



ASCENSION HEALTH FORMULARY DRUG LIST (CONDENSED VERSION)

April 2014

Please note: This is not a comprehensive list of all FDA approved drugs

LEGEND

In each class, drugs are alphabetically listed by generic name. Where an FDA approved generic is available, the generic name is **bolded and asterisked**.

In situations where an FDA approved generic is available, brand names are listed for reference only. Brand name drugs with generic equivalents are non-formulary and require a higher copayment. Example: **Cefactor*** (Ceclor) means that the generic Cefactor is formulary and the brand is non-formulary and requires a higher copayment.

If the generic name is not bolded, the active ingredient is only available as a brand name drug and is on Formulary. Example: Tiotropium (Spiriva) means that the brand, Spiriva is covered and there is no generic available. Spiriva is the brand name.

If the word 'generic' and the brand name both appear within the parenthesis, both the generic and the brand name drugs are on Formulary. Example: Phenytoin (Dilantin / generic) means that both the brand and generic are available. Therefore, the brand Dilantin and the generic phenytoin are on formulary.

Any brand name drug not found in this formulary listing shall be considered non-formulary.

GENERIC DRUGS

Ascension Health endorses the use of FDA approved bioequivalent generics and encourages the prescribing and dispensing of these generic medications whenever medically appropriate.

EXCLUDED DRUGS

Ascension Health has excluded the following drugs or drug classes from coverage under the pharmacy benefit: cosmetic products (e.g. Egrifta, Latisse, Vaniqa), cough & cold combinations, allergy ophthalmics (e.g. Patanol), H2 Blockers (e.g. Zantac, Tagamet), non-sedating antihistamines (e.g. Allegra, Clarinex), Duexis, Lazanda/Subsys, meperidine, Oracea, Rayos, Solodyn, Suprenza ODT, medical foods and drug/medical food combinations and over-the-counter products. Drugs that must be given by a medical professional (e.g. infused products) are excluded from the pharmacy benefit.

PRIOR AUTHORIZATION / STEP THERAPY / QUANTITY LIMITS

Select drugs require prior authorization (PA) of benefits. Medication utilization must meet FDA approved indications as well as Ascension Health guidelines.

Step Therapy Protocols (ST): Step therapy requires the use of one or more medications before benefits for the use of another medication can be authorized.

Quantity Limits (QL): Ascension Health has identified a number of select medications which will be subject to quantity limits. A quantity limit establishes the maximum amount of a prescription medication Ascension Health will cover as a benefit within a defined period of time. Quantity limits may be implemented on a per day basis (e.g. 1 tablet per day), per prescription or per 30 days.

SPECIALTY DRUGS

Ascension Health has specified certain specialty drugs are to be filled only through the in-house pharmacies or from Coram. These drugs are noted in the list below with (SP).

ANTI-INFECTIVE AGENTS

ANTIBIOTICS

- Cephalosporins
Cefactor* (Ceclor)
Cefdinir* (Omnicef)
Cefditoren* (Spectracef)
Cefadroxil* (Duracef)
Cefprozil* (Cefzil)
Cefuroxime* (Ceftin)
Cefpodoxime* (Vantin)
Cephalexin* (Keflex)
Macrolides.....
Azithromycin* (Zithromax)(QL)
Clarithromycin XL* (Biaxin XL)
Erythromycin* (Eryc, PCE)
Erythromycin/Sulfisoxazole* (Pediazole)
Penicillins
Amoxicillin* (Amoxil)
Amoxicillin/Clavulanate* (Augmentin)
Ampicillin* (Principen)
Dicloxacillin* (Pathocil)
Penicillin* (Veetids)
Quinolones.....
Ciprofloxacin/XR* (Cipro/XR) (QL)
Levofloxacin* (Levaquin)(QL)
Ofloxacin* (Floxin)
Sulfonamides
Erythromycin/Sulfisoxazole* (Pediazole)
Sulfamethoxazole/Trimethoprim* (Bactrim)
Sulfisoxazole* (generic)
Tetracyclines
Doxycycline hyclate* (Vibramycin)
Minocycline* (Minocin, Dynacin)

- Tetracycline* (Sumycin)
ANTIFUNGAL AGENTS (ORAL)
Clotrimazole* (Mycellex)
Fluconazole* (Diflucan) (QL)
Itraconazole* (Sporanox)
Ketoconazole* (Nizoral)
Nystatin* (Mycostatin)
Terbinafine* (Lamisil)(QL)
Voriconazole* (Vfend)

- ANTI-MALARIALS
Chloroquine* (Aralen)
Hydroxychloroquine* (Plaquenil)
Mefloquine* (Lariam)
Quinine* (generic)

- ANTI-TUBERCULOSIS AGENTS
Ethambutol* (Myambutol)
Isoniazid* (Nydrazid)
Pyrazinamide* (pyrazinamide)
Rifampin* (Rifadin)

- OTHER ANTI-INFECTIVES
Clindamycin* (Cleocin)
Iodoquinol* (iodoquinol)
Metronidazole* (Flagyl)
Trimethoprim* (Proloprim)

ANTI-VIRAL AGENTS

- Abacavir* (Ziagen)
Abacavir/Lamivudine (Epzicom)
Abacavir/Lamivudine/Zidovudine (Trizivir)
Acyclovir* (Zovirax)
Adefovir (Hepsera)
Atazanavir (Reyataz)
Amantadine* (Symmetrel)
Cidofovir (Vistide)
Darunavir (Prezista)
Delavirdine (Rescriptor)
Didanosine* (Videx EC)
Didanosine (Videx)
Efavirenz (Sustiva)
Efavirenz/Emtricitabine/Tenofovir (Atripla)
Emtricitabine (Emtriva)
Emtricitabine/tenofovir (Truvada)
Enfuvirtide (Fuzeon)(SP)
Entecavir (Baraclude)
Etravirine (Intelence)
Famciclovir* (Famvir)
Foscarnet* (generic)
Fosamprenivir (Lexiva)
Ganciclovir* (Cytovene)
Indinavir (Crixivan)
Lamivudine* (Epivir)
Lamivudine/Zidovudine* (Combivir)
Lopinavir/Ritonavir (Kaletra)
Maraviroc (Selzentry)
Nelfinavir (Viracept)
Nevirapine* (Viramune)
Nevirapine (Viramune XR)
Raltegravir (Isentress)
Ribavirin* (Rebetol)
Rimantadine* (Flumadine)
Ritonavir (Norvir)
Saquinavir (Fortavase/Invirase)
Stavudine* (Zerit)
Telbivudine (Tyzeka)
Tenofovir (Viread)
Tipranavir (Aptivus)
Valacyclovir* (Valtrex)
Zalcitabine (Hivid)
Zidovudine* (Retrovir)

AUTONOMIC AND CENTRAL NERVOUS SYSTEM AGENTS

- ANALGESICS, NARCOTIC
Acetaminophen/Codeine* (Tylenol w/codeine)
Aspirin/Codeine* (Emlin w/codeine)
Fentanyl* (Duragesic)(QL)
Fentanyl Citrate* (Actiq, Fentora)(PA/QL)
Hydrocodone/Acetaminophen* (Lortab) (QL)
Hydromorphone* (Dilaudid)
Morphine Sulfate* (MS Contin)(QL)
Oxycodone/Acetaminophen* (Percocet) (QL)
Oxycodone/Aspirin* (Percodan)
Oxycodone* (Oxycontin)(QL)
Analgesics, Non-Narcotic

APAP/Isometheptene/Dichlphen* (Midrin)
Acetaminophen/Caffeine/Butalbital* (Fioricet)
Aspirin/Caffeine/Butalbital* (Fiorinal)
Ergotamine/Caffeine* (Cafergot)
Naratriptan* (Amerge) (QL)
Sumatriptan* (Imitrex) (QL)
Rizatriptan (Maxalt/MLT) (QL)
Tramadol* (Ultram)
Zolmitriptan* (Zomig/Zomig ZMT)

ANALGESICS, NONSTEROIDAL

ANTI-INFLAMMATORY

Diclofenac* (Voltaren)
Etodolac* (etodolac)
Fenoprofen* (Nalfon)
Flurbiprofen* (Ansaid)
Ibuprofen* (Motrin)
Indomethacin* (Indocin)
Ketoprofen* (ketoprofen)
Ketorolac* (Toradol)
Meloxicam* (Mobic)
Nabumetone* (nabumetone)
Naproxen* (Naprosyn)
Oxaprozin* (Daypro)
Piroxicam* (Feldene)
Sulindac* (Clinoril)
Tolmetin* (Tolectin)

ANALGESICS, SALICYLATES

Aspirin* (generic)
Chol Sal/Magnesium Salicylate* (generic)
Diflunisal* (Dolobid)
Salsalate* (Disalcid)

ANTICONSULSANTS

Carbamazepine* (Tegretol XR/generic)
Clonazepam* (Klonopin)
Divalproex Sodium* (Depakote ER/Sprinkle/generic)
Ethosuximide* (Zarontin)
Gabapentin* (Neurontin)
Fosphenytoin* (Cerebyx)
Lamotrigine* (Lamictal)
Levetiracetam* (Keppra)
Phenobarbital* (generic)
Phenytoin* (Dilantin/generic)
Primidone* (Mysoline)
Oxcarbazepine* (Trileptal)
Topiramate* (Topamax)
Valproic Acid* (Depakene)
Zonisamide* (Zonegran)

ANTIPARKINSON AGENTS

Amantadine* (Symmetrel)
Benzotropine* (Cogentin)
Bromocriptine* (Parlodel)
Carbidopa/Levodopa* (Sinemet/CR)
Pramipexole* (Mirapex)
Ropinirole* (Requip)
Selegiline* (Eldepryl)
Trihexyphenidyl* (Artane)

CEREBRAL STIMULANTS

Amphet Asp/Amphet/D-Amphet* (Adderall/Adderall XR) (QL)(MIN AGE 3/6)
Dexmethylphenidate* (Focalin)
Dextroamphetamine* (Dexedrine)
Methylphenidate ER* (Concerta)
Methylphenidate* (Ritalin)

PSYCHOTHERAPEUTIC AGENTS

Antidepressants
Amitriptyline* (Elavil)
Bupropion/-XL* (Wellbutrin/XL)(QL)
Citalopram* (Celexa)(QL)
Desipramine* (Norpramin)
Doxepin* (Sinequan)
Escitalopram* (Lexapro)
Fluoxetine* (Prozac)
Fluvoxamine* (Luvox)
Imipramine* (Tofranil)
Mirtazapine* (Remeron)
Nortriptyline* (Norpramin)
Paroxetine* (Paxil/CR) (QL)
Sertraline* (Zoloft)
Trazodone* (trazodone)
Venlafaxine* (Effexor XR/Effexor)(QL)

Antimanic Agents

Lithium Carbonate* (Eskalith)
Lithium Citrate* (Cibalith-S)

Antipsychotic Agents
Chlorpromazine* (Thorazine)
Clomipramine* (Anafranil)
Clozapine* (Clozaril)
Fluphenazine* (Prolixin)
Haloperidol* (Haldol)
Loxapine* (Loxitane)
Olanzapine* (Zyprexa)
Perphenazine* (Trilafon)
Perchlorperazine* (Compazine)
Quetiapine* (Seroquel)
Quetiapine ER (Seroquel XR)
Risperidone* (Risperdal)
Thioridazine* (Mellaril)
Thiothixene* (Navane)
Trifluoperazine* (Stelazine)
Ziprasidone* (Geodon)

SEDATIVES, HYPNOTICS AND ANTI-ANXIETY

Alprazolam* (Xanax)
Buspirone* (BuSpar)
Chloral Hydrate* (Noctec)
Chlordiazepoxide* (Librium)
Clorazepate* (generic)
Diazepam* (Valium)
Estazolam* (generic)
Flurazepam* (flurazepam)
Lorazepam* (Ativan)
Meprobamate* (Miltown)
Oxazepam* (Serax)
Temazepam* (Restoril)
Triazolam* (Halcion)
Zalpelon* (Sonata) (QL)
Zolpidem* (Ambien/CR) (QL)

CARDIOVASCULAR AGENTS

ANGIOTENSIN CONVERTING ENZYME INHIBITORS AND RECEPTOR BLOCKERS & COMBINATIONS

Benazepril/HCTZ* (Lotensin)
Benazepril/Amlodipine* (Lotrel)(QL)
Candesartan/HCTZ* (Atacand)
Captopril/HCTZ* (Capoten/Capozide)
Enalapril/HCTZ* (Vasotec/Vaseretic)
Fosinopril/HCTZ* (Monopril)
Irbesartan/HCTZ* (Avapro/Avalide)
Lisinopril/HCTZ* (Zestril/Zestoretic)
Losartan/HCTZ* (Cozaar/Hyzaar) (QL)
Moexipril/HCTZ* (Univasc/Uniretic)
Olmesartan (Benicar/ Benicar HCT)(ST)(QL)
Quinapril/HCTZ* (Accupril/Accuretic)
Ramipril* (Altace/generic)
Trandolapril* (Mavik)
Trandolapril/verapamil* (Tarka)
Valsartan/HCTZ (Diovan/Diovan HCT)(ST)(QL)

ANTI-ADRENERGIC BLOCKERS

Doxazosin* (Cardura)
Prazosin* (Minipress)
Terazosin* (Hytrin)

ANTIARRHYTHMICS

Amiodarone* (Cordarone)
Digoxin* (Lanoxin)
Disopyramide* (Norpace)
Flecainide* (Tambocor)
Mexiletine* (Mexitil)
Procainamide* (Pronestyl)
Propafenone* (Rythmol)
Quinidine Gluconate* (Quinidex)
Sotalol* (Betapace AF)

ANTICOAGULANTS/ANTITHROMBOTICS

Anagrelide* (Agrylin)
Cilostazol* (Pletal)
Clopidogrel* (Plavix)(QL)
Dipyridamole* (Persantine)
Pentoxifylline* (Trental)
Ticlopidine* (Ticlid)
Warfarin* (generic/Coumadin)

ANTILIPEMICS

Atorvastatin* (Lipitor)
Cholestyramine* (Questran)
Colestipol* (Colestid)
Fenofibrate* (Antara/Lofibra/Tricor)
Gemfibrozil* (Lopid)
Lovastatin* (Mevacor)
Niacin* (Niaspan/generic)

Pravastatin* (Pravachol)
Simvastatin* (Zocor) (80mg requires PA)

BETA-ADRENERGIC BLOCKERS

Acebutolol* (Sectral)
Atenolol/Chlorthalidone* (Tenoretic)
Bisoprolol/HCTZ* (Zebeta)
Carvedilol* (Coreg/CR)
Labetalol* (Trandate)
Metoprolol/HCTZ* (Lopressor)(QL)
Metoprolol ER* (Toprol XL) (QL)
Nadolol* (Corgard)
Pindolol* (Viskin)
Propranolol/XL/HCTZ* (Inderal)
Sotalol* (Betapace)
Timolol* (Blocadren)

CALCIUM CHANNEL BLOCKERS

Amlodipine* (Norvasc)(QL)
Diltiazem* (Cardizem)
Felodipine* (Plendil)
Nicardipine* (Cardene)
Nifedipine* (Procardia/Adalat CC)
Nimodipine* (Nimotop)
Verapamil* (Calan, Verelan)

CENTRALLY ACTING ANTIHYPERTENSIVES

Clonidine* (Catapres)
Methyldopa* (generic)

DIURETICS

Acetazolamide* (Diamox Sequels)
Chlorthalidone* (Hygroton)
Ethacrynic Acid* (Edecrin)
Eplerenone* (Inspra)
Furosemide* (Lasix)
HCTZ/Triamterene* (Dyazide/Maxzide)
Hydrochlorothiazide* (generic)
Indapamide* (generic)
Methazolamide* (generic)
Metolazone* (Zaroxolyn)
Spironolactone/HCTZ* (Aldactone)
Torsemide* (Demadex)
Triamterene* (Dyrenium)

VASODILATORS

Hydralazine* (Apresoline)
Isosorbide Dinitrate* (Isordil)
Isosorbide Mononitrate* (Imdur, Monoket)
Minoxidil* (generic)
Nitroglycerin* (generic)

DERMATOLOGICALS

ACNE

Clindamycin* (Cleocin)
Erythromycin* (Ergel)
Isotretinoin* (Accutane)
Metronidazole* (MetroLotion, MetroGel)
Minocycline* (Minocin/Solodyne)
Sodium Sulfacetamide* (Sulfacet-R)
Retinoin* (Retin-A) (MAX AGE 34)

ANTIBIOTICS/ANTIVIRALS

Acyclovir* (Zovirax/generic)
Metronidazole* (MetroGel/MetroLotion)
Mupirocin* (Bactroban)
Sodium Sulfacetamide* (Sulfacet-R)

FUNGICIDES

Ciclopirox* (Loprox)
Clotrimazole/Betamethazone* (Lotrisone)
Ketoconazole* (Nizoral)
Nystatin/Triamcinolone* (Mycolog II)

TOPICAL ANTI-INFLAMMATORY AGENTS

Low Potency
Desonide* (Desowen)
Fluocinolone* (Synalar)
Hydrocortisone* (generic)

Medium Potency

Desoximetasone* (Topicort)
Fluocinolone* (Synalar)
Mometasone* (Elocon)
Prednicarbate* (Dermatop E)
Triamcinolone* (Aristocort)

High Potency

Betamethasone Dipropionate* (Diprosone)
Fluocinonide* (Lidex)

Ultra-High Potency

Augmented Betamethasone* (Diprolene)
Clobetasol* (Temovate)

Diflorasone* (Psorcon)

VAGINAL/RECTAL PREPARATIONS

Hydrocortisone* (Proctocort)

Mesalamine* (Rowasa)

Metronidazole* (MetroGel Vaginal)

Sulfanilamide* (AVC)

MISCELLANEOUS DERMATOLOGICALS

Calcipotriene* (Dovonex)

Fluorouracil* (Efudex)

Lindane* (Kwell)

Permethrin* (Elimite)

Podofilox* (Condylox)

Selenium Sulfide* (Selsun RX)

Silver Sulfadiazine* (Silvadene)

ENDOCRINE AGENTS

ANTI-DIABETIC AGENTS-INJECTABLE

Insulin (Novolin/Novolog/Levemir)

ANTI-DIABETIC AGENTS-ORAL

Acarbose* (Precose)

Chlorpropamide* (Diabinese)

Glimepiride* (Amaryl)

Glipizide* (Glucotrol)

Glipizide/Metformin* (Metaglip)

Glyburide/Metformin* (Glucovance)

Glyburide/Micronized* (Glynase)

Metformin* (Glucophage)

Nateglinide* (Starlix)

Pioglitazone* (Actos)

Pioglitazone/Metformin* (ActoPlus Met)

Tolazamide* (Tolinase)

Tolbutamide* (Orinase)

ANTI-DIABETIC SUPPLIES

Accu-Chek Meters and Test Strips (QL)

One Touch Meters and Test Strips (QL)

ANTITHYROID

Methimazole* (Tapazole)

Propylthiouracil* (generic)

THYROID

Levothyroxine* (Synthroid, Levothroid, Levoxy, Unithroid/generic)

Thyroid* (Armour Thyroid)

GASTROINTESTINAL AGENTS

ANTIEMETIC/ANTIVERTIGO

Granisetron* (Kytril)

Meclizine* (Antivert)

Metoclopramide* (Reglan)

Ondansetron* (Zofran)

Prochlorperazine* (Compazine)

Promethazine* (Phenergan)

Trimethobenzamide* (Tigan)

ANTISPASMODIC/GI MOTILITY

Belladonna/Phenobarbital* (Donnatal)

Clidinium/Chlordiazepoxide* (Librax)

Dicyclomine* (Bentyl)

Hyoscyamine* (Levsin)

Propantheline* (Pro-Banthine)

ANTIULCER

Misoprostol* (Cytotec)

Lansoprazole/Amox/Clarith (Prevpac)

OTHER GI PRODUCTS

Balsalazide* (Colazal)

Lactulose* (Cephulac)

Mesalamine* (Asacol/Asacol HD/generic)

Pancreatic Lipase (Creon)

Sulfasalazine* (Azulfidine)

Ursodiol* (Actigall)

GLUCOCORTICOIDS

Dexamethasone* (Decadron)

Fludrocortisone* (Florinef)

Methylprednisolone* (generic)

Prednisolone* (Prelone)

Prednisone* (generic)

GOUT THERAPY

Allopurinol* (Zyloprim)

Colchicine (Colcrys)

Colchicine/Probenecid* (generic)

Indomethacin* (Indocin)

Probenecid* (generic)

HORMONES

ANTIESTROGENS

Tamoxifen* (Nolvadex)

AROMATASE INHIBITORS

Anastrozole* (Arimidex)

Exemestane* (Aromasin)

Letrozole* (Femara)

ESTROGENS

Conjugated estrogens (Premarin)

Estradiol* (Estrace)

Estradiol Patch* (Climara)

Estropipate* (Ogen)

PROGESTINS

Medroxyprogesterone* (Provera)

Megestrol* (Megace)

Norethindrone* (Aygestin)

MISCELLANEOUS HORMONE PRODUCTS

Flutamide* (generic)

OPHTHALMICS

ALPHA-AGONIST

Brimonidine Tartrate* (Alphagan P)

ANTI-INFECTIVE AGENTS

Chloramphenicol* (generic)

Ciprofloxacin* (Ciloxin)

Erythromycin* (Romycin)

Gentamicin* (Garamycin)

Neomycin/Bacitracin/Polymyxin* (NeoSporin)

Ofloxacin* (Ocuflox)

Polymyxin B/Trimethoprim* (Polytrim)

Sulfacetamide* (Bleph-10)

Tobramycin* (Tobrex)

ANTI-INFLAMMATORY AGENTS

Cromolyn* (Opticrom)

Dexamethasone* (Maxidex)

Diclofenac* (Voltaren)

Fluorometholone* (Flarex)

Flurbiprofen* (Ocufen)

Prednisolone* (Inflamase Forte)

ANTI-INFECTIVE AND

ANTI-INFLAMMATORY COMBINATIONS

Na Sulfacetm/Prednisolone* (Vasocidin)

Neomy/Bacitracin/Polymyxin/Hydrocort*

(Neosporin)

Neomycin/Dexamethasone* (NeoDecadron)

Neomycin/Polymyx B/Dexamethasone*

(Maxitrol)

ANTIVIRAL AGENTS

Trifluridine* (Viroptic)

BETA-BLOCKERS

Betaxolol* (Betoptic)

Carteolol* (Ocupress)

Levobunolol* (Betagan)

Metipranolol* (OptiPranolol)

Timolol* (Timoptic)

MIOTICS

Brinzolamide (Azopt)

Dorzolamide* (Trusopt)

Dorzolamide/timolol* (Cosopt)

Latanoprost* (Xalatan)

Pilocarpine* (Isopto Carbachol)

MYDRIATICS

Atropine* (Isopto Atropine)

Cyclopentolate* (Cyclogyl)

Homatropine* (Isopto Homatropine)

SYMPATHOMIMETICS

Dipivefrin* (generic)

OTICS

ANTI-INFECTIVE AGENTS

Acetic Acid* (Vosol)

Acetic Acid/Benzethonium* (generic)

Ofloxacin* (Floxin)

ANTI-INFECTIVE AND

ANTI-INFLAMMATORY COMBINATIONS

Acetic acid/Hydrocortisone* (Vosol HC)

Neomycin/Polymyxin/HC* (Cortisporin)

RESPIRATORY

ANTI-ASTHMATIC AGENTS

Corticosteroids

Beclomethasone (QVAR)

Budesonide* (Pulmicort Respules)

Budesonide/Formoterol (Symbicort)

Fluticasone (Flovent)

Fluticasone/Salmeterol (Advair/Advair HFA)

Sympathomimetics

Albuterol (Ventolin HFA)

Metaproterenol* (Alupent)

Salmeterol (Serevent Diskus)

Terbutaline* (Brethine)

Xanthine Derivatives

Aminophylline* (generic)

Theophylline* (Uniphyll)

OTHER AGENTS

Albuterol/Ipratropium (Combivent)

Albuterol/Ipratropium* (DuoNeb)

Cromolyn* (Intal)

Ipratropium (Atrovent HFA)

Montelukast* (Singulair)(QL)(PA)

Tiotropium (Spiriva)

NASAL MEDICATIONS

Azelastine* (Astelin) (QL)

Fluticasone* (Flonase)

Flunisolide* (Nasarel)(QL)

SKELETAL AGENTS

ANTIRHEUMATICS

Azathioprine* (Imuran)

Hydroxychloroquine* (Plaquenil)

Methotrexate* (Rheumatrex)

BONE ENHANCING AGENTS

Alendronate* (Fosamax)(QL)

Calcitonin-Salmon* (Midrin)

Etidronate* (Didronel)

SKELETAL MUSCLE RELAXANTS

Baclofen* (Lioresal)

Carisoprodol* (Soma)

Cyclobenzaprine* (Amrix/Fexmid/Flexeril)

Diazepam* (Valium)

Methocarbamol* (Robaxin)

Tizanidine* (Zanaflex)

URINARY AGENTS

ANTI-INFECTIVES

Sulfadiazine* (generic)

Sulfisoxazole* (Gantrisin)

Trimethoprim/Sulfamethoxazole* (Bactrim, Septra)

CHOLINERGIC AGENTS

Bethanechol* (Urecholine)

Flavoxate* (Urispas)

OTHER URINARY AGENTS

Doxazosin* (generic)

Finasteride* (Proscar) (QL)

Phenazopyridine* (Pyridium)

Prazosin* (generic)

Oxybutynin*/Ex rel* (Ditropan/XL) (QL)

Tamsulosin* (Flomax)

Terazosin* (generic)

Tolterodine* (Detrol)

Trospium* (Sanctura) (QL)

VITAMINS AND ELECTROLYTES

Prenatal Vitamins requiring prescription* (generic)