous erythropoietin injections per week and need to travel to obtain the injections. ii)Patients who are on high doses of subcutaneous erythropoietin injections eg. 6000 units or more per time and require more than 1 injection of conventional erythropoietin per time. iii)Patients who require 2 or more erythropoietin injections per week and where compliance is an issue	Non Erythropoiesis Stimulating Agent (ESA)-treated patients : 0.6 mcg/kg, once every two weeks (IV or SC). When the Hb is >11g/dl, administration can be reduced to once monthly using the dose equal to twice the previous two weekly dose. ESA-treated patients : 120-360 mcg once monthly or 60-180 mcg every two weeks	A*
Methyl Salicylate 25% Ointment	M02AC00260G5001XX	Relief of minor aches and pains of muscles and joints associated with simple backache, arthritis and rheumatic conditions.	To be massage well to the affected area, 3 - 4 times daily.	C+
Methylcellulose 1% with 50 mg Vitamin C Eye Drops	S01XA00990D2001XX	To be used only for i) Post-operative cases with dry eye ii) Unconscious patients in critical care unit (CCU) with exposure keratitis	1 to 4 times daily depending on severity of cases	B

Generic Name	MDC	Indications	Dosage	Category
Methyldopa 250 mg Tablet	C02AB01110T1001XX	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.	B
Methylene Blue 1% Injection	V03AB17100P3001XX	For treatment of idiopathic and drug-induced methaemoglobinemia	Adult and children: 1 to 2 mg/kg (0.1 to 0.2 mL/kg of a 1% solution) IV very slowly over 5 minutes. This dosage can be repeated if necessary after one hour.	B
Methylphenidate HCl 10 mg Tablet	N06BA04110T1001XX	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)	A
Methylphenidate HCl 18 mg Extended-release Tablet	N06BA04110T5002XX	Attention deficit hyperactivity disorder (ADHD)	CHILD over 6 years: Individualize dosage, to be taken once daily in the morning. Dose may be adjusted in increments to a maximum of 54 mg/day, at weekly interval. Patient new to methylphenidate: starting dose 18 mg once daily; adults 18mg or 36mg once daily. Patient currently using methylphenidate: 18 - 36 mg. Maximum 54 mg/day. Discontinue if no response after 1 month	A*

Generic Name	MDC	Indications	Dosage	Category
Methylphenidate HCl 20 mg LA Capsule	N06BA04110C2003XX	Attention deficit hyperactivity disorder (ADHD)	20 mg once daily to be taken in the morning. Dosage be adjusted in increments to a maximum of 60 mg/day	A*
Methylphenidate HCl 36 mg Extended-release Tablet	N06BA04110T5003XX	Attention deficit hyperactivity disorder (ADHD)	CHILD over 6 years: Individualize dosage, to be taken once daily in the morning. Dose may be adjusted in increments to a maximum of 54 mg/day, at weekly interval. Patient new to methylphenidate: starting dose 18 mg once daily; adults 18mg or 36mg once daily. Patient currently using methylphenidate: 18 - 36 mg. Maximum 54 mg/day. Discontinue if no response after 1 month	A*
Methylphenidate HCl 40mg LA Capsule	N06BA04110C2002XX	Attention deficit hyperactivity disorder (ADHD)	20 mg once daily to be taken in the morning. Dosage be adjusted in increments to a maximum of 60 mg/day	A*

Generic Name	MDC	Indications	Dosage	Category
Methylprednisolone Acetate 40mg injection	H02AB04134P3001XX	i) Intramuscular administration: anti-inflammatory treatment, treatment of hematological and oncological disorders, endocrine disorders ii) Intrasynovial, periarticular, intrabursal or soft tissue administration: Indicated as adjunctive therapy for short term administration in : Synovitis of osteoarthritis, rheumatoid arthritis, acute and subacute bursitis, acute gouty arthritis, epicondylitis, acute nonspecific tenosynovitis, post-traumatic osteoarthritis iii) Intralesional use in alopecia areata, discoid lupus erythematosus; keloids, localized hypertrophic, infiltrated inflammatory lesions of granuloma annulare, lichen planus, psoriatic plaques, lichen simplex chronicus (neurodermatitis) *Restricted to patients experiencing side effects with triamcinolone acetonide	i. Intramuscular route a) Asthma: may be used in place of a short burst of oral steroids in vomiting or non-adherent patients. The recommended dose is 80-120mg intramuscularly as a one-dose b) Adrenogenital syndrome: 40mg every two weeks c) Rheumatoid arthritis (maintenance): 40-120mg weekly d) Dermatologic lesions (acute severe dermatitis, chronic contact dermatitis, seborrheic dermatitis): 40-120mg weekly for 1-4 weeks ii. Intraarticular route Recommended dose is 4 to 80 milligrams, depending upon the size of the joint. Injections may be repeated at intervals of 1 to 5 or more weeks in chronic cases iii.Intralesional route 20 to 60 milligrams methylprednisolone acetate injected into the lesion	A*
Methylprednisolone Sodium Succinate 0.5 g Injection	H02AB04520P4001XX	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	A
Methylprednisolone Sodium Succinate 1 g Injection	H02AB04520P4002XX	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	A

Generic Name	MDC	Indications	Dosage	Category
Metoclopramide HCl 1 mg/ml Syrup	A03FA01110L9001XX	i) Dyspepsia, flatulence, hiatus hernia, peptic ulceration, reflux oesophagitis, gastritis, duodenitis, cholelithiasis, nausea, vomiting ii) Promote bowel transit during diagnostic procedures	i) CHILD over 5 years: 2.5 - 5 ml 3 times daily. 3 - 5 years 2 ml 2 - 3 times daily. 1 - 3 years: 1 ml 2 - 3 times daily. Under 1 year: 1 ml 2 times daily ii) Single dose given 10 minutes before examination. CHILD over 5 years: 2.5 - 5 ml. Between 3 - 5 years: 2 ml. Under 1 year: 1 ml	B
Metoclopramide HCl 10 mg Tablet	A03FA01110T1001XX	i) Dyspepsia, flatulence, hiatus hernia, peptic ulceration, reflux oesophagitis, gastritis, duodenitis, cholelithiasis, nausea, vomiting ii) Promote bowel transit during diagnostic procedures	i) ADULT over 20 years: 10 mg 3 times daily. ADULT between 12 - 20 years: 5 mg 3 times daily. CHILD under 12 years: 0.12 mg/kg/dose 6 - 12 hourly ii) Single dose 5 - 10 minutes before examination; ADULT and CHILD over 15 years: 10 - 20 mg; CHILD less than 15 years: 0.12 mg/kg/dose 6 - 12 hourly	B
Metoclopramide HCl 5 mg/ml Injection	A03FA01110P3001XX	i) Dyspepsia, flatulence, hiatus hernia, peptic ulceration, reflux oesophagitis, gastritis, duodenitis, cholelithiasis, nausea, vomiting ii) Promote bowel transit during diagnostic procedures	i) ADULT over 20 years: 10 mg 3 times daily. ADULT between 12 - 20 years: 5 mg 3 times daily. CHILD under 12 years: 0.12 mg/kg/dose 6 - 12 hourly ii) Single dose 5 - 10 minutes before examination; ADULT and CHILD over 15 years: 10 - 20 mg; CHILD less than 15 years: 0.12 mg/kg/dose 6 - 12 hourly	B
Metolazone 2.5 mg Tablet	C03BA08000T1002XX	Oedema in congestive cardiac failure, nephrotic syndrome and impaired renal function	Adult: 5-10 mg daily, increased if necessary to 20 mg daily. Max: 80 mg in 24 hr. Elderly: Initially, 2.5 mg/day or every other day. Should be taken with food. Take after breakfast.	A*
Metoprolol Tartrate 100 mg Tablet	C07AB02123T1002XX	Hypertension, angina, myocardial infarction, arrhythmias	Hypertension: Initially 100 mg to maximum 400 mg daily, Angina: 50 mg - 100 mg in 2 - 3 times daily. Myocardial infarction: 200 mg daily in divided doses. Arrythmias: 50 mg - 300 mg in 2 - 3 times daily	B

Generic Name	MDC	Indications	Dosage	Category
Metoprolol Tartrate 50 mg Tablet	C07AB02123T1001XX	Hypertension, angina, myocardial infarction, arrhythmias	Hypertension: Initially 100 mg to maximum 400 mg daily, Angina: 50 mg - 100 mg in 2 - 3 times daily. Myocardial infarction: 200 mg daily in divided doses. Arrythmias: 50 mg - 300 mg in 2 - 3 times daily	B
Metronidazole 0.5 g Suppository	P01AB01000S2001XX	Anaerobic infection	Anaerobic infections Adult: As a 1-g suppository 8 hrly for 3 days, then 12 hrly. Substitute oral therapy as soon as possible. May be unsuitable for initiating therapy in severe infections. Child: <1 yr: 125 mg; 1-5 yr: 250 mg; 5-10 yr: 500 mg. All doses to be given 8 hrly for 3 days, then 12 hrly thereafter. May be unsuitable for initiating therapy in severe infections. Prophylaxis of postoperative anaerobic bacterial infections Adult: 1 g 8 hrly starting 2 hr before surgery.	B

Generic Name	MDC	Indications	Dosage	Category
Metronidazole 200 mg Tablet	P01AB01000T1001XX	Anaerobic infection	Anaerobic bacterial infections Adult: Initially, 800 mg followed by 400 mg 8 hly for about 7 days. Other recommended doses: 500 mg 8 hrly or 7.5 mg/kg 6 hrly (max: 4 g in 24 hr). Child: 7.5 mg/kg 8 hrly. Elderly: Use lower end of adult dose recommendations. Do not admin as a single dose. Prophylaxis of postoperative anaerobic bacterial infections Adult: 400 mg by mouth 8 hrly 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.	B
Metronidazole 200 mg/5 ml Suspension	P01AB01000L8001XX	Anaerobic infection	CHILD: 7.5 mg/kg 3 times daily for 7 days	B
Metronidazole 500 mg/100 ml Injection	J01XD01000P9901XX	Anaerobic infections	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.	A
Miconazole 2% Cream	D01AC02221G1001XX	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	B
Miconazole Nitrate 2% Powder	D01AC02221F2001XX	Skin infections caused by dermatophytes or Candida	Dust powder over infected area 1 - 2 times daily	A

Generic Name	MDC	Indications	Dosage	Category
Midazolam 5 mg/5 ml Injection	N05CD08110P3001XX	Pre-operative sedation, induction of general anaesthesia, premedication and sedation in ICU and sedation for minor procedures	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	A
Midazolam 5 mg/ml Injection	N05CD08110P3002XX	Pre-operative sedation, induction of general anaesthesia, premedication and sedation in ICU and sedation for minor procedures	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	A
Midazolam 7.5 mg Tablet	N05CD08253T1001XX	Pre and post-operative sedation	ADULT: Usually 7.5 - 15 mg at bedtime; or for premedication, 30 - 60 minutes before the procedure. For ELDERLY, debilitated or impaired liver/kidney function: 7.5 mg	A/KK
Minocycline 100 mg Capsule	J01AA08110C1002XX	As second-line treatment for leprosy only	100 mg daily 6 - 18 months	A*
Minocycline 50 mg Capsule	J01AA08110C1001XX	As second-line treatment for leprosy only	100 mg daily 6 - 18 months	A*

Generic Name	MDC	Indications	Dosage	Category
Minoxidil 5 mg Tablet	C02DC01000T1001XX	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	A*
Mirtazapine 15 mg Orodispersible Tablet	N06AX11000T4001XX	Major depression	Initially 15 mg daily at bedtime increased according to response up to 45 mg daily as a single dose at bedtime or in 2 divided doses. CHILD and ADOLESCENT under 18 years not recommended	A*
Mirtazapine 30 mg Orodispersible Tablet	N06AX11000T4002XX	Major depression	Initially 15 mg daily at bedtime increased according to response up to 45 mg daily as a single dose at bedtime or in 2 divided doses. CHILD and ADOLESCENT under 18 years not recommended	A*
Mitomycin C 0.002% Eye Drops	S01AX00000D2003XX	Pterygium, conjunctival tumour, glaucoma surgery	1 - 2 drops several times a day	A
Mitomycin C 0.02% Eye Drops	S01AX00000D2001XX	Pterygium, conjunctival tumour, glaucoma surgery	1 - 2 drops several times a day	A
Mitomycin C 0.04% Eye Drops	S01AX00000D2002XX	Pterygium, conjunctival tumour, glaucoma surgery	1 - 2 drops several times a day	A
Mitomycin-C 10 mg Injection	L01DC03000P4001XX	i) Gastrointestinal, lung, breast, cervical cancers ii) Bladder tumours iii) Opthalmological conditions: conjunctival squamous neoplasia, squamous cell carcinoma of conjunctiva, trabeculectomy chronic lymphocytic leukaemia, chronic myelogenous leukaemia. Gastric, colorectal, lung cancer	i) 10 - 20 mg/m2 body surface area (BSA) given as a single dose through a running IV infusion repeated every 6 - 8 weeks. The whole schedule may be repeated depending on the bone marrow ii) 10 - 40 mg daily or every other day (intravesical) iii) 0.4 mg topically as a single application for opthalmological conditions, duration: 1 to 3 minutes	A*

Generic Name	MDC	Indications	Dosage	Category
Mitoxantrone 20 mg/10ml Injection	L01DB07110P3001XX	Acute leukaemia, elderly patients with acute myeloid leukaemia (AML), relapsed/resistant acute leukaemia, non-Hodgkin's lymphoma (NHL)	10 - 12 mg/m2 IV daily for 3 days, in combination with other cytotoxic agents. Refer to protocol. CHILD: 5 - 10 mg/m2 daily for 3 - 5 days according to protocol. Treatment of acute leukaemia, ADULT: 8 - 12 mg/m2/day once daily for 4 - 5 days. CHILD more than 2 years: same as adult dose. CHILD 2 years: 0.4 mg/kg/day once daily for 3 - 5 days	A*
Mixed Gas-Gangrene Antitoxin 25,000 units/5 ml Injection	J06AA05000P3001XX	Mixed gas-gangrene	Prophylactic: 25,000 units IM or IV. Therapeutic: Not less than 75,000 units IV	B
Moclobemide 150 mg Tablet	N06AG02000T1001XX	Treatment of depressive syndrome	Initially 300 mg daily in divided doses. Gradually to increase up to 600 mg daily in divided doses depending on response. Usual range 150 - 600 mg daily. Not recommended in children	A*
Modified Fluid Gelatin 4% Injection	B05AA06905P9901XX	For primary volume replacement in hypovolaemia, peri-operative stabilization of the circulation, haemodilution, extracorporeal circulation (haemodialysis and heart-lung machine)	ADULT 500 - 1500 ml given as IV infusion	B
Modified Polypeptides (Polygeline) 3.5% Injection	B05AA10905P9901XX	For primary volume replacement in hypovolaemia, peri-operative stabilization of the circulation, haemodilution, extracorporeal circulation (haemodialysis and heart-lung machine)	Administered by intravenous infusion only. Total dosage and rate of infusion depend upon the amount of blood loss and hemodynamic parameters. The usual dose is 500 to 1000 milliliters (mL), with total dosage not to exceed 2500 mL daily	B
Molgramostim 300 mcg Injection	L03AA03000P4002XX	i) As secondary prophylaxis and therapeutic use against chemotherapy induced leucopenia according to clinician's discretion ii) Haemopoietic stem cell transplantation (HSCT)	SC or IV 250 mcg/m2/day. Initiation: 24 to 72 hours after chemotherapy. Duration: Until a clinically adequate neutrophil recovery is achieved	A*

Generic Name	MDC	Indications	Dosage	Category
Mometasone Furoate 0.1% Cream	D07AC13139G1001XX	Steroid responsive dermatosis and vitiligo. Used where a potent steroid is required for short duration not more than 6 weeks	Apply thin layer to the affected skin areas once daily until the lesion heals or for a duration of 3 weeks whichever is sooner.Massage gently and thoroughly until the medication disappears.	A*
Mometasone Furoate 50 mcg Aqueous Nasal Spray	R01AD09139A4101XX	Allergic rhinitis	ADULT and CHILD over 12 years: 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 6 - 12 years old: 50 mcg (1 spray) to each nostril once daily	A*
Monobasic Sodium Phosphate 48%, Dibasic Sodium Phosphate 18%	A06AG01162L5001XX	Bowel cleansing prior to colonoscopy, radiological examination or bowel surgery	45 ml diluted with half a glass (120 ml) of water, followed by one full glass (240 ml) of water to be taken depending on the time of the procedure. For morning procedure, 45 ml dilute with half glass of water should be taken at 7 am and the second 45 ml at 7 pm on the day before the procedure. For afternoon procedure, the first dose should be taken at 7 pm on the day before and the second dose at 7 am on the day of the procedure. Solid food must not be taken during the preparation period; clear fluids or water can be taken liberally. Not recommended for use in children	A
Montelukast Sodium 10 mg Tablet	R03DC03520T1001XX	Chronic treatment of asthma and relief of symptoms of seasonal allergic rhinitis for children more than 15 years and adults	CHILD more than 15 years and ADULT: 10 mg daily at bedtime	A/KK

Generic Name	MDC	Indications	Dosage	Category
Montelukast Sodium 4 mg Oral Granules	R03DC03520F1001XX	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	A*
Montelukast Sodium 5 mg Tablet	R03DC03520T2001XX	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	A*
Morphine HCl 10 mg/5 ml Solution	N02AA01110L9901XX	For use in management of moderate to severe pain especially that associated with neoplastic disease	5 - 20 mg or more regularly every 4 hours in terminal pain	B
Morphine Sulphate 10 mg Controlled Release Tablet	N02AA01183T5001XX	Prolonged relief of severe pain associated with neoplastic disease; assists in procuring sleep where sleeplessness is due to pain or shock	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.	A
Morphine Sulphate 10 mg Immediate Release Tablet	N02AA01183T6002XX	Relief of moderate to severe pain (cancer patient)	5-10 mg every four hours. The dose may be increased according to needs	A*
Morphine Sulphate 10 mg Suppository	N02AA01183S2001XX	Relief of severe chronic pain (cancer patient)	15 - 30 mg regularly every 4 hours	A*
Morphine Sulphate 10 mg/ml Injection	N02AA01183P3001XX	For moderate to severe pain especially that associated with neoplastic disease	ADULT: 10 - 20 mg/kg or more SC or IM every 4 hours in terminal pain. CHILD: Up to 1 month: 0.15 mg/kg body weight; 1 - 12 months: 0.2 mg/kg body weight; 1 - 5 years: 2.5 - 5 mg ; 6 - 12 years: 5 - 10 mg	B
Morphine Sulphate 20 mg Suppository	N02AA01183S2002XX	Relief of severe chronic pain (cancer patient)	15 - 30 mg regularly every 4 hours	A*
Morphine Sulphate 30 mg Controlled Release Tablet	N02AA01183T5002XX	Prolonged relief of severe pain associated with neoplastic disease; assists in procuring sleep where sleeplessness is due to pain or shock	10 - 60 mg 12 hourly intervals, depend upon the severity of the pain	A
Morphine Sulphate 30 mg Suppository	N02AA01183S2003XX	Relief of severe chronic pain (cancer patient)	15 - 30 mg regularly every 4 hours	A*

Generic Name	MDC	Indications	Dosage	Category
Morphine Sulphate 5 mg Immediate Release Tablet	N02AA01183T6001XX	Relief of moderate to severe pain (cancer patient)	5-10 mg every four hours. The dose may be increased according to needs	A*
Morphine Sulphate 60 mg Controlled Release Tablet	N02AA01183T5003XX	Prolonged relief of severe pain associated with neoplastic disease; assists in procuring sleep where sleeplessness is due to pain or shock	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.	A
Moxifloxacin 0.5% Ophthalmic Solution	S01AX22110D2001XX	Treatment of conjunctivitis caused by susceptible organism	CHILD more than 1 year and ADULT: 1 drop to affected eye(s) 3 times daily for 7 days	A*
Moxifloxacin 400 mg Injection	J01MA14110P3001XX	Second line therapy for Severe Community Acquired Pneumonia (CAP) patients with co-morbidity or with recent antibiotic therapy, suspected infections of resistant pathogens including Streptococcus pneumoniae, Haemophilus influenzae & Mycoplasma pneumoniae.	IV or Oral: 400 mg once daily. The recommended total treatment duration for sequential administration (intravenous followed by oral therapy) is 7 to 14 days	A*
Moxifloxacin 400mg Tablet	J01MA14110T1001XX	Second line therapy for Severe Community Acquired Pneumonia (CAP) patients with co-morbidity or with recent antibiotic therapy, suspected infections of resistant pathogens including Streptococcus pneumoniae, Haemophilus influenzae & Mycoplasma pneumoniae.	IV or Oral: 400 mg once daily. The recommended total treatment duration for sequential administration (intravenous followed by oral therapy) is 7 to 14 days	A*
Multivitamin Drops	A11BA00901D5001XX	For prevention and treatment of vitamin deficiencies	INFANT less than 1 year: 1 ml daily	B
Multivitamin Injection	A11BA00901P3001XX	For prevention and treatment of vitamin deficiencies	Initially 2 - 4 pairs IV 4 - 8 hourly, reducing to 1 pair IV daily. For less serious cases, 1 pair IV 1 - 2 times daily or based on individual requirements	B
Multivitamin Syrup	A11BA00901L9001XX	For prevention and treatment of vitamin deficiencies	CHILD 5 ml daily or based on manufacturer	C+
Multivitamin Tablet	A11BA00901T1001XX	For prevention and treatment of vitamin deficiencies	1 - 2 tablets daily or based on individual requirements	B

Generic Name	MDC	Indications	Dosage	Category
Mupirocin 2% Cream	D06AX09000G1001XX	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	A
Mupirocin 2% Ointment	D06AX09000G5001XX	For MRSA infections only	ADULT and CHILD: Apply up to three times daily for up to 10 days	A
Mycophenolate Mofetil 250 mg Capsule	L04AA06236C1001XX	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 resistant or intolerant to cyclophosphamide therapy	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	A*
Mycophenolate Mofetil 500 mg tablet	L04AA06236T1002XX	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 resistant or intolerant to cyclophosphamide therapy	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	A*
Mycophenolate Sodium 180mg Tablet	L04AA06520T1001XX	Prophylaxis of acute transplant rejection in adult patients receiving allogenic renal transplant in combination with ciclosporin and corticosteroids	720 mg twice daily	A*
Mycophenolate Sodium 360mg Tablet	L04AA06520T1002XX	Prophylaxis of acute transplant rejection in adult patients receiving allogenic renal transplant in combination with ciclosporin and corticosteroids	720 mg twice daily	A*
Nalbuphine HCl 10 mg/ml Injection	N02AF02110P3001XX	Perioperative analgesia, for relief of moderate to severe pain	10 - 20 mg SC, IM or IV every 3 - 6 hours	B

Generic Name	MDC	Indications	Dosage	Category
Naloxone HCl 0.02 mg/ml Injection	V03AB15110P3001XX	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	0.005 - 0.01 mg/kg body weight repeated at intervals of 2 - 3 minutes according to the patient's needs by IM, IV or SC	B
Naloxone HCl 0.4 mg/ml Injection	V03AB15110P3002XX	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	B
Naltrexone HCl 50 mg Tablet	N07BB04110T1001XX	Adjunct in relapse prevention treatment in detoxified formerly opioid-dependant patients	Initial 25 mg may be increased to 50 mg. Maintenance: 350 mg weekly; administered as 50 mg daily. Dosing interval may be lengthened to improve compliance; 100 mg on alternate days or 150 mg every third day	A
Nandrolone Decanoate 25 mg/ml Injection	A14AB01135P3001XX	Anabolic therapy	ADULT: 25 - 50 mg every 3 weeks by IM. CHILD over 2 years: 25 - 50 mg every 3 to 4 weeks	A
Naproxen 250 mg Tablet	M01AE02000T1001XX	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	A/KK
Naproxen Sodium 275 mg Tablet	M01AE02520T1001XX	i) Rheumatic arthritis, osteoarthritis and alkylosing spondylitis ii) Acute gout iii) Muscular skeletal disorder and dysmenorrhoea	550 mg- 1100 mg in two divided doses	A
Neomycin 0.5% Cream	D06AX04256G1001XX	Infections of the skin due to susceptible organisms	Apply sparingly to affected area up to 3 times daily (For short term use, 1 - 2 weeks)	B

Generic Name	MDC	Indications	Dosage	Category
Neomycin 0.5% in Betamethasone 17-Valerate 0.01% Cream	D07CC01947G1001XX	Treatment of the following conditions where bacterial infection is present or likely to occur: eczemas, prurigo nodularis, psoriasis (excluding widespread plaque psoriasis), neurodermatoses, anal and genital intertrigo	Apply sparingly to affected area 2 - 3 times daily. (May cause sensitisation to neomycin. Use with caution)	B
Neomycin 0.5% in Betamethasone 17-Valerate 0.01% Ointment	D07CC01947G5001XX	Treatment of the following conditions where bacterial infection is present or likely to occur: eczemas, prurigo nodularis, psoriasis (excluding widespread plaque psoriasis), neurodermatoses, anal and genital intertrigo	Apply sparingly to affected area 2 to 3 times daily. (May cause sensitisation to Neomycin. Use with caution)	B
Neomycin 0.5% in Betamethasone 17-Valerate 0.1% Cream	D07CC01947G1002XX	Treatment of the following conditions where bacterial infection is present or likely to occur: eczemas, prurigo nodularis, psoriasis (excluding widespread plaque psoriasis), neurodermatoses, anal and genital intertrigo	Apply sparingly to affected area 2 - 3 times daily (May cause sensitisation to neomycin. Use with caution)	A
Neomycin 0.5% in Betamethasone 17-Valerate 0.1% Ointment	D07CC01947G5002XX	Treatment of the following conditions where bacterial infection is present or likely to occur: eczemas, prurigo nodularis, psoriasis (excluding widespread plaque psoriasis), neurodermatoses, anal and genital intertrigo	Apply sparingly to affected area 2 to 3 times daily. (May cause sensitisation to neomycin. Use with caution)	A
Neomycin 0.5% Ointment	D06AX04256G5001XX	Infections of the skin due to susceptible organisms	Apply sparingly to affected area up to 3 times daily (For short term use, 1- 2 weeks)	B
Neomycin with Polymyxin B Sulphate and Gramicidin Eye Drops	S01AA30990D2001XX	Eye infections that require a broad spectrum antibiotic	1 - 2 drops in the affected eye 2 - 4 times daily. In severe infections : 1 - 2 drops every 15 - 30 minutes	A

Generic Name	MDC	Indications	Dosage	Category
Neostigmine Methylsulphate 2.5 mg/ml Injection	N07AA01183P3002XX	i) Myasthenia gravis ii) Reversal of non-depolarising neuromuscular blockade	i) ADULT: 1 - 2.5 mg at suitable intervals by SC, IM or IV. Usual total daily dose 5 - 20 mg. CHILD: 200 - 500 mcg at suitable intervals throughout the day. NEONATE: 50 - 250 mcg every 4 hours ii) By IV injection over 1 minute, 50 - 70 mcg/kg (maximum 5 mg) after or with atropine sulphate 0.6 - 1.2 mg	B
Netilmicin Sulphate 100 mg/2 ml Injection	J01GB07183P3002XX	Systemic infections	ADULT: 4 - 6.5 mg/kg/day IM or IV in 2 - 3 equally divided doses for 7 - 14 days. Maximum: 7.5 mg/kg/day. CHILD: 5 - 7.5 mg/kg/day 8 - 12 hourly depending on gestation and age. Maximum: 7.5 mg/kg/day	A
Netilmicin Sulphate 150 mg/2 ml Injection	J01GB07183P3003XX	Systemic infections	ADULT: 4 - 6.5 mg/kg/day IM or IV in 2 - 3 equally divided doses for 7 - 14 days. Maximum: 7.5 mg/kg/day. CHILD: 5 - 7.5 mg/kg/day 8 - 12 hourly depending on gestation and age. Maximum: 7.5 mg/kg/day	A
Netilmicin Sulphate 50 mg/2 ml Injection	J01GB07183P3001XX	Systemic infections	ADULT: 4 - 6.5 mg/kg/day IM or IV in 2 - 3 equally divided doses for 7 - 14 days. Maximum: 7.5 mg/kg/day. CHILD: 5 - 7.5 mg/kg/day 8 - 12 hourly depending on gestation and age. Maximum: 7.5 mg/kg/day	A
Nevirapine 200 mg Tablet	J05AG01000T1001XX	Treatment of HIV-1 infection in combination with other antiretroviral agents	Combined with other antiretrovirals: 200 mg once daily for the 1st 14 days; up to 200 mg twice daily if rash does not develop. Re-introduce at a lower dose for the 1st 14 days if treatment is interrupted for >7 days,necessitate reintroduction at a lower dose for the first 14 days.	A/KK

Generic Name	MDC	Indications	Dosage	Category
Nicotine 10 mg/ 16 hour Transdermal Patch	N07BA01000M7005XX	For the treatment of tobacco dependence by relieving nicotine withdrawal symptoms, thereby facilitating smoking cessation in smokers motivated to quit.	Adult over 18 years old: 15 mg patch on waking (usually in the morning) and remove 16 hours later (usually at bedtime) for 8 weeks, then 10 mg patch daily for 2 weeks followed by one 5 mg patch daily for another 2 weeks. Apply to dry non-hairy skin site. Application limited to 16 hours in a 24-hr period in each case. Review at 3 months.	A/KK
Nicotine 14mg/24 hour Transdermal Patch	N07BA01000M7002XX	For the treatment of tobacco dependence by relieving nicotine withdrawal symptoms, thereby facilitating smoking cessation in smokers motivated to quit.	Apply 1 patch daily for 24 hours as in the product leaflet	A/KK
Nicotine 15 mg/ 16 hour Transdermal Patch	N07BA01000M7006XX	For the treatment of tobacco dependence by relieving nicotine withdrawal symptoms, thereby facilitating smoking cessation in smokers motivated to quit.	Adult over 18 years old: 15 mg patch on waking (usually in the morning) and remove 16 hours later (usually at bedtime) for 8 weeks, then 10 mg patch daily for 2 weeks followed by one 5 mg patch daily for another 2 weeks. Apply to dry non-hairy skin site. Application limited to 16 hours in a 24-hr period in each case. Review at 3 months.	A/KK
Nicotine 2 mg Gum	N07BA01000M9901XX	For the treatment of tobacco dependence by relieving nicotine withdrawal symptoms, thereby facilitating smoking cessation in smokers motivated to quit.	Smokes ≤ 20 sticks/day, chew 2mg gum. Smokes ≥ 20 sticks/day,chew 4 mg gum. (MAX 24 pieces /day for up to 12 week.)	A/KK
Nicotine 21mg/24 hour Transdermal Patch	N07BA01000M7003XX	For the treatment of tobacco dependence by relieving nicotine withdrawal symptoms, thereby facilitating smoking cessation in smokers motivated to quit.	Apply 1 patch daily for 24 hours as in the product leaflet.	A/KK
Nicotine 4 mg Gum	N07BA01000M9902XX	For the treatment of tobacco dependence by relieving nicotine withdrawal symptoms, thereby facilitating smoking cessation in smokers motivated to quit.	Smokes ≤ 20 sticks/day, chew 2mg gum. Smokes ≥ 20 sticks/day,chew 4 mg gum. (MAX 24 pieces /day for up to 12 week.)	A/KK

Generic Name	MDC	Indications	Dosage	Category
Nicotine 5 mg/ 16 hour Transdermal Patch	N07BA01000M7004XX	For the treatment of tobacco dependence by relieving nicotine withdrawal symptoms, thereby facilitating smoking cessation in smokers motivated to quit.	Adult over 18 years old: 15 mg patch on waking (usually in the morning) and remove 16 hours later (usually at bedtime) for 8 weeks, then 10 mg patch daily for 2 weeks followed by one 5 mg patch daily for another 2 weeks. Apply to dry non-hairy skin site. Application limited to 16 hours in a 24-hr period in each case. Review at 3 months.	A/KK
Nicotine 7mg/24 hour Transdermal Patch	N07BA01000M7001XX	For the treatment of tobacco dependence by relieving nicotine withdrawal symptoms, thereby facilitating smoking cessation in smokers motivated to quit.	Apply 1 patch daily for 24 hours as in the product leaflet.	A/KK
Nicotinic Acid 50 mg Tablet	A11HA01000T1001XX	For prophylaxis and treatment of Vitamin B3 deficiency	Prophylactic: 15 - 30 mg daily. Therapeutic: 50 - 250 mg daily. Maximum single dose: 200 mg. Maximum dose in 24 hours: 800 mg	B
Nicotinic Acid 500 mg Tablet	C10AD02000T1001XX	Hyperlipidaemia	100 - 200 mg 3 times daily, gradually increased over 2 - 4 weeks to 1 - 2 g 3 times daily with or after meals. CHILD: 100 - 250 mg/day in 3 divided doses with meals, increase 100 mg/day weekly or 250 mg/day every 2 - 3 weeks as tolerated. Maximum: 10 mg/kg/day	B
Nifedipine 10 mg Capsule	C08CA05000C1001XX	Hypertension	10 - 30 mg 3 times daily. Maximum: 120 - 180 mg per day	B
Nifedipine 10 mg Tablet	C08CA05000T1001XX	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.	B

Generic Name	MDC	Indications	Dosage	Category
Nilotinib 150mg capsule	L01XE08110T1001XX	For the treatment of adult patients with newly diagnosed Philadelphia chromosome positive chronic myelogenous leukemia in the chronic phase (CP).	300mg twice daily. Dose adjustments or modifications:For neutropenia & thrombocytopenia	A*
Nilotinib 200 mg Capsule	L01XE08110C1001XX	Treatment of chronic phase and accelerated phase Philadelphia chromosome positive chronic myelogenous leukaemia (CML) in adults who: i) Failed imatinib ie no cytogenic response and no haematological response by 12 months ii) Have molecular resistance to Imatinib as shown by molecular mutation studies iii) Are intolerant to Imatinib	400 mg twice daily, 12 hours apart. No food should be taken two hours before and 1 hour after taking the dose	A*
Nimodipine 10 mg/50 ml Infusion Solution	C08CA06000P9901XX	Prophylaxis & treatment of ischaemic neurological deficits caused by cerebral vasospasm following subarachnoid haemorrhage of aneurysmal origin	IV infusion of 1 mg/hour for a period of 2 hours (about 15 mcg/kg/hour). IV therapy should be started no later than 4 days after haemorrhage & continue for up to 10 - 14 days	A*
Nimodipine 30 mg Tablet	C08CA06000T1001XX	Prophylaxis & treatment of ischaemic neurological deficits caused by cerebral vasospasm following subarachnoid haemorrhage of aneurysmal origin	360 mg daily in divided doses for 7 days	A*
Nitrazepam 5 mg Tablet	N05CD02000T1001XX	Epilepsy (infantile spasms)	5 - 10 mg at bedtime. ELDERLY or debilitated 2.5 - 5 mg. CHILD not recommended. Increasing slowly according to response	B
Nitrofurantoin 100 mg Tablet	J01XE01000T1002XX	Uncomplicated lower urinary tract infections	Acute uncomplicated urinary tract infections Adult: 50-100 mg 4 times daily for 7 days. Dual-release preparation: 100 mg bid. Child: >3 mth and older children: 3 mg/kg daily in 4 divided doses. Prophylaxis of uncomplicated urinary tract infections Adult: 50-100 mg at bedtime. Child: >3 mth and older children: 1 mg/kg once daily.	B

Generic Name	MDC	Indications	Dosage	Category
Nonacog alfa 1000 IU injection	B02BD09000P4003XX	Treatment and prophylaxis of bleeding in patients with haemophilia B (congenital factor IX deficiency)	Number of factor IX units required = body weight (kg) x desired factor IX increase (% or units/dL) x reciprocal of observed recovery (units/kg per units/dL). Average dose for secondary prophylaxis for previously treated adult patients (PTP) was 40 units/kg (range 13 to 78 units/kg) at intervals of 3 to 4 days	A*
Nonacog alfa 2000 IU injection	B02BD09000P4004XX	Treatment and prophylaxis of bleeding in patients with haemophilia B (congenital factor IX deficiency)	Number of factor IX units required = body weight (kg) x desired factor IX increase (% or units/dL) x reciprocal of observed recovery (units/kg per units/dL). Average dose for secondary prophylaxis for previously treated adult patients (PTP) was 40 units/kg (range 13 to 78 units/kg) at intervals of 3 to 4 days	A*
Nonacog alfa 250 IU injection	B02BD09000P4001XX	Treatment and prophylaxis of bleeding in patients with haemophilia B (congenital factor IX deficiency)	Number of factor IX units required = body weight (kg) x desired factor IX increase (% or units/dL) x reciprocal of observed recovery (units/kg per units/dL). Average dose for secondary prophylaxis for previously treated adult patients (PTP) was 40 units/kg (range 13 to 78 units/kg) at intervals of 3 to 4 days	A*
Nonacog alfa 500 IU injection	B02BD09000P4002XX	Treatment and prophylaxis of bleeding in patients with haemophilia B (congenital factor IX deficiency)	Number of factor IX units required = body weight (kg) x desired factor IX increase (% or units/dL) x reciprocal of observed recovery (units/kg per units/dL). Average dose for secondary prophylaxis for previously treated adult patients (PTP) was 40 units/kg (range 13 to 78 units/kg) at intervals of 3 to 4 days	A*

Generic Name	MDC	Indications	Dosage	Category
Noradrenaline Acid Tartrate (Norepinephrine Bitartrate) 1 mg/ml Injection	C01CA03123P3001XX	Septic shock and shock where peripheral vascular resistance is low	Infuse and titrate to desired pressure response. Range: 0.05 - 0.5 mcg/kg/minute	A
Norethisterone 0.35 mg Tablet	G03AC01000T1001XX	Contraception	1 tablet daily starting on the first day of the menstrual bleeding	C+
Norethisterone Enanthate 200 mg/ml Injection	G03AC01257P3001XX	Contraception	By deep IM injection only. First injection is within first 5 days of the cycle. The next 3 injections are given at 8 weeks interval after which the injection interval should be extended to 12 weeks	B
Norfloxacin 0.3% Eye Drops	S01AX12000D2001XX	Superficial infections of the eye (Pseudomonas aeruginosa and MRSA) and its adnexae	ADULT and CHILD more than 1 year : 1-2 drops 4 times daily. First day : 1 - 2 drops two hourly during waking hours (depending on severity)	A*
Nystatin 100,000 units/g Cream	D01AA01000G1001XX	Prevention and treatment of cutaneous infections caused by Candida albicans	Apply liberally to affected area twice daily or as required. After lesion has disappeared continue treatment for 10 days to prevent relapses. Nail infection: Cut nails as short as possible. Apply cream once daily until growth of new nail has set in	C
Nystatin 100,000 units/g Ointment	D01AA01000G5001XX	Prevention and treatment of cutaneous or mucocutaneous infections caused by Candida albicans	Apply liberally to affected area twice daily or as required. After lesion has disappeared continue treatment for 10 days to prevent relapses. Nail infection: Cut nails as short as possible. Apply cream once daily until growth of new nail has set in	C
Nystatin 100,000 units/ml Suspension	A07AA02000L8001XX	Prevention and treatment of candidiasis of the skin and mucous membranes, protection against candidas overgrowth during antimicrobial /corticosteroid therapy and as selective decontamination regimens	NEWBORN: 50,000-100,000 units daily. CHILD up to 5 years: 100,000 -500,000 units 6 hourly. CHILD up to 6-12 years and ADULT: 500,000-1,000,000 units 3 to 4 times daily	B

Generic Name	MDC	Indications	Dosage	Category
Nystatin 500,000 units Tablet	A07AA02000T1001XX	Prevention and treatment of candidiasis of the skin and mucous membranes, protection against candidas overgrowth during antimicrobial /corticosteroid therapy and as selective decontamination regimens	ADULT: 500,000 -1,000,000 units 6 hourly, according to severity of infections. CHILD: 100,000-500,000 units 6 hourly	B
Octreotide 0.05 mg/ml Injection	H01CB02122P3002XX	i) Acromegaly ii) Treatment of patients with symptoms associated with gastro-entero-pancreatic endocrine tumours iii) Carcinoid tumours with features of the carcinoid syndrome, VIPomas, glucagonomas, gastrinomas/Zollinger-Ellison syndrome, GRFomas, insulinomas iv) Prevention of complications following pancreatic surgery v) Emergency management of bleeding gastro-eosophageal varices in patients with cirrhosis	i, ii and iii) Initially 0.005 - 0.1 mg SC 1 - 2 times daily, increase gradually up to 0.1 - 0.2 mg 3 times daily iv) 0.1 mg 3 times daily for 7 consecutive days, starting on the day of operation, at least 1 hour before laparotomy v) 25 mcg/hour for 5 days by continous IV infusion	A
Octreotide 0.1 mg/ml Injection	H01CB02122P3001XX	i) Acromegaly ii) Treatment of patients with symptoms associated with gastro-entero-pancreatic endocrine tumours iii) Carcinoid tumours with features of the carcinoid syndrome, VIPomas, glucagonomas, gastrinomas/Zollinger-Ellison syndrome, GRFomas, insulinomas iv) Prevention of complications following pancreatic surgery v) Emergency management of bleeding gastro-eosophageal varices in patients with cirrhosis	i, ii and iii) Initially 0.005 - 0.1 mg SC 1 - 2 times daily, increase gradually up to 0.1 - 0.2 mg 3 times daily iv) 0.1 mg 3 times daily for 7 consecutive days, starting on the day of operation, at least 1 hour before laparotomy v) 25 mcg/hour for 5 days by continous IV infusion	A

Generic Name	MDC	Indications	Dosage	Category
Octreotide Acetate 20 mg Injection	H01CB02122P2001XX	i) Adjunctive treatment for active acromegaly (second/third line therapy in whom surgery or radiotherapy is inappropriate or ineffective- based on level of growth hormone and high IGF-1 and residual pituitary tumor). ii) Treatment of symptoms associated with functional gastro-entero-pancreatic endocrine tumours. iii) Carcinoid tumours with features of the carcinoid syndrome, VIPomas, Glucagonomas, Gastrinomas/Zollinger-Ellison syndrome, Insulinomas, for pre-operative control of hypoglycemia and for maintenance therapy, GRFomas.	10 - 30 mg every 4 weeks as deep intragluteal injection	A*
Octreotide Acetate 30 mg Injection	H01CB02122P2002XX	i) Adjunctive treatment for active acromegaly (second/third line therapy in whom surgery or radiotherapy is inappropriate or ineffective- based on level of growth hormone and high IGF-1 and residual pituitary tumor). ii) Treatment of symptoms associated with functional gastro-entero-pancreatic endocrine tumours. iii) Carcinoid tumours with features of the carcinoid syndrome, VIPomas, Glucagonomas, Gastrinomas/Zollinger-Ellison syndrome, Insulinomas, for pre-operative control of hypoglycemia and for maintenance therapy, GRFomas.	10 - 30 mg every 4 weeks as deep intragluteal injection	A*
Ofloxacin 0.3% Otic Solution	S02AA00000D1001XX	Acute otitis media with tympanostomy tubes, chronic suppurative otitis media with perforated tympanic membranes and 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	A/KK

Generic Name	MDC	Indications	Dosage	Category
Ofloxacin 100 mg Tablet	J01MA01000T1001X X	i) As second-line treatment of leprosy ii) As second-line treatment for tuberculosis and multidrug resistant tuberculosis (MDR-TB) iii) Sequential therapy for UTI and pyelonephritis	i) 400 mg/day ii) 400 mg twice daily iii) 200 mg twice daily	A
Ofloxacin 200 mg Injection	J01MA01000P4001X X	Sequential therapy for UTI and pyelonephritis	200 mg IV twice daily for 3 - 5 days followed with 200 mg tablet twice daily for 3 - 5 days as maintenance dose (if necessary)	A
Olanzapine 10 mg Disintegrating Tablet	N05AH03000T4002X X	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	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	A*
Olanzapine 10 mg Tablet	N05AH03000T1002X X	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	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	A*
Olanzapine 5 mg Tablet	N05AH03000T1001X X	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	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	A*

Generic Name	MDC	Indications	Dosage	Category
Olanzapine 5mg Disintegrating Tablet	N05AH03000T4001XX	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	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	A*
Olive Oil Ear Drops	S02DC00000D1001XX	Impacted wax softener	3 - 4 drops 3 - 4 or as directed	C
Olopatadine hydrochloride ophthalmic solution 0.2%	S01GX09110D2002XX	Temporary prevention of ocular itching due to allergic conjunctivitis	One drop in each affected eye once a day	A*
Omalizumab 150 mg (powder and solvent for solution)	R03DX05000P3001XX	i) For adults and adolescents (≥12 years), for severe persistent allergic asthma whose symptoms are inadequately controlled with inhaled corticosetroids ii) For Children (6 to <12 years of age): As add-on therapy to improve asthma control with severe persistent allergic asthma who have positive skin test or in vitro reactivity to a perennial aero allergen and frequent daytime symptoms or night-time awakenings and who have had multiple documented severe asthma exacerbations despite daily high-dose inhaled corticosteroids, plus a long-acting inhaled beta 2 agonist	i) Adult & adolescent ≥12 yr, 150-375 mg SC every 2-4 wk, according to body wt & baseline serum total IgE level.. For subcutaneous administration only. Do not administer by the intravenous or intramuscular route. ii) Appropriate dose and dosing frequency of omalizumab is determined by baseline IgE (IU/ml), measured before the start of treatment, and body weight (kg). Prior to initial dosing, patients should have their IgE level determined for their dose assignment. Based on these measurements 150-375mg in 1 -3 injections may be needed for each administration. Patients whose baseline IgE levels or body weight in kilograms are outside the limits of the dosing table should not be given omalizumab. For subcutaneous administration only.	A*

Generic Name	MDC	Indications	Dosage	Category
Omeprazole 10 mg Capsule	A02BC01000C1001XX	Only for : i)Reflux oesophagitis ii)For eradication of Helicobacter pylori infection iii)Benign peptic ulcer not responding to conventional therapy iv)Zollinger-Ellison 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	A/KK
Omeprazole 20 mg Capsule	A02BC01000C1002XX	Only for : i)Reflux oesophagitis ii)For eradication of Helicobacter pylori infection iii)Benign peptic ulcer not responding to conventional therapy iv)Zollinger-Ellison 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	A/KK
Omeprazole 40 mg Injection	A02BC01000P4001XX	i) Reflux oesophagitis, eradication of H. Pylori infection, benign peptic ulcer not responding to conventional therapy, Zollinger-Ellison 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	A*

Generic Name	MDC	Indications	Dosage	Category
Ondansetron 2 mg/ml Injection	A04AA01110P3001XX	i)Prevention of nausea and vomiting induced by chemotherapy and radiotherapy ii)Postoperative nausea and vomiting	i)8 mg given by IV infusion over 15 minutes or by IM immediately before treatment followed by 8 mg orally every 12 hours for up to 5 days. CHILD 5 mg/m2 body surface IV over 15 minutes immediately before chemotherapy followed by 4 mg orally every 12 hours for up to 5 days ii)Prevention : 4 mg given by IV at induction of anaesthesia. CHILD over 2 years, 100 mcg/kg (max 4mg) by slow IV before, during or after induction of anaesthesia. Treatment of postoperative: 4 mg by IM or slow. CHILD over 2 years 100 mcg/kg (maximum 4mg) by slow IV	A
Ondansetron 4 mg Tablet	A04AA01110T1001XX	i)Prevention of nausea and vomiting induced by chemotherapy and radiotherapy ii) Postoperative nausea and vomiting	i)8 mg 1 - 2 hours before treatment then 8 mg every 12 hours for up to 5 days. CHILD, treatment by infusion followed by 4 mg by mouth every 12 hours for up to 5 days ii)Prevention of postoperative nausea and vomiting, 16 mg 1 hour before anaesthesia or 8 mg 1 hour before anaesthesia followed by 8 mg at intervals of 8 hours for a further 2 doses	A
Ondansetron 8 mg Tablet	A04AA01110T1002XX	i)Prevention of nausea and vomiting induced by chemotherapy and radiotherapy ii) Postoperative nausea and vomiting	i)8 mg 1 - 2 hours before treatment then 8 mg every 12 hours for up to 5 days. CHILD, treatment by infusion followed by 4 mg by mouth every 12 hours for up to 5 days ii)Prevention of postoperative nausea and vomiting, 16 mg 1 hour before anaesthesia or 8 mg 1 hour before anaesthesia followed by 8 mg at intervals of 8 hours for a further 2 doses	A

Generic Name	MDC	Indications	Dosage	Category
Ondansetron 8 mg/4ml Injection	A04AA01110P3002XX	i)Prevention of nausea and vomiting induced by chemotherapy and radiotherapy ii)Postoperative nausea and vomiting	i)8 mg given by IV infusion over 15 minutes or by IM immediately before treatment followed by 8 mg orally every 12 hours for up to 5 days. CHILD 5 mg/m2 body surface IV over 15 minutes immediately before chemotherapy followed by 4 mg orally every 12 hours for up to 5 days ii)Prevention : 4 mg given by IV at induction of anaesthesia. CHILD over 2 years, 100 mcg/kg (max 4mg) by slow IV before, during or after induction of anaesthesia. Treatment of postoperative: 4 mg by IM or slow. CHILD over 2 years 100 mcg/kg (maximum 4mg) by slow IV	A
Oral Rehydration Salt	A07CA00905F2101XX	Replacement of fluid and electrolytes loss in diarrhoea	ADULT: 200 - 400 ml (1 - 2 sachets) for every loose motion. CHILD: 200 ml (1 sachet) for every loose motion. In severe dehydration 100 ml/kg for 3 - 4 hours. INFANT: 1 - 1.5 times their usual feed volume (50 ml per stool for small infant)	C
Orphenadrine 100 mg Tablet	M03BC01110T1001XX	Painful muscle spasm	Initially 150 mg daily in divided doses. Maximum: 400 mg daily	A
Ortho-phthalaldehyde 0.55% Solution	V07AV00000L9909XX	High level disinfectant for sensitive endoscopes or semi-critical reusable medical devices	Manual reprocessing, at least 12 minute immersion time at room temperature (20 degree celcius) is required. Automatic endoscope reprocessor, at least 5 minute immersion time at a minimum of 25 degree celcius is required	A

Generic Name	MDC	Indications	Dosage	Category
Oxaliplatin 50 mg Injection	L01XA03000P4001XX	Only for patients with colorectal cancer who: i) have relapsed within 6 months after the end of adjuvant chemotherapy with 5-fluorouracil-based regime ii) have progressive disease despite 5-fluorouracil chemotherapy for advanced disease iii) good performance status (WHO of 2 or less). The treatment must be given in a tertiary oncology centre or have clearance in writing by an oncologist	85 mg/m2 IV repeated every 2 weeks	A*
Oxybutynin Chloride 5 mg Tablet	G04BD04110T1001XX	For the relief of symptoms of bladder instability associated with voiding in patients with uninhibited neurogenic or reflex neurogenic bladder (ie urgency, frequency, urinary leakage, urge incontinence, dysuria)	ADULT: Initially 5 mg 2 - 3 times daily increased if necessary to maximum 5 mg 4 times daily. ELDERLY: Initially 2.5 - 3 mg twice daily, increased to 5 mg twice daily according to response and tolerance. CHILD over 5 years, neurogenic bladder instability: 2.5 - 3 mg twice daily increased to 5 mg twice daily to maximum 3 times daily	A*
Oxycodone HCl 10 mg Immediate Release Capsules	N02AA05110C1002XX	i)As a second line drug in the management of opioid responsive, moderate to severe chronic cancer pain ii)As a step-down analgesic drug in post-operative procedures (Initiated by palliative medicine physicians, oncologists, anaesthesiologists, haematologists and pain specialists only)	Initially 5 mg every 4 to 6 hours, increased if necessary according to severity of pain, usual max. 400 mg daily, but some patients may require higher doses	A*
Oxycodone HCl 10 mg Prolonged Release Tablet	N02AA05110T5001XX	Management of moderate to severe chronic cancer pain non-responsive to morphine (in accordance with WHO step-wise ladder of chronic pain management) [Initiated by Chronic Pain Specialist only]	ADULT, ELDERLY and CHILDREN more than 18 years, opioid-naive patients: 10 mg 12 hourly. Renal or hepatic impairment: 5 mg 12 hourly. Titrate dose carefully, as frequently as once a day if necessary, to achieve pain relief	A*

Generic Name	MDC	Indications	Dosage	Category
Oxycodone HCl 20 mg Immediate Release Capsules	N02AA05110C1003XX	i)As a second line drug in the management of opioid responsive, moderate to severe chronic cancer pain ii)As a step-down analgesic drug in post-operative procedures (Initiated by palliative medicine physicians, oncologists, anaesthesiologists, haematologists and pain specialists only)	Initially 5 mg every 4 to 6 hours, increased if necessary according to severity of pain, usual max. 400 mg daily, but some patients may require higher doses	A*
Oxycodone HCl 20 mg Prolonged Release Tablet	N02AA05110T5002XX	Management of moderate to severe chronic cancer pain non-responsive to morphine (in accordance with WHO step-wise ladder of chronic pain management) [Initiated by Chronic Pain Specialist only]	ADULT, ELDERLY and CHILDREN more than 18 years, opioid-naïve patients: 10 mg 12 hourly. Renal or hepatic impairment: 5 mg 12 hourly. Titrate dose carefully, as frequently as once a day if necessary, to achieve pain relief	A*
Oxycodone HCl 40 mg Prolonged Release Tablet	N02AA05110T5003XX	Management of moderate to severe chronic cancer pain non-responsive to morphine (Initiated by palliative medicine physicians, oncologists, anaesthesiologists, haematologists and pain specialists only)	Initially, 10 mg every 12 hours, increased if necessary according to severity of pain, usual max. 200 mg every 12 hours, but some patients may require higher doses	A*
Oxycodone HCl 5 mg Immediate Release Capsules	N02AA05110C1001XX	i)As a second line drug in the management of opioid responsive, moderate to severe chronic cancer pain ii)As a step-down analgesic drug in post-operative procedures (Initiated by palliative medicine physicians, oncologists, anaesthesiologists, haematologists and pain specialists only)	Initially 5 mg every 4 to 6 hours, increased if necessary according to severity of pain, usual max. 400 mg daily, but some patients may require higher doses	A*

Generic Name	MDC	Indications	Dosage	Category
Oxycodone Hydrochloride 10 mg/ml Injection	N02AA05110P3001XX	For the treatment of moderate to severe pain in patients with cancer and post-operative pain. For the treatment of severe pain requiring the use of a strong opioid.	Adults over 18 years: The following starting doses are recommended. A gradual increase in dose may be required if analgesia is inadequate or if pain severity increases. IV Bolus: Dilute to 1 mg/ml in 0.9% saline, 5% dextrose or water for injections. Administer a bolus dose of 1 to 10 mg slowly over 1-2 minutes. Doses should not be administered more frequently than every 4 hours. IV Infusion: Dilute to 1 mg/ml in 0.9% saline, 5% dextrose or water for injections. A starting dose of 2 mg/hour is recommended. IV PCA: Dilute to 1 mg/ml in 0.9% saline, 5% dextrose or water for injections. Bolus doses of 0.03 mg/kg should be administered with a minimum lock-out time of 5 minutes. SC Bolus: Use as 10 mg/ml concentration. A starting dose of 5 mg is recommended, repeated at 4-hourly intervals as required. SC Infusion: Dilute in 0.9% saline, 5% dextrose or water for injections if required. A starting dose of 7.5 mg/day is recommended in opioid naïve patients, titrating gradually according to symptom control. Cancer patients transferring from oral oxycodone may require much higher doses (see below). Transferring patients between oral and parenteral oxycodone: The dose should be based on the following ratio: 2 mg of oral oxycodone is equivalent to 1 mg of parenteral oxycodone. It must be emphasised that this is a guide to the dose required.Inter-patient	A*

Generic Name	MDC	Indications	Dosage	Category
			variability requires that each patient is carefully titrated to the appropriate dose.	
Oxycodone Hydrochloride 10mg and Naloxone Hydrochloride Dihydrate 5mg Tablet	N02AA55900T1002XX	The management of moderate to severe chronic pain unresponsive to non-narcotic analgesics. The opioid antagonist naloxone in the fixed combination is added to counteract and/or prevent opioid-induced constipatio. For pain specialist only	Adults and paediatric patients from 18 years of age: The usual starting dose for opioid-naïve patients or patients presenting with moderate to severe chronic pain uncontrolled by weaker opioids is one tablet 10mg/5mg at 12 hourly intervals, or one tablet 5mg/2.5mg 12-hourly for patients with mild hepatic impairment and patients with renal impairment. The dose should then be cautiously titrated, as frequently as every 1-2 days if necessary, to achieve pain relief.	A*

Generic Name	MDC	Indications	Dosage	Category
Oxycodone Hydrochloride 20mg and Naloxone Hydrochloride Dihydrate 10mg Tablet	N02AA55900T1003XX	The management of moderate to severe chronic pain unresponsive to non-narcotic analgesics. The opioid antagonist naloxone in the fixed combination is added to counteract and/or prevent opioid-induced constipatio. For pain specialist only	Adults and paediatric patients from 18 years of age: The usual starting dose for opioid-naïve patients or patients presenting with moderate to severe chronic pain uncontrolled by weaker opioids is one tablet 10mg/5mg at 12 hourly intervals, or one tablet 5mg/2.5mg 12-hourly for patients with mild hepatic impairment and patients with renal impairment. The dose should then be cautiously titrated, as frequently as every 1-2 days if necessary, to achieve pain relief.	A*
Oxycodone Hydrochloride 40mg and Naloxone Hydrochloride Dihydrate 20mg Tablet	N02AA55900T1004XX	The management of moderate to severe chronic pain unresponsive to non-narcotic analgesics. The opioid antagonist naloxone in the fixed combination is added to counteract and/or prevent opioid-induced constipation. For pain specialist only	Adults and paediatric patients from 18 years of age: The usual starting dose for opioid-naïve patients or patients presenting with moderate to severe chronic pain uncontrolled by weaker opioids is one tablet 10mg/5mg at 12 hourly intervals, or one tablet 5mg/2.5mg 12-hourly for patients with mild hepatic impairment and patients with renal impairment. The dose should then be cautiously titrated, as frequently as every 1-2 days if necessary, to achieve pain relief.	A*

Generic Name	MDC	Indications	Dosage	Category
Oxycodone Hydrochloride 5 mg and Naloxone Hydrochloride Dihydrate 2.5mg Tablet	N02AA55900T1001XX	The management of moderate to severe chronic pain unresponsive to non-narcotic analgesics. The opioid antagonist naloxone in the fixed combination is added to counteract and/or prevent opioid-induced constipation. For pain specialist only	Adults and paediatric patients from 18 years of age: The usual starting dose for opioid-naïve patients or patients presenting with moderate to severe chronic pain uncontrolled by weaker opioids is one tablet 10mg/5mg at 12 hourly intervals, or one tablet 5mg/2.5mg 12-hourly for patients with mild hepatic impairment and patients with renal impairment. The dose should then be cautiously titrated, as frequently as every 1-2 days if necessary, to achieve pain relief.	A*
Oxymetazoline HCl 0.01% Nasal Drops	R01AA05110D6003XX	Acute cold, paranasal sinusitis, syringitis, otitis media.	Newborn (up to 4 weeks): 1 drop. Infant (1 - 12 month): 1 - 2 drop. Doses to be given twice or three times daily	A*
Oxymetazoline HCl 0.025% (Paediatric) Nasal Drops	R01AA05110D6001XX	Acute colds, paranasal sinusitis and otitis media	1 - 2 drops twice daily in each nostril for child more than 1 year	A/KK
Oxymetazoline HCl 0.025% (Paediatric) Nasal Spray	R01AA05110A4101XX	Acute colds, paranasal sinusitis and otitis media	2 - 3 sprays into each nostril twice daily for child more than 1 year	A
Oxymetazoline HCl 0.05% (Adult) Nasal Drops	R01AA05110D6002XX	Acute colds, paranasal sinusitis and otitis media	1 - 2 drops twice daily in each nostril	A/KK
Oxymetazoline HCl 0.05% (Adult) Nasal Spray	R01AA05110A4102XX	Acute colds, paranasal sinusitis and otitis media	2 - 3 sprays into each nostril twice daily, maximum 6 sprays per nostril/day	A
Oxymetholone 50 mg Tablet	A14AA05000T1001XX	Anaemias caused by the administration of myelotoxic drugs, treatment of AIDS-wasting syndrome	ADULT and CHILD: 1 - 5 mg/kg daily in one daily dose. Usual effective dose 1 - 2 mg/kg/day, given for a minimum trial of 3 - 6 months because response may be delayed	A
Oxytetracycline with Polymyxin B Sulphate Eye Ointment	S01AA30947G5101XX	Conjunctivitis, dacryocystitis, blepharoconjunctivitis, keratitis, trachoma, blepharitis, pre-op prophylaxis against infection	Apply into the conjunctival sac 4 times daily	B

Generic Name	MDC	Indications	Dosage	Category
Oxytocin 10 units/ml Injection	H01BB02000P3001XX	Induction of labour	IV: 0.5 - 1 milliunits/minute; gradually increase dose in increments of 1 - 2 milliunits/minute until desired contraction pattern is established; dose may be decreased after desired frequency of contractions is reached and labor has progressed to 5 - 6 cm dilation	B
Oxytocin 5 units & Ergometrine Maleate 0.5 mg/ml Injection	G02AC01900P3001XX	i) Prevention and treatment of post partum haemorrhage ii) 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	C+
Paclitaxel 100 mg/16.6 ml Injection	L01CD01000P3002XX	i) Treatment of recurrent breast cancer, after failure of anthracycline-based chemotherapy ii) Primary adjuvant therapy in advanced ovarian cancer in combination with cisplatin iii) Treatment of locally advanced or metastatic non-small cell lung cancer (NSCLC) in chemonaive patients in combination with platinum compounds	i) 175 mg/m2 IV over 3 hours every 3 weeks ii) 175 mg/m2 IV over 3 hour followed by cisplatin 75 mg/m2 in every 3 weeks or 135 mg/m2 IV over 24 hours followed by cisplatin 75 mg/m2 every 3 weeks iii) 135 mg/m2 IV over 24 hours followed by cisplatin 75 mg/m2 every 3 weeks	A*
Paclitaxel 30 mg/5 ml Injection	L01CD01000P3001XX	i) Treatment of recurrent breast cancer, after failure of anthracycline-based chemotherapy ii) Primary adjuvant therapy in advanced ovarian cancer in combination with cisplatin iii) Treatment of locally advanced or metastatic non-small cell lung cancer (NSCLC) in chemonaive patients in combination with platinum compounds	i) 175 mg/m2 IV over 3 hours every 3 weeks ii) 175 mg/m2 IV over 3 hour followed by cisplatin 75 mg/m2 in every 3 weeks or 135 mg/m2 IV over 24 hours followed by cisplatin 75 mg/m2 every 3 weeks iii) 135 mg/m2 IV over 24 hours followed by cisplatin 75 mg/m2 every 3 weeks	A*

Generic Name	MDC	Indications	Dosage	Category
Paliperidone 100 mg Prolonged Release Injection	N05AX13000P2004XX	Second or third line treatment of acute and maintenance treatment of schizophrenia in adults	Initiation: Deltoid IM 150 mg eq on Day1, followed by deltoid IM 100 mg eq on one week later. Maintenance: Monthly dose of 75 mg eq (this can be increased or decreased based on individual patient?s tolerability and/or efficacy). These monthly maintenace dose can be administered in either the deltoid or gluteal muscle	A*
Paliperidone 150 mg Prolonged Release Injection	N05AX13000P2005XX	Second or third line treatment of acute and maintenance treatment of schizophrenia in adults	Initiation: Deltoid IM 150 mg eq on Day1, followed by deltoid IM 100 mg eq on one week later. Maintenance: Monthly dose of 75 mg eq (this can be increased or decreased based on individual patient?s tolerability and/or efficacy). These monthly maintenace dose can be administered in either the deltoid or gluteal muscle	A*
Paliperidone 3 mg Extended Released Tablet	N05AX13000T5001XX	Second or third line treatment of schizophrenia	ADULT 6 mg once daily in the morning, adjusted if necessary; usual range 3 -12 mg daily. Renal impairment (creatinine clearance between 10-50 mL/min) 3 mg once daily. Avoid if creatinine clearance less than 10mL/min	A*
Paliperidone 50 mg Prolonged Release Injection	N05AX13000P2002XX	Second or third line treatment of acute and maintenance treatment of schizophrenia in adults	Initiation: Deltoid IM 150 mg eq on Day1, followed by deltoid IM 100 mg eq on one week later. Maintenance: Monthly dose of 75 mg eq (this can be increased or decreased based on individual patient?s tolerability and/or efficacy). These monthly maintenace dose can be administered in either the deltoid or gluteal muscle	A*

Generic Name	MDC	Indications	Dosage	Category
Paliperidone 6 mg Extended Released Tablet	N05AX13000T5002XX	Second or third line treatment of schizophrenia	ADULT 6 mg once daily in the morning, adjusted if necessary; usual range 3 -12 mg daily. Renal impairment (creatinine clearance between 10-50 mL/min) 3 mg once daily. Avoid if creatinine clearance less than 10mL/min	A*
Paliperidone 75 mg Prolonged Release Injection	N05AX13000P2003XX	Second or third line treatment of acute and maintenance treatment of schizophrenia in adults	Initiation: Deltoid IM 150 mg eq on Day1, followed by deltoid IM 100 mg eq on one week later. Maintenance: Monthly dose of 75 mg eq (this can be increased or decreased based on individual patient?s tolerability and/or efficacy). These monthly maintenace dose can be administered in either the deltoid or gluteal muscle	A*
Paliperidone 9 mg Extended Released Tablet	N05AX13000T5004XX	Second or third line treatment of schizophrenia	ADULT 6 mg once daily in the morning, adjusted if necessary; usual range 3 -12 mg daily. Renal impairment (creatinine clearance between 10-50 mL/min) 3 mg once daily. Avoid if creatinine clearance less than 10mL/min	A*
Palivizumab 100mg Injection	J06BB16000P3001XX	For the prevention of serious lower respiratory tract disease caused by respiratory syncytial virus (RSV) in paediatric patients at high risk of RSV disease	15 mg/kg IM once a month during season of RSV risk	A*
Pamidronate Disodium 30 mg Injection	M05BA03520P3001XX	Hypercalcaemia of malignancy (tumour -induced hypercalcaemia)	Dose depends on the initial serum calcium levels. Doses range from a single infusion of 30 - 90 mg	A*
Pamidronate Disodium 90 mg Injection	M05BA03520P3002XX	Hypercalcaemia of malignancy (tumour -induced hypercalcaemia)	Dose depends on the initial serum calcium levels. Doses range from a single infusion of 30 - 90 mg	A*
Pancreatin 150 mg Capsule	A09AA02000C1001XX	Treatment of pancreatic exocrine insufficiency due to conditions such as cystic fibrosis, chronic pancreatitis and non-pancreatic diseases	Initially 1 - 2 capsules with each meal. May increase to 5 - 15 capsules daily	A/KK

Generic Name	MDC	Indications	Dosage	Category
Pancuronium Bromide 2 mg / ml Injection	M03AC01320P3001XX	Muscle relaxant as an adjunct to general anaesthesia	ADULT: Initially 50 - 100 mcg/kg IV, then 10 - 20 mcg/kg as required. CHILD > 2 YEARS: Initially 60 - 100 mcg/kg then 10 - 20 mcg/kg. Intensive care, by IV, 60 mcg/kg every 60 - 90 minutes	B
Pantoprazole 40 mg Injection	A02BC02000P3001XX	Bleeding peptic ulcer and acute stress ulceration	40 mg twice daily until oral administration can be resumed. CHILD not recommended	A*
Pantoprazole 40 mg Tablet	A02BC02000T1001XX	i) Helicobacter pylori eradication ii) Peptic ulcer disease iii) Erosive and non-erosive reflux oesophagitis (GERD and NERD) iv) Zollinger-Ellison 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	A*
Papaverine HCl 120 mg/10ml Injection	A03AD01110P3002XX	Relief of cerebral and peripheral ischaemia associated with arterial spasm and myocardial ischaemia complicated by arrhythmias	ADULT: 30 - 120 mg may be repeated every 3 hours as necessary. CHILD: 6 mg/kg daily in 4 divided doses	A
Paracetamol 10mg/ml in 100ml Solution for IV Infusion	N02BE01000P3101XX	Mild to moderate pain and pyrexia	Body Weight (BW) ≤ 10kg: 7.5mg/kg, max: 30mg/kg BW >10kg to ≤ 33kg: 15mg/kg, max 60mg/kg not exceeding 2g BW >33kg to ≤ 50kg: 15mg/kg, max 60mg/kg not exceeding 3g BW >50kg (with risk of hepatotoxicity): 1g, max 3g BW >50kg (without risk of hepatotoxicity): 1g, max 4g OR as in the product leaflet	A
Paracetamol 120 mg/5 ml Syrup	N02BE01000L9001XX	Mild to moderate pain and pyrexia	CHILD: up to 1 year: 60 - 120 mg. 1 - 5 years: 120 - 240 mg. 6 - 12 years: 240 - 480 mg per dose. Repeat every 4 - 6 hours when necessary.	C+

Generic Name	MDC	Indications	Dosage	Category
			Maximum of 4 doses in 24 hours	
Paracetamol 125 mg Suppository	N02BE01000S2002XX	Symptomatic relief of fever and post operative pain for paediatric cases	CHILD 1 - 5 years: 125 - 250 mg; 6 - 12 years: 250 - 500 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	C+
Paracetamol 250 mg Suppository	N02BE01000S2001XX	Symptomatic relief of fever and post operative pain for paediatric cases	CHILD 1 - 5 years : 125 - 250 mg; 6 - 12 years : 250 - 500 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	B
Paracetamol 500 mg Tablet	N02BE01000T1001XX	Mild to moderate pain and pyrexia	ADULT: 500 - 1000 mg every 4 - 6 hours, maximum of 4 g daily	C+
Paradichlorobenzene, Turpentine Oil and Chlorbutol Ear Drops	S02DA30900D1001XX	Occlusion or partial occlusion of the external auditory meatus by soft wax or wax plug	Instill 5 drops into the ears	B
Paraffin Mole Alba (White Soft Paraffin)	D02AC00000G5001XX	Xerosis and ichthyosis	Apply to the affected area	C
Paraffin Mole Flava	D02AC00000G5002XX	Xerosis and ichthyosis	Apply to the affected area	C

Generic Name	MDC	Indications	Dosage	Category
Paraldehyde Injection	N05CC05000P3001XX	Status epilepticus	The usual intramuscular dose of paraldehyde for status epilepticus is 0.15 to 0.3 milliliter/kilogram, a moderate additional dose (0.05 milliliter/kilogram) may be necessary. The dose may be repeated in 2 to 6 hours and no more than 5 milliliters should be administered in one site	C
Parecoxib Sodium 40mg Injection	M01AH04520P3001XX	Management of post operative pain in the immediate post operative setting only	40 mg followed by 20 or 40 mg every 6 to 12 hours, as required. Use limited to two days only with a maximum dose of 80 mg/day. Reduce the initial dose by 50% in elderly less than 50 kg	A*
Pazopanib Hydrochloride 200 mg Tablet	L01XE11110T1001XX	For treatment of advanced and/or metastatic renal cell carcinoma (RCC)	Recommended dose is 800 mg ORALLY once daily. Should be taken without food (at least one hour before or two hours after meal). The dose should not exceed 800 mg.	A*
Pazopanib Hydrochloride 400 mg Tablet	L01XE11110T1002XX	For treatment of advanced and/or metastatic renal cell carcinoma (RCC)	Recommended dose is 800 mg ORALLY once daily. Should be taken without food (at least one hour before or two hours after meal). The dose should not exceed 800 mg.	A*
Pefloxacin 400 mg Injection	J01MA03196P3001XX	Infections due to gram-positive and gram-negative pathogens	Administered as a slow (one hour) intravenous perfusion, after diluting the contents of the 400 mg in 250 ml 5% glucose (two perfusions daily, morning and evening)	A
Pefloxacin 400 mg Tablet	J01MA03000T1001XX	i) Infections due to gram-positive and gram-negative pathogens ii) Uncomplicated UTI, chancroid gonococcal urethritis	ADULT i) 800 mg/day in 2 divided doses ii) 800 mg stat	A

Generic Name	MDC	Indications	Dosage	Category
Pegfilgrastim Pre-filled Syringe 6 mg/0.6 ml (10 mg/ml)	L03AA13000P5001XX	Reduction in the duration of neutropenia, the incidence of febrile neutropenia and the incidence of infection as manifested by febrile neutropenia in patients treated with cytotoxic chemotherapy for malignancy (with the exception of chronic myeloid leukaemia and myelodysplastic syndromes)	Adults (≥18 years): One 6 mg dose (a single pre-filled syringe) of pegfilgrastim for each chemotherapy cycle, administered as a subcutaneous injection approximately 24 hours following cytotoxic chemotherapy. Renal impairment: Pharmacokinetics of pegfilgrastim is not expected to be affected by renal impairment. Hepatic impairment: Pharmacokinetics of pegfilgrastim is not expected to be affected by hepatic impairment. Paediatric population: Insufficient data to recommend the use of pegfilgrastim in children and adolescents under 18 years of age.	A*
Peginterferon Alfa-2b 80 mcg Injection	L03AB10000P5002XX	Treatment of: i) Chronic Hepatitis C ii) Chronic Hepatitis B	i) Combination therapy with Ribavirin: ADULT: SC 1.5 mcg/kg/week CHILD and ADOLESCENT (3-17 yr): SC 60 mcg/m2/week for 24-48 weeks Monotherapy: ADULT: SC 1 mcg/kg/week for 24 weeks to 1 year ii) SC 1.0 - 1.5 mcg/kg once weekly for 52 weeks	A*
Peginterferon Alpha-2a 135 mcg Prefilled Syringe	L03AB11000P5002XX	i) Chronic hepatitis C usually in combination with ribavirin (Important to establish hepatitis C virus (HCV) genotype and viral load where combination treatment is advocated) ii) For the treatment of both HbeAg-positive and HbeAg-negative chronic hepatitis B with compensated liver disease and evidence of viral replication who are not responding or tolerating oral antiviral therapy (Initiated by Hepatologist and Gasteroenterologist only)	i) 180 mcg weekly SC with ribavirin 800 mg daily for 24 weeks in patients in genotype 2 and 3 and 180 mcg weekly SC with ribavirin (1000 - 1200 mg) for 48 weeks for those with genotype 1 and 4. 135 mg dose may be used for patients who cannot tolerate the 180 mcg dose ii) 180 mcg weekly SC for 48 weeks	A*

Generic Name	MDC	Indications	Dosage	Category
Peginterferon Alpha-2a 180 mcg Prefilled Syringe	L03AB11000P5001XX	i) Chronic hepatitis C usually in combination with ribavirin (Important to establish hepatitis C virus (HCV) genotype and viral load where combination treatment is advocated) ii) For the treatment of both HbeAg-positive and HbeAg-negative chronic hepatitis B with compensated liver disease and evidence of viral replication who are not responding or tolerating oral antiviral therapy (Initiated by Hepatologist and Gasteroenterologist only)	i) 180 mcg weekly with ribavirin 800 mg daily for 24 weeks in patients in genotype 2 and 3 and 180 mcg weekly with ribavirin (1000 - 1200 mg) for 48 weeks for those with genotype 1 and 4. 135 mg dose may be used for patients who cannot tolerate the 180 mcg dose ii) 180 mcg subcutaneously once a week for 48 weeks	A*
Pegylated Interferon Alpha-2b 100 mcg Injection	L03AB10000P5003XX	Treatment of: i) Chronic Hepatitis C ii) Chronic Hepatitis B	i) Monotherapy: SC at a dose of 0.5 or 1 mcg/kg once weekly for at least 6 months. Combination therapy: 1.5 mcg/kg/week SC in combination with ribavirin capsules. ii) 1-1.5 mcg/kg once weekly for at least 24 weeks and up to 52 weeks.	A*
Pegylated Interferon Alpha-2b 120 mcg Injection	L03AB10000P5004XX	Treatment of: i) Chronic Hepatitis C ii) Chronic Hepatitis B	i) Monotherapy: SC at a dose of 0.5 or 1 mcg/kg once weekly for at least 6 months. Combination therapy: 1.5 mcg/kg/week SC in combination with ribavirin capsules. ii) 1-1.5 mcg/kg once weekly for at least 24 weeks and up to 52 weeks.	A*
Pegylated Interferon Alpha-2b 150 mcg Injection	L03AB10000P5005XX	Treatment of: i) Chronic Hepatitis C ii) Chronic Hepatitis B	i) Monotherapy: SC at a dose of 0.5 or 1 mcg/kg once weekly for at least 6 months. Combination therapy: 1.5 mcg/kg/week SC in combination with ribavirin capsules. ii) 1-1.5 mcg/kg once weekly for at least 24 weeks and up to 52 weeks.	A*

Generic Name	MDC	Indications	Dosage	Category
Pegylated Interferon Alpha-2b 50 mcg Injection	L03AB10000P5001XX	Treatment of: i) Chronic Hepatitis C ii) Chronic Hepatitis B	i) Monotherapy: SC at a dose of 0.5 or 1 mcg/kg once weekly for at least 6 months. Combination therapy: 1.5 mcg/kg/week SC in combination with ribavirin capsules. ii) 1-1.5 mcg/kg once weekly for at least 24 weeks and up to 52 weeks.	A*
Pegylated Liposomal Doxorubicin HCl 20 mg/vial	L01DB01110P3003XX	i) For patients with platinum-resistant ovarian cancer where the disease relapses within 6 months after completion of the initial platinum-based chemotherapy ii) For patients with platinum-sensitive ovarian cancer where the disease responds to first-line platinum-based therapy but relapses 12 months or more after completion of the initial platinum based chemotherapy. As third line therapy for very selected patients. (Gyne Oncology Specialist only)	50 mg/m2 IV every 4 weeks for as long as the disease does not progress & patient continues to tolerate treatment.For doses <90 mg: dilute in 250 ml Dextrose 5 % in Water. For doses >90 mg: dilute in 500 ml Dextrose 5 % in Water. To minimize the risk of infusion reactions, the initial dose is administered at a rate no greater than 1 mg/minute. Renal impairment: No dose adjustment required in patients with creatinine clearance 30-156 ml/min, no pharmacokinetic data are available in patients with creatinine clearance of less than 30 ml/min. Hepatic impairment: At initiation of therapy: Bilirubin 1.2 - 3.0 mg/dl, the first dose is reduced by 25 %, Bilirubin > 3.0 mg/dl, the first dose is reduced by 50 %.	A*
Pemetrexed Disodium 100 mg Injection	L01BA04016P3002XX	In combination with Cisplatin for the 2nd line treatment of patients with locally advanced or metastatic non small cell lung cancer (NSCLC) other than predominantly squamous cell histology	Initial therapy 500 mg/m(2) IV over 10 minutes on day 1, followed 30 minutes later by cisplatin 75 mg/m(2) infused IV over 2 hours; repeat cycle every 21-days. Prior chemotherapy : 500 mg/m(2) IV, as a single-agent, over 10 minutes on day 1 of each 21-day cycle	A*

Generic Name	MDC	Indications	Dosage	Category
Pemetrexed Disodium 500 mg Injection	L01BA04016P3001XX	In combination with Cisplatin for the 2nd line treatment of patients with locally advanced or metastatic non small cell lung cancer (NSCLC) other than predominantly squamous cell histology	Initial therapy 500 mg/m(2) IV over 10 minutes on day 1, followed 30 minutes later by cisplatin 75 mg/m(2) infused IV over 2 hours; repeat cycle every 21-days. Prior chemotherapy : 500 mg/m(2) IV, as a single-agent, over 10 minutes on day 1 of each 21-day cycle	A*
Pentamidine Isethionate 300 mg Injection	P01CX01198P3001XX	Only for the treatment of pneumonia due to Pneumocytosis carinii	4 mg/kg once daily by slow IV infusion for at least 14 days	A*
Pentoxifylline 400 mg Tablet	C04AD03000T1001XX	Peripheral vascular disease	400 mg 2 - 3 times daily	A/KK
Peracetic Acid and Hydrogen Peroxide	V07AV00000L9906XX	High level disinfectant or sterilant for heat labile endoscopes	Immersion time based on manufacturer recommendation	A
Perindopril 4 mg and Indapamide 1.25 mg Tablet	C09BA04900T1001XX	Essential hypertension, for patients whose blood pressure is insufficiently controlled by perindopril alone.	One tablet daily, preferably taken in the morning and before a meal.	A/KK
Perindopril 4 mg Tablet	C09AA04000T1001XX	i) Hypertension ii) Congestive heart failure iii) Stable coronary artery disease	i) 4 mg as single dose, may be increased to a single 8 mg dose. ELDERLY: Start treatment with 2 mg dose. In renal insufficiency, dose should be adapted according to creatinine clearance ii) Single starting oral dose of 2 mg should be increased to a single 4 mg once BP acceptability has been demonstrated iii) 4 mg once daily for 2 weeks, may be increased to 8 mg once daily. ELDERLY: 2 mg once daily for 1 week, then 4 mg once daily for the following week, may be increased up to 8 mg once daily	B

Generic Name	MDC	Indications	Dosage	Category
Perindopril 8 mg Tablet	C09AA04000T1002XX	i) Hypertension ii) Congestive heart failure iii) Stable coronary artery disease	i) 4 mg as single dose, may be increased to a single 8 mg dose. ELDERLY: Start treatment with 2 mg dose. In renal insufficiency, dose should be adapted according to creatinine clearance ii) Single starting oral dose of 2 mg should be increased to a single 4 mg once BP acceptability has been demonstrated iii) 4 mg once daily for 2 weeks, may be increased to 8 mg once daily. ELDERLY: 2 mg once daily for 1 week, then 4 mg once daily for the following week, may be increased up to 8 mg once daily	B
Peritoneal Dialysis Solution (1.5% Dextrose 5 Litres)	B05DB00908H2001XX	For chronic renal disease requiring dialysis and for acute renal failure	Dose depending on clinical cases	B
Peritoneal Dialysis Solution (4.25% Dextrose, 2 Litres)	B05DB00908H2002XX	For chronic renal disease requiring dialysis and for acute renal failure	Dose depending on clinical cases	B
Peritoneal Dialysis with 7.5% Icodextrin Solution	B05DB00908H2003XX	As a once replacement for a single glucose exchange as part of a continuous ambulatory peritoneal dialysis (CAPD) or automated peritoneal dialysis (APD) regimen for the treatment of chronic renal failure, particularly for patients who have lost ultra filtration on glucose solutions	Administered as a single daily exchange for the long dwell in continuous ambulatory peritoneal dialysis or automated peritoneal dialysis. The recommended dwell time is 8 to 16 hours	A*
Permethrin 5% w/v Lotion	P03AC04000L6001XX	Treatment of scabies	Apply thoroughly to all body parts. Leave on for 8 - 14 hours. Not recommended for children less than 2 years old	A*
Perphenazine 4 mg Tablet	N05AB03000T1001XX	Schizophrenia and other psychoses	ADULT: Initially 4 mg 3 times daily adjusted according to response, maximum 24 mg daily. ELDERLY: 1/4 to 1/2 adult dose. CHILD not recommended	B

Generic Name	MDC	Indications	Dosage	Category
Pethidine HCl 100 mg/2 ml Injection	N02AB02110P3002XX	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	B
Pethidine HCl 50 mg/ml Injection	N02AB02110P3001XX	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	B
Phenobarbitone 30 mg Tablet	N03AA02000T1002XX	Epilepsy	ADULT: 60 - 180 mg daily on. CHILD: Up to 8 mg/kg daily	B
Phenobarbitone Sodium 200 mg/ml Injection	N03AA02520P3001XX	Status Epilepticus	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: 10 - 20 mg/kg/dose loading dose, followed by repeated doses at 10 mg/kg/dose (strictly in ICU setting). Maintenance 5 - 8 mg/kg/day	B
Phenol 80% w/w Liquid	D08AE03000L5001XX	As disinfectant	Use in various dilutions	C
Phenoxybenzamine HCl 100 mg/2 ml Injection	C04AX02110P3001XX	Hypertensive episodes associated with phaeochromocytoma	1 mg/kg daily over at least 2 hours into large vein. Do not repeat within 24 hours.	A*
Phenoxymethyl Penicillin 125 mg Tablet	J01CE02500T1001XX	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	C
Phenoxymethyl Penicillin 125 mg/5 ml Syrup	J01CE02500F2101XX	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	C

Generic Name	MDC	Indications	Dosage	Category
Phenoxymethyl Penicillin 250 mg Tablet	J01CE02500T1002XX	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	C
Phenylephrine HCl 2.5% Eye Drops	S01FB01110D2001XX	For pupillary dilation in uveitis, for refraction without cyclopegic. For fundoscopy and other diagnostic procedures	Mydriasis and vasoconstriction: 1 drop of 2.5% or 10% solution, repeated in one hour if necessary. Chronic mydriasis: 1 drop of a 2.5% or 10% solution 2 - 3 times a day. Uveitis with posterior synechiae (treatment) or synechiae, posterior (prophylaxis): 1 drop of a 2.5% or 10% solution, repeated in one hour if necessary, not to exceed three times a day. Treatment may be continued the following day, if necessary	B
Phenylephrine HCl 10% Eye Drops	S01FB01110D2002XX	For pupillary dilation in uveitis, for refraction without cyclopegic. For fundoscopy and other diagnostic procedures	Mydriasis and vasoconstriction: 1 drop of 2.5% or 10% solution, repeated in one hour if necessary. Chronic mydriasis: 1 drop of a 2.5% or 10% solution 2 - 3 times a day. Uveitis with posterior synechiae (treatment) or synechiae, posterior (prophylaxis): 1 drop of a 2.5% or 10% solution, repeated in one hour if necessary, not to exceed three times a day. Treatment may be continued the following day, if necessary	B

Generic Name	MDC	Indications	Dosage	Category
Phenytoin Sodium 100 mg Capsule	N03AB02520C1002XX	Epilepsy	ADULT and CHILD more than 6 years: 300-400 mg/day in 3 - 4 divided doses before meals. Maximum: 600 mg/day. CHILD: Initially 5 mg/kg/day in 2 - 3 divided doses. Maintenance: 4 - 8 mg/kg/day. Maximum: 300 mg/day	B
Phenytoin Sodium 125 mg/5ml Suspension	N03AB02520L8001XX	Epilepsy	ADULT: Patients with no previous treatment may be started on 1 teaspoonful or 5 mL (125 milligrams) 3 times daily. It is then individualized to the patient. An increase to 5 teaspoonfuls (625 milligrams) may be made if necessary. CHILD: Initially 5 mg/kg/day in 2 - 3 divided doses. Maintenance: 4 - 8 mg/kg/day. Maximum: 300 mg/day. Children over 6 years and adolescents may require the minimum adult dose (300mg/day).	B
Phenytoin Sodium 30 mg Capsule	N03AB02520C1001XX	Epilepsy	ADULT and CHILD more than 6 years: 300-400 mg/day in 3 - 4 divided doses before meals. Maximum: 600 mg/day. CHILD: Initially 5 mg/kg/day in 2 - 3 divided doses. Maintenance: 4 - 8 mg/kg/day. Maximum: 300 mg/day	B
Phenytoin Sodium 50mg/ml Injection	N03AB02520P3001XX	Status epilepticus	i) Status epilepticus: ADULT 10 - 15 mg/kg by slow IV. Maximum 50 mg/minute. Maintenance: 100 mg orally/IV every 6 - 8 hours. CHILD 15 - 20 mg/kg by slow IV. Maximum: 1 - 3 mg/kg/minute ii) Neurosurgery 100 - 200 mg IM approximately at 4 hourly interval	B
Phosphate Solution containing Sodium Acid Phosphate 1.936 g /15 ml	B05XA09902L5001XX	For supplemental ionic phosphorus for correction of hypophosphataemia	According to the needs of the patient	A

Generic Name	MDC	Indications	Dosage	Category
Phyllanthus Niruri Extract 250 mg Capsule	HA05BA5999C1001XX	Liver tonic	2 capsules to be taken orally, 3 times a day, before or after meals	A/KK
Pilocarpine 1% Eye Drops	S01EB01110D2001XX	Miotics in chronic open-angle glaucoma	1 drop 1 - 4 times a day	B
Pilocarpine 2% Eye Drops	S01EB01110D2002XX	Miotics in chronic open-angle glaucoma	1 drop 1 - 4 times a day	B
Pilocarpine 4% Eye Drops	S01EB01110D2003XX	Miotics in chronic open-angle glaucoma	1 drop 1 - 4 times a day	B
Piperacillin 4 g & Tazobactam 500 mg Injection	J01CR05961P3001XX	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	A*
Piperacillin Sodium 4 g Injection	J01CA12520P4002XX	Infections due to Pseudomonas aeruginosa	ADULT: 100 - 150 mg/kg IM/IV in divided doses. Increase to 200 - 300 mg/kg in severe infections & at least 16 g in life-threatening infections. Single dose over 2 g: IV route only. Maximum: 24 g/day. CHILD: 50-75 mg/kg/dose every 6 - 8 hourly	A
Piracetam 1 g Injection	N06BX03000P3001XX	Treatment of cerebral functional impairment	30 - 160 mg/kg/day orally or parenterally 2 times daily or 3 to 4 times daily. Maximum: 24 g/day	A*
Piracetam 1.2 g Tablet	N06BX03000T1001XX	Mild cognitive impairment, post concussional head syndrome, head injury disorder, chronic vertigo and myoclonus	Initially 7.2 g daily in 2 - 3 divided doses, increased according to response by 4.8 g daily every 3 - 4 days to maximum of 20 g daily. CHILD under 16 years not recommended	A*
Piracetam 20% Solution	N06BX03000L5001XX	Children with learning disability, progressive myoclonic epilepsy and hypoxia	30 - 160 mg/kg/day orally. To be given 2 times daily or 3 - 4 times daily. Maximum 24 g/day	A*
Piribedil 50 mg Tablet	N04BC08000T5001XX	Parkinson disease	As monotherapy: 150 - 250 mg as 3 - 5 divided doses daily. As combination with L-dopa therapy: 50 - 150 mg daily (50 mg per 250 mg of L-dopa)	A*

Generic Name	MDC	Indications	Dosage	Category
Piroxicam 10 mg Capsule	M01AC01000C1001XX	i) Rheumatoid arthritis, osteoarthritis, ankylosing spondylitis ii) Acute musculoskeletal disorders iii) Acute gout	i) 20 mg daily, maintenance 10 - 30 mg daily, in single or divided doses ii) 40 mg daily in single or divided doses for 2 days, then 20 mg daily for 7 - 14 days iii) 40 mg initially, then 40 mg daily in single or divided doses for 4 - 6 days	A/KK
Pizotifen 0.5 mg Tablet	N02CX01253T1001XX	Prophylactic treatment of vascular headache	Starting with 0.5mg daily, the dosage should be progressively increased. The average maintenance dosage is 1.5mg daily in divided doses or as a single dose at night. Max dose: 4.5 mg/day and 3 mg/dose. Child: >2 yr: Up to 1.5 mg daily in divided doses. Max dose: 1 mg/dose.	B
Pneumococcal Vaccine (Polyvalent)	J07AL01000P3001XX	Prevention of pneumococcal infections in high risk subjects from the age of 2 years including patient with a history of splenectomy or scheduled splenectomy	Primary injection: 1 single injection (0.5 ml) only. Booster: Must not be given within 5 years except in very high risk patient who received the vaccine while under immunosuppressive treatment	A
Podophyllum 10 - 20% Paint	D06BB04000L7001XX	External anogenital warts	Apply 2 - 3 drops carefully to lesion after protecting surrounding area with vaseline. Wash off after 6 hours or if feel burning sensation and repeat 2 - 3 times weekly or once weekly	B
Policresulen 360 mg/g Concentrate	G01AX03900L9901XX	Local treatment of cervical and vaginal inflammation and tissue damage eg. discharge due to bacterial, trichomonal and fungal infections, protrusions of endocervical mucosa (erosion), haemostasis following biopsy or excision of uterine polyps	For cauterization, undiluted once or twice weekly whilst for vaginal douches, to be diluted 1 part concentrate to 5 parts of water	A
Poliomyelitis Oral Live Vaccine (10 Doses)	J07BF02000D5001XX	Immunisation against poliomyelitis	Two drops (0.1 ml). Primary immunization: 1 oral dose at 3,4 & 5 month of age. Booster doses at 1-4 years & 7 years.	C+

Generic Name	MDC	Indications	Dosage	Category
Polycitra Syrup	A12BA02955L9001XX	For treatment of calcium and uric acid stones	The usual dose of potassium citrate is 30 - 60 mEq/day orally in 3 or 4 doses with meals or within 30 minutes after meals. ADULT: 15 ml 3 times daily well diluted with water. CHILD 5-15 ml 3 times daily, after meals and at bedtime.	C
Polyethylene Glycol /Macrogol 4000 Powder	A06AD15000F2101XX	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. 2-3 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	A
Polymyxin B Sulphate 10,000 U, Neomycin Sulphate 5 mg and Hydrocortisone 10 mg Ear Drops	S02CA03991D1001XX	Treatment of bacterial infection and inflammation of the external auditory meatus	3 drops 3 - 4 times daily. External auditory meatus and canal to be thoroughly cleansed and dried before each application but soap should not be used as the antibiotics may be inactivated by it	B
Posaconazole 40mg/ml Oral Suspension	J02AC04000L8001XX	Prophylaxis of invasive fungal infections in the following adult patients: i. Patient receiving remission-induction chemotherapy for acute myelogenous leukemia (AML) or myelodysplastic syndrome (MDS) expected to result in prolonged neutropenia and who are at high risk of developing invasive fungal infections. ii. Haematopoietic stem cell transplant (HSCT) recipients who are undergoing high-dose immunosuppressive therapy for graft versus host disease and who are at high risk of developing invasive fungal infections.	Prophylaxis of invasive fungal infections: 200mg (5ml) three times a day. The duration of therapy is based on recovery from neutropenia or immunosuppression. For patients with acute myelogenous leukemia or myelodysplastic syndromes, prophylaxis with posaconazole should start several days before the anticipated onset of neutropenia and continue 7 days after the neutrophil count rises above 500cell/mm3. Increasing the total daily dose above 800mg does not further enhance the exposure to posaconazole.	A*

Generic Name	MDC	Indications	Dosage	Category
Potassium Chloride 0.15% w/v & Sodium Chloride 0.9% w/v Injection	A06AD10921L9902XX	Prevention and treatment of potassium, sodium and chloride depletion	Dosage depends on the age, weight, clinical and biological (acid-base balance) conditions of the patient and concomitant therapy. Maximum recommended dose of potassium is 2 to 3 mmol/kg/24hr	B
Potassium Chloride 1 g/10 ml Injection	B05XA01100P3001XX	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	B
Potassium Chloride 1 g/15 ml Mixture	A12BA01100L2101XX	Potassium depletion	1 g once or twice daily until serum potassium is restored	C
Potassium Chloride 600 mg SR Tablet	A12BA01100T5001XX	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	B
Potassium Citrate 3 g/10 ml and Citric Acid Mixture	A12BA02955L2101XX	For systemic or urine alkalinization	ADULT: 15-30 ml 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.	C
Potassium Dihydrogen Phosphate Injection	B05XA06170P3001XX	For treatment of hypophosphataemia	Up to 10mmol phosphate administered over 12 hours	A
Potassium Iodide Mixture	H03CA00200L2101XX	Pre-operative management of hyperthyroidism and thyrotoxicosis	ADULT and CHILD: 50 - 250 mg 3 times daily	B
Potassium Permanganate 1:10,000 Solution	D08AX06362L9901XX	Cleansing and deodorising suppurative eczematous reactions and wounds	As soaks or wet dressing 1 - 3 times daily or as required	C+
Potassium Permanganate 1:20,000 Solution	D08AX06362L9902XX	Cleansing and deodorising suppurative eczematous reactions and wounds	As a bath once to twice daily or as required	C
Povidone Iodine 10% (equivalent to 1% iodine) Solution	D08AG02000L9902XX	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 antisepsis.	B

Generic Name	MDC	Indications	Dosage	Category
Povidone Iodine 7.5% (equivalent to 0.75% iodine) Scrub	D08AG02000L9901XX	As preoperative scrub for hands and skin	Spread 5 ml over both hands and rub thoroughly for about 5 minutes. Rinse thoroughly. Repeat if desired. Pre-operative use on patient: Apply scrub and rub thoroughly for about 5 minutes. Rinse off using a sterile gauze saturated with water	B
Pralidoxime 25 mg/ml Injection	V03AB04000P3002XX	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.	B

Generic Name	MDC	Indications	Dosage	Category
Pramipexole Dihydrochloride 0.125 mg Tablet	N04BC05110T1001XX	Treatment for signs and symptoms of advanced idiopathic Parkinson's disease. It may be used as monotherapy or in combination with levodopa	Dose escalation: 0.125 mg 3 times daily on week 1 then 0.25 mg 3 times daily week 2 then 0.5 mg 3 times daily on week 3. Increase by 0.75 mg at weekly intervals if needed up to maximum of 4.5 mg/day. Patient on levodopa: Reduce dose. Renal impairment: In patient with creatinine clearance < 20ml/min, the daily dose of pramipexole should be started at 0.125 mg daily instead of 0.25mg and the maximum dose should not > 1.5 mg daily	A*
Pramipexole Dihydrochloride 1 mg Tablet	N04BC05110T1002XX	Treatment for signs and symptoms of advanced idiopathic Parkinson's disease. It may be used as monotherapy or in combination with levodopa	Dose escalation: 0.125 mg 3 times daily on week 1 then 0.25 mg 3 times daily week 2 then 0.5 mg 3 times daily on week 3. Increase by 0.75 mg at weekly intervals if needed up to maximum of 4.5 mg/day. Patient on levodopa: Reduced dose. Renal impairment: In patient with creatinine clearance < 20ml/min, the daily dose of pramipexole should be started at 0.125 mg daily instead of 0.25mg and the maximum dose should not > 1.5 mg daily	A*
Pramipexole Dihydrochloride Extended Release 0.375mg Tablet	N04BC05110T5001XX	Treatment for signs and symptoms of advanced idiopathic Parkinson's disease. It may be used as monotherapy or in combination with levodopa	Dose escalation: 0.375 mg/day on week 1, 0.75 mg/day on week 2, 1.5 mg/day on week 3. Increase by 0.75 mg at weekly intervals if needed up to a max of 4.5 mg/day. Patient on l-dopa: reduce dose. Renal Impairment: CrCl 30-50 mL/min Initially 0.375 mg every other day. May be increased by 0.375 mg at weekly intervals to max 2.25 mg/day	A

Generic Name	MDC	Indications	Dosage	Category
Pramipexole Dihydrochloride Extended Release 1.5mg Tablet	N04BC05110T5003XX	Treatment for signs and symptoms of advanced idiopathic Parkinson's disease. It may be used as monotherapy or in combination with levodopa	Dose escalation: 0.375 mg/day on week 1, 0.75 mg/day on week 2, 1.5 mg/day on week 3. Increase by 0.75 mg at weekly intervals if needed up to a max of 4.5 mg/day. Patient on l-dopa: reduce dose. Renal Impairment: CrCl 30-50 mL/min Initially 0.375 mg every other day. May be increased by 0.375 mg at weekly intervals to max 2.25 mg/day	A
Prasugrel HCl 10 mg Tablet	B01AC22110T1002XX	Co-administered with aspirin, is indicated to reduce the rate of thrombotic cardiovascular (CV) events (including stent thrombosis) in patients with acute coronary syndromes who are to be managed with percutaneous coronary intervention (PCI) as follows: STEMI with or without diabetes, UA and NSTEMI with diabetes, age <75yrs old, weight >60kg, without history of TIA stroke and clinically suspected clopidogrel resistance subset. (Only to be used in Cardiology Centre as third line treatment/ adjunctive therapy).	Initiate treatment with a single 60mg oral loading dose. Continue at 10mg/5mg once daily with or without food. Patients should also take aspirin (75 mg - 325 mg) daily.	A*
Pravastatin Sodium 20 mg Tablet	C10AA03520T1001XX	Hypercholesterolaemia and coronary heart disease intolerant or not responsive to other forms of therapy. In health clinics, Pravastatin is restricted to HIV patients on HAART.	10 - 20 mg once daily. Maximum: 40 mg daily	A/KK
Prazosin HCl 1 mg Tablet	C02CA01110T1001XX	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	B

Generic Name	MDC	Indications	Dosage	Category
Prazosin HCl 2 mg Tablet	C02CA01110T1002XX	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	B
Prazosin HCl 5 mg Tablet	C02CA01110T1003XX	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	B
Pre/Post Natal Vitamin & Mineral Capsule	A11AA03903C1001XX	Vitamin and mineral supplement for use during pregnancy and lactation	1 capsule daily or based on individual requirements	C+
Pre/Post Natal Vitamin & Mineral Tablet	A11AA03903T1001XX	Vitamin and mineral supplement for use during pregnancy and lactation	1 tablet daily or based on individual requirements	C+
Prednisolone 3 mg/5 ml Syrup	H02AB06000L9001XX	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/m2 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	B
Prednisolone 5 mg Tablet	H02AB06000T1001XX	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/m2 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	B
Pregabalin 150 mg Capsules	N03AX16000C1002XX	i) Second line treatment of neuropathic pain in patients who do not response to first line drugs ii) Fibromyalgia	i) Initially, 75 mg twice daily. May be increased to 150 mg twice daily after 3-7 days. Max: 600 mg/day after an additional 7-day interval ii) Initially, 75 mg twice daily. May be increased to 150 mg twice daily within 1 week or 225 mg twice daily. Max: 450 mg/day	A*

Generic Name	MDC	Indications	Dosage	Category
Pregabalin 75 mg Capsule	N03AX16000C1001XX	i) Second line treatment of neuropathic pain in patients who do not response to first line drugs ii) Fibromyalgia	i) Initially, 75 mg twice daily. May be increased to 150 mg twice daily after 3-7 days. Max: 600 mg/day after an additional 7-day interval ii) Initially, 75 mg twice daily. May be increased to 150 mg twice daily within 1 week or 225 mg twice daily. Max: 450 mg/day	A*
Primaquine 7.5 mg base Tablet	P01BA03162T1001XX	i) Treatment of malaria ii) Prophylaxis together with a schizonticide such as chloroquine	i) 15 mg daily for 14 days, increased to higher doses or longer course if resistance in P.vivax occurs. ii) ADULT: 30 mg once weekly. CHILD: 0.5 mg once weekly Child: 250 mcg/kg daily for 14 days. Should be taken with food. Take with meals to avoid GI discomfort.	B
Primidone 250 mg Tablet	N03AA03000T1001XX	Epilepsy	ADULT: Initially 1 tablet daily in the evening, increasing by 1 tablet every 4 - 7 days to 3 - 4 tablets daily. Maximum dosage: 1.5 g daily in divided doses. CHILD: 6 - 8 years: Up to 1/2 adult dose	B
Probenecid 500 mg Tablet	M04AB01000T1001XX	Hyperuricemia associated with gout and gouty arthritis (for cases allergic to allopurinol or serum uric acid not controlled by allopurinol alone)	500 mg to 1000 mg twice daily	A
Procaine Benzylpenicillin Aqueous 3 mega units (3 g) Injection	J01CE09702P4001XX	Treatment of infections due to Penicillin G-sensitive organisms	ADULT: 300,000 - 900,000 units (300 - 900 mg) IM daily. CHILD: Up to 1 year: 150 mg IM daily. 1 - 5 years: 300 mg IM daily. 6 - 12 years: 600 mg IM daily	B
Procaine Penicillin Fortified 4 MU Injection	J01CE09702P4002XX	Treatment of infections due to Penicillin G-sensitive organisms	ADULT: 300,000 - 900,000 units (300 - 900 mg) IM daily. CHILD: Up to 1 year: 150 mg IM daily. 1 - 5 years: 300 mg IM daily. 6 - 12 years: 600 mg IM daily	B

Generic Name	MDC	Indications	Dosage	Category
Procarbazine HCl 50 mg Capsule	L01XB01110C1001XX	Lymphomas	Adult: Monotherapy: Initially, 50 mg/day, increased by 50 mg daily to 250-300 mg daily in divided doses. Continue doses until max response is achieved or appearance of signs of toxicity. Maintenance: 50-150 mg/day or 1-2 mg/kg daily until a cumulative dose of at least 6 g. Combination Therapy: 100 mg/m2 on days 1-14 of each 4- or 6-wk cycle. Child: Initially, 50 mg/m2 daily, up to 100 mg/m2 adjust according to response.	A
Prochlorperazine Maleate 5mg Tablet	N05AB04253T1002XX	i) Severe nausea and vomiting ii) Vertigo/labyrinthine disorders	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. 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.	B
Prochlorperazine Mesylate 12.5 mg/ml Injection	N05AB04253P3001XX	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	B

Generic Name	MDC	Indications	Dosage	Category
Procyclidine HCl 5 mg/ ml Injection	N04AA04110P3001XX	i) All forms of Parkinson's disease (idiopathic paralysis agitants), 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.	B
Progesterone 100 mg capsule	G03DA04000C1001XX	Supplementation of the luteal phase	200-300mg daily orally. For supplementation of the luteal phase during in IVF, 400-600mg per day in 2-3 divided doses to be insert vaginally.	A*
Progesterone 8% Vaginal Gel	G03DA04000G3001XX	Treatment of infertility due to inadequate luteal phase	90 mg intravaginally daily from day of egg retrieval till pregnancy established	A*
Prolase Tablet	M09AB00000T1001XX	Oedema and inflammation in conjunction with other physical or chemotherapeutic measures	2 tablet 4 times daily	B
Promethazine HCl 25 mg/ml Injection	R06AD02110P3001XX	Allergic conditions	By deep IM: ADULT: 25 - 50 mg, maximum 100 mg. CHILD: 5 - 10 years : 6.25 - 12.5 mg. By slow IV: 25 - 50 mg in a solution of 2.5 mg/ml in water for injection. Maximum 100 mg	B
Promethazine HCl 5 mg/5 ml Syrup	R06AD02110L9001XX	Allergic conditions	CHILD 2 - 5 years: 5 - 15 mg daily, 5 - 10 years : 10 - 25 mg daily	B
Proparacaine HCl 0.5% Ophthalmic Drops	S01HA04110D2001XX	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.	B

Generic Name	MDC	Indications	Dosage	Category
Propiverine HCl 15 mg Tablet	G04BD06110T1001XX	Treatment of urinary incontinence, urgency and frequency in neurogenic detrusor overactivity (detrusor hyperreflexia) and in idiopathic detrusor overactivity (overactive bladder)	ADULT: 15 mg twice daily to 3 times daily, increase to 4 times daily if required. Max dose: 60 mg daily. CHILD more than 5 years: 0.2 to 0.4 mg/kg per day in 2 divided doses	A*
Propofol 10mg/ml (1%) Injection	N01AX10000P9901XX	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	A*
Propofol 20mg/ml (2%) emulsion for injection of infusion	N01AX10000P9902XX	Induction & maintenance of general anaesthesia. Sedation of ventilated ICU patients	Adult: IV Induction and maintenance of general anesth Induction: 40 mg every 10 sec. Maintenance: 4-12 mg/kg/hr or intermittent boluses of 20-50 mg. Sedation In diagnostic and surgical procedures: Initial: 6-9 mg/kg/hr by infusion. Maintenance: 1.5-4.5 mg/kg/hr. For ventilated patients: 0.3-4 mg/kg/hr. Monitor lipid concentrations if duration of sedation >3 days.	A*

Generic Name	MDC	Indications	Dosage	Category
Propranolol HCl 1 mg/ml Injection	C07AA05110P3001XX	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	A
Propranolol HCl 10 mg Tablet	C07AA05110T1001XX	Dysrythmias, tachycardia, hypertrophic obstructive cardiomyopathy (For cardiologist only)	10 - 40 mg 3 - 4 times daily	B
Propranolol HCl 40 mg Tablet	C07AA05110T1002XX	i) Hypertension ii) Angina iii) Myocardial infarct iv) Cardiac arrhythmia v) Portal hypertension vi) Migraine vii) Thyrotoxicosis	i) Initially 80 mg twice daily increased as required to a usual range of 160 - 320 mg daily. CHILD: Initial doses of 1 mg/kg in divided doses, can be increased to 2 - 4 mg/kg/day in divided doses ii) Initial dose of 40 mg 2 - 3 times daily. Maintenance 120 - 240 mg daily iii) 40mg 4 times daily for 2 - 3 days then 80 mg twice daily, beginning 5 - 21 days after infarction iv) 10 - 40 mg 3 - 4 times daily v) Initially 40 mg twice daily. The dose may be increased as required up to 160 mg twice daily vi) Initial prophylaxis dose: 40 mg 2 - 3 times daily. The dose may be increased at weekly intervals up to 160 mg daily vii) Adjunct: 10 - 40 mg 3 - 4 times daily. CHILD: Arrythmias, thyrotoxicosis: 0.25 - 0.5 mg/kg 3 - 4 times daily as required	B

Generic Name	MDC	Indications	Dosage	Category
Propylthiouracil 50 mg Tablet	H03BA02000T1001XX	Hyperthyroidism	ADULT Initially 300-450mg in 8 hourly intervals (can be given up to 600-900mg/daily) until symptoms are controlled in 1-2 months. Maintenance 50-150mg daily for at least 12-18 months. CHILDREN 6-10 years: 50-150mg. CHILDREN > 10 years: 150-300mg daily. All doses are to be given in 3 divided doses daily. Taken with food.	B
Protamine Sulphate 10 mg/ml Injection	V03AB14183P3001XX	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.	B
Protein Free Haemodialysate 10% Jelly	D03AX00000G4001XX	Trophic lesions in patients with arterial occlusive disease and with chronic venous insufficiency, burn injuries, impaired wound healing, decubitus ulcers and skin ulcer caused by irradiation	Apply 3 - 5 times daily	A
Protein Free Haemodialysate 20% Eye Gel	S01XA20000G3001XX	Eyes disorders e.g. burns, scalds, ulcers, prevention and treatment of radiation dermatitis, traumatic and ischaemic wound	Instill 1 drop 3 - 4 times daily	A
Protein Free Haemodialysate 5% Ointment	D03AX00000G5001XX	Trophic lesions in patients with arterial occlusive disease and with chronic venous insufficiency, burn injuries, impaired wound healing, decubitus ulcers and skin ulcer caused by irradiation	Apply 3 - 5 times daily	A

Generic Name	MDC	Indications	Dosage	Category
Protein Free Haemodialysate Dental Adhesive Paste	D03AX00000G6001XX	Painful and inflammatory affliction on the oral mucosa, gums and lips, teething pain, denture pressure sores, oral and maxillofacial surgery and dressing after scaling	Apply to lesions 3 - 5 times daily	A
Pyrantel Pamoate 125 mg Tablet	P02CC01127T1001XX	Intestinal nematodes	ADULT and CHILD : 2 years and older - single dose 10mg/kg body weight once. Maximum 1 g	C
Pyrantel Pamoate 250 mg Tablet	P02CC01127T1002XX	Intestinal nematodes	ADULT and CHILD : 2 years and older - single dose 10mg/kg body weight once. Maximum 1 g	C
Pyrazinamide 500 mg Tablet	J04AK01000T1001XX	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.	B
Pyridostigmine Bromide 60 mg Tablet	N07AA02320T1001XX	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	B
Pyridoxine HCl 10 mg Tablet	A11HA02110T1001XX	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	C+
Pyridoxine HCl 50 mg/2 ml Injection	A11HA02110P3001XX	i) Pyridoxine-dependent convulsions in infancy 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	B

Generic Name	MDC	Indications	Dosage	Category
Quetiapine Fumarate 100 mg Immediate Release Tablet	N05AH04138T1002XX	i) Schizophrenia ii) Short term treatment of acute manic episodes associated with bipolar I disorder, either monotherapy or adjunct to lithium or divalproex iii) Treatment of depressive episodes associated with bipolar disorder	i) Initial titration schedule over 4 days: 25 mg twice daily on Day 1, increase in steps of 25 - 50 mg 2 to 3 times daily on Days 2 and 3 to reach target dose of 300 - 400 mg daily by Day 4, given in 2 - 3 divided doses. Institute further dose adjustments, if indicated, at intervals of 2 days or more, in steps of 25 - 50 mg twice daily ii) 100 mg (Day 1), 200 mg (Day 2), 300 mg (Day 3) & 400 mg (Day 4). Further dosage adjustments up to 800 mg/day by Day 6 should be in increments of not more than 200 mg/day. Adjust dose within the range of 200 - 800 mg/day depending on clinical response and tolerability of the patient. Usual effective dose range: 400 - 800 mg/day iii) 50 mg ORALLY once a day on Day 1, then 100 mg once daily on Day 2, then 200 mg once daily on Day 3, then 300 mg once daily on Day 4 (all doses given at bedtime); patients requiring higher doses should receive 400 mg on Day 5, increased to 600 mg on Day 8 (week 1)	A*
Quetiapine Fumarate 200 mg Extended Release Tablet	N05AH04138T5002XX	i)Schizophrenia ii) Moderate to severe manic episodes in bipolar disorder iii) Major depressive episodes in bipolar disorder	i) & ii) 300 mg once daily on Day 1 then 600 mg on Day 2. Maintenance dose: 400 to 800 mg once daily. Maximum dose: 800 mg daily iii) 50 mg on Day 1, 100 mg on Day 2, 200 mg on Day 3 and 300 mg on Day 4. Recommended daily dose is 300 mg. May be titrated up to 600 mg daily. In elderly or hepatic impairment:Start with 50mg/ day, may be increased in increments of 50mg /day to an effective dose.	A*

Generic Name	MDC	Indications	Dosage	Category
Quetiapine Fumarate 200 mg Immediate Release Tablet	N05AH04138T1004XX	i) Schizophrenia ii) Short term treatment of acute manic episodes associated with bipolar I disorder, either monotherapy or adjunct to lithium or divalproex iii) Treatment of depressive episodes associated with bipolar disorder	i) Initial titration schedule over 4 days: 25 mg twice daily on Day 1, increase in steps of 25 - 50 mg 2 to 3 times daily on Days 2 and 3 to reach target dose of 300 - 400 mg daily by Day 4, given in 2 - 3 divided doses. Institute further dose adjustments, if indicated, at intervals of 2 days or more, in steps of 25 - 50 mg twice daily ii) 100 mg (Day 1), 200 mg (Day 2), 300 mg (Day 3) & 400 mg (Day 4). Further dosage adjustments up to 800 mg/day by Day 6 should be in increments of not more than 200 mg/day. Adjust dose within the range of 200 - 800 mg/day depending on clinical response and tolerability of the patient. Usual effective dose range: 400 - 800 mg/day iii) 50 mg ORALLY once a day on Day 1, then 100 mg once daily on Day 2, then 200 mg once daily on Day 3, then 300 mg once daily on Day 4 (all doses given at bedtime); patients requiring higher doses should receive 400 mg on Day 5, increased to 600 mg on Day 8 (week 1)	A*
Quetiapine Fumarate 300 mg Extended Release Tablet	N05AH04138T5003XX	i) Schizophrenia ii) Moderate to severe manic episodes in bipolar disorder iii) Major depressive episodes in bipolar disorder	i) & ii) 300 mg once daily on Day 1 and 600 mg on Day 2. Maintenance dose: 400 ? 800 mg once daily. Maximum dose: 800 mg daily iii) 50 mg on Day 1, 100 mg on Day 2, 200 mg on Day 3 and 300 mg on Day 4. Recommended daily dose is 300 mg. May be titrated up to 600 mg daily	A*

Generic Name	MDC	Indications	Dosage	Category
Quetiapine Fumarate 400 mg Extended Release Tablet	N05AH04138T5004XX	i) Schizophrenia ii) Moderate to severe manic episodes in bipolar disorder iii) Major depressive episodes in bipolar disorder	i) & ii) 300 mg once daily on Day 1 and 600 mg on Day 2. Maintenance dose: 400 ? 800 mg once daily. Maximum dose: 800 mg daily iii) 50 mg on Day 1, 100 mg on Day 2, 200 mg on Day 3 and 300 mg on Day 4. Recommended daily dose is 300 mg. May be titrated up to 600 mg daily	A*
Quetiapine Fumarate 50 mg Extended Release Tablet	N05AH04138T5001XX	i)Schizophrenia ii)Moderate to severe manic episodes in bipolar disorder iii)Major depressive episodes in bipolar disorder	i) & ii) 300 mg once daily on Day 1 then 600 mg on Day 2. Maintenance dose: 400 to 800 mg once daily. Maximum dose: 800 mg daily. iii)50 mg on Day 1, 100 mg on Day 2, 200 mg on Day 3 and 300 mg on Day 4. Recommended daily dose is 300 mg. May be titrated up to 600 mg daily. In elderly or hepatic impairment: Start with 50mg/ day, may be increased in increments of 50mg /day to an effective dose.	A*
Quinine Dihydrochloride 600 mg/2 ml Injection	P01BC01110P3001XX	Severe and complicated malaria	By slow intravenous infusion (over 4 hours). ADULT : 20 mg/kg followed by 10 mg/kg every 8 hours. CHILD : 20 mg/kg followed by 10 mg/kg every 12 hours, initial dose should be half in patients who have received quinine, quinidine or mefloquine during the previous 12 or 24 hours	B
Quinine Sulphate 300 mg Tablet	P01BC01183T1001XX	Severe and complicated malaria	300 - 600 mg daily. Treatment : 1.2 - 2 g daily in divided doses. CHILDS less than 1 year : 100 - 200 mg daily, 1 - 3 years : 200 - 300 mg daily, 4 - 6 years: up to 500 mg daily, more than 7 years : up to 1 g daily. All above doses are given for 7 days in 2 - 3 divided doses	B

Generic Name	MDC	Indications	Dosage	Category
Rabeprazole Sodium 20 mg Tablet	A02BC04520T1001XX	i) Treatment and maintenance of erosive or ulcerative gastroesophageal reflux disease (GERD) ii) Duodenal ulcers	i) 10-20 mg daily for 4-8 weeks, maintenance 10-20 mg daily ii) 20 mg daily at morning for up to 4-8 weeks	A*
Rabies Human Diploid Cell Vaccine (Lyophilised) Injection	J07BG01000P4001XX	Pre-exposure and post-exposure vaccination against rabies	Prophylaxis: 3 dose (1 ml each) schedule on D0, D7 and D28. Booster dose after every 2 - 3 years. Post exposure prophylaxis: use after attack of a potential rabid animal: 1 dose on D0, D3, D7, D14 and D28. In previously vaccinated individuals 2 doses on D0 and D3	B
Raloxifene HCl 60 mg Tablet	G03XC01110T1001XX	Prevention and treatment of post menopausal osteoporosis	1 tablet daily	A*
Raltegravir 400 mg tablet	J05AX08500T1001XX	Raltgeravir combination with other antiretroviral agents is indicated for the treatment of HIV-1 infection in patients who are contraindicated to boosted Protease Inhibitor or who are intolerant to boosted Protease Inhibitor.	400mg administered orally, twice daily with or without food, to be given combination with other antiretroviral agent.	A*
Ramipril 2.5 mg Tablet	C09AA05000T1001XX	i) Hypertension and congestive heart failure ii) Post-myocardial infarction iii) Reducing risk of myocardial infarction, stroke or cardiovascular death in diabetics or patients with increased cardiovascular risks	i) Hypertension: Initially 2.5 mg once daily, increased at intervals of 1 - 2 weeks to maximum 10 mg once daily; Congestive heart failure:Initially 1.25 mg once daily. Max: 10 mg/day ii) Initially 2.5 mg twice daily for 2 days then increased to maximum 5 mg twice daily iii) Initially 1.25 - 2.5 mg once daily, increased to 5 mg once daily after 1 week, maximum dose: 10 mg once daily after 3 weeks	A

Generic Name	MDC	Indications	Dosage	Category
Ramipril 5 mg Tablet	C09AA05000T1002XX	i) Hypertension and congestive heart failure ii) Post-myocardial infarction iii) Reducing risk of myocardial infarction, stroke or cardiovascular death in diabetics or patients with increased cardiovascular risks	i) Hypertension: Initially 2.5 mg once daily, increased at intervals of 1 - 2 weeks to maximum 10 mg once daily; Congestive heart failure:Initially 1.25 mg once daily. Max: 10 mg/day ii) Initially 2.5 mg twice daily for 2 days then increased to maximum 5 mg twice daily iii) Initially 1.25 - 2.5 mg once daily, increased to 5 mg once daily after 1 week, maximum dose: 10 mg once daily after 3 weeks	A
Ranibizumab 10 mg/ ml Injection	S01LA04000P3001XX	i) Treatment of Neovascular (wet) Age-Related Macular Degeneration (ARMD) ii) Treatment of visual impairment due to diabetic macular edema (DME) iii) Treatment of visual impairment due to macular edema secondary to retinal vein occlusion (RVO) Note: Indication ii) and iii) approved to be used by retinal specialist only (PFUKKM 1/2015)	0.5 mg (0.05ml) as a single intravitreal Injection.Interval between 2 doses should not be shorter than 1 month, then monitor for visual acuity monthly. Treatment is given monthly & continued until max visual acuity is achieved, confirmed by stable visual acuity for 3 consecutive monthly assessments.	A*
Ranitidine 150 mg Tablet	A02BA02110T1001XX	i) Benign gastric and duodenal ulcer ii) Reflux oesophagitis iii) Non-ulcer dyspepsia iv) Zollinger-Ellison Syndrome	i) 150 mg twice daily (at morning and night) or 300 mg on night for 4-8 weeks. Maintenance: 150-300 mg on night ii) 150 mg twice daily or 300 mg on night for 8-12 weeks iii) 150 mg daily or twice daily iv) 150 mg and may be increased as necessary to 6 g/day	B
Ranitidine 150 mg/10 ml Syrup	A02BA02110L9001XX	Peptic ulcer disease	CHILD 2-4 mg/kg 2 times daily. Maximum 300 mg daily	B

Generic Name	MDC	Indications	Dosage	Category
Ranitidine 25 mg/ml Injection	A02BA02110P3001XX	i) Benign gastric/ duodenal ulceration, reflux oesophagitis, Zollinger Ellison Syndrome ii) Stress ulcer prophylaxis in post-operative 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	B
Ranitidine 300 mg Tablet	A02BA02110T1002XX	i) Benign gastric and duodenal ulcer ii) Reflux oesophagitis iii) Non-ulcer dyspepsia iv) Zollinger-Ellison Syndrome	i) 150 mg twice daily (at morning and night) or 300 mg on night for 4-8 weeks. Maintenance: 150-300 mg on night ii) 150 mg twice daily or 300 mg on night for 8-12 weeks iii) 150 mg daily or twice daily iv) 150 mg and may be increased as necessary to 6 g/day	B

Generic Name	MDC	Indications	Dosage	Category
Remifentanil 5 mg Injection	N01AH06110P4001XX	i) As an analgesic agent for use during induction and/or maintenance of general anaesthesia during surgical procedures including cardiac surgery. ii)Continuation of analgesia into the immediate post-operative period under close supervision, during transition to longer acting analgesia. iii)Provision of analgesia and sedation in mechanically ventilated intensive care patients.	For IV use only. ADULT: Induction:Bolus infusion: 1µg/kg over 30-60 seconds; Continuous infusion: 0.5-1µg/kg/min; Maintenance: Continuous infusion: 0.025 to 2 µg/kg/min. CHILD (1-12 years of age): Induction: Insufficient data; Neonates: IV infusion 0.4-1.0 mcg/kg/minute depending on the anaesthetic method and adjust according to patient response, supplemental IV inj of 1 mcg/kg dose may be given. 1-12 yr: initially 0.1-1 mcg/kg by IV inj over at least 30 seconds (excluded if not needed), followed by IV infusion 0.05-1.3 mcg/kg/minute depending on the anaesthetic method and adjust according to patient response, supplemental IV bolus inj may be admin during infusion. 12-18 yr: 0.1-1 mcg/kg IV inj over at least 30 seconds (excluded if not needed), followed by IV infusion of 0.05-2 mcg/kg/minute depending on anaesthetic method and adjust according to patient response, supplemental IV bolus inj may be admin during infusion.	A*

Generic Name	MDC	Indications	Dosage	Category
Repaglinide 2 mg Tablet	A10BX02000T1001XX	Type 2 diabetes mellitus (as monotherapy or in combination with metformin when metformin alone is inadequate)	OHA naïve patient: Start dose with 0.5mg per meal Patients transferred from another oral hypoglycaemic agent: Start dose with 0.5-1mg per meal In combination with metformin: Start dose as 0.5mg per meal Titrate every 1-2weeks according to blood glucose response. Max single dose: 4mg before each main meal. Max total daily dose: 16mg. Doses to be taken within 30 minutes of meals, 2-4 meals a day	A*
Ribavirin 200 mg Capsule	J05AB04000C1001XX	For the treatment of chronic hepatitis C (in combination with interferon alfa-2a/2b)	ADULT (more than 18 years old): 50mg/kg/day Recommended: Body weight: ≤ 75kg should receive 1000mg daily as two 200mg capsules in the morning and three 200mg capsules in the evening Body weight: >75kg should receive 1200mg as three 200mg capsules in the morning and three 200mg capsules in the evening Genotype 1,4: 48 weeks Genotype: 24 weeks duration should be individualized in accordance with the baseline characteristics of the disease.	A*
Riboflavine 3 mg Tablet	A11HA04000T1001XX	For prevention and treatment of riboflavine deficiency	CHILD: 2.5-10 mg/day in divided doses. ADULT: 5-30 mg/day in divided doses	C
Rifampicin 100 mg/5 ml Syrup	J04AB02000L9001XX	Tuberculosis and leprosy	CHILD: 20 mg/kg body weight daily in 1 - 2 doses. Up to 1 year: 10 mg/kg body weight in a single daily dose	A

Generic Name	MDC	Indications	Dosage	Category
Rifampicin 150 mg Capsule	J04AB02000C1001XX	i) Tuberculosis ii) Leprosy iii) Prophylaxis for meningococcal meningitis	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) 600 mg/day iii) 600 mg twice daily for 2 days	B
Rifampicin 150 mg, Isoniazid 75 mg & Pyrazinamide 400 mg Tablet	J04AM05000T1001XX	Initial phase (2 months) of tuberculosis treatment	Patient more than or 71 kg: 5 tab/day, 55 -70 kg: 4 tab/day, 38-54 kg: 3 tab/day, 30-37 kg: 2 tab/day. To be taken as a single dose	B
Rifampicin 150 mg, Isoniazid 75 mg, Pyrazinamide 400 mg & Ethambutol HCl 275 mg Tablet	J04AM06000T1001XX	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	B
Rifampicin 150mg + Isoniazid 75mg tablet	J04AM02000T1001XX	For pulmonary tuberculosis in which organisms are susceptible in continuation phase treatment for 4 months	30-37kg: 2 tablets once daily, 38-54kg: 3 tablets once daily, 55-70kg: 4 tablets once daily, Above 70kg: 5 tabs once daily	B
Rifampicin 300 mg Capsule	J04AB02000C1002XX	i) Tuberculosis ii) Leprosy iii) Prophylaxis for meningococcal meningitis	i) Tuberculosis ADULT: Daily doses: 10mg/kg/day Body weight doses: 10-15/kg/day CHILD: 10 - 20 mg/kg body weight daily in 1 - 2 doses. Maximum daily dose : 600mg Directly observed therapy (DOT): 10 mg/kg twice weekly or 3 times/week. Maximum: 600 mg ii) Leprosy: ADULT: 600 mg/day CHILDREN: 10mg/kg iii) Prophylaxis for meningococcal meningitis: ADULT: 600 mg twice daily for 2 days CHILDREN: 10mg/kg twice daily for 2 days INFANT: 5mg/kg twice daily for 2 days"	B
Rifampicin, Dapsone & Clofazimine	J04AM02961T9901XX	For the treatment of leprosy and tuberculosis	Rifampicin: 600 mg once monthly, Dapsone: 100 mg daily, Clofazimine: 300 mg once monthly and 50 mg daily (or 100 mg on alternate days)	B

Generic Name	MDC	Indications	Dosage	Category
Ringers Solution (contained sodium chloride, potassium chloride and calcium chloride)	B05XA30905P6001XX	As a source of electrolytes and water for hydration/replenishing of chloride	According to the needs of the patient	B
Risperidone 1 mg Tablet	N05AX08000T1001XX	Psychoses and schizophrenia	ADULT : 2 mg in 1 - 2 divided doses on first day then 4 mg in 1 - 2 divided doses on 2nd day then 6 mg in 1 - 2 divided doses on 3rd day (slower titration appropriate in some patients); usual range 4 - 8 mg daily; dose above 10 mg daily only if benefit outweigh risk (maximum 16 mg daily). Elderly (or in hepatic or renal impairment): initially 0.5 mg twice daily increased in steps of 0.5 mg twice daily to 1 - 2 mg twice daily. Not recommended in children under 15 years	B
Risperidone 1 mg/ml Oral Solution	N05AX08000L5001XX	Psychoses and schizophrenia	ADULT: 2 mg in 1 - 2 divided doses on 1st day then 4 mg in 1 - 2 divided doses on 2nd day then 6 mg in 1 - 2 divided doses on 3rd day (slower titration appropriate in some patients); usual range 4 - 8 mg daily; dose above 10 mg daily only if benefit outweighs risk (maximum 16 mg daily). Elderly (or in hepatic or renal impairment): initially 0.5 mg twice daily increased in steps of 0.5 mg twice daily to 1-2 mg twice daily. Not recommended in children under 15 years	A

Generic Name	MDC	Indications	Dosage	Category
Risperidone 2 mg Tablet	N05AX08000T1002XX	Psychoses and schizophrenia	ADULT : 2 mg in 1 - 2 divided doses on first day then 4 mg in 1 - 2 divided doses on 2nd day then 6 mg in 1 - 2 divided doses on 3rd day (slower titration appropriate in some patients); usual range 4 - 8 mg daily; dose above 10 mg daily only if benefit outweigh risk (maximum 16 mg daily). Elderly (or in hepatic or renal impairment): initially 0.5 mg twice daily increased in steps of 0.5 mg twice daily to 1 - 2 mg twice daily. Not recommended in children under 15 years	B
Risperidone 25 mg Injection (Long Acting)	N05AX08000P3001XX	Treatment of acute and chronic schizophrenic psychosis and other psychotic conditions, in which positive and negative symptoms are prominent. It also alleviates affective symptoms associated with schizophrenia	25 mg IM every 2 weeks. Dose increments (if required) to 37.5 mg or 50 mg can be considered after a minimum of 4 weeks on each dosage	A*
Risperidone 37.5 mg Injection (Long Acting)	N05AX08000P3002XX	Treatment of acute and chronic schizophrenic psychosis and other psychotic conditions, in which positive and negative symptoms are prominent. It also alleviates affective symptoms associated with schizophrenia	25 mg IM every 2 weeks. Dose increments (if required) to 37.5 mg or 50 mg can be considered after a minimum of 4 weeks on each dosage	A*
Risperidone 50 mg Injection (Long Acting)	N05AX08000P3003XX	Treatment of acute and chronic schizophrenic psychosis and other psychotic conditions, in which positive and negative symptoms are prominent. It also alleviates affective symptoms associated with schizophrenia	25 mg IM every 2 weeks. Dose increments (if required) to 37.5 mg or 50 mg can be considered after a minimum of 4 weeks on each dosage	A*
Ritodrine HCl 50 mg/5 ml Injection	G02CA01110P3001XX	Prevention of preterm labour	IV 0.05 mg/min to be gradually increased by 0.05 mg/min every 10-15 minutes. IM injection: 10 mg 4-6 hourly. Continue treatment for 12-48 hours after ceased contraction	A

Generic Name	MDC	Indications	Dosage	Category
Ritonavir 100 mg Capsule	J05AE03000C1001XX	Progressive or advanced HIV infection in combination with other antiretroviral agents. Criteria for use: a) Clinical AIDS b) CD4 less than 350 cells or c) Viral load more than 10,000 copies/ml	ADULT: (Single PI) initially 300 mg twice daily, increase by 100 mg twice daily increments to 600 mg twice daily. (Dual PI) Initially 200mg BD, then increase by 100mg BD & reaching 400mg BD within 2 wk.	A*
Ritonavir 80 mg/ml Solution	J05AE03000L9901XX	Progressive or advanced HIV infection in combination with other antiretroviral agents. Criteria for use: a) Clinical AIDS b) CD4 less than 350 cells or c) Viral load more than 10,000 copies/ml	ADULT: 400 - 600 mg twice daily. CHILD: >1 month, initiate at dise of 25mg/m2 twice daily, titrate dose upward every 2-3 days by 50mg/m2 twice daily (maximum dose 600mg twice daily)	A*
Rituximab 10 mg/ml Injection	L01XC02000P3001XX	i) Treatment of patients with relapsed or chemo-resistant low grade or follicular B-cell Non-Hodgkin's lymphoma ii) Adjunctive therapy with combination chemoagents for aggressive Non-Hodgkin Lymphoma iii) Severe active rheumatoid arthritis with inadequate response or intolerance to other disease-modifying anti-rheumatic drugs (DMARDs) including one or more tumour necrosis factor (TNF) inhibitor therapies iv) Maintenance in relapsed/ refractory follicular lymphoma after response to induction therapy	i) 375 mg/m2 BSA administered as an IV infusion through a dedicated line once weekly for 4 weeks ii) Combination with CHOP (cyclophosphamide, doxorubicin, prednisone and vincristine) as 375 mg/m2 BSA on day 1 of each chemotherapy cycle for 8 cycles after IV administration of the glucocorticoid component of CHOP. iii) 1000 mg IV infusion followed by a second 1000 mg IV infusion two weeks later iv) 375mg/m2 BSA once every 3 months until disease progression or for a maximum period of two years.	A*
Rivaroxaban 10 mg Tablet	B01AX06000T1001XX	Prevention of venous thromboembolism in patients undergoing elective hip or knee replacement surgery	10 mg once daily. Initial dose should be taken 6 to 10 hour post-surgery provided that haemostasis has been established. Duration of treatment: Major hip surgery 5 weeks. Major knee surgery 2 weeks	A*

Generic Name	MDC	Indications	Dosage	Category
Rivaroxaban 15 mg Tablet	B01AX06000T1002XX	i)Prevention of stroke and systemic embolism in adult patients with non-valvular atrial fibrillation with one or more risk factors, such as Congestive heart failure (CHF), hypertension, age ≥ 75 yrs, diabetes mellitus, prior stroke or transient ischaemic attack. ii)Treatment of deep vein thrombosis (DVT), and prevention of recurrent DVT and pulmonary embolism (PE) following an acute DVT in adults. iii) Treatment of Pulmonary Embolism (PE), and prevention of recurrent DVT and pulmonary embolism (PE) following an acute PE in adults.	i)20mg once daily or 15mg once daily (for patients with moderate renal impairment (creatinine clearance 30-49 ml/min) Dosage: ii) & (iii) 15mg BD for 21 days, followed by 20mg OD.	A*
Rivaroxaban 20 mg Tablet	B01AX06000T1003XX	i)Prevention of stroke and systemic embolism in adult patients with non-valvular atrial fibrillation with one or more risk factors, such as Congestive heart failure (CHF), hypertension, age ≥ 75 yrs, diabetes mellitus, prior stroke or transient ischaemic attack. ii)Treatment of deep vein thrombosis (DVT), and prevention of recurrent DVT and pulmonary embolism (PE) following an acute DVT in adults. iii) Treatment of Pulmonary Embolism (PE), and prevention of recurrent DVT and pulmonary embolism (PE) following an acute PE in adults.	i)20mg once daily or 15mg once daily (for patients with moderate renal impairment (creatinine clearance 30-49 ml/min) Dosage (ii) & (iii)15mg BD for 21 days, followed by 20mg OD.	A*
Rivastigmine 1.5 mg Capsule	N06DA03123C1001XX	For psychiatrists and neurologists only. Mild to moderately severe dementia associated with Alzheimer's or Parkinson's disease	Initial dose 1.5 mg 2 times daily, may increase by 1.5 mg 2 times daily every 2 weeks to maximum of 6 mg 2 times daily. If treatment is interrupted for several days, should be reinitiated at the lowest daily dose	A*

Generic Name	MDC	Indications	Dosage	Category
Rivastigmine 2 mg/ml Oral Solution	N06DA03123L9901XX	For psychiatrists and neurologists only. Mild to moderately severe dementia associated with Alzheimer's or Parkinson's disease	Initial dose 1.5 mg 2 times daily. May be increased after a minimum of 2 weeks of treatment to 3 mg 2 times daily. Subsequently to 4.5 mg 2 times daily, up to maximum of 6 mg 2 times daily. If treatment is interrupted for several days, should be reinitiated at the lowest daily dose	A*
Rivastigmine 3 mg Capsule	N06DA03123C1002XX	For psychiatrists and neurologists only. Mild to moderately severe dementia associated with Alzheimer's or Parkinson's disease	Initial dose 1.5 mg 2 times daily, may increase by 1.5 mg 2 times daily every 2 weeks to maximum of 6 mg 2 times daily. If treatment is interrupted for several days, should be reinitiated at the lowest daily dose	A*
Rivastigmine 4.5 mg Capsule	N06DA03123C1003XX	For psychiatrists and neurologists only. Mild to moderately severe dementia associated with Alzheimer's or Parkinson's disease	Initial dose 1.5 mg 2 times daily, may increase by 1.5 mg 2 times daily every 2 weeks to maximum of 6 mg 2 times daily. If treatment is interrupted for several days, should be reinitiated at the lowest daily dose	A*
Rivastigmine 4.6mg/24hr Transdermal Patch	N06DA03123M7001XX	Mild to moderately severe dementia associated with Alzheimer's or Parkinson's disease	Initial, 4.6 mg/24 hr patch TOPICALLY once daily; after a minimum of 4 weeks and good tolerability, increase the dose to 9.5 mg/24 hr patch once daily	A*
Rivastigmine 6 mg Capsule	N06DA03123C1004XX	For psychiatrists and neurologists only. Mild to moderately severe dementia associated with Alzheimer's or Parkinson's disease	Initial dose 1.5 mg 2 times daily, may increase by 1.5 mg 2 times daily every 2 weeks to maximum of 6 mg 2 times daily. If treatment is interrupted for several days, should be reinitiated at the lowest daily dose	A*
Rivastigmine 9.5 mg/24hr Transdermal Patch	N06DA03123M7002XX	Mild to moderately severe dementia associated with Alzheimer's or Parkinson's disease	Initial, 4.6 mg/24 hr patch TOPICALLY once daily; after a minimum of 4 weeks and good tolerability, increase the dose to 9.5 mg/24 hour patch once daily	A*

Generic Name	MDC	Indications	Dosage	Category
Rivastigmine Transdermal Patch 13.3mg/24 hours	N03DA03123M7003XX	Mild to moderately severe dementia associated with Alzheimer's or Parkinson's disease	Initial, 4.6mg/24 hours patch TOPICALLY once daily, after a minimum of 4 weeks of treatment and if well tolerated, this increased to 9.5mg/24 hours or 13.3mg/24 hours (individual responses to rivastigmine may vary and some patients may derive additional benefit from higher doses)	A*
Rocuronium Bromide 10 mg/ml Injection	M03AC09320P3001XX	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 3 months of age	Adult: Initially, 600 mcg/kg by inj. Higher doses of 1 mg/kg may be used for intubation during rapid sequence induction of anaesthesia. Maintenance: 150 mcg/kg by inj (may reduce to 75-100 mcg/kg if inhalational anaesthesia is used) or by infusion at a rate of 300-600 mcg/kg/hr. Doses should be based on lean body weight for obese patients weighing >30% above the ideal body weight. Child: Infants and children >1 mth: Initially, 600 mcg/kg by inj. Maintenance: 150 mcg/kg by inj or by infusion at a rate of 300-600 mcg/kg/hr, maintenance doses may be required more frequently than in adult patients. Elderly: Reduced maintenance doses: 75-100 mcg/kg. Renal impairment: Initially, 600 mcg/kg by inj. Maintenance: 75-100 mcg/kg. Hepatic impairment: or biliary tract disease: Initially, 600 mcg/kg by inj. Maintenance: 75-100 mcg/kg.	A*

Generic Name	MDC	Indications	Dosage	Category
Ropinirole HCl 2 mg Extended Release Tablet	N04BC04110T5003XX	Treatment of idiopathic Parkinson?s disease. It may be used as monotherapy or in combination with levodopa	ADULT: Initially 2 mg once daily for the 1st week. May be increased by 2 mg at ≥1 week intervals. Max: 24 mg/day. Switching from ropinirole immediate-realease to prolonged-release tablet; dose of ropinirole prolonged release tablet should be based on the total daily dose of ropinirole immediate-release tab the patient was taking. Tablets should be taken at a similar time each day with or without food, must be swallowed whole and must not be chewed, crushed or divided.	A*
Ropinirole HCl 4 mg Extended Release Tablet	N04BC04110T5004XX	Treatment of idiopathic Parkinson?s disease. It may be used as monotherapy or in combination with levodopa	ADULT: Initially 2 mg once daily for the 1st week. May be increased by 2 mg at ≥1 week intervals. Max: 24 mg/day. Switching from ropinirole immediate-realease to prolonged-release tablet; dose of ropinirole prolonged release tablet should be based on the total daily dose of ropinirole immediate-release tab the patient was taking. Tablets should be taken at a similar time each day with or without food, must be swallowed whole and must not be chewed, crushed or divided.	A*
Ropinirole HCl 0.25 mg Tablet	N04BCO4110T1001XX	Parkinson disease in younger patients and patients with dyskinesias, especially peak dose dyskinesias	0.25 mg 3 times daily gradually increasing till adequate response obtained up to a maximum of 24 mg/day. Most patients need 3-9 mg/day	A*
Ropinirole HCl 1 mg Tablet	N04BCO4110T1002XX	Parkinson disease in younger patients and patients with dyskinesias, especially peak dose dyskinesias	0.25 mg 3 times daily gradually increasing till adequate response obtained up to a maximum of 24	A*

Generic Name	MDC	Indications	Dosage	Category
			mg/day. Most patients need 3-9 mg/day	
Ropivacaine HCl 2 mg/ml Injection	N01BB09110P3001XX	i) Surgical anaesthaesia including obstetrics ii) Acute pain management	Dose adjusted according to patient physical status and nature of procedure. i) Lumbar epidural: 15-25 ml of 7.5 mg/ml solution; Caesarean section, 15-20 ml of 7.5 mg/ml solution in incremental doses (max . total dose 150 mg). ii) lumbar epidural: 10-20 ml of 2mg/ml solution followed by 10-15 ml of 2 mg/ml solution at interval at of least 30 minutes. Labour pain 6-10 ml/hour of 2mg/ml solution	A*
Ropivacaine HCl 7.5 mg/ml Injection	N01BB09110P3002XX	i) Surgical anaesthaesia including obstetrics ii) Acute pain management	Dose adjusted according to patient physical status and nature of procedure. i) Lumbar epidural: 15-25 ml of 7.5 mg/ml solution; Caesarean section, 15-20 ml of 7.5 mg/ml solution in incremental doses (max . total dose 150 mg). ii) lumbar epidural: 10-20 ml of 2mg/ml solution followed by 10-15 ml of 2 mg/ml solution at interval at of least 30 minutes. Labour pain 6-10 ml/hour of 2mg/ml solution	A*

Generic Name	MDC	Indications	Dosage	Category
Rosiglitazone 4 mg Tablet	A10BG02000T1002XX	Type 2 diabetes with insulin resistant features. Prescribed to new patients only if inadequate glycaemic control with all other combination of oral antidiabetic medications (such as sulphonylureas, metformin, acarbose or DPPIV inhibitors) and is the only suitable alternative. Use of rosiglitazone in combination with insulin (for new patients) is not recommended. Combined use with insulin should be limited to existing cases with stable glycaemic control and requires close monitoring in view of increased risk of fluid retention, weight gain and hypoglycaemia. In cases of existing use in patients with optimal glycaemic control, rosiglitazone should be continued with close monitoring of cardiovascular, osteoporosis and fracture risk.	4 mg once daily or in 2 divided doses, may be increased to 8 mg/day in 1-2 divided doses after 12 week	A*
Rosuvastatin 10 mg Tablet	C10AA07390T1002XX	Dyslipidaemia not responsive to atorvastatin 40 mg or equivalent doses of other statins	Initially 5-10 mg once daily increased if necessary at intervals of at least 4 weeks to 20 mg once daily, increased after further 4 weeks to 40 mg daily ONLY in severe hypercholesterolemia with high cardiovascular risk. Patient of Asian origin, patients on concomitant ciclosporin/fibrate and patients with risk factors for myopathy/rhabdomyolysis (including personal/family history of muscular disorders/toxicity), the maximum dose should be 20 mg daily	A*

Generic Name	MDC	Indications	Dosage	Category
Rosuvastatin 20 mg Tablet	C10AA07390T1003XX	Dyslipidaemia not responsive to atorvastatin 40 mg or equivalent doses of other statins	Initially 5-10 mg once daily increased if necessary at intervals of at least 4 weeks to 20 mg once daily, increased after further 4 weeks to 40 mg daily ONLY in severe hypercholesterolemia with high cardiovascular risk. Patient of Asian origin, patients on concomitant ciclosporin/fibrate and patients with risk factors for myopathy/rhabdomyolysis (including personal/family history of muscular disorders/toxicity), the maximum dose should be 20 mg daily	A*
Rotigotine 2 mg per 24 hour Transdermal Patch	N04BC09000M7001XX	For stage IV Parkinson Disease with peak dyskinesia	A single daily dose should be initiated at 4mg/24 h and then increased in weekly increments of 2mg/24 h to an effective dose up to a maximal dose of 16mg/24 hr.	A*
Rotigotine 4 mg per 24 hour Transdermal Patch	N04BC09000M7002XX	For stage IV Parkinson Disease with peak dyskinesia	A single daily dose should be initiated at 4mg/24 h and then increased in weekly increments of 2mg/24 h to an effective dose up to a maximal dose of 16mg/24 hr.	A*
Rotigotine 6 mg per 24 hour Transdermal Patch	N04BC09000M7003XX	For stage IV Parkinson Disease with peak dyskinesia	A single daily dose should be initiated at 4mg/24 h and then increased in weekly increments of 2mg/24 h to an effective dose up to a maximal dose of 16mg/24 hr.	A*
Rotigotine 8 mg per 24 hour Transdermal Patch	N04BC09000M7004XX	For stage IV Parkinson Disease with peak dyskinesia	A single daily dose should be initiated at 4mg/24 h and then increased in weekly increments of 2mg/24 h to an effective dose up to a maximal dose of 16mg/24 hr.	A*
Rubella Virus Vaccine Injection (Single injection)	J07BJ01000P3001XX	Immunization against rubella (German measles)	0.5 ml SC as a a single dose	C

Generic Name	MDC	Indications	Dosage	Category
Ruxolitinib 15mg tablet	L01XE18162T1002XX	For the treatment of disease-related splenomegaly or symptoms in adult patients with primary myelofibrosis (also known as chronic idiopathic myelofibrosis), post-polycythemia vera myelofibrosis or post-essential thrombocythemia myelofibrosis. Place in therapy: To be used as 3rd line after hydroxyurea and other best available treatment such as danazol and S.C. Interferon	The recommended starting dose is 15 mg twice daily for patients with a platelet count between 100,000/mm3 and 200,000/mm3 and 20 mg twice daily for patients with a platelet count of >200,000/mm3. There is limited information to recommend a starting dose for patients with platelet counts between 50,000/mm3 and <100,000/mm3. The maximum recommended starting dose in these patients is 5 mg twice daily and the patients should be titrated cautiously.	A*
Ruxolitinib 20mg tablet	L01XE18162T1003XX	For the treatment of disease-related splenomegaly or symptoms in adult patients with primary myelofibrosis (also known as chronic idiopathic myelofibrosis), post-polycythemia vera myelofibrosis or post-essential thrombocythemia myelofibrosis. Place in therapy: To be used as 3rd line after hydroxyurea and other best available treatment such as danazol and S.C. Interferon	The recommended starting dose is 15 mg twice daily for patients with a platelet count between 100,000/mm3 and 200,000/mm3 and 20 mg twice daily for patients with a platelet count of >200,000/mm3. There is limited information to recommend a starting dose for patients with platelet counts between 50,000/mm3 and <100,000/mm3. The maximum recommended starting dose in these patients is 5 mg twice daily and the patients should be titrated cautiously.	A*

Generic Name	MDC	Indications	Dosage	Category
Ruxolitinib 5mg tablet	L01XE18162T1001XX	For the treatment of disease-related splenomegaly or symptoms in adult patients with primary myelofibrosis (also known as chronic idiopathic myelofibrosis), post-polycythemia vera myelofibrosis or post-essential thrombocythemia myelofibrosis. Place in therapy: To be used as 3rd line after hydroxyurea and other best available treatment such as danazol and S.C. Interferon	The recommended starting dose is 15 mg twice daily for patients with a platelet count between 100,000/mm3 and 200,000/mm3 and 20 mg twice daily for patients with a platelet count of >200,000/mm3. There is limited information to recommend a starting dose for patients with platelet counts between 50,000/mm3 and <100,000/mm3. The maximum recommended starting dose in these patients is 5 mg twice daily and the patients should be titrated cautiously.	A*
Salbutamol 0.5 % Inhalation Solution	R03AC02183A3001XX	Asthma and other conditions associated with reversible airways obstruction	2 ml may be inhaled up to 4 times daily over a period of 3 minutes per inhalation (0.5 ml diluted in 2.5 ml of normal saline by inhalation over 5 to 15 minutes)	B
Salbutamol 0.5 mg/ml Injection	R03CC02183P3001XX	Asthma and other conditions associated with reversible airways obstruction	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	A
Salbutamol 100 mcg/dose Inhalation	R03AC02183A1001XX	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	B
Salbutamol 2 mg Tablet	R03CC02183T1001XX	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. CHILD over 12 years and ADULT : 2 - 4 mg 3 - 4 times daily	B
Salbutamol 2 mg/5 ml Syrup	R03CC02183L9001XX	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	B

Generic Name	MDC	Indications	Dosage	Category
Salbutamol 200mcg/dose Inhaler	R03AC02183A2001XX	Asthma and other conditions associated with reversible airways obstruction	CHILD : 100 - 200 mcg. Maintenance : 100 - 200 mcg 2 - 4 times daily. ADULT : 100 - 400 mcg. Maitenance : 100 - 400 mcg 2 - 4 times daily	B
Salbutamol 5 mg/5 ml Injection	R03CC02183P3002XX	Prevention of uncomplicated premature labour only	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	A*
Salicylazosulphapyridine (Sulfasalazine) 500 mg Tablet	A07EC01000T1001XX	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, maximun 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	A/KK
Salicylic Acid 1 - 2% in Hydrocortisone 1% Ointment	D07XA01952G5001XX	Seborrhoeic capitis	Apply sparingly to affected areas 1-2 times daily	B
Salicylic Acid 2 - 10% Cream	D01AE12000G1001XX	Seborrhoeic dermatitis, scalp psoriasis and hyperkeratotic skin conditions	Apply sparingly to the affected area 2-3 times daily	C
Salicylic Acid 2 - 10% Ointment	D01AE12000G5001XX	Seborrhoeic dermatitis, scalp, psoriasis and hyperkeratotic skin disorders	Apply sparingly to the affected area 2-3 times daily	C

Generic Name	MDC	Indications	Dosage	Category
Salicylic Acid 2 % Lotion	D01AE12000L6001XX	Seborrhoeic dermatitis, scalp, psoriasis and hyperkeratotic skin conditions	Apply sparingly to the affected area 2-3 times daily. Wash with cleanser 2 - 3 times per day	B
Salicylic Acid 20% Ointment	D01AE12000G5002XX	Plantar warts	Apply daily and protect surrounding skin (eg with soft paraffin or specially designed plaster) ,may need to continue up to 3 months	C
Salicylic Acid, Starch, Zinc Oxide Paste	D01AE12952G6001XX	Use as a protective or base	Apply the paste liberally and carefully to the lesions twice daily	C
Salmeterol 25 mcg and Fluticasone Propionate 125 mcg Inhalation	R03AK06989A2102XX	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	A*
Salmeterol 25mcg and Fluticasone Propionate 50mcg Inhalation	R03AK06989A2104XX	Regular treatment of reversible obstructive airway diseases including asthma in children, where use of lower dose of a combination (bronchodilator and inhaled corticosteroids) is appropriate.	ADULT and CHILD more than 12 years : 2 puff twice daily. CHILD over 4 years : 2 puff twice daily No data on use for children aged under 4 years.	A*
Salmeterol 50 mcg and Fluticasone Propionate 250 mcg Inhalation	R03AK06989A2101XX	i) Regular treatment of reversible obstructive airways diseases including asthma ii) For the regular treatment of chronic obstructive pulmonary disease (COPD) including chronic bronchitis and emphysema	i) ADULT and CHILD more than 12 years : 1 puff twice daily. ii) For COPD: Dose is one inhalation 50/250mcg to 50/500mcg twice daily.	A/KK
Salmeterol 50 mcg and Fluticasone Propionate 500 mcg Inhalation	R03AK06989A2106XX	i) Regular treatment of reversible obstructive airways diseases including asthma ii) Chronic obstructive pulmonary disease including chronic bronchitis and emphysema	i) ADULT and CHILD more than 12 years : 1 puff twice daily ii) ADULT 1 puff twice daily	A*

Generic Name	MDC	Indications	Dosage	Category
Saxagliptin 2.5 mg Tablet	A10BH03000T1001XX	i) As add on therapy in type 2 diabetes patients inadequately controlled on metformin monotherapy and high risk of hypoglycaemia, especially elderly patients with co-morbidities. ii) As add on therapy in type 2 diabetes patients inadequately controlled with a sulphonylure and intolerant/contraindicated for metformin therapy iii) As add on therapy in type 2 diabetes patients inadequately controlled on metformin and sulphonylurea combination therapy iv) In patients with renal failure where metformin contraindicated Not to be used in patients with HbA1c > 8% on single/combination OAD, as insulin initiation is preferred.	Recommended starting dose and maintenance dose in patients with normal renal function and mild renal insufficiency (CrCl more than 50 ml/min) is 5 mg once daily. For patients with moderate to severe renal insufficiency (CrCl less than or equal to 50 ml/min) dose is 2.5 mg once daily	A/KK

Generic Name	MDC	Indications	Dosage	Category
Saxagliptin 2.5mg and Metformin HCl 1000mg Extended-Release Tablet	A10BD10926T1001XX	Indicated as an adjunct to diet and exercise to improve glycemic control in adults with type 2 diabetes mellitus when treatment with both saxagliptin and metformin is appropriate.	The recommended starting dose of in patients who need 5mg of saxagliptin and who are not currently treated with metformin is 5mg saxagliptin/500 mg metformin extended-release once daily with gradual dose escalation to reduce the gastrointestinal side effects due to metformin. In patients treated with metformin, the dose of should provide metformin at the dose already being taken, or the nearest therapeutically appropriate dose. Patients who need 2.5mg saxagliptin in combination with metformin extended-release may be treated with 2.5mg/1000mg. Patients who need 2.5mg saxagliptin who are either metformin naive or who require a dose of metformin higher than 1000mg should use the individual components. Max daily recommended dose is 5mg/2000mg.	A

Generic Name	MDC	Indications	Dosage	Category
Saxagliptin 5 mg Tablet	A10BH03000T1002XX	i) As add on therapy in type 2 diabetes patients inadequately controlled on metformin monotherapy and high risk of hypoglycaemia, especially elderly patients with co-morbidities. ii) As add on therapy in type 2 diabetes patients inadequately controlled with a sulphonylure and intolerant/contraindicated for metformin therapy iii) As add on therapy in type 2 diabetes patients inadequately controlled on metformin and sulphonylurea combination therapy iv) In patients with renal failure where metformin contraindicated Not to be used in patients with HbA1c > 8% on single/combination OAD, as insulin initiation is preferred.	2.5-5mg once daily. Patients with CrCl < 50ml/min, and when coadministered with strong CYP450 3A4/5 inhibitors: 2.5mg OD	A/KK

Generic Name	MDC	Indications	Dosage	Category
Saxagliptin 5mg and Metformin HCl 1000mg Extended-Release Tablet	A10BD10926T1002XX	Indicated as an adjunct to diet and exercise to improve glycemic control in adults with type 2 diabetes mellitus when treatment with both saxagliptin and metformin is appropriate.	The recommended starting dose of in patients who need 5mg of saxagliptin and who are not currently treated with metformin is 5mg saxagliptin/500 mg metformin extended-release once daily with gradual dose escalation to reduce the gastrointestinal side effects due to metformin. In patients treated with metformin, the dose of should provide metformin at the dose already being taken, or the nearest therapeutically appropriate dose. Patients who need 2.5mg saxagliptin in combination with metformin extended-release may be treated with 2.5mg/1000mg. Patients who need 2.5mg saxagliptin who are either metformin naive or who require a dose of metformin higher than 1000mg should use the individual components. Max daily recommended dose is 5mg/2000mg.	A

Generic Name	MDC	Indications	Dosage	Category
Saxagliptin 5mg and Metformin HCl 500 mg Extended-Release Tablet	A10BD10926T1003XX	Indicated as an adjunct to diet and exercise to improve glycemic control in adults with type 2 diabetes mellitus when treatment with both saxagliptin and metformin is appropriate.	The recommended starting dose of in patients who need 5mg of saxagliptin and who are not currently treated with metformin is 5mg saxagliptin/500 mg metformin extended-release once daily with gradual dose escalation to reduce the gastrointestinal side effects due to metformin. In patients treated with metformin, the dose of should provide metformin at the dose already being taken, or the nearest therapeutically appropriate dose. Patients who need 2.5mg saxagliptin in combination with metformin extended-release may be treated with 2.5mg/1000mg. Patients who need 2.5mg saxagliptin who are either metformin naive or who require a dose of metformin higher than 1000mg should use the individual components. Max daily recommended dose is 5mg/2000mg.	A
Selected Plasma Protein 5 g/100 ml Injection	B05AA02000P3001XX	For treatment of shock due to burns, crushing injuries, abdominal emergencies and where there is a predominant loss of plasma fluids and red blood cells, emergency treatment of shock due to haemorrhage and in infants and small children in the initial therapy of shock due to dehydration and infection	ADULT 12.5-25 g (250-500 ml) by IV. CHILD usual dose 33 ml/kg body weight at rate of 5-10 ml/min	B
Selegiline HCl 5 mg Tablet	N04BD01110T1001XX	Only for treatment of late stage Parkinsonism with on and off phenomenon	5 mg twice daily at breakfast and lunch. Maximum 10 mg/day	A*

Generic Name	MDC	Indications	Dosage	Category
Selenium Sulphide 2.5% Shampoo	D11AC03180L5201XX	Dandruff, seborrheic dermatitis of scalp	Dandruff: apply 5-10 mL topically twice weekly for 2 weeks, then 1-4 times per month, as needed, leave on for 2-3 min, then rinse thoroughly. Seborrheic dermatitis of scalp: apply 5-10 mL topically twice weekly for 2 weeks, then 1-4 times per month, as needed, leave on for 2-3 min, then rinse thoroughly	A/KK
Sertraline HCl 50 mg Tablet	N06AB06110T1001XX	Major depression, obsessive-compulsive disorder (OCD), panic disorder	Depression, obsessive-compulsive disorder: 50 mg/day, may increase in steps of 50mg at weekly interval, max:200mg/day. Panic disorder: Initially 25 mg/day. After 1 week, increase dose to 50 mg/day. All dose changes should be made at intervals of more than 1 week, max: 200 mg/day	B
Sevelamer 800mg Tablet	V03AE02121T1001XX	Control of hyperphosphatemia in adult patients receiving haemodialysis and peritoneal dialysis. Restriction: 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.	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).	A*
Sevoflurane Liquid	N01AB08000L5001XX	To be used only for i) induction and ii) maintenance of anaesthesia	i) Adult: Given via a calibrated vaporiser: Up to 5% v/v with oxygen or a mixture of oxygen and nitrous oxide. Child: Given via a calibrated vaporiser: Up to 7% v/v. ii) Adult: 0.5-3% v/v with or without nitrous oxide. Child: 0.5-3% v/v with or without nitrous oxide.	A*

Generic Name	MDC	Indications	Dosage	Category
Sildenafil Citrate 20 mg Film-coated Tablet	G04BE03136T1004XX	Treatment of adult patients with pulmonary arterial hypertension classified as WHO functional class II and III, to improve exercise capacity. Efficacy has been shown in primary pulmonary hypertension and pulmonary hypertension associated with connective tissue disease.	ADULTS ≥ 18 years: The recommended dose is 20mg three times a day. Tablets should be taken approximately 6 to 8 hours apart with or without food. ELDERLY (≥65 years): Dosage adjustments are not required in elderly patients. Clinical efficacy as measured by 6-minute walk distance could be less in elderly patients. IMPAIRED RENAL FUNCTION: Initial dose adjustments are not required in patients with renal impairment, including severe renal impairment (creatinine clearance <30ml/min). A downward dose adjustment to 20 mg twice daily should be considered after a careful benefit-risk assessment only if therapy is not well-tolerated. IMPAIRED HEPATIC FUNCTION: Initial dose adjustments are not required in patients with hepatic impairment (Child-Pugh class A and B). A downward dose adjustment to 20mg twice daily should be considered after a careful benefit-risk assessment only if therapy is not well-tolerated.	A*
Silver Nitrate 0.5% Lotion	D08AL01221L6001XX	Use as antiseptic	Apply undiluted to affected area for a limited period	B
Silver Sulfadiazine 1% Cream	D06BA01199G1001XX	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	B
Simvastatin 10 mg Tablet	C10AA01000T1001XX	Hypercholesterolaemia and coronary heart disease intolerant or not responsive to other forms of therapy	10 - 20 mg once daily. Maximum: 80 mg daily	B

Generic Name	MDC	Indications	Dosage	Category
Simvastatin 20 mg Tablet	C10AA01000T1002XX	Hypercholesterolaemia and coronary heart disease intolerant or not responsive to other forms of therapy	10 - 20 mg once daily. Maximum: 80 mg daily	B
Simvastatin 40 mg Tablet	C10AA01000T1003XX	Hypercholesterolaemia and coronary heart disease intolerant or not responsive to other forms of therapy	10 - 20 mg once daily. Maximum: 80 mg daily	B
Sitagliptin 100 mg Tablet	A10BH01000T1003XX	Management of diabetes in patients with renal failure where metformin/sulphonylurea is contraindicated/untolerated and elderly with multiple co morbidities that always experience hypoglycemia with other antidiabetic. Not to be used in diabetic patient whose HbA1c is more than 9%	ADULT over 18 years, 100 mg once daily: 100mg once daily CrCl ≥ 30 to < 50ml/min: 50mg once daily CrCl < 30 ml/min: 25mg once daily	A*
Sitagliptin 25 mg Tablet	A10BH01000T1001XX	Management of diabetes in patients with renal failure where metformin/sulphonylurea is contraindicated/untolerated and elderly with multiple co morbidities that always experience hypoglycemia with other antidiabetic. Not to be used in diabetic patient whose HbA1c is more than 9%	ADULT over 18 years, 100 mg once daily: 100mg once daily CrCl ≥ 30 to < 50ml/min: 50mg once daily CrCl < 30 ml/min: 25mg once daily	A*
Sitagliptin 50 mg and Metformin HCl 1000 mg Tablet	A10BD07926T1003XX	i)Type 2 diabetes patients, especially the elderly, with multiple co-morbidities that always experience hypoglycaemia with other antidiabetics who are inadequately controlled on metformin or sitagliptin alone or already being treated with the combination of sitagliptin and metformin ii)Newly diagnosed type 2 diabetes patients with high baseline HbA1c and multiple co-morbidities who may experience hypoglycaemia with other antidiabetics	50 mg/500 mg twice daily. The recommended maximum daily dose is 100 mg sitagliptin plus 2000 mg metformin	A*

Generic Name	MDC	Indications	Dosage	Category
Sitagliptin 50 mg and Metformin HCl 500 mg Tablet	A10BD07926T1001XX	i)Type 2 diabetes patients, especially the elderly, with multiple co-morbidities that always experience hypoglycaemia with other antidiabetics who are inadequately controlled on metformin or sitagliptin alone or already being treated with the combination of sitagliptin and metformin ii)Newly diagnosed type 2 diabetes patients with high baseline HbA1c and multiple co-morbidities who may experience hypoglycaemia with other antidiabetics	50 mg/500 mg twice daily. The recommended maximum daily dose is 100 mg sitagliptin plus 2000 mg metformin	A*
Sitagliptin 50 mg and Metformin HCl 850 mg Tablet	A10BD07926T1002XX	i)Type 2 diabetes patients, especially the elderly, with multiple co-morbidities that always experience hypoglycaemia with other antidiabetics who are inadequately controlled on metformin or sitagliptin alone or already being treated with the combination of sitagliptin and metformin ii)Newly diagnosed type 2 diabetes patients with high baseline HbA1c and multiple co-morbidities who may experience hypoglycaemia with other antidiabetics	50 mg/500 mg twice daily. The recommended maximum daily dose is 100 mg sitagliptin plus 2000 mg metformin	A*
Sitagliptin 50 mg Tablet	A10BH01000T1002XX	Management of diabetes in patients with renal failure where metformin/sulphonylurea is contraindicated/untolerated and elderly with multiple co morbidities that always experience hypoglycemia with other antidiabetic. Not to be used in diabetic patient whose HbA1c is more than 9%	ADULT over 18 years, 100 mg once daily: 100mg once daily CrCl ≥ 30 to < 50ml/min: 50mg once daily CrCl < 30 ml/min: 25mg once daily	A*

Generic Name	MDC	Indications	Dosage	Category
Sodium Alginate 1000 mg/10 ml & Potassium Bicarbonate 200 mg/10 ml Suspension	A02BX13915L8001XX	Treatment of symptoms of gastro-oesophageal reflux eg. acid regurgitation, heartburn, indigestion due to the reflux of stomach contents not responding to conventional antacids or as an addition to PPI when PPI alone fails to control the symptoms	Adult, elderly & children ≥12 year: 5-10 mL.	A*
Sodium and Meglumine Diatrizoate 58-60% Injection	V08AA01993P3002XX	For IV pyelography	Depend on the type of procedure and the degree and extent of contrast required	B
Sodium Bicarbonate 1 g/15 ml Mixture	A02AH00131L2102XX	i) Relief of discomfort in mild urinary tract ii) Alkalinisation of urine	i) 3 g in every 2 hours until urinary pH exceeds 7 ii) Maintenance of alkaline urine 5-10 g daily	B
Sodium Bicarbonate 4.2% (0.5 mmol/ml) Injection	B05XA02131P3001XX	For acceleration of excretion in drug intoxication (where excretion of the drug into the urine is accelerated by elevated urine pH) and for acidosis	IV infusion of 2 - 5 mmol/kg body weight over a period of 4 - 8 hours or according to the needs of the patients	B
Sodium Bicarbonate 5% w/v Ear Drops	S02DC00131D1001XX	To soften the impacted ear wax	2-3 drops 3-4 times daily	C
Sodium Bicarbonate 8.4% (1 mmol/ml) Injection	B05XA02131P3002XX	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. In severe shock due to cardiac arrest: 50 ml by IV	B
Sodium Bicarbonate Mixture (Paediatric)	A02AH00131L2101XX	Heartburn for rapid relief of dyspepsia	CHILD up to 1 year 5 ml; up to 1-5 years 10 ml in 4 to 6 divided doses	C
Sodium Bicarbonate, Citric Acid, Sodium Citrate and Tartaric Acid - 4 g per sachet	B05CB10955M4001XX	For relieving of discomfort in mild urinary tract infection, symptomatic relief of dysuria to enchance the action to certain antibiotics especially some sulphonamides. In gout as urinary alkalinizers to prevent cystallisation of urates	4 - 8 g (1- 2 sachets) dissolved in a glass of cold water 4 times daily as prescribed	B
Sodium Bicarbonate, Magnesium Carbonate, Tincture Cardamom Compound Mixture	A02AH00912L2101XX	Heartburn, for rapid relief of dyspepsia	ADULT 10-20 ml 3 times daily	C

Generic Name	MDC	Indications	Dosage	Category
Sodium Biphosphate 16%, Sodium Phosphate 6% Rectal Solution	A06AG01162G2001XX	Bowel cleansing before colonic surgery, colonoscopy or radiological examination to ensure the bowel is free of solid contents. It is not to be used for treatment of constipation	ADULT 133 ml (1 bottle) administered rectally. CHILD more than 2 years half the adult dose (66.6ml)	A
Sodium Biphosphate 16%, Sodium Phosphate 6% Solution	A06AG01162L9901XX	Bowel cleansing before colonic surgery, colonoscopy or radiological examination to ensure the bowel is free of solid contents. It is not to be used for treatment of constipation	45 ml diluted with half a glass (120 mL) of water, followed by one full glass (240 mL) of water. Timing of doses is dependent on the time of the procedure. For morning procedure, first dose should be taken at 7 a.m. and second at 7 p.m. on day before the procedure. For afternoon procedure, first dose should be taken at 7 p.m. on day before and second dose at 7 a.m. on day of the procedure. Solid food should not be taken during the bowel preparation period. However clear fluids or water can be taken liberally. CHILD under 12 years not recommended	A
Sodium Chloride 0.18% with Dextrose 10% Injection	B05XA03904P6001XX	For replenishing fluid and energy and for restoring or maintaining the concentration of sodium and chloride ions	According to the needs of the patient	B
Sodium Chloride 0.18% with Dextrose 4.23% Injection	B05XA03904P6004XX	For replenishing fluid and energy and for restoring or maintaining the concentration of sodium and chloride ions	According to the needs of the patient	B
Sodium Chloride 0.45% Injection	B05XA03100P6001XX	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	B
Sodium Chloride 0.45% with Dextrose 10% Injection	B05XA03904P6002XX	For replenishing fluid and energy and for restoring or maintaining the concentration of sodium and chloride ions	According to the needs of the patient	B
Sodium Chloride 0.45% with Dextrose 5% Injection	B05XA03904P6005XX	For replenishing fluid and energy and for restoring or maintaining the concentration of sodium and chloride ions	According to the needs of the patient	B

Generic Name	MDC	Indications	Dosage	Category
Sodium Chloride 0.9% Eye Drops	S01XA03000D2001XX	Irrigation of conjunctival sac	1 - 2 drops every 3 - 4 hours	C
Sodium Chloride 0.9% Injection	B05XA03100P6002XX	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	C+
Sodium Chloride 0.9% with Dextrose 5% Injection	B05XA03904P6003XX	For replenishing fluid and energy and for restoring or maintaining the concentration of sodium and chloride ions	According to the needs of the patient	C+
Sodium Chloride 20% Injection	B05XA03100P9902XX	Addition of sodium electrolyte in parenteral nutrition bags especially in paediatrics or neonates with restricted fluid allowance	According to the needs of the patient	B
Sodium Chloride 3% Injection	B05XA03100P9901XX	Acute dilutional hyponatraemia	According to the needs of the patient	B
Sodium Chromate (Chromium-51) Solution	V09GX00143L9901XX	Labelling of erythrocytes for the investigation of haemotological disorders	Usual dose range : 10 - 200 microcuries IV by IV injection	A*
Sodium Citrate 0.3 M Solution	B05CB02136L9901XX	Prophylaxis for aspiration pneumonitis (use as an oral solution)	Dose depending on clinical cases. Usually, 30 ml given 10- 60 minutes before anaesthesia prior to elective cesarean surgery is an effective antacid	B
Sodium Citrate 3.8% Solution	B05CB02136H3001XX	Sterile solution for irrigation or washout of infected bladder	Dose depending on clinical cases	B
Sodium Citrate, Citric Acid Mixture 3 g/10 ml	B05CB02136L2101XX	Citrates and citric acid solutions are used to correct the acidosis of certain renal tubular disorders to treat metabolic acidosis for long-term urine alkalinization for prevention and treatment of uric acid and calcium kidney stones and as nonparticulate neutralizing buffers	ADULT 10 - 20 ml. CHILD up to 1 year 2.5 ml tds; 1-5 year 5 ml tds; 6-12 years 10 ml tds. To be taken well diluted with water	B
Sodium Cromoglycate 2% Eye Drops	S01GX01520D2001XX	Prevention and treatment of allergic conjunctivitis including seasonal and perennial allergic conjunctivitis and vernal keratoconjunctivitis	1 or 2 drops 4 times daily	A/KK
Sodium Dichloroisocyanurate 2.5 g Tablet	V07AV00000T1001XX	Low and medium level disinfectant	50 - 10,000 ppm av chlorine	C

Generic Name	MDC	Indications	Dosage	Category
Sodium Dichloroisocyanurate 5 g Tablet	V07AV00000T1002XX	Low and medium level disinfectant	50 - 10,000 ppm av chlorine	C
Sodium Fusidate 2% Ointment	D06AX01520G5001XX	Skin infections caused by staphylococci, streptococci, corynebacterium minutissumun and other sodium fusidate-sensitive organisms	Apply to affected area 2 - 3 times daily	A
Sodium glycerophosphate for addition into infusion solution, 20ml vial	B05XA14171P3001XX	Indicated in adult patients and infants as a supplement in intravenous nutrition to meet the requirement of phosphate.	Adults: The recommended dosage is individual. The recommended daily dosage of phosphate during intravenous nutrition would normally be 10-20mmol. This can be met by using 10-20ml of sodium glycerophosphate to the infusion solution or to the admixture for which compatibility has been proved. Infants: The recommended dosage is individual. The recommended dose for infants and neonates is 1.0-1.5 mmol/kg bodyweight/day.	A
Sodium Hypochlorite Solution	V07AV00000L9903XX	Low-level disinfectant and antiseptic	Antiseptic: less than 0.5%. Disinfectant: 5%	C
Sodium Iodide (Iodide-131) Injection	V09FX03200P3001XX	Used in the determination of various thyroid functions	5 - 50 millicuries	A*
Sodium Iodide (Iodine-131) Capsule	V09FX03200C1001XX	Determination of various thyroid functions	5 - 10 milicuries (5 mCi for whole body scan)	A*
Sodium Iodide (Iodine-131) Capsule (Therapeutic)	V10XA01200C1001XX	i) Thyrotoxicosis ii) Thyroid carcinoma	i) 2 - 30 millicuries ii) 80 - 300 millicuries	A*
Sodium Iodide (Iodine-131) Solution	V10XA01200L9901XX	i) Thyrotoxicosis ii) Thyroid carcinoma	i) 5-25 millicuries ii) 30-150 millicuries	A*

Generic Name	MDC	Indications	Dosage	Category
Sodium Nitrite 30 mg/ml Injection	V03AB08220P3001XX	For cyanide poisoning	Adult: 300 mg sodium nitrite IV over 3 minutes followed after 5 minutes with 12.5g sodium thiosulphate IV administered over 10 minutes. CHILD: 4 - 10 mg/kg of sodium nitrite (max: 300 mg) followed by 400 mg/kg of sodium thiosulfate, as a 25 or 50% solution (max: 12.5 g). Methaemoglobin concentration should not exceed 30-40%. If symptoms of cyanide toxicity recur, the doses of nitrite and thiosulfate may be repeated after 30 min at half the initial doses.	B
Sodium Nitroprusside 10 mg/ml Injection	C02DD01520P3001XX	i) Hypertensive crisis ii) Controlled hypotension during anaesthesia in order to reduce bleeding in surgical procedures	i) By IV infusion, initially 0.5-1.5 mcg/kg/min, then adjusted before increasement of 0.5 mcg/kg/min every 5 mins within range 0.5-8 mcg/kg/min (lower doses in patients already receiving other antihypertensives); stop if marked response not obtained with max dose in 10 minutes. Use only in infusion with 5 % Dextrose IV. ii) By IV infusion, max: 1.5 mcg/kg/min	A
Sodium Phosphate (Phosphorus-32) Injection	V10XX01162P3001XX	Polycythemia vera, chronic myeloid and chronic lymphocytic leukaemia and palliative treatment of bone metastases	Initially 5 millicuries, follow if necessary by a dose of not more than 3 or 4 millicurie at intervals of not less than 2 months	A*
Sodium Polystyrene Sulphonate Powder	V03AE01520F2101XX	Treatment and prevention of hyperkalaemia associated with anuria or severe oliguria, in dialysis patients or those on prolonged peritoneal dialysis	ADULT : Oral : 15 g 1 - 4 times/day. Rectal : 30 g in 100 ml 2% methylcellulose and 100 ml water as a daily retention enema. Retain for 9 hours followed by non-sodium cleansing enema. CHILD : 1 g/kg in 1 - 4 doses in acute hyperkalemia. Maintenance : 0.5 g/kg/daily	A

Generic Name	MDC	Indications	Dosage	Category
Sodium Tetradecyl Sulphate 1 % Injection	C05BB04183P3001XX	Sclerotherapy of oesophageal varices, haemorrhoids and varicose veins	0.5-2 mL into the submucosal layer at the base of the oesophageal varix or the haemorrhoid; several injections may be given at different sites, max. total injected 10-15 mL of 1% per treatment	A*
Sodium Tetradecyl Sulphate 3 % Injection	C05BB04183P3002XX	Sclerotherapy of oesophageal varices, haemorrhoids and varicose veins	0.5-2 mL into the submucosal layer at the base of the oesophageal varix or the haemorrhoid, several injections may be given at different sites, max. total injected 10-15 mL of 1% per treatment	A*
Sodium Thiosulphate 10-20% Solution	D01AE00181L9901XX	Fungicides. For the treatment of pityriasis versicolor	Apply to all affected parts of the body and face with a brush after a bath once daily or twice daily or 3 times daily	C
Sodium Thiosulphate 500 mg/ml Injection	V03AB06181P3001XX	For cyanide poisoning	Adult: To be given after 300 mg of sodium nitrite has been admin over 5-20 min: 12.5 g of sodium thiosulfate (50 ml of a 25% solution or 25 ml of a 50% solution) given over 10 min. Methaemoglobin concentration should not exceed 30-40%. If symptoms of cyanide toxicity recur, the doses of nitrite and thiosulfate may be repeated after 30 min at half the initial doses. Child: To be given after 4-10 mg/kg of sodium nitrite (max: 300 mg) has been admin: 400 mg/kg of sodium thiosulfate, as a 25 or 50% solution (max: 12.5 g). Methaemoglobin concentration should not exceed 30-40%. If symptoms of cyanide toxicity recur, the doses of nitrite and thiosulfate may be repeated after 30 min at half the initial doses.	B

Generic Name	MDC	Indications	Dosage	Category
Sodium Valproate 200 mg Tablet	N03AG01520T1001XX	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	B
Sodium Valproate 200 mg/5 ml Syrup	N03AG01520L9001XX	Epilepsy	ADULT: Initially 600 mg/day; dose may be increased by 200 mg at 3-day intervals to max 2500 mg/day. Usual maintenance dose: 1000-2000 mg/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. Severe cases: 50 mg/kg daily	B
Sodium Valproate 400 mg Injection	N03AG01520P4001XX	Status epilepticus	ADULT and CHILD above 10 years: 10 to 15 mg/kg/day IV, may increase 5 to 10 mg/kg/week to achieve optimal clinical response (Maximum 60 mg/kg/day or less with a therapeutic range of 50 to 100 mcg/mL)	B
Solifenacin Succinate 5 mg Tablet	G04BD08000T1001XX	Symptomatic treatment of urge incontinence and/or increased urinary frequency and urgency as may occur in patients with overactive bladder syndrome.	5mg od. Dose can be increased to 10mg if necessary.	A*

Generic Name	MDC	Indications	Dosage	Category
Somatropin 10 mg (30IU) Injection	H01AC01000P5002XX	i) Growth failure due to inadequate endogenous growth hormone. ii) Growth failure in girls due to gonadal dysgenesis (Turner syndrome). iii) Growth failure in short children born small gestational age (SGA)	i) 0.7-1 mg/m2/day or 0.025-0.035 mg/kg/day SC/IM. ii) 1.4 mg/m2/day or 0.045-0.05 mg/kg/day SC. iii) 0.035 mg/kg/day or 1 mg/m2/day SC	A*
Somatropin 12 mg (36IU) Injection	H01AC01000P3002XX	i) Growth failure due to inadequate endogenous growth hormone ii) Growth failure in girls due to gonadal dysgenesis (Turner syndrome) iii) Growth failure in short children born small gestational age (SGA)	i) 0.7-1 mg/m2/day or 0.025-0.035 mg/kg/day SC/IM ii) 1.4 mg/m2/day or 0.045-0.05 mg/kg/day SC iii) 0.035 mg/kg/day or 1 mg/m2/day SC	A*
Somatropin 5mg (15IU) Injection	H01AC01000P3004XX	i) Growth failure due to growth hormone insufficiency ii)Growth failure in girls due to gonadal dysgenesis (Turner syndrome) iii)Growth failure in short children born small gestational age(SGA)	i) 0.7-1 mg/m2/day or 0.025-0.035 mg/kg/day SC/IM ii) 1.4 mg/m2/day or 0.045-0.05 mg/kg/day SC iii) 0.035 mg/kg/day or 1 mg/m2/day SC	A*
Somatropin 8 mg (24IU) Injection	H01AC01000P3003XX	i) Growth failure due to growth hormone insufficiency ii)Growth failure in girls due to gonadal dysgenesis (Turner syndrome) iii)Growth failure in short children born small gestational age(SGA)	i) 0.7-1 mg/m2/day or 0.025-0.035 mg/kg/day SC/IM ii) 1.4 mg/m2/day or 0.045-0.05 mg/kg/day SC iii) 0.035 mg/kg/day or 1 mg/m2/day SC	A*
Sotalol HCl 160 mg Tablet	C07AA07110T1002XX	Ventricular tachyarrythmias	Supraventricular and ventricular arrhythmias Adult: Initially, 80 mg/day as single or in 2 divided doses, increased gradually every 2-3 days. Usual dose: 160-320 mg/day in 2 divided doses. Life-threatening ventricular arrhythmias Adult: Initially, 80 mg bid, increased gradually every 3 days to 240-320 mg/day in divided doses if needed. Maintenance: 160-320 mg/day in divided doses. Max: 480-640 mg in divided doses.	A*

Generic Name	MDC	Indications	Dosage	Category
Sotalol HCl 80 mg Tablet	C07AA07110T1001XX	Ventricular tachyarrythmias	Supraventricular and ventricular arrhythmias Adult: Initially, 80 mg/day as single or in 2 divided doses, increased gradually every 2-3 days. Usual dose: 160-320 mg/day in 2 divided doses. Life-threatening ventricular arrhythmias Adult: Initially, 80 mg bid, increased gradually every 3 days to 240-320 mg/day in divided doses if needed. Maintenance: 160-320 mg/day in divided doses. Max: 480-640 mg in divided doses.	A*
Spironolactone 25 mg Tablet	C03DA01000T1001XX	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	B
Stavudine 1 mg/ml Solution	J05AF04000L5001XX	HIV infection, in combination with other antiretrovirals	Infant: 0 - 13 days old: 0.5 mg/kg/dose twice daily. Infant 14 days and older and weighing less than 30 kg: 1 mg/kg twice daily; more than 30 kg and <60kg: 30 mg twice daily	A*
Stavudine 30 mg Capsule	J05AF04000C1001XX	HIV infection, in combination with other antiretrovirals	ADULT more than 60 kg: 40 mg twice daily; less than 60 kg: 30 mg twice daily. CHILD <30kg: 1mg/kg twice daly; >30kg refer to adult dosage	A/KK
Stavudine 30 mg, Lamivudine 150 mg & Nevirapine 200 mg Tablet	J05AR07964T1001XX	Fixed dose triple therapy for treatment of HIV infection in adults once patients have been stabilized on the maintenance regimen of nevirapine 200 mg twice daily and have demonstrated adequate tolerability to nevirapine	SLN 30: 30-60 kg 1 tablet twice daily. SLN 40 ≥60 kg 1 tablet twice daily	A/KK
Stavudine 40 mg Capsule	J05AF04000C1002XX	HIV infection, in combination with other antiretrovirals	ADULT more than 60 kg: 40 mg twice daily; less than 60 kg: 30 mg twice daily. CHILD <30kg: 1mg/kg twice daly; >30kg refer to adult dosage	A*

Generic Name	MDC	Indications	Dosage	Category
Stavudine 40 mg, Lamivudine 150 mg & Nevirapine 200 mg Tablet	J05AR07964T1002XX	Fixed dose triple therapy for treatment of HIV infection in adults once patients have been stabilized on the maintenance regimen of nevirapine 200 mg twice daily and have demonstrated adequate tolerability to nevirapine	SLN 30: 30-60 kg 1 tablet twice daily. SLN 40 ≥60 kg 1 tablet twice daily	A*
Streptokinase 1,500,000 IU Injection	B01AD01000P4001XX	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	A*
Streptomycin Sulphate 1 g Injection	J01GA01183P4001XX	Tuberculosis	ADULT: 15 mg/kg daily; max: 1 g daily. Reduce max daily dose to 500-750 mg in patients >40 yr. As part of an intermittent therapy: 25-30 mg/kg/day 2-3 times/wk; max: 1.5 g/dose. Not >120 g over the course of treatment should be given unless there are no other treatment options. Child: 20-40 mg/kg (max: 1 g) daily or 25-30 mg/kg (max: 1.5 g) 2-3 times wkly.	B
Strontium Ranelate 2 g Granules	M05BX03000F1001XX	Treatment of postmenopausal osteoporosis to reduce risk of vertebral and hip fractures when biphosphonates are contraindicated or not tolerated	2 g sachet once daily	A*
Succindialdehyde 11% & Dimethoxytetrahydrofuran 3%	V07AV00000L9907XX	High level disinfection for endoscopes, ultrasonicprobes, anaesthesia equipment etc	Immersion time is based on manufacturers recommendation	A
Sucralfate 1 g Tablet	A02BX02000T1001XX	i) Benign gastric and duodenal ulceration ii) Stress ulcer prophylaxis	i) 2 g twice daily or 1 g 4 times daily for 4-6 weeks or in resistant cases up to 12 weeks (maximum 8 g daily) ii) 1 g 6 times daily (maximum 8 g daily). CHILD not recommended	A

Generic Name	MDC	Indications	Dosage	Category
Sugammadex 100 mg/ml Injection	V03AB35000P3001XX	Indicated for reversal of neuromuscular blockade induced by rocuronium and vecuronium in selective patient group: obese, elderly, underlying cardiovascular disease. For pediatric population, sugammadex is recommended for routine reversal	2 mg/kg sugammadex is recommended, if spontaneous recovery has occurred up to at least the reappearance of second twitch tension of the train-of-four (T2). 4 mg/kg sugammadex is recommended if recovery has reached at least 1- 2 post-tetanic counts (PTC). For immediate reversal following administration of rocuronium a dose of 16 mg/kg sugammadex is recommended	A*
Sulfadoxine 500 mg and Pyrimethamine 25 mg Tablet	P01BD51981T1001XX	Treatment of Plasmodium falciparum malaria in patients in whom chloroquine resistance is suspected and malaria prophylaxis for travellers to areas where chloroquine-resistant malaria is endemic	Chloroquine resistant falciparum malaria acute attack Adult: Per tab contains pyrimethamine 25 mg and sulfadoxine 500 mg: 2-3 tabs as a single dose. Do not repeat for at least 7 days. Child: Pyrimethamine 25mg + Sulfadoxine 500mg (Tablet): <2 yr (5-10 kg): ? tab as a single dose; 2-5 yr (>10-20 kg): 1 tab as a single dose; 5-10 yr (< 20-30 kg): 1? tab as a single dose; 10-14 yr (> 30-45 kg): 2 tab as a single dose. Do not repeat for at least 7 days. Renal impairment: Dose reduction may be needed. Severe: contra-indicated. Hepatic impairment: Dose reduction may be needed. Severe: contra-indicated.	B
Sulphamethoxazole 200 mg & Trimethoprim 40 mg/5ml Suspension	J01EE01961L8001XX	Infections caused by susceptible pathogens	Mild to moderate infections: more than 2months: 8 - 12mg Trimethoprim/kg/day divided every 12hours. Serious Infections: 15-20mg Trimethoprim/kg/day divided every 6hours.	B

Generic Name	MDC	Indications	Dosage	Category
Sulphamethoxazole 400 mg & Trimethoprim 80 mg Injection	J01EE01961P3001XX	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: 960 mg twice daily increased to 1.44 g twice daily in severe infections. CHILD: 36 mg/kg daily in 2 divided doses increased to 54 mg/kg/day in severe infections ii) Treatment: ADULT & CHILD over 4 weeks: 120 mg/kg/day PO/IV infusion 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	A
Sulphamethoxazole 400 mg & Trimethoprim 80 mg Tablet	J01EE01961T1001XX	i) Severe or complicated infections due to susceptible infection 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	B
Sulphur 2% & Salicylic Acid 2% Cream	D10AB02951G1001XX	Acne vulgaris and seborrhoeic dermatitis	When used in scalp disorders, a small amount of cream should be rubbed gently into the roots of the hair. When used in skin disorders, the cream should be applied sparingly to the affected area. Apply once daily or until noticeable improvement, then once or twice a week	C

Generic Name	MDC	Indications	Dosage	Category
Sulpiride 200 mg Tablet	N05AL01000T1001XX	Acute and chronic schizophrenia, chronic delusional psychoses	200-400 mg twice daily; 800 mg daily in predominantly negative symptoms and 2.4 g daily in mainly positive symptoms. Elderly, lower initial dose; increased gradually according to response. Child under 14 years not recommended	B
Sumatriptan 100 mg Tablet	N02CC01000T1002XX	Treatment of acute migraine attacks	50 mg per attack and not more than 300 mg daily	A/KK
Sumatriptan 50 mg Fast Disintegrating Tablet	N02CC01000T5001XX	Treatment of acute migraine attacks	50 mg per attack and not more than 300 mg daily	A
Sumatriptan 50 mg Tablet	N02CC01000T1001XX	Treatment of acute migraine attacks	50 mg per attack and not more than 300 mg daily	A/KK
Sumatriptan 6 mg/0.5 ml Injection	N02CC01000P5001XX	Treament of acute migraine attacks and cluster headache	6 mg given by SC as soon as possible after onset. Dose may be repeated once after not less than 1 hour if needed. Max. 12 mg in 24 hours. Child not recommended	A
Sunscreen 5 - 20% w/w Cream	D02BA02000G1001XX	Photodermatitis	Apply to exposed areas at least 30 minutes prior to solar exposure; reapply after swimming, prolonged perspiration and after 2 hours of continuos sun exposure	B
Suxamethonium Chloride 50 mg/ml Inj	M03AB01100P3001XX	Muscle relaxant as an adjunct to anaesthesia	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.	B

Generic Name	MDC	Indications	Dosage	Category
Synthetic ACTH (Tetracosactrin Acetate) 250 mcg/ml Injection	H01AA02000P3001XX	Diagnostic test to differentiate primary adrenal from secondary (pituitary) adrenocortical insufficiency	Diagnostic test for investigation of adrenocortical insufficiency Adult: As plain preparation: Measure plasma cortisol concentration immediately before and exactly 30 min after IM/IV inj of 250 mcg. Post-inj rise in plasma cortisol concentration ≥200 nmol/l (70 mcg/l) if normal adrenocortical function. As depot preparation (if inconclusive results with plain preparation): Measure plasma cortisol concentration before and exactly 30 min, 1, 2, 3, 4 and 5 hr after an IM inj of 1 mg tetracosactide acetate depot. Adrenocortical function normal if the post-inj rise in plasma cortisol concentration increases 2-fold in 1st hr, and continues to rise steadily. Expected levels in 1st hr: 600-1,250 nmol/l, increasing slowly up to 1000-1800 nmol/l by 5th hr. Child: IV 250 mcg/1.73 m2 BSA. Intramuscular	A
Tacrolimus 0.03% Ointment	D11AH01000G5002XX	For short-term and intermittent long-term therapy in the treatment of patients with moderate to severe atopic dermatitis in whom the use of alternative, conventional therapies are deemed inadvisable because of potential risks, or in the treatment of patients who are not adequately responsive to or are intolerant of alternative, conventional therapies	Adult ≥16 years: Apply 0.03% or 0.1% to the affected skin twice daily and rub in gently and completely. Children ≥ 2 years: Apply 0.03% ointment thinly to the affected skin bd and rub in gently and completely. Treatment should be continued for 1 week after clearing of signs & symptoms of atopic dermatitis.	A*

Generic Name	MDC	Indications	Dosage	Category
Tacrolimus 0.1% Ointment	D11AH01000G5001XX	For short-term and intermittent long-term therapy in the treatment of patients with moderate to severe atopic dermatitis in whom the use of alternative, conventional therapies are deemed inadvisable because of potential risks, or in the treatment of patients who are not adequately responsive to or are intolerant of alternative, conventional therapies	Adult ≥16 years: Apply 0.03% or 0.1% to the affected skin twice daily and rub in gently and completely. Children ≥ 2 years: Apply 0.03% ointment thinly to the affected skin bd and rub in gently and completely. Treatment should be continued for 1 week after clearing of signs & symptoms of atopic dermatitis.	A*
Tacrolimus 0.5 mg Capsule	L04AD02000C1003XX	i) Primary immunosuppressant agent for all solid organ transplantation ii) Rescue therapy for rejection	i) 0.2 mg/kg/day in 2 divided doses ii) 0.3 mg/kg/day in 2 divided doses	A*
Tacrolimus 1 mg Capsule	L04AD02000C1001XX	i) Primary immunosuppressant agent for all solid organ transplantation ii) Rescue therapy for rejection	i) 0.2 mg/kg/day in 2 divided doses ii) 0.3 mg/kg/day in 2 divided doses	A*
Tacrolimus 5 mg Capsule	L04AD02000C1002XX	i) Primary immunosuppressant agent for all solid organ transplantation ii) Rescue therapy for rejection	i) 0.2 mg/kg/day in 2 divided doses ii) 0.3 mg/kg/day in 2 divided doses	A*
Tacrolimus 5mg/ml Injection	L04AD02000P3001XX	i) Primary immunosuppressant agent for all solid organ transplantation ii) Rescue therapy for rejection	i) 0.2 mg/kg/day in 2 divided doses ii) 0.3 mg/kg/day in 2 divided doses	A*
Tamoxifen Citrate 20 mg Tablet	L02BA01136T1001XX	Breast cancer	20 mg in 1-2 divided doses. Max: 40 mg/day	A
Tamsulosin HCl 400 mcg Extended Release Tablet	G04CA02110T5001XX	Second line treatment of functional symptoms of benign prostatic hyperplasia (BPH) in patients who do not tolerate first line drugs or when first line drugs are inappropriate or contraindicated	400 mcg once daily	A*
Tar, Coal Tar and Oleyl Alcohol Liquid	D05AA00952L5001XX	Dandruff, seborrhoeic dermatitis and atopic dermatitis	Massage into wet hair, rinse and repeat. Use once or twice weekly	A/KK

Generic Name	MDC	Indications	Dosage	Category
Technetium-99m Sterile Generator	V09CA01000P3001XX	Sodium pertechnetate is used for scintigraphy or nuclear scan particularly of the brain and thyroid to prepare various technetium-99m labelled injections for selective organ imaging	Technetium-99m as pertechnetate is obtained by elution with a sterile solution of Sodium Chloride 0.9%. The dosage depend on type of scan i) Thyroid scintigraphy: 18.5-80 MBq (0.5-2.2 mCi) Scintigraphy performed 20 minutes after intravenous injection ii) Salivary gland scintigraphy: 40 MBq (1.1 mCi) Scintigraphy performed immediately after intravenous injection and at regular intervals up to 15 minutes iii) Meckel?s diverticulum scintigraphy: 400 MBq (10.8 mCi) Scintigraphy performed immediately after intravenous injection and at regular interval up to 30 minutes iv) Brain scintigraphy: 370-800 MBq (10-22 mCi) Rapid sequential images are taken immediately within the first minute after intravenous administration, static images 1 to 4 hours later. Thyroid and coriod plexus should be blocked to avoid non-specific 99mTc uptake v) Cardiac and vascular scintigraphy: 740-925 MBq (20-25 mCi) Red cells are labeled in vivo or in vitro by pretreating with a reducing agent. Dynamic images are taken in the first minute after intravenous administration, followed by regular images over 30 minutes vi) Gastrointestinal bleeding: 740-925 MBq (20-25 mCi) Red cells are labeled in vivo or in vitro by pretreating with a reducing agent. Dynamic images are taken in the first minutes after intravenous administration, followed by	A*

Generic Name	MDC	Indications	Dosage	Category
			regular images at appropriate intervals for up to 24 hours vii) Lacrimal duct scintigraphy: 2-4 MBq each eye (50-100 mCi) Drops are instilled into eye and dynamic images are taken over 2 minutes, followed by static images at appropriate intervals over 20 minutes	
Tegafur 100 mg & uracil 224 mg Capsule	L01BC53980C1001XX	Non small cell lung cancer	300-600 mg daily in 2-3 divided doses	A*
Telbivudine 600 mg Tablet	J05AF11000T1001XX	Treatment of chronic hepatitis B in patients with evidence of viral replication and active liver inflammation	ADULT and CHILD over 16 years: 600 mg once daily. Renal Dose Adjustment: 600mg every 48hours (30-49ml/min), 600 mg every 72hours. (<30ml/min; not requiring dialysis); 600mg every 96 days (ESRD)	A*
Telmisartan 40 mg Tablet	C09CA07000T1001XX	Hypertension in patients who cannot tolerate ACE inhibitors because of cough	40mg - 80mg once daily	A/KK
Telmisartan 80 mg & Hydrochlorothiazide 12.5 mg Tablet	C09DA07000T1001XX	Hypertension in patients who cannot tolerate ACE inhibitors because of cough	1 tablet daily	A/KK

Generic Name	MDC	Indications	Dosage	Category
Telmisartan 80 mg and Amlodipine 10 mg Tablet	C09DB04935T1002XX	Treatment of essential hypertension in adults: i) Replacement therapy:Patients receiving telmisartan and amlodipine from separate tablets may instead receive one tablet containing the same component doses ii) Add on therapy: Patients who blood pressure is not adequately controlled on telmisartan or amlodipine monotherapy iii) Initial therapy: May also be used as initial therapy in patients who are likely to need multiple drugs to achieve their blood pressure goals	Single-pill combination should be taken once daily. Initiate with telmisartan 80mg/amlodipine 5mg one tablet per day. The maximum recommendation dose is telmisartan 80mg/amlodipine 10mg one tablet per day.	A/KK
Telmisartan 80 mg and Amlodipine 5 mg Tablet	C10BX03935T1008XX	Treatment of essential hypertension in adults: i) Replacement therapy:Patients receiving telmisartan and amlodipine from separate tablets may instead receive one tablet containing the same component doses ii) Add on therapy: Patients who blood pressure is not adequately controlled on telmisartan or amlodipine monotherapy iii) Initial therapy: May also be used as initial therapy in patients who are likely to need multiple drugs to achieve their blood pressure goals	Single-pill combination should be taken once daily. Initiate with telmisartan 80mg/amlodipine 5mg one tablet per day. The maximum recommendation dose is telmisartan 80mg/amlodipine 10mg one tablet per day.	A/KK
Telmisartan 80 mg Tablet	C09CA07000T1002XX	i)Hypertension in patients who cannot tolerate ACE inhibitors because of cough 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 ii) 80mg once daily	A/KK

Generic Name	MDC	Indications	Dosage	Category
Temozolomide 100 mg Capsule	L01AX03000C1003XX	In patients with glioblastoma multiforme who fulfill all the following criteria : i. Total /near total resection ii. ECOG/WHO performance status 0-2 iii. Age less than 60 years	Concomitant phase : 75mg/m2 daily with radiotherapy for 42 days, followed by 6 cycle of adjuvant treatment. Adjuvant phase: Additional 6 cycles of adjuvant phase. Cycle 1-150mg/m2 once daily for 5 days followed by 23 days without treatment. Cycle 2-6 : 200mg/m2 once daily for 5 days per 28-day cycle	A*
Temozolomide 20 mg Capsule	L01AX03000C1001XX	In patients with glioblastoma multiforme who fulfill all the following criteria : i. total /near total resection ii. ECOG/WHO performance status 0-2 iii. Age less than 60 years	Concomitant phase : 75mg/m2 daily with radiotherapy for 42 days, followed by 6 cycle of adjuvant treatment. Adjuvant phase: Additional 6 cycles of adjuvant phase. Cycle 1-150mg/m2 once daily for 5 days followed by 23 days without treatment. Cycle 2-6 : 200mg/m2 once daily for 5 days per 28-day cycle	A*
Tenecteplase 10,000 unit (50 mg) Injection	B01AD11000P4001XX	Acute myocardial reinfarction 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	A*
Tenofovir Disoproxil Fumarate 300 mg & Emricitabine 200 mg Tablet	J05AR03964T1001XX	Treatment of HIV-1 infection in adults in combination with other antiretroviral agents (such as non-nucleoside reverse transcriptase inhibitors or protease inhibitors).	1 tablet once daily.	A/KK
Tenofovir Disoproxil Fumarate 300 mg Tablet	J05AF07138T1001XX	i)Treatment of HIV-1 infected adults in combination with other antiretroviral agents. ii)Use as first line monotherapy for chronic hepatitis B or as a rescue therapy for patients with drug resistance hepatitis B virus (according to resistant profile or treatment guidelines).	300mg once daily. Renal Dose Adjustment: 300mg every 48hours (30-49ml/min); 300mg every 72hours (10-29ml/min); 300mg every 7 days after dialysis (Hemodialysis)	A*

Generic Name	MDC	Indications	Dosage	Category
Terazosin HCl 1 mg Tablet	G04CA03110T1001XX	Only for treatment of Benign Prostatic Hyperplasia. Not to be used for treatment of hypertension	Initially 1 mg at night, increased in a stepwise fashion to 2 mg, 5 mg or 10 mg once daily	A/KK
Terazosin HCl 2 mg Tablet	G04CA03110T1002XX	i) Treatment of Benign Prostatic Hyperplasia. ii)Hypertension	i)Initially 1 mg at night, increased in a stepwise fashion to 2 mg, 5 mg or 10 mg once daily. ii)Initial: 1mg once daily at bedtime, Maintenance: 1-5mg once (morning or evening) or twice daily. Max: 20-40mg/day	A/KK
Terazosin HCl 5 mg Tablet	G04CA03110T1003XX	i) Treatment of Benign Prostatic Hyperplasia. ii)Hypertension	i) Initially 1 mg at night, increased in a stepwise fashion to 2 mg, 5 mg or 10 mg once daily. ii) Initial: 1mg once daily at bedtime, Maintenance: 1-5mg once (morning or evening) or twice daily. Max: 20-40mg/day	A/KK
Terbinafine HCl 250 mg Tablet	D01BA02110T1001XX	Fungal infections especially onchomycosis caused by dermatophytes	250 mg once daily for 6 weeks for fingernails: 12 weeks for toenails	A/KK
Terbutaline 0.5mg/dose Inhaler	R03AC03183A2001XX	Bronchial asthma, chronic bronchitis, emphysema and other lung diseases where bronchospasm is a complicating factor	ADULT and CHILD more than 12 years : 1 inhalation 6 hourly. Severe cases : Single dose may be increased to 3 inhalation. Maximum 12 inhalation/24 hour. CHILD 3-12 year : 1 inhalation 6 hourly. Severe cases : Single dose may be increased to 2 inhalation. Maximum 8 inhalation/24 hour	B
Terbutaline Sulphate 0.3 mg/ml Syrup	R03CC03183L9001XX	Asthma and other conditions associated with reversible airways obstruction	CHILD less than 7 years : 75 mcg/kg 3 times daily, 7 - 15 years : 2.5 mg 2 - 3 times daily	B
Terbutaline Sulphate 0.5 mg/ml Injection	R03CC03183P3001XX	Bronchial asthma, chronic bronchitis, emphysema and other lung diseases where broncoconstriction 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 mcg/minute for 8 - 10 hours; reduce dose for children	B

Generic Name	MDC	Indications	Dosage	Category
Terbutaline Sulphate 10 mg/ml Nebulizer Solution	R03AC03183A3001XX	Asthma and other conditions associated with reversible airways obstruction	ADULT : 5 - 10 mg 2 -4 times daily, additional doses may be necessary in severe acute asthma. CHILD up to 3 years : 2 mg, 3 - 6 years : 3 mg, 6 - 8 years : 4 mg, over 8 years : 5 mg 2 - 4 times daily	B
Terbutaline Sulphate 2.5 mg Tablet	R03CC03183T1001XX	Asthma and other conditions associated with reversible airways obstruction	ADULT: Initially 2.5 mg 3 times daily for 1 - 2 week, then up to 5 mg 3 times daily. CHILD less than 7 years: 75 mcg/kg 3 times daily, 7 - 15 years: 2.5 mg 2 - 3 times daily	B
Terlipressin 1mg/5mg Injection	H01BA04000P4001XX	Acute oesophageal variceal bleeding	2 mg IV bolus over 1 minute. Maintenance: 1 - 2 mg IV bolus 4 - 6 hourly until bleeding is controlled, up to 24 - 36 hours. The maximum daily dosage is 120-150 mcg/kg body weight.	A*
Testosterone 250 mg/ml Injection	G03BA03000P3001XX	Only for treatment of male infertility, protein deficiency during convalescence after surgery and wasting disorder. In women, supplementary therapy of progressive mammary carcinoma	By IM only. Hypogonadism 250 mg every 2-3 weeks. To maintain an adequate androgenic effect 250 mg every 3-6 weeks. Potency disorders 250 mg every 4 weeks. Male climateric disorders: 250 mg every 3-4 weeks. Repeated 6-8 weeks courses at 2-3 months interval	A*
Tetanus Toxoid Injection	J07AM01000P3001XX	Immunization against tetanus infection	2 doses of 0.5 mL IM at an interval of 4-8 wk, followed by the 3rd dose 6-12 mth later. Booster: 0.5 mL IM every 10 yr.	C+
Tetracycline HCl 250 mg Capsule	J01AA07110C1001XX	Infections caused by susceptible pathogens	"Adult: 250-500 mg 6 hrly. Max: 4 g/day. Child: ≥12 yr Max: 2 g daily"	B
Tetracycline HCl 250 mg Tablet	J01AA07110T1001XX	Infections caused by susceptible pathogens	"Adult: 250-500 mg 6 hrly. Max: 4 g/day. Child: ≥12 yr Max: 2 g daily"	B

Generic Name	MDC	Indications	Dosage	Category
Thalidomide 50 mg Capsule	L04AX02000C1001XX	First line induction therapy in newly diagnosed multiple myeloma, salvage therapy in relapsed multiple myeloma and maintenance therapy in multiple myeloma (contraindicated for pregnant women; pregnancy test for females in reproductive age group before starting treatment should be done).	50 mg to 200 mg daily	A*
Thallous Chloride (Thallium-201) Injection	V09GX01100P3001XX	Used in myocardial perfusion scintigraphy, acute myocardial infarction and post-surgical assessment of coronary artery bypass graft patency, muscle perfusion scintigraphy, visualisation of brain and thyroid tumours and metastases	As IV infusion	A*
Theophylline 125 mg Tablet	R03DA04000T1001XX	Reversible airways obstruction, acute severe asthma	ADULT: 125 mg 3 - 4 times daily after food, increased to 250 mg if required. CHILD: 1 - 15 years : 5 mg/kg/dose (up to 600 mg/ day) every 3 - 4 times daily	B
Theophylline 250 mg Long Acting Tablet	R03DA04000T5001XX	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	B
Theophylline 80 mg/15 ml Syrup	R03DA04000L9001XX	Reversible airways obstruction and acute severe asthma	ADULT : 125 mg 3 - 4 times daily after food, increased to 250 mg if required. CHILD 1 - 15 years : 5 mg/kg/dose (up to 600 mg/day) every 3 - 4 times per day	B
Thiamine HCl 100 mg/ml Injection	A11DA01110P3001XX	i) For the prevention or treatment of Vitamin B1 deficiency syndromes including beri-beri and peripheral neuritis associated with pellagra ii) Wernicke-Korsakoff Syndrome	i) Mild to chronic deficiency: 10-25 mg daily. Severe deficiency: 200- 300 mg daily ii) 500 mg every 8 hours for 2 days, followed by 100 mg 2 times daily until patient can take oral dose	B

Generic Name	MDC	Indications	Dosage	Category
Thiamine Mononitrate 10 mg Tablet	A11DA01221T1002XX	i) For the prevention or treatment of Vitamin B1 deficiency syndromes including beri-beri and peripheral neuritis associated with pellagra ii) Wernicke-Korsakoff Syndrome	i) Mild to chronic deficiency: 10-25 mg daily. Severe deficiency: 200- 300 mg daily ii) 500 mg every 8 hours for 2 days, followed by 100 mg 2 times daily until patient can take oral dose	C
Thiamine Mononitrate 3 mg Tablet	A11DA01221T1001XX	i) For the prevention or treatment of Vitamin B1 deficiency syndromes including beri-beri and peripheral neuritis associated with pellagra ii) Wernicke-Korsakoff Syndrome	i) Mild to chronic deficiency: 10-25 mg daily. Severe deficiency: 200 - 300 mg daily ii) 500 mg every 8 hours for 2 days, followed by 100 mg 2 times daily until patient can take oral dose	C
Thioguanine 40 mg Tablet	L01BB03000T1001XX	For acute leukaemia and chronic granulocytic leukaemia	Refer to specific protocols. Usually 100 mg/m2 for 5 - 7 days (acute myeloid leukaemia) or up to 2 weeks (chronic myeloid leukaemia for accelerated/ advanced disease). CHILD: 40 - 60 g/m2 daily according to protocol	A
Thiopental Sodium 500 mg Injection	N05CA19520P3001XX	i) General anaesthesia, induction ii) Anticonvulsant for cases resistant to conventional anticonvulsants in the ICU	i) ADULT : For induction 200 - 400 mg. For repeat injection 3 - 5 mg/kg over 10 - 15 seconds until desired depth of anaesthesia is obtained. Not FDA approved for use in pediatric patients ii) 75 - 125 mg IV single dose; for local-anaesthetic induced convulsion: 125 - 250 mg IV over 10 minutes	B
Thymol Compound Gargle	A01AD11985M2001XX	For sore throat and minor mouth inflammation	To be gargled 3-4 times daily	C

Generic Name	MDC	Indications	Dosage	Category
Thyrotropin alfa 0.9mg/ml Injection	H01AB01000P3002XX	Thyrogen (thyrotropin alfa) is indicated for use as an adjunctive treatment for radioiodine ablation of thyroid tissue remnants in patients who have undergone a near-total or total thyroidectomy for well-differentiated thyroid cancer and who do not have evidence of distant metastatic thyroid cancer.	A two-injection regimen is recommended for thyrotropin administration.The two-injection regimen is thyrotropin 0.9 mg intramuscularly (IM), followed by a second 0.9 mg IM injection 24 hours later. After reconstitution with 1.2 mL Sterile Water for Injection, 1.0 mL solution (0.9 mg thyrotropin alfa) is administered by intramuscular injection to the buttock. For radioiodine imaging or treatment, radioiodine administration should be given 24 hours following the final Thyrogen injection. Diagnostic scanning should be performed 48 hours after radioiodine administration, whereas post-therapy scanning may be delayed additional days to allow background activity to decline.	A*
Tibolone 2.5 mg Tablet	G03CX01000T1001XX	Treatment of complaints resulting from the natural or surgical menopause & in cases at high risk for breast carcinomas where general hormone replacement therapy is contraindicated	2.5mg daily	A*
Ticagrelor 90 mg Tablet	B01AC24000T1001XX	a)Patient who failed clopidogrel readmitted to hospital with recurrent atherothrombotic event while patients are on clopidogrel. b) ACS patients with:i) STEMI - going for invasive (PCI), ii) NSTEMI/UA - intermediate to high risk (based on TIMI score). iii) Other complicated ACS cases treated either medically or invasively via PCI or CABG (risk of Stent thrombosis, 3VD etc.)	Initially, 180mg as single dose followed by 90mg bd with maintenance dose of ASA 75-150 mg daily.	A*

Generic Name	MDC	Indications	Dosage	Category
Ticlopidine HCl 250 mg Tablet	B01AC05110T1001XX	i) Prevention of thrombotic stroke for patients who are sensitive /intolerant to Acetysalicylic Acid ii) Maintenance of coronary bypass surgery or angioplasty iii) Maintenance of patency of access in patients on chronic haemodialysis	250 mg twice daily taken with food	A/KK
Timolol Maleate 0.5% Eye Drops	S01ED01253D2002XX	Elevated intraocular pressure, chronic open angle glaucoma	Initially, 1 drop of 0.25% 2 times daily, if clinical response is not adequate, 1 drop of 0.5% 2 times daily	A
Tinidazole 500 mg Tablet	P01AB02000T1001XX	i) Amoebiasis ii) Urogenital trichomoniasis and giardiasis	i) ADULT : 2 g as a single dose for 2 - 3 days. CHILD 3 years and older : 50 mg/kg daily for 3 days ii) ADULT : 2 g as a single dose (repeated once if necessary). Sexual partners should be treated concomitantly with the same dose. CHILD 6 years and older : single dose of 1 gram	B
Tinzaparin sodium 10,000 anti-Factor Xa IU/ml Injection in Prefilled syringe/cartridge	B01AB10520P5001XX	i)Treatment of deep vein thrombosis (DVT) and pulmonary embolism (PE), not amounting to hemodynamic instability. ii)Prevention of post-operative DVT in patients undergoing general and orthopaedic surgery.	i)Treatment of DVT and PE, in conjunction with warfarin: 175 anti-Factor Xa IU/kg SC once daily for at least 6 days. ii)Thromboprophylaxis in patients with:Moderate risk of thrombosis (general surgery):3,500 anti-Factor Xa IU SC 2 hrs before surgery and postoperatively, 3,500 anti-Factor Xa IU once daily for 7-10 days. High risk of thrombosis (eg. total hip replacement):4,500 anti-Factor Xa IU SC or 50 anti-Factor Xa IU/kg body weight SC 2 hrs before surgery and then once daily until the patients has been mobilized.	A*

Generic Name	MDC	Indications	Dosage	Category
Tinzaparin sodium 20,000 anti-Factor Xa IU/ml Injection in Prefilled syringe/cartridge	B01AB10520P5002XX	i)Treatment of deep vein thrombosis (DVT) and pulmonary embolism (PE), not amounting to hemodynamic instability. ii)Prevention of post-operative DVT in patients undergoing general and orthopaedic surgery.	i)Treatment of DVT and PE, in conjunction with warfarin: 175 anti-Factor Xa IU/kg SC once daily for at least 6 days. ii)Thromboprophylaxis in patients with:Moderate risk of thrombosis (general surgery):3,500 anti-Factor Xa IU SC 2 hrs before surgery and postoperatively, 3,500 anti-Factor Xa IU once daily for 7-10 days. High risk of thrombosis (eg. total hip replacement):4,500 anti-Factor Xa IU SC or 50 anti-Factor Xa IU/kg body weight SC 2 hrs before surgery and then once daily until the patients has been mobilized.	A*
Tioconazole 1% Cream	D01AC07000G1001XX	Skin fungal infections resistant to antifungal drugs such as miconazole and clotrimazole	Gently massage into the affected and surrounding area 1-2 times daily	A
Tioconazole 100 mg Vaginal Tablet	G01AF08000S1001XX	Vulvovaginal candidiasis	Adult & Child > 12yr: Insert nightly on retiring for 3-6 or 14 days	A
Tioconazole 6.5% Vaginal Ointment	G01AF08000G5001XX	Vulvaginal candidiasis	Apply 4.6 g intravaginally prior to bedtime as a single dose therapy, therapy may extend to 7 days	A
Tiotropium 2.5mcg/puff solution for inhalation	R03BB04320A3001XX	Maintenance bronchodilator treatment to relieve symptoms of patients with chronic obstructive pulmonary disease (COPD) in which the diagnosis of COPD is confirmed by spirometry.	5 mcg (2 puff) once daily, at the same time of the day	A/KK
Tiotropium Bromide 18 mcg Inhalation Capsules	R03BB04320C9901XX	Long term maintenance treatment of bronchospasm and dypsnoea associated with COPD. Tiotropium has usually been added to standard therapy (e.g. inhaled steroids, theophylline, albuterol rescue)	Contents of one capsule is inhaled once daily with the Handihaler inhalation device at the same time of the day.	A/KK

Generic Name	MDC	Indications	Dosage	Category
Tirofiban HCl 0.25 mg/ml Injection	B01AC17110P9901XX	Unstable angina or non-ST segment elevation myocardial infarction with the following: elevated cardiac markers, refractory chest pain, ST-segment changes and thrombolysis in myocardial infarction (TIMI) risk score 4	By IV infusion, 0.4 mcg/kg/min for 30 minutes, then 0.1 mcg/kg/min for at least 48 hours, maximum 108 hours	A*
Tocilizumab 20 mg/ml Injection	L04AC07000P3001XX	Indicated for the treatment of moderate to severe active rheumatoid arthritis (RA) in adult patients: i) with inadequate respond or intolerance to conventional disease- modifying antirheumatic drugs (DMARDS) ii) who has failed antitumour necrosis factors (antiTNFs) iii) where TNF is contraindicated (patients with history of pulmonary tuberculosis [PTB]) It also can be used as monotherapy or with combination with methotrexate (MTX) and/ or other DMARDS.	Recommended dose for rheumatoid arthritis of tocilizumab for adult patients is 8mg/kg given once every 4 weeks as a single-drip IV infusion over 1 hour. It should be diluted to 100 ml by a healthcare professional with sterile 0.9% w/v sodium chloride solution over 1 hour. For patients whose body weight is more than 100kg, doses exceeding 800mg per infusion are not recommended	A*
Tolterodine Tartrate ER 4 mg Capsule	G04BD07123C2002XX	Treatment of overactive bladder with symptoms of urinary, frequency or urge incontinence	4 mg once daily. May decrease to 2 mg once daily depending on response and tolerability	A*
Topiramate 100 mg Tablet	N03AX11000T1003XX	Add-on therapy for intractable partial epilepsy	ADULT: Initially 25-50mg nightly for 1 week. Subsequently at wkly or bi-wkly intervals, increase dose by 25-50 to 100mg/day in 2 divided doses. CHILD aged 2 and above: Approx 5-9 mg/kg/day in 2 divided doses. Titrate at 25mg (or less, based on a range of 1-3mg/kg/day) nightly for the 1st week. Subsequently at 1 or 2 wkly intervals, with increments of 1-3 mg/kg/day in 2 divided dose.	A*

Generic Name	MDC	Indications	Dosage	Category
Topiramate 15 mg Capsule Sprinkle	N03AX11000C1001XX	Add-on therapy for intractable partial epilepsy	ADULT: Initially 25-50mg nightly for 1 week. Subsequently at wkly or bi-wkly intervals, increase dose by 25-50 to 100mg/day in 2 divided doses. CHILD aged 2 and above: Approx 5-9 mg/kg/day in 2 divided doses. Titrate at 25mg (or less, based on a range of 1-3mg/kg/day) nightly for the 1st week. Subsequently at 1 or 2 wkly intervals, with increments of 1-3 mg/kg/day in 2 divided dose.	A*
Topiramate 25 mg Capsule Sprinkle	N03AX11000C1002XX	Add-on therapy for intractable partial epilepsy	ADULT: Initially 25-50mg nightly for 1 week. Subsequently at wkly or bi-wkly intervals, increase dose by 25-50 to 100mg/day in 2 divided doses. CHILD aged 2 and above: Approx 5-9 mg/kg/day in 2 divided doses. Titrate at 25mg (or less, based on a range of 1-3mg/kg/day) nightly for the 1st week. Subsequently at 1 or 2 wkly intervals, with increments of 1-3 mg/kg/day in 2 divided dose.	A*
Topiramate 25 mg Tablet	N03AX11000T1001XX	Add-on therapy for intractable partial epilepsy	ADULT: Initially 25-50mg nightly for 1 week. Subsequently at wkly or bi-wkly intervals, increase dose by 25-50 to 100mg/day in 2 divided doses. CHILD aged 2 and above: Approx 5-9 mg/kg/day in 2 divided doses. Titrate at 25mg (or less, based on a range of 1-3mg/kg/day) nightly for the 1st week. Subsequently at 1 or 2 wkly intervals, with increments of 1-3 mg/kg/day in 2 divided dose.	A*

Generic Name	MDC	Indications	Dosage	Category
Topiramate 50 mg Tablet	N03AX11000T1002XX	Add-on therapy for intractable partial epilepsy	ADULT: Initially 25-50mg nightly for 1 week. Subsequently at wkly or bi-wkly intervals, increase dose by 25-50 to 100mg/day in 2 divided doses. CHILD aged 2 and above: Approx 5-9 mg/kg/day in 2 divided doses. Titrate at 25mg (or less, based on a range of 1-3mg/kg/day) nightly for the 1st week. Subsequently at 1 or 2 wkly intervals, with increments of 1-3 mg/kg/day in 2 divided dose.	A*
Trace Elements and Electrolytes (Adult) Solution	B05XA30905P3001XX	Only to be used to cover daily loss of electrolyte and trace elements for patient on parenteral nutrition	10 ml added to 500-1000 ml solution, given by IV infusion	A*
Trace Elements and Electrolytes (Paediatric) Solution	B05XA30905P3002XX	Only to be used to cover daily loss of electrolyte and trace elements for patient on parenteral nutrition	According to the needs of the patient. INFANT and CHILD weighing 15 kg or less: Basal requirements of the included trace elements are covered by 1 ml/kg/day to a maximum dose of 15 ml. CHILD weighing 15 kg or more, a daily dose of 15 ml, should meet basic trace element requirements. However, for patients weighing more than 40 kg the adult preparation trace element should be used	A*
Tramadol HCl 100 mg Suppository	N02AX02110S2001XX	Post-operative pain, chronic cancer pain, analgesia/pain relief for patients with impaired renal function	100mg rectally up to qds	A
Tramadol HCl 100 mg/ml Drops	N02AX02110D5001XX	Post-operative pain, chronic cancer pain, analgesia/pain relief for patients with impaired renal function.	50 - 100 mg every 4 hours. Max : 400 mg daily. Not recommended in children	A
Tramadol HCl 50 mg Capsule	N02AX02110C1001XX	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)	A/KK

Generic Name	MDC	Indications	Dosage	Category
Tramadol HCl 50 mg/ml Injection	N02AX02110P3001XX	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	A
Tranexamic Acid 100 mg/ml Injection	B02AA02000P3001XX	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	B
Tranexamic Acid 250 mg Capsule	B02AA02000C1001XX	Haemorrhage associated with excessive fibrinolysis	ADULT: 1-1.5 g (15-25 mg/kg) 2-4 times daily. 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	B
Trastuzumab 440 mg Injection	L01XC03000P4001XX	Used only in adjuvant setting for patients with HER2 over-expressed breast cancer, that is HER2 3+ by immunohistochemistry and over-expressed by FISH (Fluorescence in situ hybridization) and high risk group	Initial loading dose is 4 mg/kg administered as a 90 minutes IV infusion. Subsequent doses is 2 mg/kg administered as 30 minutes IV infusion weekly for 51 weeks	A*
Travoprost 0.004% & Timolol 0.5% Eye Drops	S01ED51990D2003XX	To decrease intraocular pressure (IOP) in patients with open-angle glaucoma or ocular hypertension who are insufficiently responsive to other topical anti glaucomas	1 drop in the affected eye(s) once daily	A*
Tretinoin 0.01% Gel	D10AD01000G3001XX	Acne vulgaris, recalcitrant cases of acne (comedonal type)	Apply thinly to the affected area once daily or twice daily. Avoid exposure to sunlight. Duration of treatment: 8-12 weeks is required before any noticeable response	A/KK
Tretinoin 0.05% Cream	D10AD01000G1001XX	Acne vulgaris and recalcitrant cases of acne (comedonal type)	Apply thinly to the affected area once daily or twice daily. Avoid exposure to sunlight. Duration of treatment: 8 - 12 weeks is required before any noticeable response	A/KK

Generic Name	MDC	Indications	Dosage	Category
Tretinoin 0.1% Cream	D10AD01000G1002XX	Acne vulgaris and recalcitrant cases of acne (comedonal type)	Apply thinly to the affected area once daily or twice daily. Avoid exposure to sunlight. Duration of treatment: 8 - 12 weeks is required before any noticeable response	A
Triamcinolone Acetonide 0.1% Oral Paste	A01AC01351G3101XX	Oral and perioral lesions	Apply a thin layer to affected area 2-4 times daily	B
Triamcinolone Acetonide 10 mg/ml Injection	H02AB08351P3001XX	Inflammation of joints, bursae and tendon sheaths	Smaller joints: 2.5 - 5 mg and larger joints: 5 - 15 mg. Treatment should be limited to 1 mg/injection site to prevent cutaneous atrophy	A
Triamcinolone Acetonide 40 mg/ml Injection	H02AB08351P3002XX	Allergies, dermatoses, rheumatoid arthritis and inflammatory opthalmic diseases	40-80 mg deep into the gluteal muscle	A/KK
Trifluoperazine HCl 5 mg Tablet	N05AB06110T1001XX	Psychotic disorder	ADULT: Initially 5 mg twice daily, increase by 5 mg after 1 week, then at 3-day intervals. Maximum 40 mg/day. CHILD up to 12 years: Initially up to 5 mg daily in divided doses adjusted to response, age and body weight	B
Trimetazidine 20 mg Tablet	C01EB15110T1001XX	Prophylactic treatment of episodes of angina pectoris	20 mg 3 times daily	B
Trimetazidine 35 mg MR Tablet	C01EB15110T5001XX	Prophylactic treatment of episodes of angina pectoris	35 mg twice daily in the morning and evening with meals	B
Trimethoprim 100 mg Tablet	J01EA01000T1001XX	Treatment of urinary tract infections due to susceptible pathogens	ADULT: 200 mg daily in 1 or 2 divided doses or 300 mg daily as a single dose. Acute infection: 200 mg twice daily. CHILD: 6-8 mg/kg/day in 2 divided doses. 6 - 12 years: 100 mg twice daily; 6 months - 5 years: 50 mg twice daily. 6 weeks - 5 months: 25mg twice daily	B

Generic Name	MDC	Indications	Dosage	Category
Trimethoprim 300 mg Tablet	J01EA01000T1002XX	Treatment of urinary tract infections due to susceptible pathogens	ADULT: 200 mg daily in 1 or 2 divided doses or 300 mg daily as a single dose. Acute infection: 200 mg twice daily. CHILD: 6 - 12 years: 100 mg twice daily; 6 months - 5 years: 50 mg twice daily. 6 weeks - 5 months: 25mg twice daily	B
Trioxsalen 5 mg Tablet	D05BA01000T1001XX	Vitiligo	5 - 10 mg daily, 2 - 4 hours before exposure to sunlight. To increase pigmentation: 10 mg daily, 2 hours prior to UV irradiation	A
Triprolidine HCl 1.25 mg and Pseudoephedrine HCl 30 mg per 5 ml Syrup	R01BA52110L9001XX	Decongestion of the upper respiratory tract in common cold, hay fever, allergic and vasomotor rhinitis and sinusitis. Doses to be taken twice daily or three times daily	ADULT and CHILD more than 12 year : 10 ml. CHILD 6 - 12 years : 5 ml, 2 - 5 years : 2.5 ml	B
Triprolidine HCl 2.5 mg and Pseudoephedrine HCl 60 mg Tablet	R01BA52988T1002XX	Decongestion of the upper respiratory tract in common cold, hay fever, allergic and vasomotor rhinitis and aerotitis	ADULT 2.5 mg every 4 - 6 hours; maximum dose 10 mg/day. CHILD 6 - 12 years : 1.25 mg every 4 - 6 hours; maximum dose 5 mg/day, 2 - 4 years : 0.625 mg every 4 - 6 hours; maximum dose 2.5 mg/day, 4 - 6 years : 0.938 mg every 4 - 6 hours; maximum dose 3.744 mg/day	B
Triptorelin 3.75 mg Injection	L02AE04000P2001XX	i) Treatment of confirmed central precocious puberty (preterm sexual development) in girls under 9 years, boys under 10 years of age ii) Genital and extragenital endometriosis (stage I to stage IV). Treatment should not be administered for more than 6 months. It is not recommended to start a second treatment course with triptorelin or another GnRH analogue.	1 intramuscular injection every 4 weeks. The treatment must be started in the first 5 days of the menstrual cycle. The duration of treatment depends on the initial severity of the endometriosis and the changes observed in the clinical features. In principle, the treatment should be administered for at least 4 months and for at most 6 months. It is not recommended to start a second treatment course with triptorelin or another GnRH analogue.	A

Generic Name	MDC	Indications	Dosage	Category
Tropicamide 1% Eye Drops	S01FA06000D2002XX	Topical use to produce cycloplegic refraction for diagnostic purposes	1 - 2 drops several times a day	A/KK
Trospium Chloride 20mg coated tablet	G04BD09100C1001XX	Symptomatic treatment for urge incontinence and/or increased urinary frequency and urgency as may occur in patients with overactive bladder (eg. Idiopathic or neurologic detrusor overactivity) Place in therapy: As first line treatment for overactive bladder in patients with Parkinsonism, Alzheimer?s or other cognitive disease	1 tablet twice daily. Tablet should be swallowed whole with a glass of water before meals on empty stomach. Severe renal impairment (CrCl between 10 & 30 mL/min/1.73 m2): 1 tab daily or every 2nd day	A*
Tuberculine PPD Injection	V04CF01000P3001XX	For routine Mantoux (tuberculin sensitivity) test	10 units is injected intradermally	B
Typhoid Vaccine Capsule	J07AP01000C1001XX	Active immunization against typhoid fever in adult and child 6 years of age or older	ADULT and CHILD 6 years of age or older, 1 capsule on days 1, 3 and 5	B
Typhoid Vaccine Injection (20 doses)	J07AP02000P3001XX	Active immunization against typhoid fever in adult and child more than 2 years	0.5 ml single IM injection into the deltoid or vastus lateralis, may reimmunize with 0.5 ml IM every 3 years if needed.	B
Ulipristal Acetate 30mg Tablet	G03AD02122T1001XX	Emergency contraception within 4-5 days of unprotected sexual intercourse for sexual assault victim.	Dosage is one tablet to be taken orally as soon as possible, but no later than 120 hours (5 days) after unprotected sexual intercourse or contraceptive failure.	A
Urofollitropin (FSH) 150 IU Injection	G03GA04000P3002XX	Stimulation of follicular growth in infertile women	To be individualized. 75 IU-150 IU daily and maybe increased or decreased by up to 75 IU/day at 7 or 14 day intervals if necessary	A*
Urofollitropin (FSH) 75 IU Injection	G03GA04000P3001XX	Stimulation of follicular growth in infertile women	To be individualized. 75 IU-150 IU daily and maybe increased or decreased by up to 75 IU/day at 7 or 14 day intervals if necessary	A*

Generic Name	MDC	Indications	Dosage	Category
Urokinase 6000 IU Injection	B01AD04000P4001XX	Treatment of thromboembolic disease such as mycocardial infarction, peripheral artery occlusion, pulmonary embolism, retinal artery thrombosis and other ophthalmologic use	ADULT: Acute pulmonary embolism: IV loading dose 4400 iu/kg over 10 mins, maintenance 4400 iu/kg/hour for 12 hours. Peripheral vascular occlusion: infuse 2500 iu/ml into clot at a rate of 4000 iu/min for 2 hours. This may be repeated up to 4 times. Hyphaema: 5000 IU in 2 ml saline solution is injected and withdrawn repeatedly over the iris. If residual clot remains, leave 0.3ml in the anterior chambers for 24-48 hours to facilitate futher dissolution	A
Ursodeoxycholic Acid 250 mg Capsule	A05AA02000C1001XX	Cholestatic liver diseases (eg. primary biliary cirrhosis, primary cholangitis etc)	10-15 mg/kg daily in 2 to 4 divided doses usually for 3 months to 2 years. If there is no decrease in stone size after 18 months, further treatment seems not to be useful	A
Ustekinumab 90 mg/ml Injection	L04AC05000P3002XX	Treatment of moderate to severe plaque psoriasis in adults who failed to, or who have contraindication to, or are intolerant to conventional systemic therapies including ciclosporin, methotrexate and photochemotherapy (PUVA).	Body weight less than 100kg: Initial dose of 45 mg SC, followed by 45 mg 4 weeks later, then every 12 weeks thereafter. Body weight more than 100 kg: initial dose 90 mg SC, followed by 90 mg 4 weeks later, & then every 12 weeks thereafter.	A*
Valganciclovir 450 mg Tablet	J05AB14110T1001XX	For the prevention of cytomegalovirus (CMV) disease in CMV-negative patients who have received a solid organ transplant from a CMV-positive donor	For adult patients who have received other than kidney transplant, the recommended dose is 900 mg (two 450 mg tablets) once a day starting within 10 days of transplantation until 100 days post-transplantation. For adult patients who have received a kidney transplant, the recommended dose is 900 mg (two 450 mg tablets) once a day starting within 10 days of transplantation until 200 days post-transplantation.	A*

Generic Name	MDC	Indications	Dosage	Category
Valproic Acid and Sodium Valproate (ER) 500mg Tablet	N03AG01520T5001XX	i) In the treatment of generalized or partial epilepsy, particularly with the following patterns of seizures:absence, myoclonic, tonic-clonic, atonic-mixed as well as, for partial epilepsy:simple or complex seizures, secondary generalized seizures, specific syndrome (West, Lennox-Gastatut). ii) Treatment and prevention of mania associated with bipolar disorders.	i) Adults: Dosage should start at 500mg daily increasing by 200mg at three-day intervals until control is achieved. This is generally within the dosage range 1000mg to 2000mg per day. Children: >20KG: 500mg/day (irrespective of weight) with spaced increases until control is achieved. ii) Initial dose of 1000mg/day, to be increase rapidly as possible to achieve lowest therapeutic dose, which produce desired clinical effects. Recommend initial dose is 1000mg & 2000mg daily. Max dose 3000mg daily.	B
Valsartan 160 mg and Hydrochlorothiazide 25 mg Tablet	C09DA03935T1002XX	Hypertension in patients who cannot tolerate ACE inhibitors because of cough	1 tablet once daily	A/KK
Valsartan 160 mg Tablet	C09CA03000T1002XX	Patients who cannot tolerate ACE inhibitors because of cough, in i) Hypertension ii) Heart failure iii) Post myocardial infarction	i) 80 or 160 mg once daily. May be increased to 320 mg once daily. ii) 40 mg twice daily. Uptitration to 80 mg and 160 mg twice daily. Max: 320 mg in divided doses. iii) 20 mg twice daily. Uptitration to max of 160 mg twice daily.	A/KK
Valsartan 80 mg and Hydrochlorothiazide 12.5 mg Tablet	C09DA03935T1001XX	Hypertension in patients who cannot tolerate ACE inhibitors because of cough	1 tablet once daily	A/KK
Valsartan 80 mg Tablet	C09CA03000T1001XX	Patients who cannot tolerate ACE inhibitors because of cough, in i) Hypertension ii) Heart failure iii) Post myocardial infarction	i) 80 or 160 mg once daily. May be increased to 320 mg once daily. ii) 40 mg twice daily. Uptitration to 80 mg and 160mg twice daily. Max: 320 mg in divided doses. iii) 20 mg twice daily increased over several weeks to 160mg twice daily if tolerated.	A/KK

Generic Name	MDC	Indications	Dosage	Category
Vancomycin HCl 500 mg Injection	J01XA01110P4001XX	Only for the treatment of MRSA and CAPD peritonitis	Slow IV infusion, ADULT: 500 mg over at least 60 minutes every 6 hours or 1 g over at least 100 minutes every 12 hours. NEONATE up to 1 week, 15 mg/kg initially, then 10 mg/kg every 12 hours. INFANT 1 - 4 weeks, 15 mg/kg initially then 10 mg/kg every 8 hours. CHILD over 1 month, 10 mg/kg every 6 hours	A*
Varenicline Tartrate 0.5 mg Tablet	N07BA03123T1001XX	Smoking cessation treatment	0.5 mg once daily for Day 1-3, then 0.5 mg twice daily for Day 4-7, then 1 mg twice daily; duration of treatment is 12 weeks	A/KK
Varenicline Tartrate 1 mg Tablet	N07BA03123T1002XX	Smoking cessation treatment	0.5 mg once daily for Day 1-3, then 0.5 mg twice daily for Day 4-7, then 1 mg twice daily; duration of treatment is 12 weeks	A/KK

Generic Name	MDC	Indications	Dosage	Category
Varicella Virus Vaccine Live Attenuated Injection	J07BK01000P4001XX	i) Health staff working with children, pregnant women, transplant, cancer and immunocompromised patients who are at high risk of contacting varicella and transmitting it to at risk patients ii) Transplant patients or candidates who are: a) Immunocompetent and not receiving immunosuppressant drugs, do not have graft versus host disease 2 years or more after transplant b) Susceptible to Varicella-Zoster virus at least 3 weeks before grafting iii) Children: a) with impaired humoral immunity b) HIV-infected children more than 12 months of age, in CDC class N1 (asymptomatic) or A1 (mildly symptomatic) with age specific CD4 more than 25% c) with conditions that require systemic steroid therapy less than 2 mg/kg body weight or a total of 20 mg/day of prednisolone or its equivalent. [Those receiving high doses of systemic steroids at 2 mg/kg body weight or more of prednisolone for more than 2 weeks may be vaccinated after steroid therapy has been discontinued for at least three months] iv) Acute lymphoblastic leukemia (ALL) patients with negative history of varicella who:- a) are 12 months to 17 years of age b) have leukemia in remission for at least 12 months c) have a peripheral blood lymphocyte count 700 cells/ mm3 or more. [If platelet count of greater 100,000/mm3 within 24 hours of vaccination are not being submitted to radiotherapy. Chemotherapy should be withheld for seven days before and after immunisation] v) Susceptible subjects in clinical trials who will be submitted for chemotherapy vi) Children and susceptible patients on chronic dialysis	ADULT and CHILD 13 years or more: 2 doses of 0.5 ml SC injection separated by 4 - 8 weeks apart. CHILD 12 months - 12 years: 0.5ml SC as a single dose	A*

Generic Name	MDC	Indications	Dosage	Category
Vasopressin 20 units/ml Injection	H01BA01000P3001XX	i) Pituitary diabetes insipidus ii) Oesophageal variceal bleeding	i) 5 - 20 units SC or IM every 4 hours ii) 20 units in 100 - 200 ml 5% dextrose saline over 15 minutes as infusion which may be repeated after at intervals of 1 - 2 hours. Maximum: 4 doses	A
Vecuronium Bromide 10 mg/10 ml Injection	M03AC03320P3001XX	As an adjunct in anaesthesia to produce skeletal muscle relaxation	ADULT & NEONATES > 5 MONTHS Initial: 80-100 mcg/kg as inj. Maintenance: 20-30 mcg/kg, adjust according to response. Alternatively, as continuous infusion at 0.8-1.4 mcg/kg/min after initial IV dose of 40-100 mcg/kg. NEONATE and INFANT up to 4 months: Initially 10 - 20 mcg/kg, then incremental dose to achieve response	A*
Vecuronium Bromide 4 mg/ml Injection	M03AC03320P3002XX	As an adjunct in anaesthesia to produce skeletal muscle relaxation	ADULT & NEONATES > 5 MONTHS Initial: 80-100 mcg/kg as inj. Maintenance: 20-30 mcg/kg, adjust according to response. Alternatively, as continuous infusion at 0.8-1.4 mcg/kg/min after initial IV dose of 40-100 mcg/kg. NEONATE and INFANT up to 4 months: Initially 10 - 20 mcg/kg, then incremental dose to achieve response.	A*
Venlafaxine HCl 150 mg Extended Release Capsule	N06AX16110C2002XX	i) Depression ii) Generalized anxiety disorder iii) Social anxiety disorder (social phobia) iv) Panic disorder	i), ii) & iii) ADULT: 75 mg once daily. May increase dose by 75 mg/day every 4 days to a maximum dose of 225 mg/day, (severe depression: max: 375mg/day) iv) 37.5 mg/day for the first 4-7 days after which the dose should be increased to 75 mg once daily. CHILD and ADOLESCENT under 18 years not recommended.	A*

Generic Name	MDC	Indications	Dosage	Category
Venlafaxine HCl 75 mg Extended Release Capsule	N06AX16110C2001XX	i) Depression ii) Generalized anxiety disorder iii) Social anxiety disorder (social phobia) iv) Panic disorder	i), ii) & iii) ADULT: 75 mg once daily. May increase dose by 75 mg/day every 4 days to a maximum dose of 225 mg/day, (severe depression: max: 375mg/day) iv) 37.5 mg/day for the first 4-7 days after which the dose should be increased to 75 mg once daily. CHILD and ADOLESCENT under 18 years not recommended	A*
Verapamil HCl 2.5 mg/ml Injection	C08DA01110P3001XX	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.	A/KK
Verapamil HCl 40 mg Tablet	C08DA01110T1001XX	i) Supraventricular tachyarrhythmias (SVT) prophylaxis ii) angina	ADULT: 40 - 80 mg 3-4 times daily. In oral long term therapy, max: 480 mg daily	B
Vildagliptin 50 mg and Metformin HCl 1000 mg Tablet	A10BD08926T1002XX	Treatment of type 2 diabetes mellitus patients who are unable to achieve sufficient glycaemic control at their maximally tolerated dose of oral metformin alone or who are already treated with the combination of vildagliptin and metformin as separate tablets.	50 mg/850 mg or 50 mg/1000 mg twice daily. Maximum daily dose is 100 mg vildagliptin plus 2000 mg metformin hydrochloride.	A*
Vildagliptin 50 mg and Metformin HCl 500 mg Tablet	A10BD08926T1003XX	Treatment of type 2 diabetes mellitus patients who are unable to achieve sufficient glycaemic control at their maximally tolerated dose of oral metformin alone or who are already treated with the combination of vildagliptin and metformin as separate tablets.	50/500mg or 50/850mg or 50/1000mg twice daily. Maximum daily dose is 100mg vildagliptin and 2000mg metformin.	A*

Generic Name	MDC	Indications	Dosage	Category
Vildagliptin 50 mg and Metformin HCl 850 mg Tablet	A10BD08926T1001XX	Treatment of type 2 diabetes mellitus patients who are unable to achieve sufficient glycaemic control at their maximally tolerated dose of oral metformin alone or who are already treated with the combination of vildagliptin and metformin as separate tablets.	50 mg/850 mg or 50 mg/1000 mg twice daily. Maximum daily dose is 100 mg vildagliptin plus 2000 mg metformin hydrochloride.	A*
Vildagliptin 50 mg Tablet	A10BH02000T1001XX	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	A*

Generic Name	MDC	Indications	Dosage	Category
Vinblastine Sulphate 10 mg Injection	L01CA01183P3002XX	Hodgkin's disease, choriocarcinoma resistant to other chemotherapeutic agents, non-small cell lung cancer, Langerhans cell histiocytosis	Adult: Initially, 3.7 mg/m2, increase dose weekly based on WBC counts in increments of about 1.8 mg/m2 until leukocyte count decreases to about 3000/mm3, or maximum weekly dose of 18.5 mg/m2 reached. Usual dose: 5.5-7.4 mg/m2 per week. Do not administer next dose, even though 7 days have lapsed unless the leukocyte count has returned to at least 4000/mm3. Child: Initial 2.5 mg/m2 of BSA, increased dose at weekly intervals in increments of about 1.25 mg/m2 until leukocyte count decreases to about 3000/ mm3, or maximum weekly dose of 12.5 mg/m2 reached. Do not increase dose once leukocyte count reaches approximately 3000 cells/mm3, instead, a dose of 1 increment smaller to be admin at wkly intervals for maintenance. Do not administer next dose, even though 7 days have lapsed unless the leukocyte count has returned to at least 4000/mm3.	A
Vincristine Sulphate 1 mg Injection	L01CA02183P3001XX	i) Solid tumours ii) Gestational trophoblastic disease iii) Non-Hodgkin's lymphoma iv) Multiple myeloma v) Acute lymphoblastic leukemia	i) ADULT: 1.4 mg/m2 weekly (maximum 2 mg weekly) ii) Refer to protocol iii) 1.4 mg/m2 weekly (maximum 2 mg weekly) iv) 0.4 mg/m2 IV continuous infusion on days 1 - 4 v) Refer to protocol. CHILD: 1 mg/m2 to 2 mg/m2 weekly according to protocol (0.05 mg/kg for infants less than 10kg)	A

Generic Name	MDC	Indications	Dosage	Category
Vinorelbine 10 mg Injection	L01CA04000P4001XX	i) First line treatment in non-small cell lung cancer in combination with cisplatin/ifosfomide ii) Metastatic breast cancer	i) Single agent: Adult 30mg/m2 IV administered over 6-10 minutes once weekly Combination with cisplatin : 30mg/m2 IV administered over 6-10mintes once weekly combination with cisplatin IV on days and 29 and then every 6 weeks or Vinolrebine administered at a dose of 25mg/m2 IV weekly in combination with cisplatin given every 4 weeks at a dose of 100mg/m2 ii) 25 - 30 mg/m2 diluted in saline solution, infused over 6 - 10 minutes, administered weekly or vinolrebine maybe given as an 8mg/m2 IV BOLUS followed by 8mg/m2 as a 96-hour intravenous infusion	A*
Vinorelbine 50 mg Injection	L01CA04000P4002XX	i) First line treatment in non-small cell lung cancer in combination with cisplatin/ifosfomide ii) Metastatic breast cancer	i) Single agent: Adult 30mg/m2 IV administered over 6-10 minutes once weekly Combination with cisplatin : 30mg/m2 IV administered over 6-10mintes once weekly combination with cisplatin IV on days and 29 and then every 6 weeks or Vinolrebine administered at a dose of 25mg/m2 IV weekly in combination with cisplatin given every 4 weeks at a dose of 100mg/m2 ii) 25 - 30 mg/m2 diluted in saline solution, infused over 6 - 10 minutes, administered weekly or vinolrebine maybe given as an 8mg/m2 IV BOLUS followed by 8mg/m2 as a 96-hour intravenous infusion.	A*
Vitamin A & D (Cod Liver Oil)	A11CB00901L5001XX	Prevention of ricketts	Not more than 10 ml daily, allowance being made for Vitamin D obtained from other sources	C

Generic Name	MDC	Indications	Dosage	Category
Vitamin A & D Concentrate 25,000 units/0.6ml Liquid	A11CB00901L5002XX	Prevention of ricketts	0.06 - 0.6ml (2,500-25,000 IU of Vitamin A and 250-2,500 IU of D) daily, allowance being made for A and D obtained from other sources	B
Vitamin A 50,000 IU Capsule	A11CA01000C1001XX	Children with measles malnutrition and serious infections. Category C can use this drug for Orang Asli and in Sabah	i) 0-5 months, 50,000 IU ii) 6-11 months, 100,000 IU iii) 1-5 years, 200,000 IU. Frequency twice daily	C
Vitamin B Complex 10 ml Injection	A11EX00901P3001XX	Prophylaxis and treatment of vitamin B deficiency	1-2 ml daily by IM	B
Vitamin B Complex Tablet	A11EA00901T1001XX	Prophylaxis and treatment of vitamin B deficiency	1-2 tablets daily	C+
Vitamin B1, B6, B12 Injection	A11DB00901P3001XX	For deficiency or raised requirement of Vitamin B1, B6, B12	Mild cases: 1 ampoule given by IM 2-3 times weekly. Severe cases: 1 ampoule daily	B
Vitamin B1, B6, B12 Tablet	A11DB00901T1001XX	For deficiency or raised requirement of Vitamin B1, B6, B12	1 - 3 tablets 3 times daily swallowed unchewed.	B
Vitamin C 10% Eye Drops	S01XA15000D2001XX	For all types of severe chemical corneal burns especially acid and alkali burns	1 to 4 times daily depending on severity of case	B
Vitamin E, B12, B6, Nicotinamide Tablet	A11E000901T1001XX	To improve appetite and growth. Neurasthenia, nausea and vomiting in pregnancy, radiation sickness and neuritis due to isoniazid therapy and alcoholism	1 - 2 tablet daily	A
Vitamin K1 1 mg/ml Injection	B02BA01000P3001XX	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	C+
Vitamin K1 10 mg/ml Injection	B02BA01000P3002XX	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	B

Generic Name	MDC	Indications	Dosage	Category
Vitamin K1 Mixed Micelle 2 mg/0.2 ml Injection	B02BA01000P3004XX	Prevention of bleeding in neonates	Healthy neonate 2 mg orally at birth or soon after followed by 2 mg at 4 - 7 days. Exclusively breastfed baby, in addition, 2 mg orally at monthly intervals until end of breastfeeding period. Neonate at special risk, 1 mg IM/IV at birth or soon after if oral route is not suitable. Treatment: 1 mg IV initially. Further doses depend on clinical picture and coagulation status	B
Voriconazole 200 mg Injection	J02AC03000P3001XX	i) Treatment of immunocompromised patients with progressive, possibly life-threatening infections such as invasive aspergillosis, fluconazole-resistant serious invasive candidiasis, serious fungal infections caused by Scedosporium species and Fusarium species ii)Prevention of breakthrough fungal infections in febrile high-risk neutropenic patients	Adult and Children 12 years and greater: Loading dose: 6 mg/kg 12 hourly for first 24 hours. Maintenance: i) 4 mg/kg 12 hourly ii) 3 mg/kg 12 hourly. Dose may be increased to 4 mg/kg 12 hourly if response is inadequate. Children aged 2years to <12years with normal hepatic and renal function: No loading dose needed; 7mg/kg 12hourly	A*
Voriconazole 200 mg Tablet	J02AC03000T1002XX	i) Treatment of immunocompromised patients with progressive, possibly life-threatening infections such as invasive aspergillosis, fluconazole-resistant serious invasive candidiasis, candidiasis of the oesophagus, serious fungal infections caused by Scedosporium species and Fusarium species ii) Prevention of breakthrough fungal infections in febrile high-risk neutropenic patients	Adult and Children 12 years and greater and over 40 kg: Loading dose: 400 mg 12 hourly for first 24 hours. Maintenance: 200 - 300 mg 12 hourly. Less than 40 kg: Loading dose: 200 mg 12 hourly for first 24 hours. Maintenance: 100 - 150 mg 12 hourly. Children aged 2years to <12years with normal hepatic and renal function: No loading dose needed; 200mg 12hourly	A*

Generic Name	MDC	Indications	Dosage	Category
Voriconazole 50 mg Tablet	J02AC03000T1001XX	i) Treatment of immunocompromised patients with progressive, possibly life-threatening infections such as invasive aspergillosis, fluconazole-resistant serious invasive candidiasis, candidiasis of the oesophagus, serious fungal infections caused by Scedosporium species and Fusarium species ii) Prevention of breakthrough fungal infections in febrile high-risk neutropenic patients	ADULT and CHILDREN 12 years and greater and over 40 kg: Loading dose: 400 mg 12 hourly for first 24 hours. Maintenance: 200 - 300 mg 12 hourly. Less than 40 kg: Loading dose: 200 mg 12 hourly for first 24 hours. Maintenance: 100 - 150 mg 12 hourly	A*
Warfarin Sodium 1 mg Tablet	B01AA03520T1001XX	Treatment and prophylaxis of thromboembolic disorders	Initially 10 mg daily for 2 days. Maintenance dose, 3-9 mg daily according to the INR (taken at the same time each day)	B
Warfarin Sodium 2 mg Tablet	B01AA03520T1002XX	Treatment and prophylaxis of thromboembolic disorders	Initially 10 mg daily for 2 days. Maintenance dose, 3-9 mg daily according to the INR (taken at the same time each day)	B
Warfarin Sodium 3 mg Tablet	B01AA03520T1003XX	Treatment and prophylaxis of thromboembolic disorders	Initially 10 mg daily for 2 days. Maintenance dose, 3-10 mg daily according to the INR (taken at the same time each day)	B
Warfarin Sodium 5 mg Tablet	B01AA03520T1004XX	Treatment and prophylaxis of thromboembolic disorders	Initially 10 mg daily for 2 days. Maintenance dose, 3-10 mg daily according to the INR (taken at the same time each day)	B
Water for Injection	V07AB00000P3001XX	As a diluent and vehicle for the administration of medications	According to the needs of the patient	C+
White Petroleum Anhydrous Liquid Landin, Mineral Oil Eye Ointment	S01XA20900G5101XX	Keeping the eye lubricated and comfortable during the night	Apply a small amount into the eye	A

Generic Name	MDC	Indications	Dosage	Category
Zidovudine 1% Injection	J05AF01000P3001XX	To reduce the rate of maternal-foetal transmission of HIV in: i) HIV-positive pregnant women over 14 weeks of gestation ii) Their newborn infants	i) Prophylaxis of maternal-foetal HIV transmission during labour and delivery Adult: Loading dose: 2 mg/kg, followed by continuous infusion of 1 mg/kg/hr until umbilical cord is clamped. If caesarean section is planned, start the IV infusion 4 hr before the operation. Renal and Hepatic impairment: Dose reduction may be needed. HIV infection (to be discuss: not in indication) Adult: 1-2 mg/kg every 4 hr, given as 2-4 mg/ml infusion over 1 hr. Child: As continuous infusion: 20 mg/m2/hr. Alternatively, as intermittent infusion: 120 mg/m2 every 6 hr. Renal impairment: Haemodialysis or peritoneal dialysis: 1 mg/kg every 6-8 hr. ii) Prophylaxis of HIV infection in neonates Child: Neonates: 1.5 mg/kg every 6 hr. Start treatment within 12 hr after birth and continue for 1st 6 wk of life. Dose to be given via IV infusion over 30 minutes. Renal impairment: Dose adjustment may be needed.	A

Generic Name	MDC	Indications	Dosage	Category
Zidovudine 10 mg/ml Syrup	J05AF01000L9001XX	i) Management of patients with asymptomatic and symptomatic (early or advanced) HIV infections with CD4 cell counts less than 500 cu. mm. ii) Neonatal prophylaxis	i) HIV infection Adult: 600 mg daily in divided doses, in combination with other antiretroviral agents. Child: 6 wk - 12 yr: 160 mg/m2 every 8 hr. Max: 200 mg every 8 hr. May be used in combination with other anti-retrovirals. Renal and Hepatic impairment: Dose reduction may be needed. ii) Prophylaxis of HIV infection in neonates Child: Neonates: 2 mg/kg every 6 hr for 1st 6 wk of life, starting within 12 hr after birth. Renal and hepatic impairment: Dose adjustment may be needed.	A*
Zidovudine 100 mg Capsule	J05AF01000C1001XX	i) Management of patients with asymptomatic and symptomatic (early or advanced) HIV infections with CD4 cell counts less than 500 cu. mm ii) Neonatal prophylaxis	i) HIV infection Adult: 600 mg daily in divided doses, in combination with other antiretroviral agents. Child: 6 wk - 12 yr: 160 mg/m2 every 8 hr. Max: 200 mg every 8 hr. May be used in combination with other anti-retrovirals. Renal and Hepatic impairment: Dose reduction may be needed. ii) Prophylaxis of HIV infection in neonates Child: Neonates: 2 mg/kg every 6 hr for 1st 6 wk of life, starting within 12 hr after birth. Renal and hepatic impairment: Dose adjustment may be needed.	A/KK
Zidovudine 300 mg & Lamivudine 150 mg Tablet	J05AR01964T1001XX	HIV infection in combination with at least one other antiretroviral drug	ADULT and CHILD over 12 years: 1 tablet twice daily	A/KK

Generic Name	MDC	Indications	Dosage	Category
Zidovudine 300 mg Tablet	J05AF01000T1001XX	i) Management of patients with asymptomatic and symptomatic (early or advanced) HIV infections with CD4 cell counts < 500 cu. mm ii) HIV positive pregnant mothers	HIV infection Adult: 600 mg daily in divided doses, in combination with other antiretroviral agents. Child: 6 wk - 12 yr: 160 mg/m2 every 8 hr. Max: 200 mg every 8 hr. May be used in combination with other anti-retrovirals. ii)Prophylaxis of maternal-foetal HIV transmission Adult: 100 mg 5 times daily or 200 mg tid or 300 mg bid. Start treatment after 14th wk of gestation until the start of labour. Haemodialysis or peritoneal dialysis (CrCl <10 ml/min: 100 mg every 6-8 hr.	A*
Zinc Oxide Cream	D02AB00000G1001XX	Skin protective in various skin conditions such as nappy rash, eczema and problem skin	Apply 3 times daily or as required	C+
Zinc Oxide Ointment	D02AB00240G5001XX	Skin protective in various skin conditions such as nappy rash and eczema	Apply 3 times daily or as required	C
zinc oxide, benzyl benzoate and balsam peru suppository	C05AX04931S1001XX	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.	C
Ziprasidone 20 mg/ml Injection	N05AE04110P3001XX	Acute agitation in schizophrenia	ADULT: Initially 10 mg (every 2 hour) or 20 mg (every 4 hour). Maximum: 40 mg/day. IM administration more than 3 days has not been studied	A*
Zoledronic Acid 4 mg Injection	M05BA08000P3001XX	i) Treatment of hypercalcaemia of malignancy ii) Prevention of skeletal related events in patients with multiple myeloma involving multiple bone lesions	4 mg reconstituted and should be given as a 15 minutes IV infusion every 3-4 weeks	A*
Zolpidem Tartrate 10 mg Tablet	N05CF02123T1001XX	For treatment of insomnia	10-mg tablet daily. Stilnox should always be taken just before going to bed. In elderly patients or patients with hepatic insufficiency: Dosage should be halved ie, 5 mg. Dosage must never exceed 10 mg/day.	A

Generic Name	MDC	Indications	Dosage	Category
Zonisamide 100mg tablet	N03AX15000T1001XX	As adjunctive therapy in the treatment of partial seizures in adults with epilepsy. Restrictions: As adjunctive therapy in the treatment of partial seizures in adults with epilepsy when 1st line and 2nd line therapy failed.	For adults, usually 100 to 200mg of zonisomide is to be administered orally 1 to 3 times a day initially. The dose is gradually increased at every one to two weeks up to 200-400mg daily, in 1 to 3 divided dose. The maximum daily dose should not exceed 600mg per day.	A*
Zuclopenthixol 20 mg/ml Drops	N05AF05000D5001XX	Only for psychoses with insight or compliance	Acute Schizophrenia and Other Acute Psychoses; Severe Acute States of Agitation; Mania: Oral treatment: Usually 10-50 mg/day. In moderate to severe cases initially 20 mg/day increased, if necessary, by 10-20 mg/day every 2-3 days to ≥75 mg daily.	A*
Zuclopenthixol Acetate 100 mg/2 ml Injection	N05AF05122P3002XX	Only for treatment of agitated and violent patients suffering from schizophrenia who are not responding to the available standard drugs	Clopixol-Acuphase: Clopixol-Acuphase is administered by IM injection. The dosage range should normally be 50-150 mg (1-3 mL) IM repeated if necessary, preferably with a time interval of 2-3 days. In a few patients, an additional injection may be needed 24-48 hrs following the 1st injection. In the maintenance therapy, treatment should be continued with oral Clopixol or Clopixol Depot IM after the following guidelines: Change to Oral Clopixol: 2-3 days after the last injection of Clopixol-Acuphase, a patient who has been treated with 100 mg Clopixol-Acuphase, oral treatment should be started at a dosage of about 40 mg daily, possibly in divided dosages. If necessary, the dose can be further increased by 10-20 mg every 2-3 days up to 75 mg or more.	A*

Generic Name	MDC	Indications	Dosage	Category
Zuclopenthixol Acetate 50 mg/ml Injection	N05AF05122P3001XX	Only for treatment of agitated and violent patients suffering from schizophrenia who are not responding to the available standard drugs	Clopixol-Acuphase: Clopixol-Acuphase is administered by IM injection. The dosage range should normally be 50-150 mg (1-3 mL) IM repeated if necessary, preferably with a time interval of 2-3 days. In a few patients, an additional injection may be needed 24-48 hrs following the 1st injection. In the maintenance therapy, treatment should be continued with oral Clopixol or Clopixol Depot IM after the following guidelines: Change to Oral Clopixol: 2-3 days after the last injection of Clopixol-Acuphase, a patient who has been treated with 100 mg Clopixol-Acuphase, oral treatment should be started at a dosage of about 40 mg daily, possibly in divided dosages. If necessary, the dose can be further increased by 10-20 mg every 2-3 days up to 75 mg or more.	A*
Zuclopenthixol Decanoate 200 mg/ml Injection	N05AF05135P2001XX	Only for treatment of agitated and violent patients suffering from schizophrenia who are not responding to the available standard drugs	By deep IM injection test dose 100 mg followed after 7 - 28 days by 100 - 200 mg or more followed by 200 - 400 mg at intervals of 2 - 4 weeks adjusted according to response. Maximum 600 mg weekly. Child not recommended	A*