

Polmed Exclusions List



Mar-26

Exclusions – Items completely excluded from the routine (and chronic benefit)

Pre-auth products – Items that require pre-authorisation on the CMM benefit for reimbursement where funds and scheme rules allow

New products under review - Newly launched products that are being clinically reviewed for reimbursement

| Nappi | Drug Name | Strength | Form | ATC | Active Ingredient/s | Exclusion Status |
|--|-----------------------------------|---------------|------|---------|--|----------------------------|
| A03 - DRUGS FOR FUNCTIONAL GASTROINTESTINAL DISORDERS | | | | | | |
| 743348 | MILLERSPAS | | TAB | A03CB02 | BELLADONNA TOTAL ALKALOIDS AND PSYCHOLEPTICS | Exclusion |
| A04 - ANTIEMETICS AND ANTINAUSEANTS | | | | | | |
| 3005017 | AKYNZEO 300MG/0.5MG | 300MG/ .5MG | CAP | A04AA55 | PALONOSETRON, COMBINATIONS | Exclusion |
| A05 - BILE AND LIVER THERAPY | | | | | | |
| A06 - DRUGS FOR CONSTIPATION | | | | | | |
| 758345 | PURITONE NO 1 | 250MG | TAB | A06AB04 | PHENOLPHTHALEIN | Exclusion |
| 859826 | SB STRONGLAX | | TAB | A06AB04 | PHENOLPHTHALEIN | Exclusion |
| 859818 | SB3 LAXATIVE PILLS | | TAB | A06AB04 | PHENOLPHTHALEIN | Exclusion |
| A07 - ANTI-DIARRHEALS AND INTESTINAL ANTI-INFECTIVES | | | | | | |
| 722546 | FIDICID | 200MG | TAB | A07AA12 | FIDAZOMICIN | Pre-authorisation required |
| 721965 | XIFAXAN | 550MG | TAB | A07AA11 | RIFAXIMIN | New product under review |
| A10 - DRUGS USED IN DIABETES | | | | | | |
| 3002922 | SOLIQUA 33/100 PRE-FILLED PEN 3ML | 33MCG/100U | INJ | A10AE54 | INSULIN GLARGINE AND LIXISENATIDE | Exclusion |
| 3002924 | SOLIQUA 50/100 PRE-FILLED PEN 3ML | 50MCG/100U | INJ | A10AE54 | INSULIN GLARGINE AND LIXISENATIDE | Exclusion |
| 3002220 | XULTOPHY PRE-FILLED PEN 3ML | | INJ | A10AE56 | INSULIN DEGLUCED AND LIRAGLUTIDE | Exclusion |
| 701111 | GLUCOVANCE | 500MG/2.5MG | TAB | A10BD02 | METFORMIN AND SULFONAMIDES | Pre-authorisation required |
| 701112 | GLUCOVANCE | 500MG/5MG | TAB | A10BD02 | METFORMIN AND SULFONAMIDES | Pre-authorisation required |
| 717788 | JANUMET | 50MG/500MG | TAB | A10BD07 | METFORMIN AND SITAGLIPTIN | Pre-authorisation required |
| 717790 | JANUMET | 50MG/850MG | TAB | A10BD07 | METFORMIN AND SITAGLIPTIN | Pre-authorisation required |
| 717791 | JANUMET | 50MG/1000MG | TAB | A10BD07 | METFORMIN AND SITAGLIPTIN | Pre-authorisation required |
| 3008708 | SITUVIAMET 50 MG/1000 MG | 50MG/1000MG | TAB | A10BD07 | METFORMIN AND SITAGLIPTIN | Pre-authorisation required |
| 3008816 | METPLITIN CO 50/1000 | 50MG/1000MG | TAB | A10BD07 | METFORMIN AND SITAGLIPTIN | Pre-authorisation required |
| 3008817 | METPLITIN CO 50/850 | 50MG/850MG | TAB | A10BD07 | METFORMIN AND SITAGLIPTIN | Pre-authorisation required |
| 3008149 | METSITAG 50/1000 | 50MG/1000MG | TAB | A10BD07 | METFORMIN AND SITAGLIPTIN | Pre-authorisation required |
| 3008148 | METSITAG 50/500 | 50MG/500MG | TAB | A10BD07 | METFORMIN AND SITAGLIPTIN | Pre-authorisation required |
| 3009462 | SALUMET 50/500 | 50MG/500MG | TAB | A10BD07 | METFORMIN AND SITAGLIPTIN | Pre-authorisation required |
| 3009463 | SALUMET 50/1000 | 50MG/1000MG | TAB | A10BD07 | METFORMIN AND SITAGLIPTIN | Pre-authorisation required |
| 717636 | GALVUS MET | 50MG/850MG | TAB | A10BD08 | METFORMIN AND VILDAGLIPTIN | Pre-authorisation required |
| 717637 | GALVUS MET | 50MG/1000MG | TAB | A10BD08 | METFORMIN AND VILDAGLIPTIN | Pre-authorisation required |
| 3000953 | JALRAMET 50/850 | 50MG/850MG | TAB | A10BD08 | METFORMIN AND VILDAGLIPTIN | Pre-authorisation required |
| 3000955 | JALRAMET 50/1000 | 50MG/1000MG | TAB | A10BD08 | METFORMIN AND VILDAGLIPTIN | Pre-authorisation required |
| 3008857 | VILEPTIN CO 50/850 | 50MG/850MG | TAB | A10BD08 | METFORMIN AND VILDAGLIPTIN | Pre-authorisation required |
| 3008858 | VILEPTIN CO 50/1000 | 50MG/1000MG | TAB | A10BD08 | METFORMIN AND VILDAGLIPTIN | Pre-authorisation required |
| 3009661 | VILDAMET 50/850 | 50MG/850MG | TAB | A10BD08 | METFORMIN AND VILDAGLIPTIN | Pre-authorisation required |
| 3009662 | VILDAMET 50/1 000 | 50MG/1000MG | TAB | A10BD08 | METFORMIN AND VILDAGLIPTIN | Pre-authorisation required |
| 3004733 | XIGDUO XR 5MG/1000MG | 5MG/1000MG | SRT | A10BD15 | METFORMIN AND DAPAGLIFLOZIN | Pre-authorisation required |
| 3004735 | XIGDUO XR 10MG/1000MG | 10MG/1000MG | SRT | A10BD15 | METFORMIN AND DAPAGLIFLOZIN | Pre-authorisation required |
| 3006455 | SYNGLUTRA 5/1000 | 5MG/1000MG | SRT | A10BD15 | METFORMIN AND DAPAGLIFLOZIN | Pre-authorisation required |
| 3006456 | SYNGLUTRA 10/1000 | 10MG/1000MG | SRT | A10BD15 | METFORMIN AND DAPAGLIFLOZIN | Pre-authorisation required |
| 3006456 | SYNGLUTRA 10/1000 | 10MG/1000MG | SRT | A10BD15 | METFORMIN AND DAPAGLIFLOZIN | Pre-authorisation required |
| 3002736 | SYNJARDY 5/500MG | 5MG/500MG | TAB | A10BD20 | METFORMIN AND EMPAGLIFLOZIN | Exclusion |
| 3002737 | SYNJARDY 5/850MG | 5MG/850MG | TAB | A10BD20 | METFORMIN AND EMPAGLIFLOZIN | Exclusion |
| 3002739 | SYNJARDY 5/1000MG | 5MG/1000MG | TAB | A10BD20 | METFORMIN AND EMPAGLIFLOZIN | Exclusion |
| 3002740 | SYNJARDY 12.5/500MG | 12.5MG/500MG | TAB | A10BD20 | METFORMIN AND EMPAGLIFLOZIN | Exclusion |
| 3002741 | SYNJARDY 12.5/850MG | 12.5MG/850MG | TAB | A10BD20 | METFORMIN AND EMPAGLIFLOZIN | Exclusion |
| 3002742 | SYNJARDY 12.5/1000MG | 12.5MG/1000MG | TAB | A10BD20 | METFORMIN AND EMPAGLIFLOZIN | Exclusion |
| 717785 | JANUVIA | 25MG | TAB | A10BH01 | SITAGLIPTIN | Pre-authorisation required |
| 717786 | JANUVIA | 50MG | TAB | A10BH01 | SITAGLIPTIN | Pre-authorisation required |
| 717787 | JANUVIA | 100MG | TAB | A10BH01 | SITAGLIPTIN | Pre-authorisation required |
| 3006062 | GLIZEB | 25MG | TAB | A10BH01 | SITAGLIPTIN | Pre-authorisation required |
| 3006063 | GLIZEB | 50MG | TAB | A10BH01 | SITAGLIPTIN | Pre-authorisation required |
| 3006065 | GLIZEB | 100MG | TAB | A10BH01 | SITAGLIPTIN | Pre-authorisation required |
| 3008505 | METPLITIN | 50MG | TAB | A10BH01 | SITAGLIPTIN | Pre-authorisation required |
| 3008506 | METPLITIN | 100MG | TAB | A10BH01 | SITAGLIPTIN | Pre-authorisation required |
| 715554 | GALVUS | 50MG | TAB | A10BH02 | VILDAGLIPTIN | Pre-authorisation required |
| 721592 | JALRA | 50MG | TAB | A10BH02 | VILDAGLIPTIN | Pre-authorisation required |
| 3004451 | ZOMVIL | 50MG | TAB | A10BH02 | VILDAGLIPTIN | Pre-authorisation required |
| 3008161 | VIDAMACE | 50MG | TAB | A10BH02 | VILDAGLIPTIN | Pre-authorisation required |
| 3008205 | VILGLAV | 50MG | TAB | A10BH02 | VILDAGLIPTIN | Pre-authorisation required |
| 3008207 | VILEPTIN | 50MG | TAB | A10BH02 | VILDAGLIPTIN | Pre-authorisation required |
| 716640 | ONGLYZA | 2.5MG | TAB | A10BH03 | SAXAGLIPTIN | Pre-authorisation required |
| 716641 | ONGLYZA | 5MG | TAB | A10BH03 | SAXAGLIPTIN | Pre-authorisation required |
| 711678 | BYETTA | 5MCG/1DOSE | INJ | A10BJ01 | EXENATIDE | Pre-authorisation required |
| 711684 | BYETTA | 10MCG/1DOSE | INJ | A10BJ01 | EXENATIDE | Pre-authorisation required |
| 716645 | VICTOZA PRE-FILLED PEN 3ML | 6MG/1ML | INJ | A10BJ02 | LIRAGLUTIDE | Pre-authorisation required |
| 3009098 | GLIPITRA PRE-FILLED PEN 3ML | 6MG/1ML | INJ | A10BJ02 | LIRAGLUTIDE | Pre-authorisation required |
| 3001765 | TRULICITY PRE-FILLED PEN 0.5ML | 1.5MG/ .5ML | INJ | A10BJ05 | DULAGLUTIDE | Pre-authorisation required |

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|---|-------------------------------------|--------------|-----|---------|------------------------------|----------------------------|
| 3003249 | OZEMPIC PRE-FILLED PEN 1.5ML | 2MG/1.5ML | INJ | A10BJ06 | SEMAGLUTIDE | Exclusion |
| 3003250 | OZEMPIC PRE-FILLED PEN 3ML | 4MG/3ML | INJ | A10BJ06 | SEMAGLUTIDE | Exclusion |
| 3009555 | WEGOVY PRE-FILLED PEN 1.5ML | .25MG/3.75ML | INJ | A10BJ06 | SEMAGLUTIDE | Exclusion |
| 3009556 | WEGOVY PRE-FILLED PEN 1.5ML | .5MG/3.75ML | INJ | A10BJ06 | SEMAGLUTIDE | Exclusion |
| 3009557 | WEGOVY PRE-FILLED PEN 3ML | 1MG/.75ML | INJ | A10BJ06 | SEMAGLUTIDE | Exclusion |
| 3009558 | WEGOVY PRE-FILLED PEN 3ML | 1.7MG/.75ML | INJ | A10BJ06 | SEMAGLUTIDE | Exclusion |
| 3009559 | WEGOVY PRE-FILLED PEN 3ML | 2.4MG/.75ML | INJ | A10BJ06 | SEMAGLUTIDE | Exclusion |
| 723708 | FORXIGA | 5MG | TAB | A10BK01 | DAPAGLIFLOZIN | Pre-authorisation required |
| 723709 | FORXIGA | 10MG | TAB | A10BK01 | DAPAGLIFLOZIN | Pre-authorisation required |
| 3005567 | DUFORZIG | 10MG | TAB | A10BK01 | DAPAGLIFLOZIN | Pre-authorisation required |
| 3006119 | DAGLIF | 5MG | TAB | A10BK01 | DAPAGLIFLOZIN | Pre-authorisation required |
| 3006122 | DAGLIF | 10MG | TAB | A10BK01 | DAPAGLIFLOZIN | Pre-authorisation required |
| 3006448 | SAGALATIN | 5MG | TAB | A10BK01 | DAPAGLIFLOZIN | Pre-authorisation required |
| 3006449 | SAGALATIN | 10MG | TAB | A10BK01 | DAPAGLIFLOZIN | Pre-authorisation required |
| 3006542 | DAPTICA | 5MG | TAB | A10BK01 | DAPAGLIFLOZIN | Pre-authorisation required |
| 3006543 | DAPTICA | 10MG | TAB | A10BK01 | DAPAGLIFLOZIN | Pre-authorisation required |
| 3007448 | DIAXIGA | 5MG | TAB | A10BK01 | DAPAGLIFLOZIN | Pre-authorisation required |
| 3007449 | DIAXIGA | 10MG | TAB | A10BK01 | DAPAGLIFLOZIN | Pre-authorisation required |
| 3008197 | DEPAGLOZ | 5MG | TAB | A10BK01 | DAPAGLIFLOZIN | Pre-authorisation required |
| 3008198 | DEPAGLOZ | 10MG | TAB | A10BK01 | DAPAGLIFLOZIN | Pre-authorisation required |
| 3008056 | DAPIFLO | 10MG | TAB | A10BK01 | DAPAGLIFLOZIN | Pre-authorisation required |
| 3008055 | DAPIFLO | 5MG | TAB | A10BK01 | DAPAGLIFLOZIN | Pre-authorisation required |
| 3010490 | DAPAGLIFLOZIN 10 UNICORN | 10MG | TAB | A10BK01 | DAPAGLIFLOZIN | Pre-authorisation required |
| 3010489 | DAPAGLIFLOZIN 5 UNICORN | 5MG | TAB | A10BK01 | DAPAGLIFLOZIN | Pre-authorisation required |
| 3008397 | AVAXIGA | 5MG | TAB | A10BK01 | DAPAGLIFLOZIN | Pre-authorisation required |
| 3008398 | AVAXIGA | 10MG | TAB | A10BK01 | DAPAGLIFLOZIN | Pre-authorisation required |
| 3008474 | GLUDAPZIN | 5MG | TAB | A10BK01 | DAPAGLIFLOZIN | Pre-authorisation required |
| 3008475 | GLUDAPZIN | 10MG | TAB | A10BK01 | DAPAGLIFLOZIN | Pre-authorisation required |
| 3008852 | REDIFARG | 5MG | TAB | A10BK01 | DAPAGLIFLOZIN | Pre-authorisation required |
| 3008853 | REDIFARG | 10MG | TAB | A10BK01 | DAPAGLIFLOZIN | Pre-authorisation required |
| 3009003 | DAPAGLIFLOZIN 5 MG ASCEND | 5MG | TAB | A10BK01 | DAPAGLIFLOZIN | Pre-authorisation required |
| 3009004 | DAPAGLIFLOZIN 10 MG ASCEND | 10MG | TAB | A10BK01 | DAPAGLIFLOZIN | Pre-authorisation required |
| 720929 | JARDIANCE | 10MG | TAB | A10BK03 | EMPAGLIFLOZIN | Pre-authorisation required |
| 721619 | JARDIANCE | 25MG | TAB | A10BK03 | EMPAGLIFLOZIN | Pre-authorisation required |
| 3010282 | STENIT | 10MG | TAB | A10BK03 | EMPAGLIFLOZIN | Pre-authorisation required |
| 3010291 | STENIT | 25MG | TAB | A10BK03 | EMPAGLIFLOZIN | Pre-authorisation required |
| 893900 | STARLIX | 120MG | TAB | A10BX03 | NATEGLINIDE | Pre-authorisation required |
| 3008715 | MOUNJARO 2.5MG SOLUTION FOR INJECTI | 2.5MG/.5ML | INJ | A10BX16 | TIRZEPATIDE | Exclusion |
| 3008719 | MOUNJARO 5MG SOLUTION FOR INJECTIO | 5MG/.5ML | INJ | A10BX16 | TIRZEPATIDE | Exclusion |
| 3010215 | MOUNJARO KWIKPEN MULTI-DOSE PRE-FI | 5MG/.6ML | INJ | A10BX16 | TIRZEPATIDE | Exclusion |
| 3008760 | MOUNJARO 7.5MG SOLUTION FOR INJECTI | 7.5MG/.5ML | INJ | A10BX16 | TIRZEPATIDE | Exclusion |
| 3008782 | MOUNJARO 10MG SOLUTION FOR INJECTI | 10MG/.5ML | INJ | A10BX16 | TIRZEPATIDE | Exclusion |
| 3009712 | MOUNJARO 2.5 MG KWIKPEN MULTI-DOSE | 2.5MG/.6ML | INJ | A10BX16 | TIRZEPATIDE | Exclusion |
| 3009713 | MOUNJARO 10 MG KWIKPEN MULTI-DOSE | 10MG/.6ML | INJ | A10BX16 | TIRZEPATIDE | Exclusion |
| 3009714 | MOUNJARO 12.5 MG KWIKPEN MULTI-DOSE | 12.5MG/.6ML | INJ | A10BX16 | TIRZEPATIDE | Exclusion |
| 3009715 | MOUNJARO 15 MG KWIKPEN MULTI-DOSE | 15MG/.6ML | INJ | A10BX16 | TIRZEPATIDE | Exclusion |
| 3009728 | MOUNJARO 7.5 MG KWIKPEN MULTI-DOSE | 7.5MG/.6ML | INJ | A10BX16 | TIRZEPATIDE | Exclusion |
| A16 - OTHER ALIMENTARY TRACT AND METABOLISM PRODUCTS | | | | | | |
| 3002277 | CARBAGLU | 200MG | DSP | A16AA05 | CARGLUMIC ACID | New product under review |
| B01 - ANTITHROMBOTIC AGENTS | | | | | | |
| 715258 | EFIENT | 10MG | TAB | B01AC22 | PRASUGREL | Exclusion |
| 715257 | EFIENT | 5MG | TAB | B01AC22 | PRASUGREL | Exclusion |
| C01 - CARDIAC THERAPY | | | | | | |
| 714128 | REVATIO | 20MG | TAB | C01CE | PHOSPHODIESTERASE INHIBITORS | Pre-authorisation required |
| 3010211 | BRADHET | 5MG | TAB | C01EB17 | IVABRADINE | Pre-authorisation required |
| 3010212 | BRADHET | 7.5MG | TAB | C01EB17 | IVABRADINE | Pre-authorisation required |
| 710620 | CORALAN | 5MG | TAB | C01EB17 | IVABRADINE | Pre-authorisation required |
| 710621 | CORALAN | 7.5MG | TAB | C01EB17 | IVABRADINE | Pre-authorisation required |
| 3004756 | IVABRADINE 5 UNICORN | 5MG | TAB | C01EB17 | IVABRADINE | Pre-authorisation required |
| 3004757 | IVABRADINE 7.5 UNICORN | 7.5MG | TAB | C01EB17 | IVABRADINE | Pre-authorisation required |
| 3003702 | IVACOR | 5MG | TAB | C01EB17 | IVABRADINE | Pre-authorisation required |
| 3003703 | IVACOR | 7.5MG | TAB | C01EB17 | IVABRADINE | Pre-authorisation required |
| 3003505 | IVOLAN | 5MG | TAB | C01EB17 | IVABRADINE | Pre-authorisation required |
| 3005782 | RANEXA | 375MG | SRT | C01EB18 | RANOLAZINE | Pre-authorisation required |
| 3005783 | RANEXA | 500MG | SRT | C01EB18 | RANOLAZINE | Pre-authorisation required |
| 3005800 | RANEXA | 750MG | SRT | C01EB18 | RANOLAZINE | Pre-authorisation required |
| C03 - DIURETICS | | | | | | |
| 706121 | INSPRA | 25MG | TAB | C03DA04 | EPLERENONE | Pre-authorisation required |
| 706135 | INSPRA | 50MG | TAB | C03DA04 | EPLERENONE | Pre-authorisation required |
| 3009305 | FIRIALTA | 10MG | TAB | C03DA05 | FINERENONE | Exclusion |
| 3009306 | FIRIALTA | 20MG | TAB | C03DA05 | FINERENONE | Exclusion |
| C05 - VASOPROTECTIVES | | | | | | |
| 752983 | PAROVEN | 250MG | CAP | C05CA01 | RUTOSIDE | Exclusion |
| C09 - AGENTS ACTING ON THE RENIN-ANGIOTENSIN SYSTEM | | | | | | |
| 723103 | ENTRESTO | 50MG | TAB | C09DX04 | VALSARTAN AND SACUBITRIL | Pre-authorisation required |

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|--|---|-------------|-----|---------|---|----------------------------|
| 723105 | ENTRESTO | 200MG | TAB | C09DX04 | VALSARTAN AND SACUBITRIL | Pre-authorisation required |
| 723104 | ENTRESTO | 100MG | TAB | C09DX04 | VALSARTAN AND SACUBITRIL | Pre-authorisation required |
| 3009643 | SACUVAN 24 MG/26 MG | 50MG | TAB | C09DX04 | VALSARTAN AND SACUBITRIL | Pre-authorisation required |
| 3009644 | SACUVAN 49 MG/51 MG | 100MG | TAB | C09DX04 | VALSARTAN AND SACUBITRIL | Pre-authorisation required |
| 3009645 | SACUVAN 97 MG/103 MG | 200MG | TAB | C09DX04 | VALSARTAN AND SACUBITRIL | Pre-authorisation required |
| 3003712 | VYMADA | 100MG | TAB | C09DX04 | VALSARTAN AND SACUBITRIL | Pre-authorisation required |
| 3003714 | VYMADA | 200MG | TAB | C09DX04 | VALSARTAN AND SACUBITRIL | Pre-authorisation required |
| 3003698 | VYMADA | 50MG | TAB | C09DX04 | VALSARTAN AND SACUBITRIL | Pre-authorisation required |
| D03 PREPARATIONS FOR TREATMENT OF WOUNDS AND ULCERS | | | | | | |
| 3002456 | HEBERPROT-P VIAL | .075MG | INJ | D03B | RECOMBINANT EPIDERMAL GROWTH FACTOR | Exclusion |
| D04 - DERMATOLOGICALS | | | | | | |
| 3000725 | VERSATIS | | PTD | D04AB01 | LIDOCAINE | Exclusion |
| G03 - SEX HORMONES AND MODULATORS OF THE GENITAL SYSTEM | | | | | | |
| 3006735 | PERGOVERIS 300IU/150IU PRE-FILLED PEN | 300IU/150IU | INJ | G03GA30 | COMBINATIONS | New product under review |
| 3006736 | PERGOVERIS 900IU/450IU PRE-FILLED PEN | 900IU/450IU | INJ | G03GA30 | COMBINATIONS | New product under review |
| 717165 | PERGOVERIS POWDER FOR SOLUTION + SOLVENT | | INJ | G03GA30 | COMBINATIONS | New product under review |
| H05 - CALCIUM HOMEOSTASIS | | | | | | |
| 702800 | FORTEO | 250mcg/1ML | INJ | H05AA02 | TERIPARATIDE | Pre-authorisation required |
| J01 - ANTIBACTERIALS FOR SYSTEMIC USE | | | | | | |
| 723836 | AKLID | 600MG | TAB | J01XX08 | LINEZOLID | Pre-authorisation required |
| 3005593 | ELTURIN 600 | 600MG | TAB | J01XX08 | LINEZOLID | Pre-authorisation required |
| 3009089 | ELTURIN IV SOLUTION FOR INFUSION BAG | 600MG/300ML | INJ | J01XX08 | LINEZOLID | Pre-authorisation required |
| 3009572 | LIDOHET | 600MG | TAB | J01XX08 | LINEZOLID | Pre-authorisation required |
| 3004296 | LINEZOLID ASPEN SOLUTION FOR INFUSION BAG | 600MG/300ML | INJ | J01XX08 | LINEZOLID | Pre-authorisation required |
| 722770 | LINEZOLID FRESENIUS SOLUTION FOR INFUSION BAG | 600MG/300ML | TAB | J01XX08 | LINEZOLID | Pre-authorisation required |
| 721141 | LINEZOLID HETERO | 600MG | TAB | J01XX08 | LINEZOLID | Pre-authorisation required |
| 3003719 | LINEZOLID LHC | 600MG | TAB | J01XX08 | LINEZOLID | Pre-authorisation required |
| 721512 | LINEZOLID SPECPHARM | 600MG | TAB | J01XX08 | LINEZOLID | Pre-authorisation required |
| 722714 | LINEZOLID TEVA | 600MG | TAB | J01XX08 | LINEZOLID | Pre-authorisation required |
| 3008467 | LINOACT IV SOLUTION FOR INFUSION BAG | 600MG/300ML | INF | J01XX08 | LINEZOLID | Pre-authorisation required |
| 3003772 | LINOKEM | 600MG | TAB | J01XX08 | LINEZOLID | Pre-authorisation required |
| 3004929 | VOXWIN IV SOLUTION FOR INFUSION BAG | 600MG/300ML | INF | J01XX08 | LINEZOLID | Pre-authorisation required |
| 3002381 | ZENILID | 600MG | TAB | J01XX08 | LINEZOLID | Pre-authorisation required |
| 3004431 | ZENILID SOLUTION FOR INFUSION BAG 300ML | 600MG/300ML | INF | J01XX08 | LINEZOLID | Pre-authorisation required |
| 3003818 | ZENOXPAN | 600MG | TAB | J01XX08 | LINEZOLID | Pre-authorisation required |
| 700464 | ZYVOXID | 600MG | TAB | J01XX08 | LINEZOLID | Pre-authorisation required |
| 708873 | ZYVOXID | 200MG/100ML | INF | J01XX08 | LINEZOLID | Pre-authorisation required |
| 700466 | ZYVOXID | 100MG/5ML | SUS | J01XX08 | LINEZOLID | Pre-authorisation required |
| 898507 | ZYVOXID 300ML | 600MG/300ML | INF | J01XX08 | LINEZOLID | Pre-authorisation required |
| 3004233 | SIVEXTRO | 200MG | TAB | J01XX11 | TEDIZOLID | Pre-authorisation required |
| 3004234 | SIVEXTRO 200MG POWDER FOR SOLUTION | 200MG | INF | J01XX11 | TEDIZOLID | New product under review |
| J02 - ANTIMYCOTICS FOR SYSTEMIC USE | | | | | | |
| 3007885 | VCIDE 200 FC | 200MG | TAB | J02AC03 | VORICONAZOLE | Pre-authorisation required |
| 3007884 | VCIDE 50 FC | 50MG | TAB | J02AC03 | VORICONAZOLE | Pre-authorisation required |
| 700845 | VFEND | 200MG | TAB | J02AC03 | VORICONAZOLE | Pre-authorisation required |
| 700832 | VFEND | 50MG | TAB | J02AC03 | VORICONAZOLE | Pre-authorisation required |
| 3006838 | VORICONAZOLE 200MG MYLAN | 200MG | TAB | J02AC03 | VORICONAZOLE | Pre-authorisation required |
| 3005141 | VORISPORE 200 FC | 200MG | TAB | J02AC03 | VORICONAZOLE | Pre-authorisation required |
| 3005140 | VORISPORE 50 FC | 50MG | TAB | J02AC03 | VORICONAZOLE | Pre-authorisation required |
| 3005303 | NOXAFIL | 100MG | TAB | J02AC04 | POSACONAZOLE | Pre-authorisation required |
| 715049 | NOXAFIL | 40MG/1ML | SUS | J02AC04 | POSACONAZOLE | Pre-authorisation required |
| J05 - ANTIVIRALS FOR SYSTEMIC USE | | | | | | |
| 888609 | RELENZA | 5MG | KIT | J05AH01 | ZANAMIVIR | Exclusion |
| 3003130 | CYAMEG | 450MG | TAB | J05AB14 | VALGANCICLOVIR | Exclusion |
| 703908 | VALCYTE 450 | 450MG | TAB | J05AB14 | VALGANCICLOVIR | Exclusion |
| 719358 | VALCYTE POWDER FOR ORAL SOLUTION | 50MG/1ML | SOL | J05AB14 | VALGANCICLOVIR | Exclusion |
| 3001700 | VALHET | 450MG | TAB | J05AB14 | VALGANCICLOVIR | Exclusion |
| 3008324 | VALHET POWDER FOR ORAL SOLUTION | 50MG/1ML | SOL | J05AB14 | VALGANCICLOVIR | Exclusion |
| 3003109 | VALVIR | 450MG | TAB | J05AB14 | VALGANCICLOVIR | Exclusion |
| 3006307 | PREVYMIS | 240MG | TAB | J05AX18 | LETTERMOVIR | Exclusion |
| 3006296 | PREVYMIS CONCENTRATE FOR SOLUTION | 240MG/12ML | INF | J05AX18 | LETTERMOVIR | Exclusion |
| 3009788 | RIAMILOVIR 250 PHARMACENTRIX | 250MG | CAP | J05AX32 | RIAMILOVIR | Exclusion |
| J06 - IMMUNE SERA AND IMMUNOGLOBULINS | | | | | | |
| 3009061 | PRIVIGEN SOLUTION FOR INFUSION 100ML | 10G/100ML | INF | J06BA02 | IMMUNOGLOBULINS, NORMAL HUMAN, FOR INTRAVASCULAR ADM. | New product under review |
| 3009056 | PRIVIGEN SOLUTION FOR INFUSION 25ML | 2.5G/25ML | INF | J06BA02 | IMMUNOGLOBULINS, NORMAL HUMAN, FOR INTRAVASCULAR ADM. | New product under review |
| 3009060 | PRIVIGEN SOLUTION FOR INFUSION 50ML | 5G/50ML | INF | J06BA02 | IMMUNOGLOBULINS, NORMAL HUMAN, FOR INTRAVASCULAR ADM. | New product under review |
| 3010330 | BEYFORTUS SOLUTION FOR INJECTION PH | 100MG/1ML | INJ | J06BD08 | NIRSEVIMAB | New product under review |
| 3010329 | BEYFORTUS SOLUTION FOR INJECTION PH | 50MG/ .5ML | INJ | J06BD08 | NIRSEVIMAB | New product under review |
| J07-VACCINES | | | | | | |
| L01 - ANTINEOPLASTIC AGENTS | | | | | | |
| 3003124 | LEDAGA | 160MCG/1G | JEL | L01AA05 | CHLORMETHINE | New product under review |
| 3007697 | NERLYNX | 40MG | TAB | L01EH02 | NERATINIB | New product under review |
| 3007747 | BRUKINSA | 80MG | CAP | L01EL03 | ZANUBRUTINIB | New product under review |
| 3007788 | CABOMETYX | 20MG | TAB | L01EX07 | CABOZANTINIB | New product under review |
| 3007789 | CABOMETYX | 40MG | TAB | L01EX07 | CABOZANTINIB | New product under review |
| 3007790 | CABOMETYX | 60MG | TAB | L01EX07 | CABOZANTINIB | New product under review |
| 3008476 | ASU BEVACIZUMAB 0.2ML PRE-FILLED SYR | 25MG/1ML | INJ | L01FG01 | BEVACIZUMAB | Pre-authorisation required |

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| 3006791 | RYBREVANT CONCENTRATE FOR SOLUTION FOR INFUSION | | INF | L01FX18 | AMIVANTAMAB | New product under review | |
| 3009193 | COLUMVI CONCENTRATE FOR SOLUTION F | 2.5MG/2.5ML | INF | L01FX28 | GLOFITAMAB | New product under review | |
| 3009194 | COLUMVI CONCENTRATE FOR SOLUTION F | 10MG/10ML | INF | L01FX28 | GLOFITAMAB | New product under review | |
| 705611 | METVIX | 160MG/G | CRE | L01XD03 | METHYL AMINOLEVULINATE | Pre-authorisation required | |
| 3009291 | AKEEGA 100 MG /500 MG | 100MG/500MG | TAB | L01XK52 | NIRAPARIB AND ABIRATERONE | New product under review | |
| 3009289 | AKEEGA 50 MG /500 MG | 50MG/500MG | TAB | L01XK52 | NIRAPARIB AND ABIRATERONE | New product under review | |
| L04 - IMMUNOSUPPRESSANTS | | | | | | | |
| 3009178 | KOSELUGO | 10MG | CAP | L01EE04 | Selumetinib | New product under review | |
| 3005996 | KOSELUGO | 25MG | CAP | L01EE04 | Selumetinib | New product under review | |
| 898175 | ARAVAL | 20MG | TAB | L04AK01 | LEFLUNOMIDE | Pre-authorisation required | |
| 898171 | ARAVAL | 10MG | TAB | L04AK01 | LEFLUNOMIDE | Pre-authorisation required | |
| 3009300 | LEFLUNOMIDE 20 UNICORN | 20MG | TAB | L04AK01 | LEFLUNOMIDE | Pre-authorisation required | |
| 3009233 | LEFUNAR | 10MG | TAB | L04AK01 | LEFLUNOMIDE | Pre-authorisation required | |
| 3009234 | LEFUNAR | 20MG | TAB | L04AK01 | LEFLUNOMIDE | Pre-authorisation required | |
| 721806 | LUNAR | 20MG | TAB | L04AK01 | LEFLUNOMIDE | Pre-authorisation required | |
| 3000528 | RAVALEF | 10MG | TAB | L04AK01 | LEFLUNOMIDE | Pre-authorisation required | |
| 3000529 | RAVALEF | 20MG | TAB | L04AK01 | LEFLUNOMIDE | Pre-authorisation required | |
| 721609 | RHEUMALEF | 10MG | TAB | L04AK01 | LEFLUNOMIDE | Pre-authorisation required | |
| 721610 | RHEUMALEF | 20MG | TAB | L04AK01 | LEFLUNOMIDE | Pre-authorisation required | |
| 3001035 | ESBRIET | 267MG | CAP | L04AX05 | PIRFENIDONE | Pre-authorisation required | |
| 3007083 | ESBRIET | 267MG | TAB | L04AX05 | PIRFENIDONE | Pre-authorisation required | |
| 3007082 | ESBRIET | 801MG | TAB | L04AX05 | PIRFENIDONE | Pre-authorisation required | |
| 3009214 | PIROFIBRA | 267MG | TAB | L04AX05 | PIRFENIDONE | Pre-authorisation required | |
| 3004236 | TECFIDERA | 120MG | CAP | L04AX07 | DIMETHYL FUMARATE | New product under review | |
| 3004237 | TECFIDERA | 240MG | CAP | L04AX07 | DIMETHYL FUMARATE | New product under review | |
| M02 - TOPICAL PRODUCTS FOR JOINT AND MUSCULAR PAIN | | | | | | | |
| 810487 | TRANSACT | 40MG | PAD | M02AA19 | FLURBIPROFEN | Pre-authorisation required | |
| 720112 | VOLTAREN PATCH | .14G | PLS | M02AA15 | DICLOFENAC | Pre-authorisation required | |
| M09 - OTHER DRUGS FOR DISORDERS OF THE MUSCULO-SKELETAL SYSTEM | | | | | | | |
| 569024 | GO-ON SYRINGE 2.5ML | | 0 | ZZZ | M09AX01 | HYALURONIC ACID | Exclusion |
| 210946 | INJECTION ARTHROVISC1 2ML | | | INJ | M09AX01 | HYALURONIC ACID | Exclusion |
| 210947 | INJECTION ARTHROVISC3 2ML | | | INJ | M09AX01 | HYALURONIC ACID | Exclusion |
| 257649 | INJECTION OPTIVISC 20 20MG PER 2ML | 20MG/2ML | | ZZZ | M09AX01 | HYALURONIC ACID | Exclusion |
| 257651 | INJECTION OPTIVISC M 40MG PER 2ML +0.3 | 40MG/2ML | | ZZZ | M09AX01 | HYALURONIC ACID | Exclusion |
| 257650 | INJECTION OPTIVISC PLUS 40MG PER 2ML | 40MG/2ML | | ZZZ | M09AX01 | HYALURONIC ACID | Exclusion |
| 257652 | INJECTION OPTIVISC SINGLE 90MG PER 3ML | 90MG/3ML | | ZZZ | M09AX01 | HYALURONIC ACID | Exclusion |
| 1044785 | INJECTION REVISCON 2.0% 2.4ML | 48MG | | INJ | M09AX01 | HYALURONIC ACID | Exclusion |
| 713683 | SUPLASYN PREFILLED SYRINGE 2ML | 20MG/2ML | | INJ | M09AX01 | HYALURONIC ACID | Exclusion |
| 721958 | SUPLASYN PRE-FILLED SYRINGE 6ML | 60MG/6ML | | INJ | M09AX01 | HYALURONIC ACID | Exclusion |
| 236799 | SYNOCROM FORTE ONE SYRINGE 80MG PER 4ML | | | INJ | M09AX01 | HYALURONIC ACID | Exclusion |
| 236797 | SYNOCROM FORTE SYRINGE 40MG PER 2ML | | | INJ | M09AX01 | HYALURONIC ACID | Exclusion |
| 236801 | SYNOCROM MINI SYRINGE 10MG PER 1ML | | | INJ | M09AX01 | HYALURONIC ACID | Exclusion |
| 236800 | SYNOCROM SYRINGE 20MG PER 2ML | | | INJ | M09AX01 | HYALURONIC ACID | Exclusion |
| 3008999 | SYNVISC ONE (SECTION 21) 10ML SYRINGE | 8MG/1ML | | INJ | M09AX01 | HYALURONIC ACID | Exclusion |
| 720405 | SYNVISC PRE-FILLED SYRINGE 10ML | 8MG/1ML | | INJ | M09AX01 | HYALURONIC ACID | Exclusion |
| 848816 | SYNVISC SYRINGE | 16MG/2ML | | INJ | M09AX01 | HYALURONIC ACID | Exclusion |
| 3005819 | EVRYSDI POWDER FOR ORAL SOLUTION | .75MG/1ML | | SUS | M09AX10 | RISDIPLAM | New product under review |
| N03 - ANTIEPILEPTICS | | | | | | | |
| 809594 | SABRIL | 500MG | TAB | N03AG04 | VIGABATRIN | Pre-authorisation required | |
| 704128 | TALOXIA SUSP | 600MG/5ML | | SUS | N03AX10 | FELBAMATE | Pre-authorisation required |
| 713146 | DIACOMIT POWDER FOR ORAL SOLUTION | 250MG | | SAC | N03AX17 | Stiripentol | New product under review |
| 714751 | DIACOMIT | 250MG | | CAP | N03AX17 | Stiripentol | New product under review |
| 714752 | DIACOMIT POWDER FOR ORAL SOLUTION | 500MG | | SAC | N03AX17 | Stiripentol | New product under review |
| 714753 | DIACOMIT | 500MG | | CAP | N03AX17 | Stiripentol | New product under review |
| 3008077 | VIMCOSA | 100MG | | TAB | N03AX18 | LACOSAMIDE | Pre-authorisation required |
| 3008088 | VIMCOSA | 150MG | | TAB | N03AX18 | LACOSAMIDE | Pre-authorisation required |
| 3008089 | VIMCOSA | 200MG | | TAB | N03AX18 | LACOSAMIDE | Pre-authorisation required |
| 3008087 | VIMCOSA | 50MG | | TAB | N03AX18 | LACOSAMIDE | Pre-authorisation required |
| 723048 | FYCOMPA | 2MG | | TAB | N03AX22 | PERAMPANEL | Pre-authorisation required |
| 723049 | FYCOMPA | 4MG | | TAB | N03AX22 | PERAMPANEL | Pre-authorisation required |
| 723050 | FYCOMPA | 6MG | | TAB | N03AX22 | PERAMPANEL | Pre-authorisation required |
| 723024 | FYCOMPA | 8MG | | TAB | N03AX22 | PERAMPANEL | Pre-authorisation required |
| 723051 | FYCOMPA | 10MG | | TAB | N03AX22 | PERAMPANEL | Pre-authorisation required |
| 723052 | FYCOMPA | 12MG | | TAB | N03AX22 | PERAMPANEL | Pre-authorisation required |
| N04 - ANTI-PARKINSON DRUGS | | | | | | | |
| 868590 | COMTAN | 200MG | | TAB | N04BX02 | ENTACAPONE | Pre-authorisation required |
| 3005273 | ENKOBIST | 200MG | | TAB | N04BX02 | ENTACAPONE | Pre-authorisation required |
| 708000 | STALEVO 100/25 | 100MG/25MG | | TAB | N04BA03 | LEVODOPA, DECARBOXYLASE INHIBITOR AND COMT INHIBITOR | Pre-authorisation required |
| 708001 | STALEVO 150/37.5 | 150MG/37.5MG | | TAB | N04BA03 | LEVODOPA, DECARBOXYLASE INHIBITOR AND COMT INHIBITOR | Pre-authorisation required |
| 707999 | STALEVO 50/12.5 | 50MG/12.5MG | | TAB | N04BA03 | LEVODOPA, DECARBOXYLASE INHIBITOR AND COMT INHIBITOR | Pre-authorisation required |
| N05 - PSYCHOLEPTICS | | | | | | | |
| 3002581 | ABILIFY MAINTENA POWD & SOLVENT FOR | 400MG | | INJ | N05AX12 | ARIPIPIRAZOLE | Pre-authorisation required |
| 3002583 | ABILIFY MAINTENA POWDER & SOLVENT F | 400MG | | INJ | N05AX12 | ARIPIPIRAZOLE | Pre-authorisation required |
| 723894 | EQUANIL | 400MG | | TAB | N05BC01 | MEPROBAMATE | Exclusion |
| 705474 | RISPERDAL CONSTA | 25MG | | VIAL | N05AX08 | RISPERIDONE | Pre-authorisation required |

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| 705475 | RISPERDAL CONSTA | 37.5MG | VIAL | N05AX08 | RISPERIDONE | Pre-authorisation required |
| 705476 | RISPERDAL CONSTA | 50MG | VIAL | N05AX08 | RISPERIDONE | Pre-authorisation required |
| 3007704 | FOXISTRES | 50MG | CAP | N05BX03 | ETIFOXINE | Exclusion |
| 707127 | STRESAM | 50MG | CAP | N05BX03 | ETIFOXINE | Exclusion |
| 3002705 | TREVICTA PRE-FILLED SYRINGE | 175MG/1.875ML | INJ | N05AX13 | PALIPERIDONE | Pre-authorisation required |
| 3002704 | TREVICTA PRE-FILLED SYRINGE | 263MG/1.315ML | INJ | N05AX13 | PALIPERIDONE | Pre-authorisation required |
| 3002703 | TREVICTA PRE-FILLED SYRINGE | 350MG/1.75ML | INJ | N05AX13 | PALIPERIDONE | Pre-authorisation required |
| 3002702 | TREVICTA PRE-FILLED SYRINGE | 525MG/2.625ML | INJ | N05AX13 | PALIPERIDONE | Pre-authorisation required |
| 718471 | XEPLION | 100MG/1ML | INJ | N05AX13 | PALIPERIDONE | Pre-authorisation required |
| 718469 | XEPLION | 50MG/0.5ML | INJ | N05AX13 | PALIPERIDONE | Pre-authorisation required |
| 718472 | XEPLION | 150MG/1.5ML | INJ | N05AX13 | PALIPERIDONE | Pre-authorisation required |
| 718470 | XEPLION | 75MG/0.75ML | INJ | N05AX13 | PALIPERIDONE | Pre-authorisation required |
| 3007716 | DAYVIGO | 10MG | TAB | N05CJ02 | LEMBOREXANT | Exclusion |
| 3007710 | DAYVIGO | 5MG | TAB | N05CJ02 | LEMBOREXANT | Exclusion |
| N06 - PSYCHOANALEPTICS | | | | | | |
| 3003107 | BUDEP XR | 150MG | SRT | N06AX12 | BUPROPIONE HYDROCHLORIDE | Pre-authorisation required |
| 3003108 | BUDEP XR | 300MG | SRT | N06AX12 | BUPROPIONE HYDROCHLORIDE | Pre-authorisation required |
| 3008900 | BUPROPION 150 XL DRL | 150MG | SRT | N06AX12 | BUPROPIONE HYDROCHLORIDE | Pre-authorisation required |
| 3008901 | BUPROPION 300 XL DRL | 300MG | SRT | N06AX12 | BUPROPIONE HYDROCHLORIDE | Pre-authorisation required |
| 3003761 | BUPROPION XR ADKO | 150MG | SRT | N06AX12 | BUPROPIONE HYDROCHLORIDE | Pre-authorisation required |
| 3006368 | BUPYRA XL | 150MG | SRT | N06AX12 | BUPROPIONE HYDROCHLORIDE | Pre-authorisation required |
| 3006369 | BUPYRA XL | 300MG | SRT | N06AX12 | BUPROPIONE HYDROCHLORIDE | Pre-authorisation required |
| 3006765 | PRODYNA 150 MG XR | 150MG | SRT | N06AX12 | BUPROPIONE HYDROCHLORIDE | Pre-authorisation required |
| 3006766 | PRODYNA 300 MG XR | 300MG | SRT | N06AX12 | BUPROPIONE HYDROCHLORIDE | Pre-authorisation required |
| 3001584 | VOXRA XL | 150MG | SRT | N06AX12 | BUPROPIONE HYDROCHLORIDE | Pre-authorisation required |
| 3001582 | VOXRA XL | 300MG | SRT | N06AX12 | BUPROPIONE HYDROCHLORIDE | Pre-authorisation required |
| 3004156 | WELDEP XR | 150MG | SRT | N06AX12 | BUPROPIONE HYDROCHLORIDE | Pre-authorisation required |
| 3004157 | WELDEP XR | 300MG | SRT | N06AX12 | BUPROPIONE HYDROCHLORIDE | Pre-authorisation required |
| 711008 | WELLBUTRIN XL | 150MG | TAB | N06AX12 | BUPROPIONE HYDROCHLORIDE | Pre-authorisation required |
| 711009 | WELLBUTRIN XL | 300MG | TAB | N06AX12 | BUPROPIONE HYDROCHLORIDE | Pre-authorisation required |
| 716215 | VALDOXANE | 25MG | TAB | N06AX22 | AGOMELATINE | Pre-authorisation required |
| 3004987 | DEPVEN 100 XL | 100MG | SRT | N06AX23 | DESVENLAFAXINE | Exclusion |
| 3004986 | DEPVEN 50 XL | 50MG | SRT | N06AX23 | DESVENLAFAXINE | Exclusion |
| 3004437 | DESLAFEKS | 100MG | SRT | N06AX23 | DESVENLAFAXINE | Exclusion |
| 3004436 | DESLAFEKS | 50MG | SRT | N06AX23 | DESVENLAFAXINE | Exclusion |
| 3004327 | DESLAFORE XR | 100MG | SRT | N06AX23 | DESVENLAFAXINE | Exclusion |
| 3004326 | DESLAFORE XR | 50MG | SRT | N06AX23 | DESVENLAFAXINE | Exclusion |
| 3002751 | EXLOV XR | 100MG | SRT | N06AX23 | DESVENLAFAXINE | Exclusion |
| 3002750 | EXLOV XR | 50MG | SRT | N06AX23 | DESVENLAFAXINE | Exclusion |
| 720594 | EXSIRA | 50MG | SRT | N06AX23 | DESVENLAFAXINE | Exclusion |
| 720595 | EXSIRA | 100MG | SRT | N06AX23 | DESVENLAFAXINE | Exclusion |
| 3004350 | VOLOXIN | 100MG | SRT | N06AX23 | DESVENLAFAXINE | Exclusion |
| 3004347 | VOLOXIN | 50MG | SRT | N06AX23 | DESVENLAFAXINE | Exclusion |
| 3004864 | SPRAVATO SINGLE-USE | 28MG/2ML | NAS | N06AX27 | ESKETAMINE | Exclusion |
| 3004465 | AMFEXA | 5MG | TAB | N06BA02 | DEXAMFETAMINE | Exclusion |
| 3004466 | AMFEXA | 10MG | TAB | N06BA02 | DEXAMFETAMINE | Exclusion |
| 3007018 | AMFEXA | 20MG | TAB | N06BA02 | DEXAMFETAMINE | Exclusion |
| 3004875 | MODAFINIL 100 IPHARMA | 100MG | TAB | N06BA07 | MODAFINIL | Pre-authorisation required |
| 3009851 | PROLERT | 100MG | TAB | N06BA07 | MODAFINIL | Pre-authorisation required |
| 701388 | PROVIGIL | 100MG | TAB | N06BA07 | MODAFINIL | Pre-authorisation required |
| 3002858 | VYVANSE | 30MG | CAP | N06BA12 | LISDEXAMFETAMINE | Exclusion |
| 3002859 | VYVANSE | 50MG | CAP | N06BA12 | LISDEXAMFETAMINE | Exclusion |
| 3002860 | VYVANSE | 70MG | CAP | N06BA12 | LISDEXAMFETAMINE | Exclusion |
| 3003512 | NUVIGIL | 150MG | TAB | N06BA13 | ARMODAFINIL | Pre-authorisation required |
| 3003513 | NUVIGIL | 250MG | TAB | N06BA13 | ARMODAFINIL | Pre-authorisation required |
| 723248 | ALZIDO | 5MG | TAB | N06DA02 | DONEPEZIL | Pre-authorisation required |
| 723249 | ALZIDO | 10MG | TAB | N06DA02 | DONEPEZIL | Pre-authorisation required |
| 837334 | ARICEPT | 10MG | TAB | N06DA02 | DONEPEZIL | Pre-authorisation required |
| 837326 | ARICEPT | 5MG | TAB | N06DA02 | DONEPEZIL | Pre-authorisation required |
| 720803 | ARIMENTIA | 10MG | TAB | N06DA02 | DONEPEZIL | Pre-authorisation required |
| 720802 | ARIMENTIA | 5MG | TAB | N06DA02 | DONEPEZIL | Pre-authorisation required |
| 720362 | ARIMER | 5MG | TAB | N06DA02 | DONEPEZIL | Pre-authorisation required |
| 720363 | ARIMER | 10MG | TAB | N06DA02 | DONEPEZIL | Pre-authorisation required |
| 722444 | CURLOVON | 5MG | TAB | N06DA02 | DONEPEZIL | Pre-authorisation required |
| 722445 | CURLOVON | 10MG | TAB | N06DA02 | DONEPEZIL | Pre-authorisation required |
| 715040 | DONECEPT | 10MG | TAB | N06DA02 | DONEPEZIL | Pre-authorisation required |
| 715039 | DONECEPT | 5MG | TAB | N06DA02 | DONEPEZIL | Pre-authorisation required |
| 3003951 | DONECEPT ODT | 10MG | MLT | N06DA02 | DONEPEZIL | Pre-authorisation required |
| 3003950 | DONECEPT ODT | 5MG | MLT | N06DA02 | DONEPEZIL | Pre-authorisation required |
| 723344 | DONEPEZIL UNICORN | 5MG | TAB | N06DA02 | DONEPEZIL | Pre-authorisation required |
| 723345 | DONEPEZIL UNICORN | 10MG | TAB | N06DA02 | DONEPEZIL | Pre-authorisation required |
| 720340 | DONERIN | 10MG | TAB | N06DA02 | DONEPEZIL | Pre-authorisation required |
| 720339 | DONERIN | 5MG | TAB | N06DA02 | DONEPEZIL | Pre-authorisation required |
| 722953 | JUBEZIL | 5MG | TAB | N06DA02 | DONEPEZIL | Pre-authorisation required |
| 722954 | JUBEZIL | 10MG | TAB | N06DA02 | DONEPEZIL | Pre-authorisation required |

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| 721161 | MACLEODS DONEPEZIL | 5MG | TAB | N06DA02 | DONEPEZIL | Pre-authorisation required |
| 721162 | MACLEODS DONEPEZIL | 10MG | TAB | N06DA02 | DONEPEZIL | Pre-authorisation required |
| 722446 | NEPIZEL | 5MG | TAB | N06DA02 | DONEPEZIL | Pre-authorisation required |
| 722447 | NEPIZEL | 10MG | TAB | N06DA02 | DONEPEZIL | Pre-authorisation required |
| 722728 | ZEPANALZ | 5MG | TAB | N06DA02 | DONEPEZIL | Pre-authorisation required |
| 722729 | ZEPANALZ | 10MG | TAB | N06DA02 | DONEPEZIL | Pre-authorisation required |
| 848565 | EXELON | 3MG | CAP | N06DA03 | RIVASTIGMINE | Pre-authorisation required |
| 848573 | EXELON | 4.5MG | CAP | N06DA03 | RIVASTIGMINE | Pre-authorisation required |
| 3005488 | KYRIZ | 1.5MG | CAP | N06DA03 | RIVASTIGMINE | Pre-authorisation required |
| 3005489 | KYRIZ | 3MG | CAP | N06DA03 | RIVASTIGMINE | Pre-authorisation required |
| 3005490 | KYRIZ | 4.5MG | CAP | N06DA03 | RIVASTIGMINE | Pre-authorisation required |
| 3005491 | KYRIZ | 6MG | CAP | N06DA03 | RIVASTIGMINE | Pre-authorisation required |
| 723726 | REMCEPT XL | 8MG | SRC | N06DA04 | GALANTAMINE | Pre-authorisation required |
| 723727 | REMCEPT XL | 16MG | SRC | N06DA04 | GALANTAMINE | Pre-authorisation required |
| 723728 | REMCEPT XL | 24MG | SRC | N06DA04 | GALANTAMINE | Pre-authorisation required |
| 714433 | REMINYL CR | 16MG | SRC | N06DA04 | GALANTAMINE | Pre-authorisation required |
| 714434 | REMINYL CR | 24MG | SRC | N06DA04 | GALANTAMINE | Pre-authorisation required |
| 714432 | REMINYL CR | 8MG | SRC | N06DA04 | GALANTAMINE | Pre-authorisation required |
| 722117 | COGNIMET | 10MG | TAB | N06DX01 | MEMANTINE | Pre-authorisation required |
| 722967 | EBITINE | 10MG | TAB | N06DX01 | MEMANTINE | Pre-authorisation required |
| 705592 | EBIXA | 10MG | TAB | N06DX01 | MEMANTINE | Pre-authorisation required |
| 706181 | EBIXA DROPS | 10MG/1G | DRP | N06DX01 | MEMANTINE | Pre-authorisation required |
| 3007453 | EMORIX | 10MG | TAB | N06DX01 | MEMANTINE | Pre-authorisation required |
| 722058 | MEMANTINE UNICHEM | 10MG | TAB | N06DX01 | MEMANTINE | Pre-authorisation required |
| 722059 | MEMINIST | 10MG | TAB | N06DX01 | MEMANTINE | Pre-authorisation required |
| 721208 | MEMOR | 10MG | TAB | N06DX01 | MEMANTINE | Pre-authorisation required |
| 3005797 | NOALZH | 10MG | TAB | N06DX01 | MEMANTINE | Pre-authorisation required |
| N07 - OTHER NERVOUS SYSTEM DRUGS | | | | | | |
| 3008699 | BETAHISTINE 24 UNICORN | 24MG | TAB | N07CA01 | BETAHISTINE | Exclusion |
| 720978 | DAHIDE | 24MG | TAB | N07CA01 | BETAHISTINE | Exclusion |
| 720325 | HIDRIST | 24MG | TAB | N07CA01 | BETAHISTINE | Exclusion |
| 723921 | MENIVERT | 24MG | TAB | N07CA01 | BETAHISTINE | Exclusion |
| 707452 | SERC | 24MG | TAB | N07CA01 | BETAHISTINE | Exclusion |
| 720825 | TREVIGO | 24MG | TAB | N07CA01 | BETAHISTINE | Exclusion |
| 3000557 | VERTIN | 24MG | TAB | N07CA01 | BETAHISTINE | Exclusion |
| 3006087 | ZYGOVERT | 24MG | TAB | N07CA01 | BETAHISTINE | Exclusion |
| 3006227 | REVIHIST | 24MG | TAB | N07CA01 | BETAHISTINE | Exclusion |
| 824100 | RILUTEK | 50MG | TAB | N07XX02 | RILUZOLE | Exclusion |
| P02 - ANTIHELMINTICS | | | | | | |
| 711840 | STROMECTOL (SECTION 21) | | TAB | P02CF01 | IVERMECTIN | Exclusion |
| 3001433 | IVERMECTIN POWDER | | POW | | IVERMECTIN | Exclusion |
| 3002852 | ALICE (SECTION 21) | 12MG | TAB | P02CF01 | IVERMECTIN | Exclusion |
| 3002851 | ALICE (SECTION 21) | 6MG | TAB | P02CF01 | IVERMECTIN | Exclusion |
| 3002838 | IVERMECTIN (SECTION 21) | 12MG | TAB | P02CF01 | IVERMECTIN | Exclusion |
| 3002893 | IVERMECTIN (SECTION 21) | 3MG | TAB | P02CF01 | IVERMECTIN | Exclusion |
| 3002836 | IVERMECTIN (SECTION 21) | 6MG | TAB | P02CF01 | IVERMECTIN | Exclusion |
| 3002835 | PARAKIL (SECTION 21) | 6MG | TAB | P02CF01 | IVERMECTIN | Exclusion |
| 3002895 | PARAKIL (SECTION 21) | 6MG | TAB | P02CF01 | IVERMECTIN | Exclusion |
| R01 - NASAL PREPARATIONS | | | | | | |
| 878758 | FLIXONASE NASULES | 400MCG | CPS | R01AD08 | FLUTICASONE | Pre-authorisation required |
| R03 - DRUGS FOR OBSTRUCTIVE AIRWAY DISEASES | | | | | | |
| 3004164 | TRELEGY ELLIPTA 30 DOSES | | ACC | R03AL08 | VILANTEROL, UMECLIDINIUM BROMIDE AND FLUTICASONE FUROATE | Exclusion |
| 714152 | FORVENT (REFILL) | 18MCG | CPS | R03BB04 | TIOTROPIUM BROMIDE | Pre-authorisation required |
| 714167 | FORVENT HANDIHALER COMPLETE | 18MCG | KIT | R03BB04 | TIOTROPIUM BROMIDE | Pre-authorisation required |
| 3006100 | NEUMOTROPIO 30 INH CAPSULES WITH ZE | 18MCG | KIT | R03BB04 | TIOTROPIUM BROMIDE | Pre-authorisation required |
| 702523 | SPIRIVA MA COMPLETE | | KIT | R03BB04 | TIOTROPIUM BROMIDE | Pre-authorisation required |
| 702526 | SPIRIVA MA REFILL | | CPS | R03BB04 | TIOTROPIUM BROMIDE | Pre-authorisation required |
| 710897 | SPIRIVA RESPIMAT INHALER 60 DOSES | 2.5MCG | INH | R03BB04 | TIOTROPIUM BROMIDE | Pre-authorisation required |
| 3003750 | TIORES 30 INH CAPSULES WITH ZEPHIR INHAL | | KIT | R03BB04 | TIOTROPIUM BROMIDE | Pre-authorisation required |
| 3003905 | TIOTOR 30 INH CAPSULES WITH ZELPHIR I | 16MCG | KIT | R03BB04 | TIOTROPIUM BROMIDE | Pre-authorisation required |
| 3009204 | YUPELRI SOLUTION FOR INHALATION | 175MCG/3ML | UDV | R03BB08 | REVEFENACIN | New product under review |
| 715321 | DAXAS | .5MG | TAB | R03DX07 | ROFLUMILAST | Exclusion |
| 3008856 | DAXAS (SECTION 21) | 500MCG | TAB | R03DX07 | ROFLUMILAST | Exclusion |
| 3006635 | GLEMOLVE | 10MG/5MG | TAB | R03DC53 | MONTELUKAST, COMBINATIONS | Exclusion |
| 3009553 | LUMONT CO | 10MG/5MG | TAB | R03DC53 | MONTELUKAST, COMBINATIONS | Exclusion |
| 3009743 | MONTECET | 10MG/5MG | TAB | R03DC53 | MONTELUKAST, COMBINATIONS | Exclusion |
| R05 - COUGH AND COLD PREPARATIONS | | | | | | |
| 814679 | PULMOZYME | 2.5MG/2.5ML | AMP | R05CB13 | DORNASE ALFA (DESOXYRIBONUCLEASE) | Exclusion |
| S01 - OPHTHALMOLOGICALS | | | | | | |
| 3008903 | ASU AFLIBERCEPT (SECTION 36) PRE-FILL | 40MG/1ML | INJ | S01LA05 | AFLIBERCEPT | Pre-authorisation required |
| 3008476 | ASU BEVACIZUMAB 0.2ML PRE-FILLED SYR | 25MG/1ML | INJ | S01LA08 | BEVACIZUMAB | Pre-authorisation required |
| 1027834 | INTRACINOL 1.1ML | | SUS | S01BA05 | TRIAMCINOLONE | Pre-authorisation required |

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| 152122 | OPHTHALMIC TRIAMCINOLONE ACETORIDE | 0.04 | SUS | S01BA05 | TRIAMCINOLONE | Pre-authorisation required |
| 822868 | BETOPTIC S SINGLE DOSE 0.25ml | 2.5MG/1ML | OPD | S01ED02 | BETAXOLOL | Exclusion |
| S02 - OTOLOGICALS | | | | | | |
| V03 - ALL OTHER THERAPEUTIC PRODUCTS | | | | | | |
| 720512 | RENVELA | 800MG | TAB | V03AE02 | SEVELAMER | Pre-authorisation required |