

ABACAVIR

Abacavir

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Oral:

Ziagen: 20 mg/mL (240 mL) [contains methylparaben, propylene glycol, propylparaben, saccharin sodium; strawberry-banana flavor]

Tablet, Oral:

Generic: 300 mg

Abacavir and Lamivudine

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Tablet, Oral:

Generic: Abacavir 600 mg and lamivudine 300 mg

Abacavir, Dolutegravir, and Lamivudine

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Tablet, Oral:

Triumeq: Abacavir 600 mg, dolutegravir 50 mg, and lamivudine 300 mg

Abacavir, Lamivudine, and Zidovudine

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Tablet, Oral:

Generic: Abacavir sulfate 300 mg, lamivudine 150 mg, and zidovudine 300 mg

Abciximab

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Solution, Intravenous:

ReoPro: 2 mg/mL (5 mL) [contains polysorbate 80]

Abemaciclib

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Tablet, Oral:

Verzenio: 50 mg, 100 mg, 150 mg, 200 mg

Abiraterone Acetate

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Tablet, Oral:

Yonsa: 125 mg

Zytiga: 250 mg, 500 mg

Generic: 250 mg

AbobotulinumtoxinA

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Solution Reconstituted, Intramuscular:

Dysport: 300 units (1 ea); 500 units (1 ea) [contains milk protein]

Absorption Base

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Cream: 480 g

Ointment, topical: 480 g

Acalabrutinib

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Capsule, Oral:

Calquence: 100 mg

Acamprosate

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Tablet Delayed Release, Oral, as calcium:

Generic: 333 mg

Acarbose

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Tablet, Oral:

Generic: 25 mg, 50 mg, 100 mg

Acebutolol

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Capsule, Oral, as hydrochloride:

Generic: 200 mg, 400 mg

Acetaminophen

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Caplet, Oral:

Generic: 500 mg

Capsule, Oral:

Mapap Extra Strength: 500 mg

Elixir, Oral:

Mapap Children's: 160 mg/5 mL (118 mL, 480 mL) [ethanol free; contains benzoic acid, propylene glycol, sodium benzoate; cherry flavor]

Injection, Solution [preservative free]:

Ofirmev: 10 mg/mL (100 mL)

Liquid, Oral:

Generic: 160 mg/5 mL (120 mL, 473 mL); 500 mg/5 mL (240 mL)

Solution, Oral:

Generic: 160 mg/5 mL (5 mL, 10 mL, 20 mL)

Suppository, Rectal:

Generic: 120 mg (12s); 325 mg (12s)

Suspension, Oral:

Generic: 160 mg/5 mL (5 mL, 10.15 mL, 20.3 mL)

Syrup, Oral:

Triaminic Children's Fever Reducer Pain Reliever: 160 mg/5 mL (118 mL)

Tablet, Oral:

Generic: 325 mg, 500 mg

Tablet, Chewable, Oral:

Generic: 80 mg

NOT COVERED

Caplet, Extended Release, Oral:

Mapap Arthritis Pain: 650 mg

Tylenol 8 HR Arthritis Pain: 650 mg

Suppository, Rectal:

Generic: 650 mg (12s)

Acetaminophen and Caffeine

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Tablet, Oral:

Excedrin Tension Headache: Acetaminophen 500 mg and caffeine 65 mg [contains benzoic acid]

Excedrin Tension Headache: Acetaminophen 500 mg and caffeine 65 mg [aspirin free; contains benzoic acid]

Acetaminophen and Codeine

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BASIC CORE FORMULARY

Tablet, Oral:

Acetaminophen 300 mg and codeine phosphate 30 mg

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Solution, Oral:

Generic: Acetaminophen 120 mg and codeine phosphate 12 mg per 5 mL (5 mL, 12.5 mL, 118 mL, 473 mL)

Tablet, Oral:

Acetaminophen 300 mg and codeine phosphate 15 mg

Acetaminophen 300 mg and codeine phosphate 60 mg

Acetaminophen and Diphenhydramine

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UNIFORM FORMULARY

Tablet, Oral:

Aceta-Gesic: Acetaminophen 325 mg and diphenhydramine hydrochloride 12.5 mg

Excedrin PM: Acetaminophen 500 mg and diphenhydramine citrate 38 mg

Legatrin PM: Acetaminophen 500 mg and diphenhydramine hydrochloride 50 mg

Percogesic Extra Strength: Acetaminophen 500 mg and diphenhydramine hydrochloride 12.5 mg

Generic: Acetaminophen 500 mg and diphenhydramine hydrochloride 25 mg

Acetaminophen and Pamabrom

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Caplet, Oral:

Midol Teen Formula: Acetaminophen 500 mg and pamabrom 25 mg

Tylenol Women's Menstrual Relief: Acetaminophen 500 mg and pamabrom 25 mg

Tablet, Oral:

Cramp Tabs: Acetaminophen 325 mg and pamabrom 25 mg

Acetaminophen and Phenylephrine

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Caplet, Oral:

Contact Cold + Flu Maximum Strength Non Drowsy: Acetaminophen 500 mg and phenylephrine hydrochloride 5 mg

Mapap Sinus PE, Sudafed PE Pressure + Pain: Acetaminophen 325 mg and phenylephrine hydrochloride 5 mg

Tylenol Sinus Congestion & Pain Daytime: Acetaminophen 325 mg and phenylephrine hydrochloride 5 mg [Cool Burst flavor]

Capsule, Liquid Filled, Oral:

Vicks DayQuil Sinex Daytime Sinus: Acetaminophen 325 mg and phenylephrine hydrochloride 5 mg

Tablet, Oral:

Cetafen Cold: Acetaminophen 500 mg and phenylephrine hydrochloride 5 mg

Robitussin Peak Cold Nasal Relief: Acetaminophen 325 mg and phenylephrine hydrochloride 5 mg
 Sinus Pain & Pressure: Acetaminophen 500 mg and phenylephrine hydrochloride 5 mg

Acetaminophen and Phenyltoloxamine
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UNIFORM FORMULARY

Tablet, Oral:
 Dolorex: Acetaminophen 325 mg and phenyltoloxamine citrate 25 mg

Acetaminophen and Pseudoephedrine
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Caplet, Oral:
 Ornex Maximum Strength: Acetaminophen 500 mg and pseudoephedrine hydrochloride 30 mg

Acetaminophen and Tramadol
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Tablet, Oral:
 Generic: Acetaminophen 325 mg and tramadol hydrochloride 37.5 mg

Acetaminophen, Aspirin, and Caffeine
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Caplet, Oral:
 Excedrin Extra Strength, Excedrin Migraine: Acetaminophen 250 mg, aspirin 250 mg, and caffeine 65 mg
 Vanquish Extra Strength Pain Reliever: Acetaminophen 194 mg, aspirin 227 mg, and caffeine 33 mg
 Powder, Oral:
 Goody's Extra Strength Headache Powder: Acetaminophen 260 mg, aspirin 520 mg, and caffeine 32.5 mg [contains lactose]
 Tablet, Oral:
 Anacin Advanced Headache Formula: Acetaminophen 250 mg, aspirin 250 mg, and caffeine 65 mg
 Excedrin Extra Strength, Excedrin Migraine, Pain-Off: Acetaminophen 250 mg, aspirin 250 mg, and caffeine 65 mg
 Fem-Prin: Acetaminophen 194.4 mg, aspirin 226.8 mg, and caffeine 32.4 mg

Acetaminophen, Caffeine, and Dihydrocodeine
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Capsule, Oral:
 Generic: Acetaminophen 320.5 mg, caffeine 30 mg, and dihydrocodeine bitartrate 16 mg

Acetaminophen, Caffeine, and Isometheptene Mucate
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UNIFORM FORMULARY

Capsule, Oral:
 Generic: Acetaminophen 500 mg, caffeine 20 mg, isometheptene mucate 130 mg

Acetaminophen, Caffeine, and Pyrilamine
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Tablet, Oral, as hydrochloride:
 Midol Complete: Acetaminophen 500 mg, caffeine 60 mg, and pyrilamine maleate 15 mg

Acetaminophen, Dextromethorphan, and Doxylamine
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Capsule, Liquid Filled, Oral:
 Generic: Acetaminophen 325 mg, dextromethorphan hydrobromide 15 mg, and doxylamine succinate 6.25 mg
 Liquid, Oral:
 Vicks NyQuil Cold & Flu Nighttime Relief: Acetaminophen 650 mg, dextromethorphan hydrobromide 30 mg, and doxylamine succinate 12.5 mg per 30 mL (240 mL, 360 mL) [contains ethanol 10%, propylene glycol, sodium benzoate, sodium 43 mg/30 mL]

Acetaminophen, Dextromethorphan, and Phenylephrine
DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY

Caplet, Oral:
 Comtrex Maximum Strength, Non-Drowsy Cold & Cough: Acetaminophen 325 mg, dextromethorphan hydrobromide 10 mg, and phenylephrine hydrochloride 5 mg
 Mapap Multi-Symptom Cold: Acetaminophen 325 mg, dextromethorphan hydrobromide 10 mg, and phenylephrine hydrochloride 5 mg [cool blast flavor]
 Sudafed PE Pressure+Pain+Cough: Acetaminophen 325 mg, dextromethorphan hydrobromide 10 mg, and phenylephrine hydrochloride 5 mg
 Theraflu ExpressMax Daytime Severe Cold & Cough: Acetaminophen 325 mg, dextromethorphan hydrobromide 10 mg, and phenylephrine hydrochloride 5 mg

Tylenol Cold Max: Acetaminophen 325 mg, dextromethorphan hydrobromide 10 mg, and phenylephrine hydrochloride 5 mg
 Capsule, Liquid filled, Oral:
 Alka-Seltzer Plus Day Cold: Acetaminophen 325 mg, dextromethorphan hydrobromide 10 mg, and phenylephrine hydrochloride 5 mg
 Mucinex Fast-Max Severe Cold & Sinus: Acetaminophen 325 mg, dextromethorphan hydrobromide 10 mg, and phenylephrine hydrochloride 5 mg [contains soybean lecithin]
 Vicks DayQuil Cold & Flu Multi-Symptom: Acetaminophen 325 mg, dextromethorphan hydrobromide 10 mg, and phenylephrine hydrochloride 5 mg
 Liquid, Oral:

Tylenol Cold Max: Acetaminophen 325 mg, dextromethorphan hydrobromide 10 mg, and phenylephrine hydrochloride 5 mg per 15 mL (240 mL) [contains propylene glycol, sodium 5 mg/15 mL, sodium benzoate; citrus burst flavor]
 Vicks DayQuil Cold & Flu Multi-Symptom: Acetaminophen 325 mg, dextromethorphan hydrobromide 10 mg, and phenylephrine hydrochloride 5 mg per 15 mL (180 mL, 300 mL) [ethanol free, sugar free; contains propylene glycol, sodium 50 mg/15 mL, sodium benzoate]

Powder for Solution, Oral:
 Theraflu Daytime Severe Cold & Cough: Acetaminophen 650 mg, dextromethorphan hydrobromide 20 mg, and phenylephrine hydrochloride 10 mg per packet (6s) [contains phenylalanine 14 mg/packet, potassium 10 mg/packet, and sodium 20 mg/packet; berry-green tea-menthol flavor]
 Theraflu Multi-Symptom Severe Cold: Acetaminophen 500 mg, dextromethorphan hydrobromide 20 mg, and phenylephrine hydrochloride 10 mg per packet (6s) [contains phenylalanine 20 mg/packet, potassium 10 mg/packet, and sodium 19 mg/packet; Lipton green tea and honey lemon flavors]

Syrup, Oral:
 Theraflu ExpressMax Daytime Severe Cold & Cough: Acetaminophen 325 mg, dextromethorphan hydrobromide 10 mg, and phenylephrine hydrochloride 5 mg per 15 mL (245.5 mL) [contains ethanol, potassium 12 mg/15 mL, propylene glycol, sodium 8 mg/15 mL, sodium benzoate; berry flavor]

Acetaminophen, Diphenhydramine, and Phenylephrine
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Caplet, Oral:
 One Tab Allergy & Sinus: Acetaminophen 650 mg, diphenhydramine hydrochloride 25 mg, and phenylephrine hydrochloride 10 mg [dye free]
 One Tab Cold and Flu: Acetaminophen 650 mg, diphenhydramine hydrochloride 25 mg, and phenylephrine hydrochloride 10 mg [dye free]
 Cold Control PE: Acetaminophen 650 mg, diphenhydramine hydrochloride 25 mg, and phenylephrine hydrochloride 10 mg
 Theraflu ExpressMax Nighttime Severe Cold & Cough: Acetaminophen 325 mg, diphenhydramine hydrochloride 12.5 mg, and phenylephrine hydrochloride 5 mg
 Tylenol Allergy Multi-Symptom Nighttime: Acetaminophen 325 mg, diphenhydramine hydrochloride 25 mg, and phenylephrine hydrochloride 5 mg [Cool Burst flavor]

Liquid, Oral:
 Delsym Children's Cough+Cold Night Time: Acetaminophen 325 mg, diphenhydramine hydrochloride 12.5 mg, and phenylephrine hydrochloride 5 mg per 10 mL (180 mL) [contains edetate disodium, propylene glycol, sodium 6 mg/10 mL, sodium benzoate; berry flavor]
 Delsym Cough+Cold Night Time: Acetaminophen 650 mg, diphenhydramine hydrochloride 25 mg, and phenylephrine hydrochloride 10 mg per 20 mL (180 mL) [contains edetate disodium, propylene glycol, sodium 12 mg/20 mL, sodium benzoate; mixed berry flavor]

Dimetapp Children's Multi-Symptom Cold & Flu: Acetaminophen 160 mg, diphenhydramine hydrochloride 6.25 mg, and phenylephrine hydrochloride 2.5 mg per 5 mL (118 mL) [alcohol free; contains edetate disodium, menthol, polyethylene glycol, propylene glycol, sodium benzoate, sodium 3.5 mg/5 mL; red grape flavor]
 Mucinex Sinus-Max Night Time Congestion & Cough: Acetaminophen 650 mg, diphenhydramine hydrochloride 25 mg, and phenylephrine hydrochloride 10 mg per 20 mL (180 mL) [contains edetate disodium, propylene glycol, sodium 12 mg/20 mL, sodium benzoate]

Theraflu ExpressMax Flu Cough & Sore Throat: Acetaminophen 325 mg, diphenhydramine hydrochloride 12.5 mg, and phenylephrine hydrochloride 5 mg per 15 mL (245.5 mL) [contains edetate disodium, ethanol 10%, potassium 12.5 mg/15 mL, propylene glycol, sodium 8 mg/15 mL, sodium benzoate; berry flavor]
 Robitussin Peak Cold Nighttime Multi-Symptom Cold: Acetaminophen 160 mg, diphenhydramine hydrochloride 6.25 mg, and phenylephrine hydrochloride 2.5 mg per 5 mL (118 mL, 237 mL) [contains menthol, propylene glycol, sodium 4 mg/5 mL, sodium benzoate]

Robitussin Severe Multi-Symptom Cough Cold + Flu Nighttime: Acetaminophen 650 mg, diphenhydramine hydrochloride 25 mg, and phenylephrine hydrochloride 10 mg per 20 mL (118 mL, 237 mL) [contains edetate disodium, fd&c red #40, polyethylene glycol, propylene glycol, sodium 12 mg/20 mL, sodium benzoate, sorbitol]

Powder for Solution, Oral:
 Theraflu Nighttime Severe Cold: Acetaminophen 650 mg, diphenhydramine hydrochloride 25 mg, and phenylephrine hydrochloride 10 mg per packet (6s) [contains phenylalanine 13 mg, potassium 10 mg, and sodium 23 mg per packet; green tea and citrus flavor]
 Theraflu Nighttime Severe Cold & Cough: Acetaminophen 650 mg, diphenhydramine hydrochloride 25 mg, and phenylephrine hydrochloride 10 mg per

ACETAMINOPHEN, DIPHENHYDRAMINE, AND PHENYLEPHRINE

packet (6s) [contains phenylalanine 13 mg, potassium 10 mg, and sodium 23 mg per packet; honey lemon flavor]

Theraflu Sugar-Free Nighttime Severe Cold & Cough: Acetaminophen 650 mg, diphenhydramine hydrochloride 25 mg, and phenylephrine hydrochloride 10 mg per packet (6s) [sugar free; contains phenylalanine 13 mg, potassium 10 mg, and sodium 23 mg per packet; honey lemon flavor]

Syrup, Oral:

Theraflu Warming Relief Flu & Sore Throat: Acetaminophen 325 mg, diphenhydramine hydrochloride 12.5 mg, and phenylephrine hydrochloride 5 mg per 15 mL (245.5 mL) [contains ethanol, potassium 5 mg/15 mL, propylene glycol, sodium 5 mg/15 mL, sodium benzoate; cherry flavor]

Theraflu ExpressMax Nighttime Severe Cold & Cough: Acetaminophen 325 mg, diphenhydramine hydrochloride 12.5 mg, and phenylephrine hydrochloride 5 mg per 15 mL (245.5 mL) [contains ethanol, potassium 12.5 mg/15 mL, propylene glycol, sodium 8 mg/15 mL, sodium benzoate; cherry flavor]

Acetaminophen, Guaifenesin, and Phenylephrine

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Liquid, Oral:

Mucinex Fast-Max: Acetaminophen 650 mg, guaifenesin 400 mg, and phenylephrine hydrochloride 10 mg per 20 mL (180 mL) [contains brilliant blue fcf (fd&c blue #1), edetate disodium, fd&c red #40, propylene glycol, sodium benzoate, sorbitol]

Mucinex Fast-Max Cold & Sinus: Acetaminophen 650 mg, guaifenesin 400 mg, and phenylephrine hydrochloride 10 mg per 20 mL (177 mL) [contains brilliant blue fcf (fd&c blue #1), edetate disodium, fd&c red #40, propylene glycol, sodium benzoate]

Mucinex Sinus-Max: Acetaminophen 650 mg, guaifenesin 400 mg, and phenylephrine hydrochloride 10 mg per 20 mL (180 mL) [contains brilliant blue fcf (fd&c blue #1), edetate disodium, fd&c red #40, propylene glycol, sodium benzoate]

Theraflu Warming Cold & Chest: Acetaminophen 325 mg, guaifenesin 200 mg, and phenylephrine hydrochloride 5 mg per 15 mL (245.5 mL) [contains benzyl alcohol, edetate disodium, fd&c yellow #6 (sunset yellow), propylene glycol, sodium benzoate; orange flavor]

Tablet, Oral:

Mucinex Sinus-Max Congestion: Acetaminophen 325 mg, guaifenesin 200 mg, and phenylephrine hydrochloride 5 mg [contains fd&c red #40 aluminum lake, fd&c yellow #6 aluminum lake]

Sudafed PE Pressure+Pain+Mucus: Acetaminophen 325 mg, guaifenesin 200 mg, and phenylephrine hydrochloride 5 mg

Tylenol Sinus Severe: Acetaminophen 325 mg, guaifenesin 200 mg, and phenylephrine hydrochloride 5 mg

Acetaminophen, Isometheptene, and Dichloralphenazone

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Capsule, Oral:

Generic: Acetaminophen 325 mg, isometheptene mucate 65 mg, and dichloralphenazone 100 mg

AcetaZOLAMIDE

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Capsule Extended Release 12 Hour, Oral:

Generic: 500 mg

Solution Reconstituted, Injection [preservative free]:

Generic: 500 mg (1 ea)

Tablet, Oral:

Generic: 125 mg, 250 mg

Acetic Acid (Otic)

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Solution, Otic:

Generic: 2% (15 mL, 60 mL)

Acetic Acid, Propylene Glycol Diacetate, and Hydrocortisone

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Solution, Otic [drops]:

Generic: Acetic acid 2%, propylene glycol diacetate 3%, and hydrocortisone 1% (10 mL)

Acetic Acid (Topical)

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Solution, Irrigation:

Generic: 0.25% (250 mL, 500 mL, 1000 mL)

Acetohydroxamic Acid

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Tablet, Oral:

Lithostat: 250 mg

Acetylcholine

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Solution Reconstituted, Intraocular, as chloride:

Miochol-E: 20 mg (1 ea) [contains mannitol]

Acetylcysteine

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Solution, Injection [preservative free]:

Generic: 20% (30 mL)

Solution, for Inhalation/Oral:

Generic: 10% [100 mg/mL] (10 mL, 30 mL); 20% [200 mg/mL] (10 mL, 30 mL)

Solution, for Inhalation/Oral [preservative free]:

Generic: 10% [100 mg/mL] (4 mL, 10 mL, 30 mL); 20% [200 mg/mL] (4 mL, 10 mL, 30 mL)

Tablet Effervescent, Oral:

Cetylev: 500 mg, 2.5 g [contains edetate disodium; lemon mint flavor]

Acitretin

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UNIFORM FORMULARY

Capsule, Oral:

Generic: 10 mg, 17.5 mg, 25 mg

Acidinium

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UNIFORM FORMULARY

Aerosol Powder Breath Activated, Inhalation, as bromide:

Tudorza Pressair: 400 mcg/actuation (1 ea) [contains milk protein]

Acidinium and Formoterol

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NOT COVERED

Aerosol Powder Breath Activated, Inhalation:

Duaklir Pressair: Acidinium bromide 400 mcg and formoterol fumarate 12 mcg per actuation (1 ea) [contains lactose, milk protein]

Acrivastine and Pseudoephedrine

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Capsule, Oral:

Semprex-D: Acrivastine 8 mg and pseudoephedrine hydrochloride 60 mg

Acyclovir and Hydrocortisone

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UNIFORM FORMULARY

Cream, External:

Xerese: Acyclovir 5% and hydrocortisone 1% (5 g)

Acyclovir (Systemic)

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BASIC CORE FORMULARY

Capsule, Oral:

Zovirax: 200 mg

Generic: 200 mg

Suspension, Oral:

Zovirax: 200 mg/5 mL (473 mL)

Generic: 200 mg/5 mL (473 mL)

Tablet, Oral:

Zovirax: 400 mg, 800 mg

Generic: 400 mg, 800 mg

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Solution, Intravenous, as sodium [strength expressed as base]:

Generic: 50 mg/mL (10 mL, 20 mL)

Solution Reconstituted, Intravenous, as sodium [strength expressed as base]:

Generic: 500 mg (1 ea)

Acyclovir (Topical)

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UNIFORM FORMULARY

Cream, External:

Zovirax: 5% (5 g) [contains cetostearyl alcohol, propylene glycol]

Ointment, External:

Generic: 5% (5 g, 15 g, 30 g)

Tablet, Buccal:

Sitavig: 50 mg [contains milk protein concentrate]

Adalimumab

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BASIC CORE FORMULARY

Pen-injector Kit, Subcutaneous [preservative free]:

Humira Pen: 40 mg/0.8 mL (1 ea); 40 mg/0.4 mL (1 ea) [contains polysorbate 80]

Humira Pen-CD/UC/HS Starter: 40 mg/0.8 mL (1 ea); 80 mg/0.8 mL (1 ea) [contains polysorbate 80]

Humira Pen-Pediatric UC Start: 80 mg/0.8 mL (1 ea) [latex free; contains polysorbate 80]

Humira Pen-Ps/UV/Adol HS Start: 40 mg/0.8 mL (1 ea); 80 mg/0.8 mL & 40 mg/0.4 mL (1 ea) [contains polysorbate 80]
 Humira Pen-Psor/Uveit Starter: 80 MG/0.8ML & 40MG/0.4ML (1 ea) [contains polysorbate 80]
 Prefilled Syringe Kit, Subcutaneous [preservative free]:
 Humira: 10 mg/0.2 mL (1 ea); 20 mg/0.4 mL (1 ea); 40 mg/0.8 mL (1 ea); 10 mg/0.1 mL (1 ea); 20 mg/0.2 mL (1 ea); 40 mg/0.4 mL (1 ea) [contains polysorbate 80]
 Humira Pediatric Crohns Start: 40 mg/0.8 mL (1 ea); 80 mg/0.8 mL (1 ea); 80 mg/0.8 mL & 40 mg/0.4 mL (1 ea)[contains polysorbate 80]

Adapalene**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Cream, External:
 Generic: 0.1% (45 g)
 Gel, External:
 Generic: 0.1% (45 g); 0.3% (45 g)
 Lotion, External:
 Generic: 0.1% (59 mL)

NONFORMULARY

Pad, Swab, External:
 Generic: 0.1% (30 ea) [contains alcohol, usp]
 Solution, External:
 Generic: 0.1% (60 mL)

Adefovir**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Tablet, Oral, as dipivoxil:
 Generic: 10 mg

Adenosine**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution, Intravenous:
 Adenocard: 12 mg/4 mL (4 mL)
 Generic: 3 mg/mL (20 mL, 30 mL); 6 mg/2 mL (2 mL)
 Solution, Intravenous [preservative free]:
 Generic: 3 mg/mL (20 mL, 30 mL); 6 mg/2 mL (2 mL); 12 mg/4 mL (4 mL)

Adenovirus (Types 4, 7) Vaccine**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Tablet, Enteric Coated, Oral [combination package]:
 Adenovirus type 4 $\geq 4.5 \log_{10}$ TCID₅₀ [contains albumin (human); 100 white tablets]
 Adenovirus type 7 $\geq 4.5 \log_{10}$ TCID₅₀ [contains albumin (human); 100 white tablets]

Ado-Trastuzumab Emtansine**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution Reconstituted, Intravenous [preservative free]:
 Kadcyla: 100 mg (1 ea); 160 mg (1 ea) [contains mouse (murine) and/or hamster protein]

Aducanumab**Afatinib****DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Tablet, Oral:
 Gilotrif: 20 mg, 30 mg, 40 mg

Aflibercept (Ophthalmic)**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution, Intraocular [preservative free]:
 Eylea: 2 mg/0.05 mL (0.05 mL) [contains mouse (murine) and/or hamster protein]

Agalsidase Beta**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution Reconstituted, Intravenous:
 Fabrazyme: 5 mg (1 ea); 35 mg (1 ea) [contains mouse (murine) and/or hamster protein]

Albendazole**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Tablet, Oral:
 Albenza: 200 mg [contains saccharin sodium]

Albumin**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution, Intravenous:
 Albumin-ZLB: 5% (250 mL, 500 mL)

Albuminar-5: 5% (250 mL, 500 mL)
 AlbuRx: 5% (250 mL, 500 mL)
 Buminate: 5% (250 mL, 500 mL); 25% (20 mL)
 Plasbumin-5: 5% (50 mL, 250 mL)
 Generic: 25% (50 mL, 100 mL)
 Solution, Intravenous [preservative free]:
 Albutein: 5% (50 mL); 25% (20 mL)
 Plasbumin-5: 5% (50 mL)
 Generic: 5% (100 mL, 250 mL, 500 mL); 25% (50 mL, 100 mL)

Albuterol**DoD Uniform Formulary Outpatient Dosage Forms****BASIC CORE FORMULARY**

Aerosol Solution, Inhalation:
 ProAir HFA: 90 mcg/actuation (8.5 g)
 Nebulization Solution, Inhalation:
 Generic: 0.083% [2.5 mg/3 mL] (3 mL)
 Nebulization Solution, Inhalation [preservative free]:
 Generic: 0.083% [2.5 mg/3 mL] (3 mL)

UNIFORM FORMULARY

Aerosol Powder Breath Activated, Inhalation:
 ProAir RespiClick: 90 mcg/actuation (1 ea) [contains milk protein]
 Nebulization Solution, Inhalation:
 Generic: 0.63 mg/3 mL (3 mL); 0.5% [2.5 mg/0.5 mL] (20 mL)
 Nebulization Solution, Inhalation [preservative free]:
 Generic: 0.63 mg/3 mL (3 mL); 1.25 mg/3 mL (3 mL); 0.5% [2.5 mg/0.5 mL] (1 ea)
 Syrup, Oral:
 Generic: 2 mg/5 mL (473 mL)
 Tablet, Oral:
 Generic: 2 mg, 4 mg
 Tablet Extended Release 12 Hour, Oral:
 Generic: 4 mg, 8 mg

NONFORMULARY

Aerosol Solution, Inhalation:
 Proventil HFA: 90 mcg/actuation (6.7 g)
 Ventolin HFA: 90 mcg/actuation (8 g, 18 g)

Alclometasone**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Cream, External, as dipropionate:
 Generic: 0.05% (15 g, 45 g, 60 g)
 Ointment, External, as dipropionate:
 Generic: 0.05% (15 g, 45 g, 60 g)

Alcohol (Ethyl)**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Aerosol, Foam, External [instant hand sanitizer]:
 Epi-Clenz: 70% (240 mL) [contains aloe, vitamin E]
 Gel, External [foam/instant hand sanitizer]:
 Epi-Clenz: 70% (480 mL) [contains aloe, vitamin E]
 Gel, External [instant hand sanitizer]:
 GelRite: 67% (120 mL, 480 mL)
 GelRite: 67% (800 mL) [contains vitamin E]
 Isagel: 60% (59 mL, 118 mL, 621 mL, 800 mL)
 Prevacare: 60% (120 mL, 240 mL, 960 mL, 1200 mL, 1500 mL)
 Generic: 62% (1.5 mL, 118 mL, 354 mL, 473 mL)
 Liquid, External [denatured]:
 Generic: 70% (480 mL, 3840 mL)
 Liquid, External [denatured/rubbing alcohol]:
 Lavacol: 70% (473 mL)
 Lotion, External [instant hand sanitizer]:
 Purell 2 in 1: 62% (60 mL, 360 mL, 1000 mL)
 Pad, External [instant hand sanitizer/towelette]:
 Isagel: 60% (50s, 300s)
 Purell: 62% (24s) [contains aloe, moisturizers, tartrazine, vitamin A, vitamin E]
 Purell: 62% (35s, 175s) [contains moisturizers, vitamin E]
 Solution, External [instant hand sanitizer]:
 Protection Plus: 62% (800 mL)
 Solution, Injection [dehydrated, preservative free]:
 Generic: 98% (1 mL, 5 mL)

Alcohol (Isopropyl)**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Gel, External:
 Generic: 70% (118 mL)
 Miscellaneous, External:
 Essentra Wipes 9x9": 70% (30 ea, 270 ea)
 Pad, External:
 Pharmacist Choice Alcohol: 70% (100 ea)

ALDESLEUKIN

Aldesleukin

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution Reconstituted, Intravenous [preservative free]:
Proleukin: 22,000,000 units (1 ea)

Alectinib

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule, Oral:
Alecensa: 150 mg

Alemtuzumab

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Intravenous [preservative free]:
Campath: 30 mg/mL (1 mL) [contains edetate disodium dihydrate, mouse (murine) and/or hamster protein, polysorbate 80]
Lemtrada: 12 mg/1.2 mL (1.2 mL) [contains edetate disodium dihydrate, mouse (murine) and/or hamster protein, polysorbate 80]

Alendronate

DoD Uniform Formulary Outpatient Dosage Forms

BASIC CORE FORMULARY

Solution, Oral:
Generic: 70 mg/75 mL (75 mL)
Tablet, Oral:
Generic: 5 mg, 10 mg, 35 mg, 40 mg, 70 mg

NONFORMULARY

Tablet Effervescent, Oral:
Binosto: 70 mg

Alfentanil

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Injectable, Injection [preservative free]:
Generic: 500 mcg/mL (2 mL, 5 mL)

Alfuzosin

DoD Uniform Formulary Outpatient Dosage Forms

BASIC CORE FORMULARY

Tablet Extended Release 24 Hour, Oral, as hydrochloride:
Generic: 10 mg

Alglucosidase Alfa

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution Reconstituted, Intravenous [preservative free]:
Lumizyme: 50 mg (1 ea) [contains polysorbate 80]

Alirocumab

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution Pen-injector, Subcutaneous [preservative free]:
Praluent: 75 mg/mL (1 mL); 150 mg/mL (1 mL) [contains mouse (murine) and/or hamster protein]

Alitretinoin (Topical)

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Gel, External:
Panretin: 0.1% (60 g)

Allopurinol

DoD Uniform Formulary Outpatient Dosage Forms

BASIC CORE FORMULARY

Tablet, Oral, as sodium:
Generic: 100 mg, 300 mg

UNIFORM FORMULARY

Solution Reconstituted, Intravenous, as sodium [strength expressed as base, preservative free]:
Generic: 500 mg (1 ea)

Alosetron

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:
Generic: 0.5 mg, 1 mg

Alpha₁-Proteinase Inhibitor

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Intravenous [preservative free]:
Glassia: 1000 mg/50 mL (1 ea) [latex free]
Solution Reconstituted, Intravenous:
Zemaira: 1000 mg (1 ea)
Solution Reconstituted, Intravenous [preservative free]:
Aralast NP: 500 mg (1 ea); 1000 mg (1 ea) [contains polyethylene glycol, polysorbate 80]

Prolastin-C: 1000 mg (1 ea)

Alpha-Galactosidase

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Chewable, Oral:
beano: 150 Galactosidase units [scored]
Tablet, Orally Disintegrating, Oral:
beano Meltaways: 300 Galactosidase units [strawberry flavor]

ALPRAZolam

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Concentrate, Oral:
ALPRAZolam Intensol: 1 mg/mL (30 mL) [unflavored flavor]
Tablet, Oral:
Generic: 0.25 mg, 0.5 mg, 1 mg, 2 mg
Tablet Dispersible, Oral:
Generic: 0.25 mg, 0.5 mg, 1 mg, 2 mg
Tablet Extended Release 24 Hour, Oral:
Generic: 0.5 mg, 1 mg, 2 mg, 3 mg

Alprostadil

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Kit, Intracavernosal:
Caverject Impulse: 10 mcg [contains benzyl alcohol]
Caverject Impulse: 20 mcg
Edex: 10 mcg, 20 mcg, 40 mcg
Pellet, Urethral:
Muse: 125 mcg (1 ea, 6 ea); 250 mcg (1 ea, 6 ea); 500 mcg (1 ea, 6 ea); 1000 mcg (1 ea, 6 ea)
Solution, Injection:
Generic: 500 mcg/mL (1 mL)
Solution Reconstituted, Intracavernosal:
Caverject: 20 mcg (1 ea)
Caverject: 20 mcg (1 ea); 40 mcg (1 ea) [contains benzyl alcohol]

Alteplase

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution Reconstituted, Injection:
Cathflo Activase: 2 mg (1 ea)
Solution Reconstituted, Intravenous:
Activase: 50 mg (1 ea); 100 mg (1 ea)

Altretamine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule, Oral:
Hexalen: 50 mg

Aluminum Acetate

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Packet, External:
Boro-Packs: Aluminum sulfate 49% and calcium acetate 51% per packet (14 ea, 100 ea)
Domeboro: Aluminum sulfate tetradecahydrate 1347 mg and calcium acetate monohydrate 952 mg per packet (12s, 100s)
Pedi-Boro Soak: Aluminum sulfate tetradecahydrate 1191 mg and calcium acetate monohydrate 839 mg per packet (12 ea, 100 ea)
Generic: Aluminum sulfate tetradecahydrate 1347 mg and calcium acetate monohydrate 952 mg per packet (1 ea, 12 ea)
Solution, External:
Generic: (480 mL)

Aluminum Acetate and Acetic Acid

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Otic:
Generic: Aluminum acetate 10% and acetic acid 2% (60 mL)

Aluminum Chloride

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Gel, Oral [topical]:
ViscoStat Clear: 25% (1.2 mL, 30 mL)
Liquid, Oral [topical]:
Hemoban: 25% (30 mL)
Hemodent: 21% (10 mL, 20 mL, 40 mL)

Aluminum Chloride Hexahydrate

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Liquid, External:
B+Drier: 15% (35 mL)
Solution, External:
Drysol: 20% (35 mL, 37.5 mL, 60 mL)
Hypercare: 15% (35 mL, 60 mL) [contains sd alcohol 40]

Aluminum Hydroxide**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Ointment, External:
DermaMed: (113 g)
Suspension, Oral:
Generic: 320 mg/5 mL (473 mL)

Aluminum Hydroxide and Magnesium Carbonate**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Liquid:
Acid Gone: Aluminum hydroxide 31.7 mg and magnesium carbonate 119.3 mg per 5 mL (360 mL)
Gaviscon: Aluminum hydroxide 31.7 mg and magnesium carbonate 119.3 mg per 5 mL (355 mL) [contains magnesium 38 mg/5 mL, sodium 17 mg/5 mL and benzyl alcohol; cool mint flavor]
Gaviscon Extra Strength: Aluminum hydroxide 254 mg and magnesium carbonate 237.5 mg per 5 mL (355 mL) [contains magnesium 80 mg/5 mL, sodium 14 mg/5 mL and benzyl alcohol; cool mint flavor]
Tablet, chewable:
Acid Gone Extra Strength: Aluminum hydroxide 160 mg and magnesium carbonate 105 mg
Gaviscon Extra Strength: Aluminum hydroxide 160 mg and magnesium carbonate 105 mg [contains sodium 19 mg/tablet (1.3 mEq/tablet); cherry and original flavors]

Aluminum Hydroxide and Magnesium Hydroxide**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Liquid, oral:
Mag-Al: Aluminum hydroxide 200 mg and magnesium hydroxide 200 mg per 5 mL (30 mL) [dye free, ethanol free, sugar free; contains propylene glycol, sodium 4 mg/5 mL; peppermint flavor]

Aluminum Hydroxide, Magnesium Hydroxide, and Simethicone**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Liquid, Oral:
Generic: Aluminum hydroxide 200 mg, magnesium hydroxide 200 mg, and simethicone 20 mg per 5 mL (360 mL); aluminum hydroxide 400 mg, magnesium hydroxide 400 mg, and simethicone 40 mg per 5 mL (360 mL)
Suspension, Oral:
Generic: Aluminum hydroxide 225 mg, magnesium hydroxide 200 mg, and simethicone 25 mg per 5 mL (360 mL)
Tablet, Chewable, Oral:
Generic: Aluminum hydroxide 200 mg, magnesium hydroxide 200 mg, and simethicone 25 mg

Alvimopan**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Capsule, Oral:
Entereg: 12 mg

Amantadine**DoD Uniform Formulary Outpatient Dosage Forms****BASIC CORE FORMULARY**

Capsule, Oral, as hydrochloride:
Generic: 100 mg
Syrup, Oral, as hydrochloride:
Generic: 50 mg/5 mL (10 mL, 473 mL)

UNIFORM FORMULARY

Tablet, Oral, as hydrochloride:
Generic: 100 mg

NONFORMULARY

Capsule Extended Release 24 Hour, Oral, as hydrochloride [strength expressed as base]:
Gocovri: 68.5 mg, 137 mg
Tablet Extended Release 24 Hour, Oral, as hydrochloride [strength expressed as base]:
Osmolex ER: 129 mg, 193 mg, 258 mg

Ambrisentan**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Tablet, Oral:
Letairis: 5 mg, 10 mg

Amifampridine**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Tablet, Oral:
Firdapse: 10 mg [scored]
Ruzurgi: 10 mg

Amifostine**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution Reconstituted, Intravenous:
Generic: 500 mg (1 ea)

Amikacin (Systemic)**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution, Injection, as sulfate:
Generic: 500 mg/2 mL (2 mL); 1 g/4 mL (4 mL)
Solution, Injection, as sulfate [preservative free]:
Generic: 500 mg/2 mL (2 mL); 1 g/4 mL (4 mL)

AMILoride**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Tablet, Oral, as hydrochloride:
Generic: 5 mg

Amiloride and Hydrochlorothiazide**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Tablet, Oral:
Generic: 5/50: Amiloride hydrochloride 5 mg and hydrochlorothiazide 50 mg

Amino Acid Injection**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution, Intravenous:
Aminosyn: 8.5% (500 mL); 10% (500 mL, 1000 mL) [latex free, sulfite free]
Aminosyn II: 7% (500 mL); 8.5% (500 mL, 1000 mL); 10% (2000 mL) [latex free, sulfite free]
Aminosyn III: 10% (500 mL, 1000 mL); 15% (2000 mL) [sulfite free]
Aminosyn II/Electrolytes: 8.5% (500 mL) [latex free, sulfite free]
Aminosyn M: 3.5% (1000 mL) [latex free, sulfite free]
Aminosyn-HBC: 7% (500 mL) [latex free, sulfite free]
Aminosyn-PF: 7% (500 mL); 10% (1000 mL) [latex free, sulfite free]
Aminosyn-RF: 5.2% (500 mL) [latex free, sulfite free]
Aminosyn/Electrolytes: 8.5% (500 mL, 1000 mL) [latex free, sulfite free]
Clinimix E/Dextrose (2.75/10): 2.75% (1000 mL, 2000 mL) [sulfite free]
Clinimix E/Dextrose (2.75/5): 2.75% (1000 mL, 2000 mL) [sulfite free]
Clinimix E/Dextrose (4.25/10): 4.25% (1000 mL, 2000 mL) [sulfite free]
Clinimix E/Dextrose (4.25/25): 4.25% (1000 mL, 2000 mL) [sulfite free]
Clinimix E/Dextrose (4.25/5): 4.25% (1000 mL, 2000 mL) [sulfite free]
Clinimix E/Dextrose (5/15): 5% (1000 mL, 2000 mL) [sulfite free]
Clinimix E/Dextrose (5/20): 5% (1000 mL, 2000 mL) [sulfite free]
Clinimix E/Dextrose (5/25): 5% (1000 mL, 2000 mL) [sulfite free]
Clinimix/Dextrose (2.75/5): 2.75% (1000 mL) [sulfite free]
Clinimix/Dextrose (4.25/10): 4.25% (1000 mL, 2000 mL) [sulfite free]
Clinimix/Dextrose (4.25/20): 4.25% (1000 mL, 2000 mL) [sulfite free]
Clinimix/Dextrose (4.25/25): 4.25% (1000 mL, 2000 mL) [sulfite free]
Clinimix/Dextrose (4.25/5): 4.25% (1000 mL, 2000 mL) [sulfite free]
Clinimix/Dextrose (5/15): 5% (1000 mL, 2000 mL) [sulfite free]
Clinimix/Dextrose (5/20): 5% (1000 mL, 2000 mL) [sulfite free]
Clinimix/Dextrose (5/25): 5% (1000 mL, 2000 mL) [sulfite free]
Clinisol SF: 15% (500 mL, 2000 mL) [sulfite free]
FreAmine HBC: 6.9% (750 mL)
FreAmine III: 3% (1000 mL)
FreAmine III: 10% (1000 mL) [contains sodium bisulfite]
Hepatamine: 8% (500 mL)
NephrAmine: 5.4% (250 mL)
Plenaminate: 15% (1000 mL) [contains sodium metabisulfite]
Premasol: 6% (500 mL); 10% (500 mL, 1000 mL, 2000 mL) [sulfite free]
Prosol: 20% (2000 mL)
Travasol: 10% (500 mL, 1000 mL, 2000 mL) [sulfite free]
Trophamine: 6% (500 mL)
TrophAmine: 10% (500 mL)

Aminocaproic Acid**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution, Intravenous:
Generic: 250 mg/mL (20 mL)
Solution, Oral:
Amicar: 25% (236.5 mL) [contains edetate disodium, methylparaben, propylparaben, saccharin sodium; raspberry flavor]
Tablet, Oral:
Amicar: 500 mg, 1000 mg [scored]

Aminolevulinic Acid (Topical)**DoD Uniform Formulary Outpatient Dosage Forms****NOT COVERED**

Gel, External:
Ameluz: 10% (2 g) [contains isopropyl alcohol, phosphatidylcholine, soy polysorbate 80, propylene glycol, sodium benzoate]
Solution Reconstituted, External, as hydrochloride:
Levulan Kerastick: 20% (1 ea) [contains alcohol, usp, isopropyl alcohol, laureth, polyethylene glycol]

AMINOPHYLLINE

Aminophylline

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Intravenous, as dihydrate:
Generic: 25 mg/mL (10 mL, 20 mL)

Aminosalicic Acid

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Packet, Oral:
Paser: 4 g (30 ea)

Amiodarone

DoD Uniform Formulary Outpatient Dosage Forms

BASIC CORE FORMULARY

Tablet, Oral, as hydrochloride:
Generic: 200 mg

UNIFORM FORMULARY

Solution, Intravenous, as hydrochloride:
Nexterone: 150 mg/100 mL in Dextrose (100 mL); 360 mg/200 mL in Dextrose (200 mL)

Generic: 150 mg/3 mL (3 mL); 450 mg/9 mL (9 mL); 900 mg/18 mL (18 mL)

Tablet, Oral, as hydrochloride:
Generic: 100 mg, 400 mg

Amitriptyline

DoD Uniform Formulary Outpatient Dosage Forms

BASIC CORE FORMULARY

Tablet, Oral, as hydrochloride:
Generic: 10 mg, 25 mg, 50 mg, 75 mg

UNIFORM FORMULARY

Tablet, Oral, as hydrochloride:
Generic: 100 mg, 150 mg

Amitriptyline and Chlordiazepoxide

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:
12.5/5: Amitriptyline hydrochloride 12.5 mg and chlordiazepoxide 5 mg
25/10: Amitriptyline hydrochloride 25 mg and chlordiazepoxide 10 mg

Amitriptyline and Perphenazine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:
Generic:
Amitriptyline hydrochloride 10 mg and perphenazine 2 mg
Amitriptyline hydrochloride 10 mg and perphenazine 4 mg
Amitriptyline hydrochloride 25 mg and perphenazine 2 mg
Amitriptyline hydrochloride 25 mg and perphenazine 4 mg
Amitriptyline hydrochloride 50 mg and perphenazine 4 mg

Amivantamab

AmLODIPINE

DoD Uniform Formulary Outpatient Dosage Forms

BASIC CORE FORMULARY

Tablet, Oral:
Generic: 2.5 mg, 5 mg, 10 mg

NONFORMULARY

Suspension, Oral, as benzoate:
Katerzia: 1 mg/mL (150 mL)

Amlodipine and Atorvastatin

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:
Generic:
2.5/10: Amlodipine 2.5 mg and atorvastatin 10 mg
2.5/20: Amlodipine 2.5 mg and atorvastatin 20 mg
2.5/40: Amlodipine 2.5 mg and atorvastatin 40 mg
5/10: Amlodipine 5 mg and atorvastatin 10 mg
5/20: Amlodipine 5 mg and atorvastatin 20 mg
5/40: Amlodipine 5 mg and atorvastatin 40 mg
5/80: Amlodipine 5 mg and atorvastatin 80 mg
10/10: Amlodipine 10 mg and atorvastatin 10 mg
10/20: Amlodipine 10 mg and atorvastatin 20 mg
10/40: Amlodipine 10 mg and atorvastatin 40 mg
10/80: Amlodipine 10 mg and atorvastatin 80 mg

Amlodipine and Benazepril

DoD Uniform Formulary Outpatient Dosage Forms

BASIC CORE FORMULARY

Capsule, Oral:
Generic: 2.5/10: Amlodipine 2.5 mg and benazepril hydrochloride 10 mg
Generic: 5/10: Amlodipine 5 mg and benazepril hydrochloride 10 mg
Generic: 5/20: Amlodipine 5 mg and benazepril hydrochloride 20 mg
Generic: 5/40: Amlodipine 5 mg and benazepril hydrochloride 40 mg
Generic: 10/20: Amlodipine 10 mg and benazepril hydrochloride 20 mg

Generic: 10/40: Amlodipine 10 mg and benazepril hydrochloride 40 mg

Amlodipine and Celecoxib

DoD Uniform Formulary Outpatient Dosage Forms

Tier 4 - NOT COVERED

Tablet, Oral:
Consensi: Amlodipine besylate 2.5 mg and celecoxib 200 mg
Consensi: Amlodipine besylate 5 mg and celecoxib 200 mg
Consensi: Amlodipine besylate 10 mg and celecoxib 200 mg [scored]

Amlodipine and Olmesartan

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:
5/20: Amlodipine 5 mg and olmesartan medoxomil 20 mg
5/40: Amlodipine 5 mg and olmesartan medoxomil 40 mg
10/20: Amlodipine 10 mg and olmesartan medoxomil 20 mg
10/40: Amlodipine 10 mg and olmesartan medoxomil 40 mg

Amlodipine and Valsartan

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:
Generic:
5/160: Amlodipine 5 mg and valsartan 160 mg
5/320: Amlodipine 5 mg and valsartan 320 mg
10/160: Amlodipine 10 mg and valsartan 160 mg
10/320: Amlodipine 10 mg and valsartan 320 mg

Amlodipine, Valsartan, and Hydrochlorothiazide

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:
Amlodipine 5 mg, valsartan 160 mg, and hydrochlorothiazide 12.5 mg
Amlodipine 5 mg, valsartan 160 mg, and hydrochlorothiazide 25 mg
Amlodipine 10 mg, valsartan 160 mg, and hydrochlorothiazide 12.5 mg
Amlodipine 10 mg, valsartan 160 mg, and hydrochlorothiazide 25 mg
Amlodipine 10 mg, valsartan 320 mg, and hydrochlorothiazide 25 mg

Ammonia Spirit (Aromatic)

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, for Vapor Inhalation:
Generic: 2% (60 mL), 15% (0.33 mL)

Ammonium Alum

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY Powder: 454 g

Amobarbital

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution Reconstituted, Injection, as sodium:
Amytal Sodium: 500 mg (1 ea)

Amoxapine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:
Generic: 25 mg, 50 mg, 100 mg, 150 mg

Amoxicillin

DoD Uniform Formulary Outpatient Dosage Forms

BASIC CORE FORMULARY

Capsule, Oral:
Generic: 250 mg, 500 mg
Suspension Reconstituted, Oral:
Generic: 250 mg/5 mL (80 mL, 100 mL, 150 mL); 400 mg/5 mL (50 mL, 75 mL, 100 mL)

UNIFORM FORMULARY

Suspension Reconstituted, Oral:
Generic: 125 mg/5 mL (80 mL, 100 mL, 150 mL); 200 mg/5 mL (50 mL, 75 mL, 100 mL)
Tablet, Oral:
Generic: 500 mg, 875 mg
Tablet Chewable, Oral:
Generic: 125 mg, 250 mg
Tablet Extended Release 24 Hour, Oral:
Moxatag: 775 mg

Amoxicillin and Clavulanate

DoD Uniform Formulary Outpatient Dosage Forms

BASIC CORE FORMULARY

Powder for Suspension, Oral:
Augmentin: 125: Amoxicillin 125 mg and clavulanate potassium 31.25 mg per 5 mL (75 mL, 100 mL, 150 mL) [contains potassium 0.16 mEq/5 mL; banana flavor]
Generic: 200: Amoxicillin 200 mg and clavulanate potassium 28.5 mg per 5 mL (50 mL, 75 mL, 100 mL)

Generic: 250: Amoxicillin 250 mg and clavulanate potassium 62.5 mg per 5 mL (75 mL, 100 mL, 150 mL)
 Generic: 400: Amoxicillin 400 mg and clavulanate potassium 57 mg per 5 mL (50 mL, 75 mL, 100 mL)
 Generic: 600: Amoxicillin 600 mg and clavulanate potassium 42.9 mg per 5 mL (75 mL, 125 mL, 200 mL)

Tablet, Oral:

Generic: 250: Amoxicillin 250 mg and clavulanate potassium 125 mg
 Generic: 500: Amoxicillin 500 mg and clavulanate potassium 125 mg
 Generic: 875: Amoxicillin 875 mg and clavulanate potassium 125 mg

UNIFORM FORMULARY

Tablet, Chewable, oral:

Generic: 200: Amoxicillin 200 mg and clavulanate potassium 28.5 mg [contains phenylalanine]
 Generic: 400: Amoxicillin 400 mg and clavulanate potassium 57 mg [contains phenylalanine]

Tablet, Extended Release, Oral:

Generic: 1000: Amoxicillin 1000 mg and clavulanate acid 62.5 mg

Amphetamine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral, as sulfate:

Evekeo: 5 mg, 10 mg [scored]
 Tablet Disintegrating, Oral, as sulfate:
 Evekeo ODT: 5 mg, 10 mg, 15 mg, 20 mg

NONFORMULARY

Suspension Extended Release, Oral:

Adzenys ER: 1.25 mg/mL (450 mL)
 Suspension Extended Release, Oral, as base:
 Dyanavel XR: 2.5 mg/mL (464 mL) [contains methylparaben, polysorbate 80, propylparaben]

Tablet Extended Release Dispersible, Oral, as base:

Adzenys XR-ODT: 3.1 mg, 6.3 mg, 9.4 mg, 12.5 mg, 15.7 mg, 18.8 mg

Amphotericin B Deoxycholate

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution Reconstituted, Injection, as desoxycholate:

Generic: 50 mg (1 ea)

Amphotericin B (Lipid Complex)

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Suspension, Intravenous:

Abelcet: 5 mg/mL (20 mL)

Amphotericin B (Liposomal)

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Suspension Reconstituted, Intravenous:

AmBisome: 50 mg (1 ea) [contains cholesterol, distearoyl phosphatidylglycerol, hydrogenated soy phosphatidylcholine, sodium succinate hexahydrate, sucrose, tocopherol, dl-alpha]

Ampicillin

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule, Oral:

Generic: 250 mg, 500 mg

Solution Reconstituted, Injection, as sodium [strength expressed as base]:

Generic: 125 mg (1 ea); 250 mg (1 ea); 500 mg (1 ea); 1 g (1 ea); 2 g (1 ea); 10 g (1 ea)

Solution Reconstituted, Injection, as sodium [strength expressed as base, preservative free]:

Generic: 250 mg (1 ea); 500 mg (1 ea)

Solution Reconstituted, Intravenous, as sodium [strength expressed as base]:

Generic: 1 g (1 ea); 2 g (1 ea); 10 g (1 ea)

Suspension Reconstituted, Oral:

Generic: 125 mg/5 mL (100 mL); 250 mg/5 mL (100 mL)

Ampicillin and Sulbactam

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Injection, powder for reconstitution:

Generic:
 1.5 g: Ampicillin 1 g and sulbactam 0.5 g
 3 g: Ampicillin 2 g and sulbactam 1 g
 15 g: Ampicillin 10 g and sulbactam 5 g

Amyl Nitrite

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Liquid, for inhalation: USP: 85% to 103% (0.3 mL)

Anagrelide

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule, Oral:

Generic: 0.5 mg, 1 mg

Anastrozole

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:

Generic: 1 mg

Anidulafungin

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution Reconstituted, Intravenous [preservative free]:

Eraxis: 50 mg (1 ea); 100 mg (1 ea) [contains polysorbate 80]

Ansuvimab

Anthralin

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Cream, External:

Dritho-Creme HP: 1% (50 g) [contains methylparaben]

Zithranol-RR: 1.2% (45 g) [contains brilliant blue fcf (fd&c blue #1)]

Shampoo, External:

Zithranol: 1% (85 g) [contains brilliant blue fcf (fd&c blue #1)]

Anthrax Vaccine Adsorbed

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Injection, suspension:

BioThrax: *Bacillus anthracis* proteins (5 mL) [contains aluminum, natural rubber/natural latex in packaging]

Anticoagulant Citrate Dextrose

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, In Vitro:

ACD Formula A: Citric acid anhydrous 0.73 g, dextrose monohydrate 2.45 g, and sodium citrate dihydrate 2.2 g per 100 mL (500 mL, 1000 mL)

ACD-A noClot-50: Citric acid anhydrous 0.073 g, dextrose monohydrate 0.245 g, and sodium citrate dihydrate 0.22 g per 10 mL (50 mL)

Generic: Citric acid Monohydrate 0.8 g, dextrose monohydrate 2.45 g, and sodium citrate dihydrate 2.2 g per 100 mL (750 mL)

Anticoagulant Citrate Phosphate Dextrose

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Injection: 63 mL

Anticoagulant Sodium Citrate

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Concentrate, In Vitro:

TriCitrasol: 46.7% (30 mL)

Solution, In Vitro:

Generic: 4% (250 mL, 500 mL)

Antihemophilic Factor (Human)

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Kit, Intravenous:

Monoclote-P: ~1000 units, ~1500 units [contains mouse (murine) and/or hamster protein]

Solution Reconstituted, Intravenous:

Koate: ~250 units (1 ea); ~500 units (1 ea); ~1000 units (1 ea) [contains albumin human, polyethylene glycol, polysorbate 80]

Koate-DVI: ~500 units (1 ea) [contains albumin human, polyethylene glycol, polysorbate 80]

Solution Reconstituted, Intravenous [preservative free]:

Hemofil M: ~250 units (1 ea) [contains albumin human, mouse (murine) and/or hamster protein, polyethylene glycol]

Hemofil M: ~500 units (1 ea) [contains albumin human, mouse (murine) and/or hamster protein, polyethylene glycol]

Hemofil M: ~1000 units (1 ea); ~1700 units (1 ea) [contains albumin human, mouse (murine) and/or hamster protein, polyethylene glycol]

Koate-DVI: ~250 units (1 ea); ~1000 units (1 ea) [contains albumin human, polyethylene glycol, polysorbate 80]

Antihemophilic Factor (Recombinant [Fc Fusion Protein])

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution Reconstituted, Intravenous [preservative free]:

Eloctate: 250 units (1 ea); 500 units (1 ea); 750 units (1 ea); 1000 units (1 ea); 1500 units (1 ea); 2000 units (1 ea); 3000 units (1 ea)

ANTIHEMOPHILIC FACTOR (RECOMBINANT)

Antihemophilic Factor (Recombinant [Pegylated])

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution Reconstituted, Intravenous:

Adynovate: 250 units (1 ea); 500 units (1 ea); 750 units (1 ea); 1000 units (1 ea); 1500 units (1 ea); 2000 units (1 ea) [contains mouse (murine) and/or hamster protein, polysorbate 80]

Esperoct: antihemophilic factor (recombinant) glycopegylated-exei ~500 units (1 ea); antihemophilic factor (recombinant) glycopegylated-exei ~2000 units (1 ea); antihemophilic factor (recombinant) glycopegylated-exei ~1500 units (1 ea); antihemophilic factor (recombinant) glycopegylated-exei ~1000 units (1 ea) [contains polysorbate 80]; antihemophilic factor (recombinant) glycopegylated-exei ~3000 units (1 ea)

Jivi: ~500 units (1 ea); ~1000 units (1 ea); ~2000 units (1 ea); ~3000 units (1 ea) [latex free; contains polysorbate 80]

Antihemophilic Factor (Recombinant [Porcine Sequence])

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution Reconstituted, Intravenous:

Obizur: 500 units (1 ea) [contains mouse (murine) and/or hamster protein, polysorbate 80]

Antihemophilic Factor (Recombinant)

DoD Uniform Formulary Outpatient Dosage Forms

Extended Core Formulary

Kit, Intravenous [preservative free]:

Xyntha: 250 units, 500 units, 1000 units, 2000 units [albumin free; contains mouse protein (murine) (hamster), polysorbate 80]

UNIFORM FORMULARY

Kit, Intravenous:

Kogenate FS: 250 units, 500 units, 1000 units [contains mouse (murine) and/or hamster protein]

Kit, Intravenous [preservative free]:

Afstyla: 250 units, 500 units, 1000 units, 2000 units, 3000 units [contains polysorbate 80]

Helixate FS: 250 units, 500 units, 1000 units, 2000 units, 3000 units [contains polysorbate 80]

Kogenate FS: 2000 units, 3000 units [contains mouse (murine) and/or hamster protein]

Kogenate FS Bio-Set: 250 units, 500 units, 1000 units, 2000 units, 3000 units [contains mouse (murine) and/or hamster protein]

Nuwiq: 250 units, 500 units, 1000 units, 2000 units

Xyntha Solofuse: 250 units, 500 units, 1000 units, 2000 units, 3000 units [albumin free; contains mouse (murine) and/or hamster protein, polysorbate 80]

Solution Reconstituted, Intravenous:

Kovaltry: 250 units (1 ea); 500 units (1 ea); 1000 units (1 ea); 2000 units (1 ea); 3000 units (1 ea) [contains mouse (murine) and/or hamster protein, polysorbate 80]

Solution Reconstituted, Intravenous [preservative free]:

Advate: 250 units (1 ea); 500 units (1 ea); 1000 units (1 ea); 1500 units (1 ea); 2000 units (1 ea); 3000 units (1 ea); 4000 units (1 ea) [albumin free; contains polysorbate 80]

Novoeight: 250 units (1 ea); 500 units (1 ea); 1000 units (1 ea); 1500 units (1 ea); 2000 units (1 ea); 3000 units (1 ea) [contains mouse (murine) and/or hamster protein, polysorbate 80]

Nuwiq: 250 units (1 ea); 500 units (1 ea); 1000 units (1 ea); 2000 units (1 ea)

Recombine: 220-400 units (1 ea); 401-800 units (1 ea); 801-1240 units (1 ea); 1241-1800 units (1 ea); 1801-2400 units (1 ea) [contains albumin human, polyethylene glycol, polysorbate 80]

Antihemophilic Factor/von Willebrand Factor Complex (Human)

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Injection, powder for reconstitution [human derived]:

Alphanate:

250 units [Factor VIII and VWF:RCo ratio varies by lot; contains albumin and polysorbate 80; packaged with diluent]

500 units [Factor VIII and VWF:RCo ratio varies by lot; contains albumin and polysorbate 80; packaged with diluent]

1000 units [Factor VIII and VWF:RCo ratio varies by lot; contains albumin and polysorbate 80; packaged with diluent]

1500 units [Factor VIII and VWF:RCo ratio varies by lot; contains albumin and polysorbate 80; packaged with diluent]

2000 units [Factor VIII and VWF:RCo ratio varies by lot; contains albumin and polysorbate 80; packaged with diluent]

Humate-P:

FVIII 250 units and VWF:RCo 600 units [contains albumin; packaged with diluent]

FVIII 500 units and VWF:RCo 1200 units [contains albumin; packaged with diluent]

FVIII 1000 units and VWF:RCo 2400 units [contains albumin; packaged with diluent]

Wilate:

FVIII 500 units and VWF:RCo 500 units [contains polysorbate 80 (in diluent); packaged with diluent]

FVIII 1000 units and VWF:RCo 1000 units [contains polysorbate 80 (in diluent); packaged with diluent]

Anti-inhibitor Coagulant Complex (Human)

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution Reconstituted, Intravenous [preservative free]:

FEIBA: 500 units (1 ea); 1000 units (1 ea); 2500 units (1 ea)

Antithrombin

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Injection, powder for reconstitution [human, preservative free]:

Thrombate III: 500 units, 1000 units [contains heparin; exact potency labeled on each vial]

Injection, powder for reconstitution [recombinant, preservative free]:

ATryn: 525 units, 1750 units [contains goat protein; exact potency labeled on each vial]

Antithymocyte Globulin (Equine)

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Injectable, Intravenous:

Atgam: 50 mg/mL (5 mL) [thimerosal free]

Antithymocyte Globulin (Rabbit)

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution Reconstituted, Intravenous:

Thymoglobulin: 25 mg (1 ea) [contains glycine, mannitol, sodium chloride]

Antivenin (*Latrodectus mactans*)

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Kit, Injection:

Generic: 6000 Antivenin units

Antivenin (*Micrurus fulvius*)

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution Reconstituted, Intravenous:

Generic: (1 ea)

Apalutamide

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:

Erleada: 60 mg

Apixaban

DoD Uniform Formulary Outpatient Dosage Forms

BASIC CORE FORMULARY

Tablet, Oral:

Eliquis: 2.5 mg, 5 mg

Eliquis DVT/PE Starter Pack: 5 mg

Apomorphine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Subcutaneous, as hydrochloride:

Apokyn: 10 mg/mL (3 mL) [contains benzyl alcohol, sodium metabisulfite]

Apraclonidine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Ophthalmic:

Generic: 0.5% (5 mL, 10 mL)

Apremilast

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:

Otezla: 30 mg

Tablet Therapy Pack, Oral:

Otezla: 10 & 20 & 30 mg (55 ea)

Aprepitant

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule, Oral:

Generic: 40 mg, 80 mg, 125 mg, 80 mg & 125 mg

Suspension Reconstituted, Oral:

Emend: 125 mg (1 ea)

Arformoterol

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Nebulization Solution, Inhalation:

Brovana: 15 mcg/2 mL (2 mL)

Argatroban**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution, Intravenous:

Generic: 125 mg/125 mL (125 mL); 250 mg/250 mL (250 mL); 250 mg/2.5 mL (2.5 mL)

Solution, Intravenous [preservative free]:

Generic: 50 mg/50 mL (50 mL); 250 mg/2.5 mL (2.5 mL)

Arginine**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution, Intravenous, as hydrochloride [preservative free]:

R-Gen 10: 10% (300 mL)

ARIPiprazole**DoD Uniform Formulary Outpatient Dosage Forms****BASIC CORE FORMULARY**

Tablet, Oral:

Generic: 2 mg, 5 mg, 10 mg, 15 mg, 20 mg, 30 mg

UNIFORM FORMULARY

Prefilled Syringe, Intramuscular:

Abilify Maintena: 300 mg (1 ea); 400 mg (1 ea)

Solution, Oral:

Generic: 1 mg/mL (150 mL)

Tablet, Oral:

Abilify: 2 mg, 5 mg, 10 mg, 15 mg, 20 mg, 30 mg

Tablet Dispersible, Oral:

Generic: 10 mg, 15 mg

NONFORMULARY

Tablet, Oral:

Abilify MyCite: 2 mg, 5 mg, 10 mg, 15 mg, 20 mg, 30 mg

ARIPiprazole Lauroxil**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Prefilled Syringe, Intramuscular:

Aristada: 441 mg/1.6 mL (1.6 mL); 662 mg/2.4 mL (2.4 mL); 882 mg/3.2 mL (3.2 mL)

Armodafinil**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Tablet, Oral:

Nuvigil: 50 mg, 150 mg, 200 mg, 250 mg

Generic: 50 mg, 150 mg, 200 mg, 250 mg

Arsenic Trioxide**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution, Intravenous:

Trisenox: 10 mg/10 mL (10 mL)

Artemether and Lumefantrine**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Tablet, Oral:

Coartem: Artemether 20 mg and lumefantrine 120 mg

Artesunate**DoD Uniform Formulary Outpatient Dosage Forms****NOT COVERED**

Solution Reconstituted, Injection:

Generic: 110 mg [phosphate buffer solution provided as diluent]

Articaine and Epinephrine**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Injection, solution [for dental use]:

Articadent: Articaine hydrochloride 4% [40 mg/mL] and epinephrine 1:100,000 (1.7 mL) [contains sodium metabisulfite]

Articadent: Articaine hydrochloride 4% [40 mg/mL] and epinephrine 1:200,000 (1.7 mL) [contains sodium metabisulfite]

Orabloc: Articaine hydrochloride 4% [40 mg/mL] and epinephrine 1:100,000 (1.8 mL) [contains sodium metabisulfite]

Orabloc: Articaine hydrochloride 4% [40 mg/mL] and epinephrine 1:200,000 (1.8 mL) [contains sodium metabisulfite]

Septocaine with epinephrine 1:100,000: Articaine hydrochloride 4% [40 mg/mL] and epinephrine 1:100,000 (1.7 mL) [contains sodium metabisulfite]

Septocaine with epinephrine 1:200,000: Articaine hydrochloride 4% [40 mg/mL] and epinephrine 1:200,000 (1.7 mL) [contains sodium metabisulfite]

Zorcaine: Articaine hydrochloride 4% [40 mg/mL] and epinephrine 1:100,000 (1.7 mL) [contains sodium metabisulfite]

Artificial Tears**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Gel, Ophthalmic:

Systane: Polyethylene glycol 400 0.4% and propylene glycol 0.3% (10 mL, 15 mL)

Ointment, Ophthalmic:

Altalube: Petrolatum 83% and mineral oil 15% (3.5 g)

GenTeal Tears Night-Time: Petrolatum 94% and mineral oil 3% (3.5 g)

Puralube: Petrolatum 85% and mineral oil 15% (3.5 g)

Refresh Lacri-Lube: Petrolatum 83% and mineral oil 15% (3.5 g, 7 g)

Tears Naturale PM: Petrolatum 94% and mineral oil 3% (3.5 g) [contains lanolin]

Ointment, Ophthalmic [preservative free]:

LubriFresh P.M.: Petrolatum 83% and mineral oil 15% (3.5 g)

Systane Nighttime: Petrolatum 94% and mineral oil 3% (3.5 g)

Solution, Ophthalmic:

Advanced Eye Relief Dry Eye Environmental: Glycerin 1% (15 mL) [contains benzalkonium chloride]

Advanced Eye Relief Dry Eye Rejuvenation: Glycerin 0.3% and propylene glycol 1% (30 mL) [contains benzalkonium chloride]

GenTeal Tears Mild: Dextran 70 0.1%, and hydroxypropyl methylcellulose 2910 0.3% (15 mL)

GenTeal Tears Moderate: Dextran 70 0.1%, glycerin 0.2%, and hydroxypropyl methylcellulose 2910 0.3% (15 mL)

HypoTears: Polyvinyl alcohol 1% and polyethylene glycol 400 1% (30 mL) [contains benzalkonium chloride]

LiquiTears: Polyvinyl alcohol 1.4% (15 mL) [contains benzalkonium chloride, edetate disodium]

Murine Tears: Polyvinyl alcohol 0.5% and povidone 0.6% (15 mL) [contains benzalkonium chloride]

Natural Balance Tears: Dextran 70 0.1% and hydroxypropyl methylcellulose 2910 0.3% (15 mL) [contains benzalkonium chloride, edetate disodium]

Natures Tears: Dextran 70 0.1% and hydroxypropyl methylcellulose 2910 0.3% (15 mL) [contains benzalkonium chloride, edetate disodium]

Soothe Hydration: Povidone 1.25% (15 mL)

Systane Balance: Propylene glycol 0.6% (10 mL)

Systane Ultra: Polyethylene glycol 400 0.4% and propylene glycol 0.3% (5 mL, 10 mL)

Systane: Polyethylene glycol 400 0.4% and propylene glycol 0.3% (5 mL, 15 mL, 30 mL)

Tears Again: Polyvinyl alcohol 1.4% (15 mL, 30 mL) [contains benzalkonium chloride]

Solution, Ophthalmic [preservative free]:

Bion Tears: Dextran 70 0.1% and hydroxypropyl methylcellulose 2910 0.3% per 0.4 mL (28s)

GenTeal Tears Mild: Dextran 70 0.1%, and hydroxypropyl methylcellulose 2910 0.3% (36s)

Soothe: Glycerin 0.6% and propylene glycol 0.6% per 0.6 mL (28s)

Systane Preservative Free: Polyethylene glycol 400 0.4% and propylene glycol 0.3% per 0.4 mL (28s, 30s)

Tears Naturale Free: Dextran 70 0.1% and hydroxypropyl methylcellulose 2910 0.3% per 0.5 mL (36s, 60s)

Viva-Drops: Polysorbate 80 1% (0.5 mL, 10 mL)

Ascorbic Acid**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Capsule Extended Release, Oral:

Generic: 500 mg

Capsule Extended Release, Oral [preservative free]:

Generic: 500 mg

Crystals, Oral:

Vita-C: (120 g, 480 g) [animal products free, gelatin free, gluten free, lactose free, no artificial color(s), no artificial flavor(s), starch free, sugar free, yeast free]

Liquid, Oral:

Generic: 500 mg/5 mL (473 mL)

Powder, Oral:

Generic: (113 g, 120 g, 480 g)

Powder Effervescent, Oral:

Ascocid-ISO-pH: (150 g) [corn free, rye free, wheat free]

Solution, Injection:

Generic: 500 mg/mL (50 mL)

Solution, Injection [preservative free]:

Mega-C/A Plus: 500 mg/mL (50 mL)

Solution, Injection, as sodium ascorbate [preservative free]:

Generic: 250 mg/mL (30 mL)

Syrup, Oral:

Generic: 500 mg/5 mL (118 mL)

Tablet, Oral:

Generic: 100 mg, 250 mg, 500 mg, 1000 mg

Tablet, Oral [preservative free]:

Generic: 250 mg, 500 mg

Tablet Chewable, Oral:

VitaChew Vit C Citrus Burst: 125 mg

Generic: 100 mg, 250 mg, 500 mg

Tablet Chewable, Oral [preservative free]:

Generic: 500 mg

Tablet Extended Release, Oral:

Generic: 500 mg, 1000 mg, 1500 mg

ASCORBIC ACID

Wafer, Oral [preservative free]:
Acerola C 500: 500 mg (50 ea) [corn free, no artificial color(s), no artificial flavor(s), wheat free, yeast free; contains acerola (*malpighia glabra*)]

Asfotase Alfa

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Solution, Subcutaneous [preservative free]:
Strensiq: 18 mg/0.45 mL (0.45 mL); 28 mg/0.7 mL (0.7 mL); 40 mg/mL (1 mL);
80 mg/0.8 mL (0.8 mL) [contains mouse (murine) and/or hamster protein]

Asparaginase (*Erwinia*)

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Solution Reconstituted, Intramuscular:
Erwinaze: 10,000 units (1 ea)

Aspirin

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Caplet, Oral:
Generic: 81, 325 mg, 500 mg
Caplet, Oral [buffered]:
Generic: 500 mg
Caplet, Enteric Coated, Oral:
Bayer Aspirin Regimen Regular Strength: 325 mg
Suppository, Rectal: 300 mg (12s); 600 mg (12s)
Tablet, Oral:
Generic: 325 mg
Tablet, Oral [buffered]:
Generic: 325 mg
Tablet, Chewable, Oral:
Generic: 81 mg
Tablet, Enteric Coated, Oral:
Generic: 81 mg, 325 mg, 650 mg

NONFORMULARY

Capsule Extended Release, oral:
Durlaza: 162.5 mg

Aspirin and Diphenhydramine

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Caplet, Oral:
Bayer PM: Aspirin 500 mg and diphenhydramine citrate 38.3 mg

Aspirin and Dipyridamole

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Capsule Extended Release 12 Hour, Oral:
Generic: Aspirin 25 mg [immediate release] and dipyridamole 200 mg
[extended release]

Aspirin, Citric Acid, and Sodium Bicarbonate

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Tablet Effervescent, Oral:
Alka-Seltzer: Aspirin 325 mg, citric acid 1000 mg, and sodium bicarbonate
1916 mg [contains sodium 567 mg/tablet]
Alka-Seltzer: Aspirin 325 mg, citric acid 1000 mg, and sodium bicarbonate
1700 mg [contains phenylalanine 9 mg/tablet, sodium 504 mg/tablet, sodium
benzoate; lemon lime flavor]
Alka-Seltzer Extra Strength: Aspirin 500 mg, citric acid 1000 mg, and sodium
bicarbonate 1985 mg [contains sodium 588 mg/tablet]
Medi-Seltzer: Aspirin 325 mg, citric acid 1000 mg, and sodium bicarbonate
1916 mg
Neutralin: Aspirin 325 mg, citric acid 1000 mg, and sodium bicarbonate
1916 mg

Atazanavir

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Capsule, Oral, as sulfate:
Reyataz: 150 mg, 200 mg, 300 mg [contains fd&c blue #2 (indigotine)]
Packet, Oral, as sulfate:
Reyataz: 50 mg (30 ea) [contains aspartame; orange-vanilla flavor]

Atazanavir and Cobicistat

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Tablet, Oral:
Evotaz: Atazanavir 300 mg and cobicistat 150 mg

Atenolol

DoD Uniform Formulary Outpatient Dosage Forms BASIC CORE FORMULARY

Tablet, Oral:
Generic: 25 mg, 50 mg, 100 mg

Atenolol and Chlorthalidone

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Tablet, Oral:
Generic: Atenolol 50 mg and chlorthalidone 25 mg
Generic: Atenolol 100 mg and chlorthalidone 25 mg

Atezolizumab

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Solution, Intravenous [preservative free]:
Tecentriq: 1200 mg/20 mL (20 mL)

AtoMOXetine

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Capsule, Oral:
Strattera: 10 mg, 18 mg, 25 mg, 40 mg, 60 mg, 80 mg, 100 mg

AtorvaSTATin

DoD Uniform Formulary Outpatient Dosage Forms BASIC CORE FORMULARY

Tablet, Oral:
Generic: 10 mg, 20 mg, 40 mg, 80 mg

Atovaquone

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Suspension, Oral:
Generic: 750 mg/5 mL (210 mL)

Atovaquone and Proguanil

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Tablet, Oral:
Generic: Atovaquone 250 mg and proguanil hydrochloride 100 mg
Tablet, Oral [pediatric]:
Malarone: Atovaquone 62.5 mg and proguanil hydrochloride 25 mg

Atracurium

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Solution, Intravenous, as besylate:
Generic: 50 mg/5 mL (5 mL); 100 mg/10 mL (10 mL)
Solution, Intravenous, as besylate [preservative free]:
Generic: 50 mg/5 mL (5 mL)

Atropine and Pralidoxime

DoD Uniform Formulary Outpatient Dosage Forms NOT COVERED

Injection, solution:
Duodote: Atropine 2.1 mg/0.7 mL and pralidoxime chloride 600 mg/2 mL
[contains benzyl alcohol; prefilled autoinjector]

Atropine (Ophthalmic)

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Ointment, Ophthalmic, as sulfate:
Generic: 1% (3.5 g)
Solution, Ophthalmic, as sulfate:
Generic: 1% (2 mL, 5 mL, 15 mL)

Atropine (Systemic)

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Device, Intramuscular, as sulfate:
AtroPen: 0.25 mg/0.3 mL (0.3 mL) [pyrogen free]
AtroPen: 0.5 mg/0.7 mL (0.7 mL); 1 mg/0.7 mL (0.7 mL); 2 mg/0.7 mL (0.7 mL) [pyrogen free; contains phenol]
Solution, Injection, as sulfate:
Generic: 0.05 mg/mL (5 mL); 0.1 mg/mL (5 mL, 10 mL); 0.4 mg/mL (20 mL);
1 mg/mL (1 mL)
Solution, Injection, as sulfate [preservative free]:
Generic: 0.4 mg/mL (1 mL); 0.8 mg/mL (0.5 mL); 1 mg/mL (1 mL)

Auranofin

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Capsule, Oral:
Ridaura: 3 mg [contains benzyl alcohol]

Aurothioglucose

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Injection, suspension [gold 50%]:
Generic: 50 mg/mL (10 mL)

Avapritinib**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Tablet, Oral:
Ayvakit: 100 mg, 200 mg, 300 mg

Avatrombopag**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Tablet, Oral:
Doptelet: 20 mg

Avelumab**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Solution, Intravenous [preservative free]:
Bavencio: 200 mg/10 mL (10 mL)

Axicabtagene Ciloleucef**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Suspension, Intravenous [preservative free]:
Yescarta: (1 ea) [contains albumin human, dimethyl sulfoxide]

Axitinib**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Tablet, Oral:
Inlyta: 1 mg, 5 mg

AzaCITIDine**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Tablet, Oral:
Onureg: 200 mg, 300 mg

AzaTHIOprine**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Solution Reconstituted, Injection:
Generic: 100 mg (1 ea)
Tablet, Oral:
Azasan: 75 mg, 100 mg [scored]
Generic: 50 mg

Azelaic Acid**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Cream, External:
Azelex: 20% (30 g, 50 g)
Foam, External:
Finacea: 15% (50 g) [contains benzoic acid, cetostearyl alcohol, polysorbate 80, propylene glycol]
Gel, External:
Finacea: 15% (50 g) [contains benzoic acid, disodium edta, polysorbate 80, propylene glycol]

Azelastine (Ophthalmic)**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Solution, Ophthalmic, as hydrochloride:
Generic: 0.05% (6 mL)

Azilsartan**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Tablet, Oral, as medoxomil:
Edarbi: 40 mg, 80 mg

Azilsartan and Chlorthalidone**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Tablet, Oral:
Edarbyclor: 40/12.5: Azilsartan medoxomil 40 mg and chlorthalidone 12.5 mg
Edarbyclor: 40/25: Azilsartan medoxomil 40 mg and chlorthalidone 25 mg

Azithromycin (Ophthalmic)**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Solution, Ophthalmic:
AzaSite: 1% (2.5 mL) [contains benzalkonium chloride, disodium edta]

Azithromycin (Systemic)**DoD Uniform Formulary Outpatient Dosage Forms
BASIC CORE FORMULARY**

Packet, Oral:
Generic: 1 g (3 ea, 10 ea)
Suspension Reconstituted, Oral:
Generic: 100 mg/5 mL (15 mL)

Suspension Reconstituted, Oral, as monohydrate [strength expressed as base]:

Generic: 100 mg/5 mL (15 mL)

Tablet, Oral:

Generic: 250 mg, 500 mg

UNIFORM FORMULARY

Solution Reconstituted, Intravenous:

Generic: 500 mg (1 ea)

Solution Reconstituted, Intravenous [preservative free]:

Generic: 500 mg (1 ea)

Aztreonam (Oral Inhalation)**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Solution Reconstituted, Inhalation [preservative free]:

Cayston: 75 mg (1 mL) [arginine free]

Aztreonam (Systemic)**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Solution, Intravenous:

Azactam in Dextrose: 1 g (50 mL); 2 g (50 mL) [sodium free]

Solution Reconstituted, Injection:

Generic: 1 g (1 ea); 2 g (1 ea)

Bacitracin and Polymyxin B (Ophthalmic)**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Ointment, Ophthalmic:

Generic: Bacitracin 500 units and polymyxin B 10,000 units per g (3.5 g)

Bacitracin and Polymyxin B (Topical)**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Ointment, External:

Double Antibiotic: Bacitracin 500 units and polymyxin B 10,000 units per g (1 ea, 14.17 g, 28.35 g)

Polysporin: Bacitracin 500 units and polymyxin B 10,000 units per g (1 ea, 14.2 g, 28.3 g)

Bacitracin, Neomycin, and Polymyxin B (Ophthalmic)**DoD Uniform Formulary Outpatient Dosage Forms
BASIC CORE FORMULARY**

Ointment, Ophthalmic:

Generic: Bacitracin 400 units, neomycin 3.5 mg, and polymyxin B 10,000 units per g (3.5 g)

Bacitracin, Neomycin, and Polymyxin B (Topical)**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Ointment, External:

Generic: Bacitracin 400 units, neomycin 3.5 mg, and polymyxin B 5000 units per g (1 ea, 15 g, 28.35 g)

Bacitracin, Neomycin, Polymyxin B, and Hydrocortisone (Ophthalmic)**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Ointment, ophthalmic:

Generic: Bacitracin 400 units, neomycin 3.5 mg, polymyxin B 10,000 units, and hydrocortisone 10 mg per g (3.5 g)

Bacitracin, Neomycin, Polymyxin B, and Hydrocortisone (Topical)**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Ointment, topical:

Cortisporin: Bacitracin 400 units, neomycin 3.5 mg, polymyxin B 5000 units, and hydrocortisone 10 mg per g (15 g)

Bacitracin, Neomycin, Polymyxin B, and Pramoxine**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Ointment, External

Cortisporin: Bacitracin 400 units, neomycin 3.5 mg, polymyxin B 5000 units, and hydrocortisone 10 mg per g (15 g)

Bacitracin (Ophthalmic)**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Ointment, Ophthalmic:

Generic: 500 units/g (3.5 g)

Bacitracin (Systemic)**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Solution Reconstituted, Intramuscular:

Generic: 50,000 units (1 ea)

BACITRACIN (TOPICAL)

Bacitracin (Topical)

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Ointment, External, as zinc [strength expressed as base]:

Generic: 500 units/g (1 ea, 1 g, 14 g, 14.17 g, 14.2 g, 15 g, 28 g, 28.35 g, 28.4 g, 30 g, 113.4 g, 453.6 g, 453.9 g)

Baclofen

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Cream, External:

EnovaRX-Baclofen: 1% (60 g, 120 g) [contains cetyl alcohol]

Generic: 2% (60 g)

Solution, Intrathecal [preservative free]:

Gablofen: 50 mcg/mL (1 mL); 10,000 mcg/20 mL (20 mL); 20,000 mcg/20 mL (20 mL); 40,000 mcg/20 mL (20 mL) [antioxidant free]

Lioresal: 0.05 mg/mL (1 mL); 10 mg/20 mL (20 mL); 10 mg/5 mL (5 mL); 40 mg/20 mL (20 mL) [antioxidant free]

Suspension, Oral:

First-Baclofen 1: 1 mg/mL (120 mL) [contains saccharin sodium, sodium benzoate]

First-Baclofen 5: 5 mg/mL (60 mL, 120 mL) [contains saccharin sodium, sodium benzoate]

Tablet, Oral:

Generic: 10 mg, 20 mg

NONFORMULARY

Solution, Oral:

Ozobax: 5 mg/5 mL (473 mL) [contains methylparaben, propylparaben; grape flavor]

Balanced Salt Solution

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Ophthalmic [irrigation; preservative free]:

BSS Plus: Sodium chloride 0.71%, potassium chloride 0.038%, calcium chloride 0.015%, magnesium chloride 0.02%, sodium phosphate 0.042%, sodium bicarbonate 0.21%, dextrose 0.092%, glutathione 0.018% (250 mL, 500 mL)

Generic: Sodium chloride 0.64%, potassium chloride 0.075%, calcium chloride 0.048%, magnesium chloride 0.03%, sodium acetate 0.39%, sodium citrate 0.17% (18 mL, 200 mL, 250 mL, 500 mL)

Balsalazide

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule, Oral, as disodium:

Generic: 750 mg

NONFORMULARY

Tablet, Oral, as disodium:

Giazo: 1.1 g

Balsam Peru and Castor Oil

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Aerosol, External:

Amberderm: Balsam peru 72.5 mg and castor oil 650 mg per 0.82 mL (113.4 g)

Ointment, External:

Venelex: Balsam peru 87 mg and castor oil 788 mg per gram (30 g, 60 g)

Baricitinib

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:

Olumiant: 2 mg

Barium

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Cream, Oral, as sulfate:

E-Z-Paste: 60% (454 g) [contains methylparaben, propylparaben, saccharin sodium]

Esopho-Cat: 3% (30 g) [contains saccharin sodium, sodium benzoate]

Enema, Rectal, as sulfate:

E-Z-Dose: 105% (650 mL) [contains saccharin sodium, sodium benzoate]

Packet, Oral, as sulfate:

E-Z-Cat Dry: 2% (50 ea) [contains saccharin sodium]

Entero VU: 13% (12 ea) [contains saccharin sodium]

Paste, Oral, as sulfate:

Varibar Pudding: 40% (230 mL) [contains polysorbate 80, saccharin sodium, sodium benzoate; vanilla flavor]

Suspension, Combination, as sulfate:

Liquid Polibar Plus: 105% (1900 mL) [contains saccharin sodium, sodium benzoate]

Readi-Cat: 1.3% (900 mL) [contains saccharin sodium, sodium benzoate]

Readi-Cat 2: 2.1% (450 mL) [contains saccharin sodium, sodium benzoate]

Suspension, Oral, as sulfate:

Entero VU: 13% (600 mL) [contains saccharin sodium, sodium benzoate]

Entero VU: 24% (600 mL) [contains polysorbate 80, saccharin sodium, sodium benzoate]

Liquid E-Z-Paque: 60% (355 mL) [contains saccharin sodium, sodium benzoate]

Maxibar: 210% (120 mL) [contains saccharin sodium, sodium benzoate]

Readi-Cat 2: 2% (450 mL) [contains benzoic acid, saccharin sodium, sodium benzoate; banana smoothie flavor]

Readi-Cat 2: 2.1% (450 mL) [contains benzoic acid, saccharin sodium, sodium benzoate]

Readi-Cat 2: 2.1% (450 mL) [contains benzoic acid, saccharin sodium, sodium benzoate; berry smoothie flavor]

Tagitol V: 40% (60 mL) [contains saccharin sodium, sodium benzoate; apple flavor]

Varibar Honey: 40% (250 mL) [contains polysorbate 80, saccharin sodium, sodium benzoate; apple flavor]

Varibar Nectar: 40% (240 mL) [contains polysorbate 80, saccharin sodium, sodium benzoate; apple flavor]

Varibar Thin Honey: 40% (250 mL) [contains polysorbate 80, saccharin sodium, sodium benzoate; apple flavor]

VoLumen: 0.1% (450 mL) [contains benzoic acid, saccharin sodium, sodium benzoate; blueberry flavor]

Suspension Reconstituted, Oral, as sulfate:

Digibar 190: 190% (120 mL) [grit free, odorless; contains saccharin sodium]

E-Z-HD: 98% (135 mL) [contains saccharin sodium]

E-Z-Paque: 96% (176 g) [contains propylene glycol, saccharin sodium]

Varibar Thin Liquid: 40% (148 g) [contains polysorbate 80, saccharin sodium]

Tablet, Oral, as sulfate:

E-Z-Disk: 700 mg

Basiliximab

DoD Uniform Formulary Outpatient Dosage Forms

NOT COVERED

Solution Reconstituted, Intravenous [preservative free]:

Simulect: 10 mg (1 ea); 20 mg (1 ea)

BCG (Intravesical)

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Suspension Reconstituted, Intravesical:

Tice BCG: 50 mg (1 ea)

Suspension Reconstituted, Intravesical [preservative free]:

TheraCys: 81 mg (1 ea) [contains monosodium glutamate (sodium glutamate)]

BCG Vaccine (Immunization)

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Injectable, Injection:

Generic: 50 mg (1 ea)

Becaplermin

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Gel, External:

Regranex: 0.01% (15 g) [contains metacresol, methylparaben, propylparaben]

Bedaquiline

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:

Sirturo: 100 mg [contains corn starch]

Belatacept

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution Reconstituted, Intravenous:

Nulojix: 250 mg (1 ea)

Belimumab

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution Auto-injector, Subcutaneous [preservative free]:

Benlysta: 200 mg/mL (1 mL) [contains polysorbate 80]

Solution Prefilled Syringe, Subcutaneous [preservative free]:

Benlysta: 200 mg/mL (1 mL) [contains polysorbate 80]

Solution Reconstituted, Intravenous [preservative free]:

Benlysta: 120 mg (1 ea); 400 mg (1 ea) [contains polysorbate 80]

Belinostat

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution Reconstituted, Intravenous:

Beleodaq: 500 mg (1 ea)

Belladonna and Opium

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Suppository:

Generic: Belladonna extract 16.2 mg and opium 30 mg; belladonna extract 16.2 mg and opium 60 mg

Benazepril

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral, as hydrochloride:
Generic: 5 mg, 10 mg, 20 mg, 40 mg

Benazepril and Hydrochlorothiazide

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:
Generic:
5/6.25: Benazepril hydrochloride 5 mg and hydrochlorothiazide 6.25 mg
10/12.5: Benazepril hydrochloride 10 mg and hydrochlorothiazide 12.5 mg
20/12.5: Benazepril hydrochloride 20 mg and hydrochlorothiazide 12.5 mg
20/25: Benazepril hydrochloride 20 mg and hydrochlorothiazide 25 mg

Bendamustine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Intravenous, as hydrochloride:
Bendeka: 100 mg/4 mL (4 mL) [contains polyethylene glycol, propylene glycol]
Solution Reconstituted, Intravenous, as hydrochloride:
Treanda: 25 mg (1 ea); 100 mg (1 ea)

Benralizumab

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution Auto-injector, Subcutaneous [preservative free]:
Fasenra Pen: 30 mg/mL (1 mL)

NOT COVERED

Solution Prefilled Syringe, Subcutaneous [preservative free]:
Fasenra: 30 mg/mL (1 mL)

Benzocaine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Aerosol, External:
Dermoplast: Benzocaine 20% and menthol 0.5% (56 g) [contains methylparaben]
Ivy-Rid: 2% (82.5 mL)
Gel, Mouth/Throat:
Anbesol: 10% (9 g) [contains benzyl alcohol, brilliant blue fcf (fd&c blue #1), fd&c yellow #10 (quinoline yellow), fd&c yellow #6 (sunset yellow), methylparaben, propylene glycol, saccharin; cool mint flavor]
Anbesol JR: 10% (9 g) [contains methylparaben]
Anbesol Maximum Strength: 20% (9 g) [contains brilliant blue fcf (fd&c blue #1), fd&c red #40, fd&c yellow #10 (quinoline yellow), methylparaben, saccharin]
Baby Anbesol: 7.5% (9 g)
Benz-O-Sthetic: 20% (15 g, 29 g) [contains benzyl alcohol, saccharin sodium]
Dentapaine: 20% (11 g)
Hurricane: 20% (5.25 g, 28.4 g, 30 g) [contains polyethylene glycol, saccharin sodium]
Zilactin Baby: 10% (9.4 g) [alcohol free, dye free, saccharin free]
Liquid, External:
Chiggertox: 2.1% (30 mL)
Liquid, Mouth/Throat:
Anbesol: 10% (12 mL) [contains brilliant blue fcf (fd&c blue #1), fd&c yellow #10 (quinoline yellow), fd&c yellow #6 (sunset yellow), methylparaben, saccharin; cool mint flavor]
Anbesol Maximum Strength: 20% (12 mL) [contains benzyl alcohol, methylparaben, polyethylene glycol, propylene glycol, saccharin]
Benz-O-Sthetic: 20% (56 g) [contains benzyl alcohol, polyethylene glycol, propylene glycol, saccharin]
Dent-O-Kain/20: 20% (9 mL) [contains benzyl alcohol, propylene glycol, saccharin]
Lozenge, Mouth/Throat:
Bi-Zets/Benzotroches: 15 mg (10 ea) [orange flavor]
Sore Throat Relief: 10 mg (2 ea) [wild cherry flavor]
Trocaine Throat: 10 mg (1 ea)
Ointment, External:
Anacaine: 10% (30 g)
Anbesol Cold Sore Therapy: 20% (9 g) [contains aloe, vitamin e]
Blistex Medicated: (6.3 g) [contains cetyl alcohol, edetate calcium disodium, saccharin sodium, sd alcohol]
Chiggerex: 2% (52.5 g)
Foille: 5% (28 g)
Solution, Mouth/Throat:
Benz-O-Sthetic: 20% (30 mL) [contains polyethylene glycol, saccharin]
Hurricane: 20% (57 g) [contains polyethylene glycol, saccharin]
Hurricane: 20% (30 mL) [contains polyethylene glycol, saccharin sodium; wild cherry flavor]
Hurricane One: 20% (2 ea, 25 ea) [contains polyethylene glycol, saccharin sodium]
Kank-A Mouth Pain: 20% (9.75 mL) [contains benzyl alcohol, propylene glycol, saccharin sodium]
Topex Topical Anesthetic: 20% (57 g) [cherry flavor]

Strip, Mouth/Throat:

Ora-film: 6% (12 ea) [contains brilliant blue fcf (fd&c blue #1), menthol, methylparaben, propylparaben, tartrazine (fd&c yellow #5)]

Swab, Mouth/Throat:

Benz-O-Sthetic: 20% (2 ea) [contains benzyl alcohol, polyethylene glycol, saccharin sodium; cherry flavor]

Hurricane: 20% (72 ea) [contains polyethylene glycol, saccharin sodium; wild cherry flavor]

Benzocaine and Menthol

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Lozenge, Mouth/Throat:
Cepacol Sore Throat: Benzocaine 10 mg and Menthol 2.1 mg (18 ea)
Cepacol Sore Throat: Benzocaine 15 mg and Menthol 2.6 mg (16 ea)
Cepacol Sore Throat: Benzocaine 15 mg and Menthol 3.6 mg (8 ea, 16 ea)

Benzocaine, Butamben, and Tetracaine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Aerosol, spray, topical [kit]:
Cetacaine: Benzocaine 14%, butamben 2%, and tetracaine hydrochloride 2% (56 g) [delivers benzocaine 28 mg, butamben 4 mg, and tetracaine hydrochloride 4 mg per second; contains benzalkonium chloride, chlorofluorocarbon; packaged with cannula assortment]
Aerosol, spray, topical:
Cetacaine: Benzocaine 14%, butamben 2%, and tetracaine hydrochloride 2% (20 g) [delivers benzocaine 28 mg, butamben 4 mg, and tetracaine hydrochloride 4 mg per second; contains benzalkonium chloride, chlorofluorocarbon; packaged with cannula]
Gel, External:
Cetacaine: Benzocaine 14%, butamben 2%, and tetracaine hydrochloride 2% (32 g) [delivers benzocaine 28 mg, butamben 4 mg and tetracaine hydrochloride 4 mg per pump actuation ~ 0.25 inch (6.5 mm) x 0.5 inch (13 mm) long application; contains benzalkonium chloride]
Liquid, External [kit]:
Cetacaine: Benzocaine 14%, butamben 2%, and tetracaine hydrochloride 2% (14 g, 30 g) [provides benzocaine 28 mg, butamben 4 mg, and tetracaine hydrochloride 4 mg per 6-7 drops (0.2 mL); contains benzalkonium chloride; packaged with syringes and applicator tips]
Liquid, External:
Cetacaine: Benzocaine 14%, butamben 2%, and tetracaine hydrochloride 2% (14 g, 30 g) [provides benzocaine 28 mg, butamben 4 mg, and tetracaine hydrochloride 4 mg per 6-7 drops (0.2 mL); contains benzalkonium chloride]

Benzoin

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tincture, topical:
Benz-Protect Swabs: Benzoin Compound USP: Benzoin 10% (3 mL)
Generic: Benzoin Compound USP: Benzoin 10% (30 mL, 59 mL, 60 mL, 120 mL, 473 mL); Benzoin NFXI (59 mL)
Tincture, topical [spray]:
Sprayzoin: Benzoin Compound USP: Benzoin 10% (120 mL)

Benzonatate

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule, Oral:
Generic: 100 mg, 150 mg, 200 mg

Benzoyl Peroxide

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Cream, External:
Clearskin: 10% (30 g)
Foam, External:
Generic: 5.3% (60 g, 100 g); 9.8% (100 g)
Gel, External:
Benziq: 5.25% (50 g) [contains benzyl alcohol, disodium edta, trolamine (triethanolamine)]
Benziq LS: 2.75% (50 g) [contains trolamine (triethanolamine)]
OC8: 7% (45 g) [contains disodium edta, propylene glycol]
Generic: 2.5% (60 g); 5% (60 g, 90 g); 10% (56 g, 60 g, 90 g)
Kit, External:
AcneFree Acne Clearing System: Wash 2.5% and lotion 3.7% [contains disodium edta, polysorbate 80, propylene glycol]
AcneFree Severe Clearing Syst: Wash 2.5% and lotion 10% [contains benzalkonium chloride, butylparaben, cetyl alcohol, disodium edta, edetate sodium (tetrasodium), ethylparaben, isobutylparaben, methylisothiazolinone, methylparaben, propylene glycol, propylparaben, soybeans (glycine max)]
BPO Creamy Wash: Wash 4% (170.1 g) and bar soap 5% (2 x 21 g), Wash 8% (170.1 g) and bar soap 5% (2 x 21 g) [contains disodium edta, methylparaben]
Inova: Pad 4% (30s) and tocopherol 5% (28s), Pad 8% (30s) and tocopherol 5% (28s) [contains disodium edta, methylparaben]
Lavoclen-4 Acne Wash: 4% [soap free; contains butylparaben, methylparaben, propylparaben]

BENZOYL PEROXIDE

Lavoclen-8 Acne Wash: 8% [soap free; contains butylparaben, methylparaben, propylparaben]

Liquid, External:

Benzac AC Wash: 5% (226 g)

BenzePrO Creamy Wash: 7% (180 g) [contains cetyl alcohol, edetate disodium, propylene glycol]

Benziq Wash: 5.25% (175 g) [contains benzyl alcohol, cetyl alcohol, disodium edta, propylene glycol]

Benzoyl Peroxide Wash: 5% (148 g, 237 g) [contains cetyl alcohol, edetate disodium, propylene glycol]

Benzoyl Peroxide Wash: 5% (142 g, 227 g) [contains edetate disodium]

Benzoyl Peroxide Wash: 10% (148 g, 237 g) [contains cetyl alcohol, edetate disodium, propylene glycol]

Benzoyl Peroxide Wash: 10% (142 g, 227 g) [contains edetate disodium]

BP Foaming Wash: 10% (227 g) [contains cetearyl alcohol, methylparaben]

BP Wash: 2.5% (227 g); 5% (113 g, 142 g, 227 g) [contains cetearyl alcohol, methylparaben]

BP Wash: 7% (473 mL) [contains benzyl alcohol, cetyl alcohol, propylene glycol, trolamine (triethanolamine)]

BP Wash: 10% (142 g, 227 g) [contains cetearyl alcohol, methylparaben]

BPO-10 Wash: 10% (227 g) [contains methylparaben, propylene glycol, propylparaben]

BPO-5 Wash: 5% (227 g) [contains methylparaben, propylene glycol, propylparaben]

Desquam-X Wash: 5% (140 g); 10% (140 g) [contains edetate disodium]

Neutrogena Clear Pore: 3.5% (125 mL) [contains disodium edta, menthol]

PanOxyl: 2.5% (156 g) [soap free; contains cetearyl alcohol]

PanOxyl Wash: 10% (156 g) [contains alcohol, usp, methylparaben]

PanOxyl-4 Creamy Wash: 4% (170.1 g) [contains cetearyl alcohol, methylparaben]

PR Benzoyl Peroxide Wash: 7% (180 g, 473 mL) [contains cetyl alcohol, edetate disodium, propylene glycol]

Liquid Extended Release, External:

Advanced Acne Wash: 4.4% (104 mL)

Lotion, External:

Acne Medication 5: 5% (29.5 mL) [odorless; contains disodium edta]

Acne Medication 10: 10% (29.5 mL) [odorless; contains edetate disodium]

Benzoyl Peroxide Cleanser: 3% (340.2 g); 6% (170.3 g, 340.2 g); 9% (340.2 g) [contains cetyl alcohol, edetate disodium, propylene glycol]

Oscion Cleanser: 6% (170.3 g, 340.2 g)

Zaclir Cleansing: 8% (297 g)

Miscellaneous, External:

BenzePrO Foaming Cloths: 6% (60 ea) [contains cetyl alcohol]

BPO Foaming Cloths: 6% (60 ea) [contains methylparaben]

Benzoyl Peroxide and Hydrocortisone

**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Lotion, External:

Vanoxide-HC: Benzoyl peroxide 5% and hydrocortisone 0.5% (25 g)

Benzphetamine

**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Tablet, Oral, as hydrochloride:

Generic: 25 mg, 50 mg

Benztropine

**DoD Uniform Formulary Outpatient Dosage Forms
BASIC CORE FORMULARY**

Tablet, Oral, as mesylate:

Generic: 0.5 mg, 1 mg, 2 mg

UNIFORM FORMULARY

Solution, Injection, as mesylate:

Generic: 1 mg/mL (2 mL)

Benzyl Alcohol

**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Gel, Mouth/Throat:

Zilactin: 10% (7.1 g) [contains propylene glycol, sd alcohol]

Lotion, External:

Ulesfia: 5% (227 g) [contains polysorbate 80, trolamine (triethanolamine)]

Benzylpenicilloyl Polylysine

**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Injection, solution:

Pre-Pen: 6 x 10⁻⁵ M (0.25 mL)

Beractant

**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Suspension, Intratracheal:

Survanta: Phospholipids 25 mg/mL (4 mL, 8 mL)

Beta-Carotene

**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Capsule, Oral:

Generic: 25,000 units

Capsule, Oral [preservative free]:

B-Caro-T: 15 mg [dye free]

Caroguard: 15 mg [dye free]

Generic: 25,000 units

Betaine

**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Powder, Oral, as anhydrous:

Cystadane: 1 g/scoop (180 g)

Betamethasone and Clotrimazole

**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Cream, External:

Generic: Betamethasone dipropionate 0.05% (base) and clotrimazole 1% (15 g, 45 g)

Lotion, External:

Generic: Betamethasone dipropionate 0.05% (base) and clotrimazole 1% (30 mL)

Betamethasone (Systemic)

**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Kit, Injection:

ReadySharp Betamethasone: Betamethasone sodium phosphate 3 mg and betamethasone acetate 3 mg per 1 mL [contains benzalkonium chloride, disodium edta]

Suspension, Injection:

Generic: Betamethasone sodium phosphate 3 mg and betamethasone acetate 3 mg per 1 mL (5 mL)

Betamethasone (Topical)

**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Cream, External, as dipropionate [strength expressed as base]:

Generic: 0.05% (15 g, 45 g)

Cream, External, as dipropionate augmented [strength expressed as base]:

Generic: 0.05% (15 g, 50 g)

Cream, External, as valerate [strength expressed as base]:

Generic: 0.1% (15 g, 45 g)

Gel, External, as dipropionate augmented [strength expressed as base]:

Generic: 0.05% (15 g, 50 g)

Lotion, External, as dipropionate [strength expressed as base]:

Generic: 0.05% (60 mL)

Lotion, External, as dipropionate augmented [strength expressed as base]:

Generic: 0.05% (30 mL, 60 mL)

Lotion, External, as valerate [strength expressed as base]:

Generic: 0.1% (60 mL)

Ointment, External, as dipropionate [strength expressed as base]:

Generic: 0.05% (15 g, 45 g)

Ointment, External, as dipropionate augmented [strength expressed as base]:

Generic: 0.05% (15 g, 45 g, 50 g)

Ointment, External, as valerate [strength expressed as base]:

Generic: 0.1% (15 g, 45 g)

NONFORMULARY

Emulsion, External, as dipropionate [strength expressed as base]:

Sernivo: 0.05% (120 mL) [contains cetostearyl alcohol, methylparaben, propylparaben]

Foam, External, as valerate:

Luxiq: 0.12% (50 g, 100 g)

Generic: 0.12% (50 g, 100 g)

Betaxolol (Ophthalmic)

**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Solution, Ophthalmic:

Generic: 0.5% (5 mL, 10 mL, 15 mL)

Suspension, Ophthalmic:

Betoptic-S: 0.25% (10 mL, 15 mL)

Betaxolol (Systemic)

**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Tablet, Oral, as hydrochloride:

Generic: 10 mg, 20 mg

Bethanechol

**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Tablet, Oral, as chloride:

Generic: 5 mg, 10 mg, 25 mg, 50 mg

Bevacizumab

**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Solution, Intravenous [preservative free]:

Avastin: 100 mg/4 mL (4 mL); 400 mg/16 mL (16 mL)

Bexarotene (Systemic)

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule, Oral:
Generic: 75 mg

Bexarotene (Topical)

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Gel, External:
Targretin: 1% (60 g) [contains alcohol, usp]

Bezlotoxumab

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Intravenous [preservative free]:
Zinplava: 1000 mg/40 mL (40 mL) [contains polysorbate 80]

Bicalutamide

DoD Uniform Formulary Outpatient Dosage Forms

BASIC CORE FORMULARY

Tablet, Oral:
Generic: 50 mg

Bimatoprost

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, External:
Generic: 0.03% (3 mL, 5 mL)
Solution, Ophthalmic:
Lumigan: 0.01% (2.5 mL, 5 mL, 7.5 mL) [contains benzalkonium chloride]
Generic: 0.03% (2.5 mL, 5 mL, 7.5 mL)

Binimetinib

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:
Mektovi: 15 mg

Biotin

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule, Oral:
Meribin: 5 mg
Capsule, Oral [preservative free]:
Generic: 5000 mcg
Tablet, Oral:
Biotin Forte: 3 mg, 5 mg
Generic: 1000 mcg, 5 mg, 10 mg
Tablet, Oral [preservative free]:
Generic: 300 mcg

Bisacodyl

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Enema, Rectal:
Fleet Bisacodyl: 10 mg/30 mL (37 mL)
Suppository, Rectal:
Generic: 10 mg (12 ea, 50 ea, 100 ea)
Tablet Delayed Release, Oral:
Bisacodyl EC: 5 mg
Correct: 5 mg
Ducodyl: 5 mg
Dulcolax: 5 mg [contains methylparaben, propylparaben, sodium benzoate]
Ex-Lax Ultra: 5 mg [contains methylparaben]
Fleet Laxative: 5 mg
Gentle Laxative: 5 mg
Stimulant Laxative: 5 mg
Womens Laxative: 5 mg

Bismuth Subcitrate, Metronidazole, and Tetracycline

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule, Oral:
Pylera: Bismuth subcitrate potassium 140 mg, metronidazole 125 mg, and tetracycline hydrochloride 125 mg

Bismuth Subsalicylate

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule, Softgel, Oral:
Kaopectate: 240 mg
Suspension, Oral, as subsalicylate:
Bismatrol: 262 mg/15 mL (236 mL) [contains benzoic acid, saccharin sodium; wintergreen flavor]
Bismatrol Maximum Strength: 525 mg/15 mL (236 mL) [contains benzoic acid, saccharin sodium; wintergreen flavor]
Geri-Pectate: 262 mg/15 mL (355 mL)
Kaopectate: 600 mg/15 mL (250 mL, 350 mL) [vanilla flavor]
Kaopectate Children's: 600 mg/15 mL (180 mL) [cherry flavor]

Kaopectate Extra Strength: 750 mg/15 mL (250 mL, 350 mL) [peppermint flavor]

Kao-Tin: 262 mg/15 mL (236 mL, 473 mL) [contains saccharin sodium, sodium benzoate]

Peptic Relief: 262 mg/15 mL (237 mL) [sugar free; contains benzoic acid, saccharin sodium; mint flavor]

Pepto-Bismol: 262 mg/15 mL (118 mL, 473 mL) [contains benzoic acid, saccharin sodium]

Pink Bismuth: 262 mg/15 mL (236 mL)

Stomach Relief: 262 mg/15 mL (237 mL, 355 mL) [contains saccharin sodium]

Stomach Relief: 527 mg/30 mL (240 mL, 480 mL)

Stomach Relief Max St: 525 mg/15 mL (237 mL) [contains saccharin sodium]

Stomach Relief Plus: 525 mg/15 mL (240 mL, 480 mL)

Tablet Chewable, Oral:

Stomach Relief: 262 mg [contains aspartame]

Tablet Chewable, Oral, as subsalicylate:

Generic: 262 mg

Bisoprolol

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral, as fumarate:
Generic: 5 mg, 10 mg

Bisoprolol and Hydrochlorothiazide

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:
Generic:
2.5/6.25: Bisoprolol fumarate 2.5 mg and hydrochlorothiazide 6.25 mg
5/6.25: Bisoprolol fumarate 5 mg and hydrochlorothiazide 6.25 mg
10/6.25: Bisoprolol fumarate 10 mg and hydrochlorothiazide 6.25 mg

Bivalirudin

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution Reconstituted, Intravenous:
Generic: 250 mg (1 ea)

Bleomycin

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution Reconstituted, Injection:
Generic: 15 units (1 ea); 30 units (1 ea)
Solution Reconstituted, Injection [preservative free]:
Generic: 15 units (1 ea); 30 units (1 ea)

Blinatumomab

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution Reconstituted, Intravenous [preservative free]:
Blinicyto: 35 mcg (1 ea) [contains polysorbate 80]

Bortezomib

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution Reconstituted, Injection:
Velcade: 3.5 mg (1 ea)

Bosentan

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:
Tracleer: 62.5 mg, 125 mg

NONFORMULARY

Tablet Soluble, Oral:
Tracleer: 32 mg [scored; contains aspartame]

Bosutinib

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:
Bosulif: 100 mg, 500 mg

Botulism Antitoxin, Heptavalent

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Injection [preservative free]:
Each vial contains no less than serotype A antitoxin 4500 units, serotype B antitoxin 3300 units, serotype C antitoxin 3000 units, serotype D antitoxin 600 units, serotype E antitoxin 5100 units, serotype F antitoxin 3000 units, and serotype G antitoxin 600 units (20 mL, 50 mL)

Botulism Immune Globulin (Intravenous-Human)

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Injection, powder for reconstitution [preservative free]:
BabyBIG: ~ 100 mg [contains albumin (human), sucrose; supplied with diluent]

BRENTUXIMAB VEDOTIN

Brentuximab Vedotin

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Solution Reconstituted, Intravenous [preservative free]:
Adcetris: 50 mg (1 ea) [contains polysorbate 80]

Brexanolone

DoD Uniform Formulary Outpatient Dosage Forms NOT COVERED

Solution, Intravenous [preservative free]:
Zulresso: 100 mg/20 mL (20 mL)

Brigatinib

DoD Uniform Formulary Outpatient Dosage Forms Uniform Formulary

Tablet, Oral:
Alunbrig: 30 mg, 90 mg, 180 mg
Tablet Therapy Pack, Oral:
Alunbrig: 90 mg (7s) & 180 mg (23s) (30 ea)

Brimonidine (Ophthalmic)

DoD Uniform Formulary Outpatient Dosage Forms BASIC CORE FORMULARY

Solution, Ophthalmic, as tartrate:
Generic: 0.15% (5 mL, 10 mL, 15 mL); 0.2% (5 mL, 10 mL, 15 mL)

UNIFORM FORMULARY

Solution, Ophthalmic, as tartrate:
Alphagan P: 0.1% (5 mL, 10 mL, 15 mL); 0.15% (5 mL, 10 mL, 15 mL)
Lumify: 0.025% (2.5 mL, 7.5 mL)

Brincidofovir

Brinzolamide and Brimonidine

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Suspension, Ophthalmic:
Simbrinza: Brinzolamide 1% and brimonidine tartrate 0.2% (8 mL) [contains benzalkonium chloride]

Brolucizumab

DoD Uniform Formulary Outpatient Dosage Forms

NOT COVERED

Solution, Intravitreal [preservative free]:
Beovu: brolucizumab-dblb 6 mg/0.05 mL (0.05 mL) [contains polysorbate 80]

Bromfenac

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Solution, Ophthalmic:
Generic: 0.09% (1.7 mL)

NONFORMULARY

Solution, Ophthalmic:
BromSite: 0.075% (5 mL)
Prolensa: 0.07% (3 mL)

Bromocriptine

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Capsule, Oral:
Generic: 5 mg
Tablet, Oral:
Generic: 2.5 mg
NONFORMULARY
Tablet, Oral:
Cycloset: 0.8 mg

Brompheniramine and Phenylephrine

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Elixir, Oral:
Dimaphen Children's: Brompheniramine maleate 1 mg and phenylephrine hydrochloride 2.5 mg per 5 mL (118 mL, 237 mL) [ethanol free, gluten free; contains propylene glycol, sodium 2 mg/5 mL, sodium benzoate; grape flavor]

Liquid, Oral:

Dimetapp Children's Cold & Allergy: Brompheniramine maleate 1 mg and phenylephrine hydrochloride 2.5 mg per 5 mL (118 mL, 237 mL) [ethanol free; contains sodium 3 mg/5 mL, propylene glycol, sodium benzoate; grape flavor]

Glenmax PEB: Brompheniramine maleate 4 mg and phenylephrine hydrochloride 10 mg per 5 mL (473 mL) [alcohol free, dye free, sugar free; contains propylene glycol, saccharin sodium, sodium benzoate, sorbitol; fruit gum flavor]

Rynex PE: Brompheniramine maleate 1 mg and phenylephrine hydrochloride 2.5 mg per 5 mL (473 mL) [ethanol free, gluten free, sugar free; contains propylene glycol; bubblegum flavor]

Suspension, Oral:

Entre-B: Brompheniramine maleate 6 mg and phenylephrine hydrochloride 10 mg per 5 mL (118 mL) [contains benzoic acid, propylene glycol; bubble gum flavor]

Vazobid-PD: Brompheniramine maleate 1.2 mg and phenylephrine hydrochloride 2 mg per 1 mL (118 mL) [contains aspartame, sodium benzoate; bubblegum flavor]

Syrup, Oral:

Triaminic Cold & Allergy: Brompheniramine maleate 1 mg and phenylephrine hydrochloride 2.5 mg per 5 mL (118 mL) [contains propylene glycol, sodium benzoate; grape flavor]

Tablet, Oral:

Brohist D: Brompheniramine maleate 4 mg and phenylephrine hydrochloride 10 mg

Relhist BP: Brompheniramine maleate 4 mg and phenylephrine hydrochloride 10 mg

Ru-Hist D: Brompheniramine maleate 4 mg and phenylephrine hydrochloride 10 mg

Brompheniramine and Pseudoephedrine

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Capsule, Oral:

Lodrane D: Brompheniramine maleate 4 mg and pseudoephedrine hydrochloride 60 mg

Liquid, Oral:

Brotapp: Brompheniramine maleate 1 mg and pseudoephedrine hydrochloride 15 mg per 5 mL (120 mL, 240 mL, 480 mL) [ethanol free, sugar free; contains propylene glycol, sodium benzoate; grape flavor]

Rynex PSE: Brompheniramine maleate 1 mg and pseudoephedrine hydrochloride 15 mg per 5 mL (473 mL) (ethanol free, sugar free; contains propylene glycol; orange flavor)

Brompheniramine, Dextromethorphan, and Phenylephrine

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Capsule, Oral:

Lodrane D: Brompheniramine maleate 4 mg and pseudoephedrine hydrochloride 60 mg

Liquid, Oral:

Brotapp: Brompheniramine maleate 1 mg and pseudoephedrine hydrochloride 15 mg per 5 mL (120 mL, 240 mL, 480 mL) [ethanol free, sugar free; contains propylene glycol, sodium benzoate; grape flavor]

Rynex PSE: Brompheniramine maleate 1 mg and pseudoephedrine hydrochloride 15 mg per 5 mL (473 mL) (ethanol free, sugar free; contains propylene glycol; orange flavor)

Brompheniramine, Pseudoephedrine, and Dextromethorphan

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Liquid, Oral:

Brotapp-DM: Brompheniramine maleate 1 mg, pseudoephedrine hydrochloride 15 mg, and dextromethorphan hydrobromide 5 mg per 5 mL (120 mL, 240 mL) [grape flavor]

Syrup, Oral:

Bromfed DM: Brompheniramine maleate 2 mg, pseudoephedrine hydrochloride 30 mg, and dextromethorphan hydrobromide 10 mg per 5 mL (118 mL, 473 mL) [contains ethanol 0.95%, propylene glycol, sodium benzoate; butterscotch flavor]

TGQ 30PSE/3BRM/15DM: Brompheniramine maleate 3 mg, pseudoephedrine hydrochloride 30 mg, and dextromethorphan hydrobromide 15 mg per 5 mL (473 mL) [contains propylene glycol; berry-vanilla flavor]

Generic: Brompheniramine maleate 2 mg, pseudoephedrine hydrochloride 30 mg, and dextromethorphan hydrobromide 10 mg per 5 mL (118 mL, 473 mL)

Budesonide (Nasal)

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Suspension, Nasal:

Rhinocort Allergy: 32 mcg/actuation (5 mL, 8.43 mL)

NONFORMULARY

Suspension, Nasal:

Generic: 32 mcg/actuation (8.43 mL)

Budesonide (Oral Inhalation)

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Suspension, Inhalation:

Generic: 0.25 mg/2 mL (2 mL); 0.5 mg/2 mL (2 mL); 1 mg/2 mL (2 mL)

NONFORMULARY

Aerosol Powder Breath Activated, Inhalation:

Pulmicort Flexhaler: 90 mcg/actuation (1 ea); 180 mcg/actuation (1 ea) [contains milk protein]

Budesonide (Systemic)

**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Capsule Delayed Release Particles, Oral:
Generic: 3 mg

NONFORMULARY

Tablet Extended Release 24 Hour, Oral:
Uceris: 9 mg

NOT COVERED

Capsule Extended Release 24 Hour, Oral:
Ortikos: 6 mg, 9 mg

Budesonide (Topical)

**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Foam, Rectal:
Uceris: 2 mg/actuation (33.4 g) [contains cetyl alcohol, edetate disodium, propylene glycol]

Bumetanide

**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Solution, Injection:
Generic: 0.25 mg/mL (2 mL, 4 mL, 10 mL)
Tablet, Oral:
Generic: 0.5 mg, 1 mg, 2 mg

Bupivacaine

**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Kit, Injection, as hydrochloride [preservative free]:
ReadySharp Bupivacaine: 0.5%
Solution, Injection, as hydrochloride:
Generic: 0.25% (50 mL); 0.5% (50 mL)
Solution, Injection, as hydrochloride [preservative free]:
Generic: 0.25% (10 mL, 30 mL); 0.5% (10 mL, 30 mL); 0.75% (10 mL, 30 mL)
Solution, Intrathecal, as hydrochloride:
Generic: 0.75% [7.5 mg/mL] (2 mL)
Solution, Intrathecal, as hydrochloride [preservative free]:
Bupivacaine Spinal: 0.75% [7.5 mg/mL] (2 mL)
Marcaine Spinal: 0.75% [7.5 mg/mL] (2 mL)
Sensorcaine-MPF Spinal: 0.75% [7.5 mg/mL] (2 mL)

Bupivacaine and Epinephrine

**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Injection, solution [preservative free]:
Sensorcaine MPF with Epinephrine: Bupivacaine hydrochloride 0.75% and epinephrine 1:200,000 (30 mL) [contains sodium metabisulfite]
Generic: Bupivacaine hydrochloride 0.25% and epinephrine 1:200,000 (10 mL, 30 mL)
Generic: Bupivacaine hydrochloride 0.5% and epinephrine 1:200,000 (10 mL, 30 mL)
Injection, solution:
Generic: Bupivacaine hydrochloride 0.25% and epinephrine 1:200,000 (50 mL)
Generic: Bupivacaine hydrochloride 0.5% and epinephrine 1:200,000 (50 mL)
Injection, solution [for dental use]:
Marcaine with Epinephrine: Bupivacaine hydrochloride 0.5% and epinephrine 1:200,000 (1.8 mL) [contains edetate calcium disodium, sodium metabisulfate]
Vivacaine: Bupivacaine hydrochloride 0.5% and epinephrine 1:200,000 (1.8 mL) [contains edetate calcium disodium, sodium metabisulfate]

Bupivacaine (Liposomal)

**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Suspension, Injection:
Exparel: 1.3% (10 mL, 20 mL)

Buprenorphine

**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Implant, Subcutaneous:
Probuphine Implant Kit: 74.2 mg (4 ea)
Patch Weekly, Transdermal:
Butrans: 5 mcg/hr (4 ea); 7.5 mcg/hr (4 ea); 10 mcg/hr (4 ea); 15 mcg/hr (4 ea); 20 mcg/hr (4 ea)
Solution, Injection:
Generic: 0.3 mg/mL (1 mL)
Solution Prefilled Syringe, Subcutaneous:
Sublocade: 100 mg/0.5 mL (0.5 mL); 300 mg/1.5 mL (1.5 mL)
Tablet Sublingual, Sublingual:
Generic: 2 mg, 8 mg

NONFORMULARY

Film, Buccal:
Belbuca: 75 mcg (60 ea); 150 mcg (60 ea); 300 mcg (60 ea); 450 mcg (60 ea); 600 mcg (60 ea); 750 mcg (60 ea); 900 mcg (60 ea) [contains

methylparaben, propylparaben, saccharin sodium, sodium benzoate; peppermint flavor]

Buprenorphine and Naloxone

**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Film, Buccal:
Bunavail: Buprenorphine 2.1 mg and naloxone 0.3 mg (30s); buprenorphine 4.2 mg and naloxone 0.7 mg (30s); buprenorphine 6.3 mg and naloxone 1 mg (30s) [citrus flavor]
Film, Sublingual:
Suboxone: Buprenorphine 2 mg and naloxone 0.5 mg (30s); buprenorphine 4 mg and naloxone 1 mg (30s); buprenorphine 8 mg and naloxone 2 mg (30s); buprenorphine 12 mg and naloxone 3 mg (30s) [lime flavor]
Tablet, Sublingual:
Zubsolv: Buprenorphine 0.7 mg and naloxone 0.18 mg; buprenorphine 1.4 mg and naloxone 0.36 mg; buprenorphine 2.9 mg and naloxone 0.71 mg; buprenorphine 5.7 mg and naloxone 1.4 mg; buprenorphine 8.6 mg and naloxone 2.1 mg; buprenorphine 11.4 mg and naloxone 2.9 mg [menthol flavor]
Generic: Buprenorphine 2 mg and naloxone 0.5 mg; buprenorphine 8 mg and naloxone 2 mg

BuPROPion

**DoD Uniform Formulary Outpatient Dosage Forms
BASIC CORE FORMULARY**

Tablet, Oral, as hydrochloride:
Generic: 75 mg, 100 mg
Tablet Extended Release 12 Hour, Oral, as hydrochloride:
Generic: 100 mg, 150 mg
Tablet Extended Release 24 Hour, Oral, as hydrochloride:
Generic: 150 mg, 300 mg

NONFORMULARY

Tablet Extended Release 24 Hour, Oral, as hydrobromide:
Aplenzin: 174 mg, 348 mg, 522 mg
Tablet Extended Release 24 Hour, Oral, as hydrochloride:
Forfivo XL: 450 mg

Burosumab

**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Solution, Subcutaneous [preservative free]:
Crysvita: 10 mg/mL (1 mL); 20 mg/mL (1 mL); 30 mg/mL (1 mL) [contains polysorbate 80]

BusPIRone

**DoD Uniform Formulary Outpatient Dosage Forms
BASIC CORE FORMULARY**

Tablet, Oral, as hydrochloride:
Generic: 5 mg, 10 mg, 15 mg
UNIFORM FORMULARY
Tablet, Oral, as hydrochloride:
Generic: 7.5 mg, 30 mg

Busulfan

**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Solution, Intravenous:
Busulfex: 6 mg/mL (10 mL)
Tablet, Oral:
Myleran: 2 mg

Butabarbital

**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Tablet, Oral, as sodium:
Butisol Sodium: 30 mg [scored]

Butalbital, Acetaminophen, and Caffeine

**DoD Uniform Formulary Outpatient Dosage Forms
BASIC CORE FORMULARY**

Tablet, Oral:
Esgic: Butalbital 50 mg, acetaminophen 325 mg, and caffeine 40 mg
Generic: Butalbital 50 mg, acetaminophen 325 mg, and caffeine 40 mg

UNIFORM FORMULARY

Capsule, Oral:
Generic: Butalbital 50 mg, acetaminophen 300 mg, and caffeine 40 mg
Generic: Butalbital 50 mg, acetaminophen 325 mg, and caffeine 40 mg
Solution, Oral:
Vanatol LQ: Butalbital 50 mg, acetaminophen 325 mg, and caffeine 40 mg per 15 mL (480 mL)
Vtol LQ: Butalbital 50 mg, acetaminophen 325 mg, and caffeine 40 mg per 15 mL (473 mL)

Butalbital, Acetaminophen, Caffeine, and Codeine

**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Capsule, Oral:
Butalbital 50 mg, acetaminophen 300 mg, caffeine 40 mg, and codeine phosphate 30 mg

BUTALBITAL, ACETAMINOPHEN, CAFFEINE, AND CODEINE

Butalbital 50 mg, acetaminophen 325 mg, caffeine 40 mg, and codeine phosphate 30 mg

Butalbital and Acetaminophen

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:

Allzital: Butalbital 25 mg and acetaminophen 325 mg

Butalbital 50 mg and acetaminophen 325 mg

NONFORMULARY

Tablet, Oral:

Butalbital 50 mg and acetaminophen 300 mg

Butalbital, Aspirin, and Caffeine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule, Oral:

Generic: Butalbital 50 mg, aspirin 325 mg, and caffeine 40 mg

Butalbital, Aspirin, Caffeine, and Codeine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule, Oral:

Generic: Butalbital 50 mg, aspirin 325 mg, caffeine 40 mg, and codeine phosphate 30 mg

Butenafine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Cream, External, as hydrochloride:

Lotrimin Ultra: 1% (30 g) [contains benzyl alcohol, cetyl alcohol, propylene glycol, sodium benzoate]

Lotrimin Ultra: 1% (12 g, 30 g) [contains benzyl alcohol, cetyl alcohol, propylene glycol, sodium benzoate, trolamine (triethanolamine)]

Mentax: 1% (15 g, 30 g) [contains benzyl alcohol, sodium benzoate]

Butoconazole

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Cream, Vaginal, as nitrate:

Gynazole-1: 2% (5 g) [contains edetate disodium, methylparaben, propylene glycol, propylparaben]

Butorphanol

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Injection, as tartrate:

Generic: 1 mg/mL (1 mL); 2 mg/mL (1 mL, 2 mL)

Solution, Nasal, as tartrate:

Generic: 10 mg/mL (2.5 mL)

C1 Inhibitor (Human)

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Kit, Intravenous:

Beriner: 500 units

Solution Reconstituted, Intravenous [preservative free]:

Cinryze: 500 units (1 ea)

NONFORMULARY

Solution Reconstituted, Subcutaneous:

Haegarda: 2000 units (1 ea); 3000 units (1 ea)

C1 Inhibitor (Recombinant)

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution Reconstituted, Intravenous [preservative free]:

Ruconest: 2100 units (1 ea) [contains rabbit protein]

Cabazitaxel

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Intravenous:

Jevtana: 60 mg/1.5 mL (1.5 mL) [contains alcohol, usp, polysorbate 80]

Cabergoline

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:

Generic: 0.5 mg

Cabotegravir and Rilpivirine

DoD Uniform Formulary Outpatient Dosage Forms

NOT COVERED

Suspension Extended Release, Intramuscular [preservative free]:

Cabenuva: Cabotegravir 400 mg and rilpivirine 600 mg per 2 mL (4 mL)

Cabotegravir 600 mg and rilpivirine 900 mg per 3 mL (6 mL)

Cabozantinib

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule, Oral [each package contains four blister cards; each card contains the following]:

Cometriq: 60 mg daily-dose: 20 mg (21s)

Cometriq: 100 mg daily-dose: 80 mg (7s) and 20 mg (7s)

Cometriq: 140 mg daily-dose: 80 mg (7s) and 20 mg (21s)

Tablet, Oral:

Cabometyx: 20 mg, 40 mg, 60 mg

Caffeine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Injection, as citrate [preservative free]:

Generic: 60 mg/3 mL (3 mL) [equivalent to 10 mg/mL caffeine base]

Solution, Injection [with sodium benzoate]:

Generic: Caffeine 125 mg/mL and sodium benzoate 125 mg/mL (2 mL)

Solution, Oral, as citrate [preservative free]:

Generic: 60 mg/3 mL (3 mL) [equivalent to 10 mg/mL caffeine base]

Tablet, Oral:

Generic: 200 mg

Calamine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Lotion, External:

Caladryl: Calamine 8% and pramoxine hydrochloride 1% (177 mL) [contains methylparaben, polysorbate 80, propylene glycol, propylparaben]

Calagesic: Calamine 8% and pramoxine hydrochloride 1% (177 mL) [contains alcohol, usp, methylparaben, polysorbate 80, propylene glycol, propylparaben]

Generic: 8% (180 mL); Calamine 8% and zinc oxide 8% (118 mL, 180 mL)

Suspension, External:

GoodSense Calamine: Calamine 8% and zinc oxide 8% (177 mL)

Calaspargase Pegol

DoD Uniform Formulary Outpatient Dosage Forms

NOT COVERED

Solution, Intravenous [preservative free]:

Asparlas: 3750 units/5 mL (5 mL)

Calcipotriene

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Cream, External:

Generic: 0.005% (60 g, 120 g)

Foam, External:

Sorilux: 0.005% (60 g, 120 g) [contains cetyl alcohol, edetate disodium, propylene glycol]

Ointment, External:

Generic: 0.005% (60 g, 120 g)

Solution, External:

Generic: 0.005% (60 mL)

Calcipotriene and Betamethasone

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Foam, External:

Enstilar: Calcipotriene 0.005% and betamethasone dipropionate 0.064% (60 g)

Ointment, External:

Generic: Calcipotriene 0.005% and betamethasone dipropionate 0.064% (60 g, 100 g)

Suspension, External:

Taclonex: Calcipotriene 0.005% and betamethasone dipropionate 0.064% (60 g, 120 g) [contains castor oil]

Calcitonin

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Injection:

Miacalcin: 200 units/mL (2 mL) [contains phenol]

Solution, Nasal:

Generic: 200 units/actuation (3.7 mL)

Calcitriol (Systemic)

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule, Oral:

Generic: 0.25 mcg, 0.5 mcg

Solution, Intravenous:

Generic: 1 mcg/mL (1 mL)

Solution, Oral:

Generic: 1 mcg/mL (15 mL)

Calcitriol (Topical)

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Ointment, External:

Generic: 3 mcg/g (100 g)

Calcium Acetate**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Capsule, Oral:

Generic: 667 mg

Solution, Oral:

Phoslyra: 667 mg/5 mL (473 mL) [contains methylparaben, propylene glycol]

Tablet, Oral:

Generic: 667 mg, 668 mg

Calcium and Vitamin D**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Caplet, Oral:

Citracal Maximum: Calcium 315 mg and vitamin D 250 units [gluten free]

Os-Cal Calcium + D3: Calcium 500 mg and vitamin D 200 units

Os-Cal Extra D3: Calcium 500 mg and vitamin D 600 units

Capsule, Oral:

Generic: Calcium 600 mg and vitamin D 100 units, Calcium 600 mg and vitamin D 400 units, Calcium 600 mg and vitamin D 500 units, Calcium 600 mg and vitamin D 1000 units

Tablet, Oral:

Calcet Petites: Calcium 200 mg and vitamin D 250 units [gluten free; contains tartrazine]

Citracal Petites: Calcium 200 mg and vitamin D 250 units [gluten free]

Citracal Regular: Calcium 250 mg and vitamin D 200 units [gluten free]

Generic: Calcium 250 mg and vitamin D 125 units; Calcium 315 mg and vitamin D 200 units; Calcium 315 mg and vitamin D 250 units; Calcium 500 mg and vitamin D 125 units; Calcium 500 mg and vitamin D 200 units; Calcium 500 mg and vitamin D 400 units; Calcium 500 mg and vitamin D 600 units; Calcium 600 mg and vitamin D 125 units; Calcium 600 mg and vitamin D 200 units; Calcium 600 mg and vitamin D 400 units; Calcium 600 mg and vitamin D 800 units

Tablet, Chewable, Oral:

Caltrate Gummy Bites: Calcium 250 mg and vitamin D 400 units

Caltrate 600+D3 Soft: Calcium 600 mg and vitamin D 800 units [contains soybean oil]

Generic: Calcium 500 mg and vitamin D 100 units; Calcium 500 mg and vitamin D 200 units; Calcium 500 mg and vitamin D 600 units; Calcium 600 mg and vitamin D 400 units

Calcium Carbonate**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Capsule, Oral:

Florical: 364 mg (elemental calcium 145 mg) and fluoride 3.75 mg

Powder, Oral:

Generic: Elemental calcium 800 mg/2 g (480 g)

Suspension, Oral:

Generic: 1250 mg (elemental calcium 500 mg) per 5 mL (5 mL, 473 mL, 500 mL)

Tablet, Oral:

Florical: 364 mg (elemental calcium 145 mg) and fluoride 3.75 mg

Generic: 648 mg, 1250 mg (elemental calcium 500 mg), 1500 mg (elemental calcium 600 mg)

Tablet, Oral [preservative free]:

Generic: 1250 mg (elemental calcium 500 mg), 1500 mg (elemental calcium 600 mg)

Tablet Chewable, Oral:

Cal-Mint: Elemental calcium 260 mg [animal products free, gelatin free, gluten free, lactose free, no artificial color(s), no artificial flavor(s), starch free, sugar free, yeast free]

Calci-Chew: 1250 mg (elemental calcium 500 mg) [cherry flavor]

Calcium Antacid Ultra Max St: 1000 mg [contains brilliant blue fcf (fd&c blue #1), fd&c red #40, fd&c yellow #6 (sunset yellow), soybeans (glycine max), tartrazine (fd&c yellow #5)]

Maalox: 600 mg [contains aspartame; wild berry flavor]

Maalox Childrens: 400 mg [contains aspartame; wild berry flavor]

Titrilac: 420 mg [low sodium, sugar free; contains saccharin]

Tums Chewy Delights: 1177 mg [contains fd&c red #40 aluminum lake, soybean lecithin; cherry flavor]

Tums Ultra 1000: 1000 mg

Generic: 500 mg, 750 mg, Elemental calcium 260 mg

Calcium Carbonate and Magnesium Hydroxide**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Liquid, Oral:

Geri-Lanta Supreme: Calcium carbonate 400 mg and magnesium hydroxide 135 mg per 5 mL (355 mL) [cherry flavor]

Mylanta Supreme: Calcium carbonate 400 mg and magnesium hydroxide 135 mg per 5 mL (360 mL, 720 mL) [cherry flavor]

Tablet, Chewable, Oral:

Mi-Acid Double Strength: Calcium carbonate 700 mg and magnesium hydroxide 300 mg

Calcium Carbonate and Simethicone**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Tablet, Chewable, Oral:

Alka-Seltzer Heartburn + Gas: Calcium carbonate 750 mg and simethicone 80 mg [tropical punch flavor]

Gas-X with Maalox Extra Strength: Calcium carbonate 500 mg and simethicone 125 mg [wild berry flavor]

Maalox Advanced Maximum Strength: Calcium carbonate 1000 mg and simethicone 60 mg [assorted fruit flavor, lemon flavor, wild berry flavor]

Maalox Junior Plus Antigas: Calcium carbonate 400 mg and simethicone 24 mg [wild berry flavor]

Calcium Chloride**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution, Intravenous:

Generic: 10% (10 mL)

Solution, Intravenous [preservative free]:

Generic: 10% (10 mL)

Calcium Citrate**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Capsule, Oral [preservative free]:

Cal-Citrate: 150 mg [dye free]

Granules, Oral:

Generic: 760 mg/3.5 g (480 g)

Tablet, Oral:

Generic: 250 mg, 950 mg, 1040 mg

Tablet, Oral [preservative free]:

Calcitrate: 950 mg [lactose free, milk derivatives/products, no artificial color(s), no artificial flavor(s), sodium free, soy free, sugar free, wheat free, yeast free]

Calcium Citrate and Vitamin D**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Tablet, Oral:

Generic: Calcium citrate 315 mg and vitamin D 200 units

Calcium Glubionate**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Syrup, Oral:

Calcionate: 1.8 g/5 mL (473 mL) [fruit flavor]

Calcium Gluconate**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Capsule, Oral [preservative free]:

Cal-Glu: 500 mg [dye free]

Solution, Intravenous:

Generic: 10% (10 mL, 50 mL, 100 mL)

Solution, Intravenous [preservative free]:

Generic: 10% (100 mL)

Tablet, Oral:

Generic: 50 mg, 500 mg

Calcium Lactate**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Capsule, Oral [preservative free]:

Cal-Lac: 500 mg [dye free]

Tablet, Oral:

Generic: 100 mg

Tablet, Oral [preservative free]:

Generic: 648 mg

Calfactant**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Suspension, Intratracheal:

Infasurf: 35 mg phospholipids and 0.7 mg protein per mL (3 mL, 6 mL)

Camphor**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Cream, External:

JointFlex: 3.1% (114 g) [contains disodium EDTA]

Gel, External:

Benadryl Anti-Itch Childrens: 0.45% (85 g) [contains benzyl alcohol, edetate disodium, menthol, SD alcohol 40B, trolamine (triethanolamine)]

Liquid, Inhalation:

Vicks Vapo Steam: 6.2% (236 mL) [contains alcohol, USP, menthol]

Camphor and Menthol**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Cream, External:

Soltice Quick-Rub: Camphor 5.1% and menthol 5.1% (40 g, 90 g)

Gel, External:

Camphotrex: Camphor 4% and menthol 10% (85 g)

CAMPHOR AND MENTHOL

Sombra Natural Pain Relieving: Camphor 3% and menthol 3% (85 g) [alcohol free]

Lotion, External:

DermaSarra Anti-Itch: Camphor 0.5% and menthol 0.5% (222 mL)

Men-Phor: Camphor 0.5% and menthol 0.5% (222 mL, 225 mL)

Sarna: Camphor 0.5% and menthol 0.5% (222 mL)

Ointment, External:

Mentholatum: Camphor 9% and menthol 1.3% (30 g, 90 g)

Camphor and Phenol

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Gel, External:

Campho-Phenique: Camphor 10.8% and phenol 4.7% (7 g, 14 g)

Liquid, External:

Generic: Camphor 10.8% and phenol 4.7% (45 mL)

Canakinumab

DoD Uniform Formulary Outpatient Dosage Forms

NOT COVERED

Solution, Subcutaneous:

Ilaris: 150 mg/mL (1 mL) [contains polysorbate 80]

Solution Reconstituted, Subcutaneous [preservative free]:

Ilaris: 180 mg (1 ea) [contains polysorbate 80]

Candesartan

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral, as cilexetil:

Generic: 4 mg, 8 mg, 16 mg, 32 mg

Candesartan and Hydrochlorothiazide

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:

Generic:

16/12.5: Candesartan cilexetil 16 mg and hydrochlorothiazide 12.5 mg

32/12.5: Candesartan cilexetil 32 mg and hydrochlorothiazide 12.5 mg

32/25: Candesartan cilexetil 32 mg and hydrochlorothiazide 25 mg

Candida albicans (Monilia)

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Intradermal:

Generic: (5 mL)

Cangrelor

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution Reconstituted, Intravenous:

Kengreal: 50 mg (1 ea)

Cannabidiol

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Oral:

Epidiolex: 100 mg/mL (100 mL) [contains alcohol, usp, sesame oil; strawberry flavor]

Capecitabine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:

Generic: 150 mg, 500 mg

Capreomycin

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution Reconstituted, Injection, as sulfate:

Capastat Sulfate: 1 g (1 ea)

Capsaicin

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Cream, External:

Capzasin-HP: 0.1% (42.5 g) [contains benzyl alcohol]

Capzasin-P: 0.035% (42.5 g) [contains benzyl alcohol]

Zostrix-HP: 0.1% (60 g) [contains benzyl alcohol]

Generic: 0.025% (60 g)

Gel, External:

Capzasin-P: 0.025% (42.5 g) [contains menthol]

Liquid, External:

Capzasin-P: 0.15% (29.5 mL)

Lotion, External:

DiabetAid Pain and Tingling Relief: 0.025% (120 mL)

Patch, External:

Alleve: 0.05% (15s) [contains menthol 5%]

Flexin: 0.0375% (15s) [contains menthol 5%]

Levatio: 0.03% (15s) [contains menthol 5%]

MenCaps: 0.0225% (15s) [contains menthol 4.5%]

Qutenza: 8% (1s, 2s) [contains metal; supplied with cleansing gel]

Releevia: 0.0375% (15s) [contains menthol 5%]

Releevia MC: 0.0375% (15s) [contains menthol 5%]

Renovo: 0.0375% (15s) [contains menthol 5%]

Salonpas Gel-Patch Hot: 0.025% (3s, 6s) [contains menthol]

Captopril

DoD Uniform Formulary Outpatient Dosage Forms

BASIC CORE FORMULARY

Tablet, Oral:

Generic: 12.5 mg, 25 mg, 50 mg, 100 mg

Captopril and Hydrochlorothiazide

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:

Generic:

25/15: Captopril 25 mg and hydrochlorothiazide 15 mg

25/25: Captopril 25 mg and hydrochlorothiazide 25 mg

50/15: Captopril 50 mg and hydrochlorothiazide 15 mg

50/25: Captopril 50 mg and hydrochlorothiazide 25 mg

Carbachol

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Intraocular:

Miostat: 0.01% (1.5 mL)

CarBAMazepine

DoD Uniform Formulary Outpatient Dosage Forms

BASIC CORE FORMULARY

Suspension, Oral:

Generic: 100 mg/5 mL (10 mL, 450 mL)

Tablet, Oral:

Generic: 200 mg

Tablet, Chewable, Oral:

Generic: 100 mg

Tablet Extended Release 12 Hour, Oral:

Generic: 400 mg

UNIFORM FORMULARY

Capsule Extended Release 12 Hour, Oral:

Generic: 100 mg, 200 mg, 300 mg

Carbamide Peroxide

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Mouth/Throat:

Gly-Oxide: 10% (15 mL, 60 mL) [contains propylene glycol]

Solution, Otic:

Auraphene-B: 6.5% (15 mL)

E-R-O Ear Drops: 6.5% (15 mL) [contains glycerin]

E-R-O Ear Wax Removal System: 6.5% (15 mL)

Ear Drops: 6.5% (15 mL) [contains propylene glycol]

Earwax Treatment Drops: 6.5% (15 mL) [contains glycerin, propylene glycol]

Carbidopa

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:

Generic: 25 mg

Carbidopa and Levodopa

DoD Uniform Formulary Outpatient Dosage Forms

BASIC CORE FORMULARY

Tablet, Oral:

Generic: 10/100: Carbidopa 10 mg and levodopa 100 mg [scored]

Generic: 25/100: Carbidopa 25 mg and levodopa 100 mg [scored]

Generic: 25/250: Carbidopa 25 mg and levodopa 250 mg [scored]

UNIFORM FORMULARY

Capsule Extended Release, Oral:

Rytary: 23.75/95: Carbidopa 23.75 mg and levodopa 95 mg

Rytary: 36.25/145: Carbidopa 36.25 mg and levodopa 145 mg

Rytary: 48.75/195: Carbidopa 48.75 mg and levodopa 195 mg

Rytary: 61.25/245: Carbidopa 61.25 mg and levodopa 245 mg

Suspension, Enteral:

Duopa: Carbidopa 4.63 mg and levodopa 20 mg per 1 mL (100 mL)

Tablet Disintegrating, Oral:

Generic: 10/100: Carbidopa 10 mg and levodopa 100 mg

Generic: 25/100: Carbidopa 25 mg and levodopa 100 mg

Generic: 25/250: Carbidopa 25 mg and levodopa 250 mg

Tablet Extended Release, Oral:

Generic: 25/100: Carbidopa 25 mg and levodopa 100 mg;

Generic: 50/200: Carbidopa 50 mg and levodopa 200 mg

Carbinoxamine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Oral, as maleate:

Generic: 4 mg/5 mL (118 mL, 473 mL)

Suspension Extended Release, Oral, as maleate:

Karbinal ER: 4 mg/5 mL (480 mL) [contains methylparaben, polysorbate 80, propylparaben, sodium metabisulfite; strawberry-banana flavor]

Tablet, Oral, as maleate:

Generic: 4 mg, 6 mg

CARBOplatin

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Intravenous:

Generic: 50 mg/5 mL (5 mL); 150 mg/15 mL (15 mL); 450 mg/45 mL (45 mL); 600 mg/60 mL (60 mL)

Solution, Intravenous [preservative free]:

Generic: 50 mg/5 mL (5 mL); 150 mg/15 mL (15 mL); 450 mg/45 mL (45 mL); 600 mg/60 mL (60 mL)

Carboprost Tromethamine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Intramuscular [strength expressed as base]:

Hemabate: 250 mcg/mL (1 mL) [contains benzyl alcohol]

Carboxymethylcellulose

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Gel, Ophthalmic, as sodium:

GenTeal: 0.25% (15 mL, 25 mL)

Refresh Optive: 1% (10 mL)

Theratears: 1% (28 ea) [contains calcium chloride anhydrous, magnesium chloride, potassium chloride, sodium bicarbonate, sodium chloride, sodium phosphate]

Gel, Ophthalmic, as sodium [preservative free]:

Biolle Gel Tears: 1% (1 ea)

Liquid, Ophthalmic, as sodium:

Sterile Lubricant: 0.7% (15 mL)

Solution, Ophthalmic, as sodium:

Lubricating Plus Eye Drops: 0.5% (30 ea, 50 ea)

Refresh Liquigel: 1% (15 mL, 30 mL)

Refresh Optive: 0.5% (15 mL)

Refresh Optive Advanced: 0.5% (10 mL)

Refresh Plus: 0.5% (30 ea, 50 ea, 70 ea)

Refresh Tears: 0.5% (15 mL, 30 mL)

Theratears: 0.25% (15 mL, 30 mL) [contains calcium chloride dihydrate, magnesium chloride, potassium chloride, sodium bicarbonate, sodium chloride, sodium phosphate, monobasic monohydrate]

Ultra Fresh: 0.5% (15 mL, 30 mL)

Solution, Ophthalmic, as sodium [preservative free]:

Biolle Tears: 0.5% (0.6 mL)

Refresh Celluvisc: 1% (30 ea)

Refresh Optive Advanced: 0.5% (1 ea)

Refresh Optive Sensitive: 0.5% (1 ea)

Refresh Plus: 0.5% (30 ea, 50 ea)

Theratears: 0.25% (32 ea) [contains calcium chloride dihydrate, magnesium chloride, potassium chloride, sodium bicarbonate, sodium chloride, sodium phosphate, monobasic monohydrate]

Cardioplegic Solution

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Perfusion:

Generic: (1000 mL)

Carfilzomib

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution Reconstituted, Intravenous:

Kyprolis: 30 mg (1 ea); 60 mg (1 ea)

Carglumic Acid

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:

Carbaglu: 200 mg [scored]

Carisoprodol

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:

Generic: 250 mg, 350 mg

Carisoprodol and Aspirin

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:

Generic: Carisoprodol 200 mg and aspirin 325 mg

Carisoprodol, Aspirin, and Codeine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:

Generic: Carisoprodol 200 mg, aspirin 325 mg, and codeine phosphate 16 mg

Carmustine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution Reconstituted, Intravenous:

BiCNU: 100 mg (1 ea) [contains alcohol, usp]

Wafer, Implant:

Gladel Wafer: 7.7 mg (8 ea) [contains polifeprosan 20]

Carteolol (Ophthalmic)

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Ophthalmic, as hydrochloride:

Generic: 1% (5 mL, 10 mL, 15 mL)

Carvedilol

DoD Uniform Formulary Outpatient Dosage Forms

BASIC CORE FORMULARY

Tablet, Oral:

Generic: 3.125 mg, 6.25 mg, 12.5 mg, 25 mg

UNIFORM FORMULARY

Capsule Extended Release 24 Hour, Oral, as phosphate:

Generic: 10 mg, 20 mg, 40 mg, 80 mg

Casimersen

DoD Uniform Formulary Outpatient Dosage Forms

NOT COVERED

Solution, Intravenous [preservative free]:

Amondys 45: 100 mg/2 mL (2 mL)

Caspofungin

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution Reconstituted, Intravenous, as acetate:

Candidas: 50 mg (1 ea); 70 mg (1 ea)

Castor Oil

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Oil, Oral:

Generic: (59 mL, 118 mL, 177 mL, 473 mL)

Cefaclor

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule, Oral:

Generic: 250 mg, 500 mg

Suspension Reconstituted, Oral:

Generic: 125 mg/5 mL (150 mL); 250 mg/5 mL (150 mL); 375 mg/5 mL (100 mL)

Tablet Extended Release 12 Hour, Oral:

Generic: 500 mg

Cefadroxil

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule, Oral:

Generic: 500 mg

Suspension Reconstituted, Oral:

Generic: 250 mg/5 mL (50 mL, 100 mL); 500 mg/5 mL (75 mL, 100 mL)

Tablet, Oral:

Generic: 1 g

CeFAZolin

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Intravenous:

Generic: 1 g (50 mL); 2 g (100 mL)

Solution Reconstituted, Injection:

Generic: 500 mg (1 ea); 1 g (1 ea); 10 g (1 ea); 20 g (1 ea); 100 g (1 ea); 300 g (1 ea)

Solution Reconstituted, Injection [preservative free]:

Generic: 500 mg (1 ea); 1 g (1 ea); 10 g (1 ea)

Solution Reconstituted, Intravenous:

Generic: 1 g (1 ea); 2 g (1 ea)

Cefdinir

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule, Oral:

Generic: 300 mg

Suspension Reconstituted, Oral:

Generic: 125 mg/5 mL (60 mL, 100 mL); 250 mg/5 mL (60 mL, 100 mL)

CEFDITOREN

Cefditoren

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:

Generic: 200 mg, 400 mg

Cefepime

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Intravenous, as hydrochloride:

Generic: 1 g/50 mL (50 mL); 2% (100 mL)

Solution Reconstituted, Injection, as hydrochloride:

Generic: 1 g (1 ea); 2 g (1 ea)

Solution Reconstituted, Intravenous, as hydrochloride:

Generic: 1 g/50 mL (1 ea); 2 g/50 mL (1 ea)

Cefixime

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule, Oral:

Suprax: 400 mg

Suspension Reconstituted, Oral:

Suprax: 500 mg/5 mL (10 mL, 20 mL) [contains sodium benzoate; strawberry flavor]

Generic: 100 mg/5 mL (50 mL); 200 mg/5 mL (50 mL, 75 mL)

Tablet Chewable, Oral:

Suprax: 100 mg, 200 mg [contains aspartame]

Cefotaxime

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution Reconstituted, Injection:

Generic: 500 mg (1 ea); 1 g (1 ea); 2 g (1 ea); 10 g (1 ea)

CefoTETan

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution Reconstituted, Injection:

Generic: 1 g (1 ea); 2 g (1 ea); 10 g (1 ea)

Solution Reconstituted, Intravenous:

Generic: 1 g (1 ea); 2 g (1 ea)

CefOXitin

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution Reconstituted, Injection:

Generic: 10 g (1 ea)

Solution Reconstituted, Injection [preservative free]:

Generic: 10 g (1 ea)

Solution Reconstituted, Intravenous:

Generic: 1 g (1 ea); 2 g (1 ea)

Solution Reconstituted, Intravenous [preservative free]:

Generic: 1 g (1 ea); 2 g (1 ea)

Cefpodoxime

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Suspension Reconstituted, Oral:

Generic: 50 mg/5 mL (50 mL, 100 mL); 100 mg/5 mL (50 mL, 100 mL)

Tablet, Oral:

Generic: 100 mg, 200 mg

Cefprozil

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Suspension Reconstituted, Oral:

Generic: 125 mg/5 mL (50 mL, 75 mL, 100 mL); 250 mg/5 mL (50 mL, 75 mL, 100 mL)

Tablet, Oral:

Generic: 250 mg, 500 mg

Ceftaroline Fosamil

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution Reconstituted, Intravenous:

Teflaro: 400 mg (1 ea); 600 mg (1 ea)

CeftAZidime

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Intravenous, as sodium [strength expressed as base]:

Fortaz in D5W: 1 g (50 mL); 2 g (50 mL)

Tazicef: 1 g/50 mL (50 mL)

Solution Reconstituted, Injection:

Fortaz: 500 mg (1 ea)

Generic: 1 g (1 ea); 2 g (1 ea); 6 g (1 ea); 100 g (1 ea)

Solution Reconstituted, Injection [preservative free]:

Generic: 1 g (1 ea); 2 g (1 ea); 6 g (1 ea)

Solution Reconstituted, Intravenous:

Generic: 1 g/50 mL (1 ea); 2 g/50 mL (1 ea)

Ceftazidime and Avibactam

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution Reconstituted, Intravenous:

Avycaz: 2.5 g: Ceftazidime 2 g and avibactam 0.5 g (1 ea)

Ceftibuten

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule, Oral:

Generic: 400 mg

Suspension Reconstituted, Oral:

Generic: 180 mg/5 mL (60 mL)

Ceftolozane and Tazobactam

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution Reconstituted, Intravenous [preservative free]:

Zerbaxa: 1.5 g: Ceftolozane 1 g and tazobactam 0.5 g (1 ea)

CefTRIAxone

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Intravenous:

Generic: 20 mg/mL (50 mL); 40 mg/mL (50 mL)

Solution Reconstituted, Injection:

Generic: 250 mg (1 ea); 500 mg (1 ea); 1 g (1 ea); 2 g (1 ea); 100 g (1 ea)

Solution Reconstituted, Intravenous:

Generic: 1 g (1 ea); 2 g (1 ea); 10 g (1 ea)

Cefuroxime

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Intravenous, as sodium [strength expressed as base]:

Zinacef in Sterile Water: 1.5 g (50 mL)

Solution Reconstituted, Injection, as sodium [strength expressed as base]:

Generic: 750 mg (1 ea); 1.5 g (1 ea); 7.5 g (1 ea); 75 g (1 ea); 225 g (1 ea)

Solution Reconstituted, Intravenous, as sodium [strength expressed as base]:

Zinacef: 750 mg (1 ea)

Generic: 1.5 g (1 ea)

Suspension Reconstituted, Oral, as axetil [strength expressed as base]:

Ceftin: 125 mg/5 mL (100 mL); 250 mg/5 mL (50 mL, 100 mL) [contains aspartame; tutti-frutti flavor]

Tablet, Oral, as axetil [strength expressed as base]:

Generic: 250 mg, 500 mg

Celecoxib

DoD Uniform Formulary Outpatient Dosage Forms

BASIC CORE FORMULARY

Capsule, Oral:

Generic: 50 mg, 100 mg, 200 mg, 400 mg

UNIFORM FORMULARY

Capsule, Oral:

Celebrex: 50 mg, 100 mg, 200 mg, 400 mg

Cellulose (Oxidized Regenerated)

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Pad, External:

Interceed: (10 ea)

Surgicel SNoW 1"x2": (10 ea)

Surgicel SNoW 2"x4": (10 ea)

Surgicel SNoW 4"x4": (10 ea)

Cemiplimab

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Intravenous [preservative free]:

Libtayo: 350 mg/7 mL (7 mL) [contains polysorbate 80]

Cenegermin

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Ophthalmic [preservative free]:

Oxervate: 0.002% (1 mL)

Cenobamate

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:

Xcopri: 50 mg, 100 mg, 150 mg, 200 mg

Tablet Therapy Pack, Oral:

Xcopri: 14 x 12.5 MG & 14 x 25 MG (28 ea)

Xcopri: 14 x 50 MG & 14 x 100 MG (28 ea)

Xcopri: 14 x 150 MG & 14 x 200 MG (28 ea)

Xcopri (250 MG Daily Dose): 50 & 200 MG (56 ea)

Xcopri (350 MG Daily Dose): 150 & 200 MG (56 ea)

Centruroides Immune F(ab')₂ (Equine)**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Solution Reconstituted, Intravenous [preservative free]:
Anascorp: (1 ea)

Cephalexin**DoD Uniform Formulary Outpatient Dosage Forms
BASIC CORE FORMULARY**

Capsule, Oral:
Generic: 250 mg, 500 mg
Suspension Reconstituted, Oral:
Generic: 250 mg/5 mL (100 mL, 200 mL)

UNIFORM FORMULARY

Capsule, Oral:
Daxbia: 333 mg
Generic: 750 mg

Ceritinib**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Tablet, Oral:
Zykadia: 150 mg

Cerliponase Alfa**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Solution, Intraventric [preservative free]:
Brineura: 150 mg/5 mL (1 ea)

Cetirizine and Pseudoephedrine**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Tablet, Extended Release, Oral:
Generic: Cetirizine hydrochloride 5 mg and pseudoephedrine hydrochloride 120 mg

Cetirizine (Systemic)**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Capsule, Oral, as hydrochloride:
ZyrTEC Allergy: 10 mg
Solution, Oral, as hydrochloride:
Generic: 5 mg/5 mL (120 mL, 473 mL)
Syrup, Oral, as hydrochloride:
Generic: 5 mg/5 mL (120 mL, 480 mL)
Tablet, Oral, as hydrochloride:
Generic: 5 mg, 10 mg
Tablet Chewable, Oral, as hydrochloride:
Generic: 5 mg, 10 mg
Tablet Dispersible, Oral, as hydrochloride:
ZyrTEC Allergy: 10 mg
ZyrTEC Allergy Childrens: 10 mg [citrus flavor]

Cetorelix**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Kit, Subcutaneous:
Cetrotide: 0.25 mg [contains mannitol]

Cetuximab**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Solution, Intravenous [preservative free]:
Erbix: 100 mg/50 mL (50 mL); 200 mg/100 mL (100 mL) [contains galactose-alpha-1,3-galactose]

Cevimeline**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Capsule, Oral, as hydrochloride:
Generic: 30 mg

Charcoal, Activated**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Liquid, Oral:
Actidose-Aqua: 15 g/72 mL (72 mL); 25 g/120 mL (120 mL); 50 g/240 mL (240 mL) [sweet flavor]
Actidose/Sorbitol: 25 g/120 mL (120 mL); 50 g/240 mL (240 mL) [sweet flavor]
Kerr Insta-Char: 25 g/120 mL (120 mL); 50 g/240 mL (240 mL) [contains fd&c red #40, methylparaben sodium, propylene glycol, propylparaben sodium, sodium benzoate; cherry flavor]
Kerr Insta-Char: 50 g/240 mL (240 mL) [contains propylene glycol]
Kerr Insta-Char in Sorbitol: 25 g/120 mL (120 mL); 50 g/240 mL (240 mL) [contains fd&c red #40, methylparaben sodium, propylene glycol, propylparaben sodium, sodium benzoate; cherry flavor]
Suspension, Oral:
Char-Flo with Sorbitol: 25 g (120 mL)

Suspension Reconstituted, Oral:
EZ Char: 25 g (1 ea) [contains bentonite]

Chenodiol**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Tablet, Oral:
Chenodal: 250 mg

Chlophedianol and Dexbrompheniramine**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Solution, Oral:
Chlo Hist: Chlophedianol hydrochloride 12.5 mg and dexbrompheniramine maleate 1 mg per 5 mL (473 mL) [alcohol free, dye free, gluten free, sugar free; contains propylene glycol, saccharin sodium; grape flavor]

Chlorambucil**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Tablet, Oral:
Leukeran: 2 mg

Chloramphenicol (Systemic)**DoD Uniform Formulary Outpatient Dosage Forms
NOT COVERED**

Solution Reconstituted, Intravenous:
Generic: 1 g (1 ea)

Chlordiazepoxide**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Capsule, Oral, as hydrochloride:
Generic: 5 mg, 10 mg, 25 mg

Chlorhexidine Gluconate (Oral)**DoD Uniform Formulary Outpatient Dosage Forms
BASIC CORE FORMULARY**

Solution, Mouth/Throat:
Generic: 0.12% (15 mL, 473 mL, 480 mL)

Chlorhexidine Gluconate (Topical)**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Liquid, External:
Generic: 4% (118 mL, 237 mL, 473 mL, 946 mL, 3800 mL)
Miscellaneous, External:
Tegaderm CHG Dressing: (Dressing) (1 ea)
Pad, External:
Generic: 2% (2 ea, 6 ea)
Solution, External:
Antiseptic Skin Cleanser: 4% (118 mL, 237 mL) [dye free; contains isopropyl alcohol]
Dyna-Hex 2: 2% (473 mL) [contains isopropyl alcohol]

Chlorprocaine**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Solution, Injection, as hydrochloride:
Nesacaine: 1% (30 mL); 2% (30 mL) [contains disodium edta, methylparaben]
Solution, Injection, as hydrochloride [preservative free]:
Nesacaine-MPF: 2% (20 mL); 3% (20 mL) [methylparaben free]

Chloroquine**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Tablet, Oral, as phosphate:
Generic: 250 mg [equivalent to chloroquine base 150 mg], 500 mg [equivalent to chloroquine base 300 mg]

Chlorothiazide**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Solution Reconstituted, Intravenous, as sodium [strength expressed as base]:
Generic: 500 mg (1 ea)
Solution Reconstituted, Intravenous, as sodium [strength expressed as base, preservative free]:
Generic: 500 mg (1 ea)
Suspension, Oral:
Diuril: 250 mg/5 mL (237 mL) [contains alcohol, usp, benzoic acid, methylparaben, propylparaben, saccharin sodium]
Tablet, Oral:
Generic: 250 mg, 500 mg

Chlorpheniramine**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Liquid, Oral, as maleate:
Ed ChlorPed: 2 mg/mL (60 mL) [contains fd&c red #40, propylene glycol, saccharin sodium, sodium benzoate; cotton candy flavor]

CHLORPHENIRAMINE

Syrup, Oral, as maleate:

Aller-Chlor: 2 mg/5 mL (120 mL) [contains alcohol, usp, fd&c yellow #6 (sunset yellow), menthol, methylparaben, propylene glycol, propylparaben]

Chlor-Trimeton: 2 mg/5 mL (120 mL) [contains alcohol, usp]

Ed Chlorped Jr: 2 mg/5 mL (118 mL, 473 mL) [alcohol free, sugar free; contains fd&c red #40, methylparaben, propylene glycol, propylparaben; cherry flavor]

Tablet, Oral, as maleate:

Generic: 4 mg

Tablet Extended Release, Oral, as maleate:

Generic: 12 mg

Chlorpheniramine and Acetaminophen

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:

Generic: Chlorpheniramine maleate 2 mg and acetaminophen 325 mg

Chlorpheniramine and Phenylephrine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Liquid, Oral:

Dallergy: Chlorpheniramine maleate 1 mg and phenylephrine hydrochloride 2.5 mg per 1 mL (30 mL) [alcohol free, sugar free; contains propylene glycol, saccharin sodium; peach flavor]

Ed A-Hist: Chlorpheniramine maleate 4 mg and phenylephrine hydrochloride 10 mg per 5 mL (473 mL) [gluten free, sugar free; contains alcohol, usp, propylene glycol, saccharin sodium, sodium benzoate; grape flavor]

Ed ChlorPed D: Chlorpheniramine maleate 2 mg and phenylephrine hydrochloride 5 mg per 1 mL (60 mL) [alcohol free, gluten free, sugar free; contains methylparaben, propylene glycol, propylparaben; apple sauce flavor]

NoHist-LQ: Chlorpheniramine maleate 4 mg and phenylephrine hydrochloride 10 mg per 5 mL (473 mL) [alcohol free, sugar free; contains edetate disodium, methylparaben, propylene glycol, propylparaben, saccharin calcium; bubble-gum flavor]

Tablet, Oral:

Ed A-Hist: Chlorpheniramine maleate 4 mg and phenylephrine hydrochloride 10 mg [scored]

Chlorpheniramine and Pseudoephedrine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Liquid, Oral:

LoHist-D: Chlorpheniramine maleate 2 mg and pseudoephedrine hydrochloride 30 mg per 5 mL (473 mL) [dye free, ethanol free, sugar free; cherry flavor]

Tablet, Oral:

Generic: Chlorpheniramine maleate 4 mg and pseudoephedrine hydrochloride 60 mg

Chlorpheniramine, Phenylephrine, and Dextromethorphan

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Liquid, Oral:

De-Chlor DM: Chlorpheniramine maleate 2 mg, phenylephrine hydrochloride 10 mg, and dextromethorphan hydrobromide 15 mg per 5 mL (473 mL) [dye free, ethanol free, sugar free; contains propylene glycol; strawberry flavor]

Ed A-Hist DM: Chlorpheniramine maleate 4 mg, phenylephrine hydrochloride 10 mg, and dextromethorphan hydrobromide 15 mg per 5 mL (473 mL) [gluten free, sugar free; contains propylene glycol; banana flavor]

Father John's Plus: Chlorpheniramine maleate 2 mg, phenylephrine hydrochloride 5 mg, and dextromethorphan hydrobromide 5 mg per 15 mL (118 mL) [ethanol free]

NoHist DM: Chlorpheniramine maleate 4 mg, phenylephrine hydrochloride 10 mg, and dextromethorphan hydrobromide 15 mg per 5 mL (473 mL) [dye free, ethanol free, sugar free; contains propylene glycol; grape flavor]

Norel CS: Chlorpheniramine maleate 4 mg, phenylephrine hydrochloride 10 mg, and dextromethorphan hydrobromide 12.5 mg per 5 mL (473 mL) [dye free, ethanol free, sugar free; contains propylene glycol; grape flavor]

Liquid, Oral [drops]:

Cardac DM: Chlorpheniramine maleate 1 mg, phenylephrine hydrochloride 3.5 mg, and dextromethorphan hydrobromide 3 mg per 1 mL (30 mL) [ethanol free, gluten free, sugar free; contains propylene glycol, sodium benzoate; grape flavor]

Tablet, Oral:

Ed A-Hist: Chlorpheniramine maleate 4 mg, phenylephrine hydrochloride 10 mg, and dextromethorphan hydrobromide 10 mg

Chlorpheniramine, Pseudoephedrine, and Codeine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Liquid, Oral:

Phenylhistine DH: Chlorpheniramine maleate 2 mg, pseudoephedrine hydrochloride 30 mg, and codeine phosphate 10 mg per 5 mL (120 mL, 480 mL) [contains ethanol 5.3%, menthol, sodium benzoate]

Chlorpheniramine, Pseudoephedrine, and Dextromethorphan

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Liquid, Oral:

Kidkare Children's Cough/Cold: Chlorpheniramine maleate 1 mg, pseudoephedrine hydrochloride 15 mg, and dextromethorphan hydrobromide 5 mg per 5 mL (118 mL) [ethanol free; contains propylene glycol and sodium benzoate; cherry flavor]

Maxichlor PSE DM: Chlorpheniramine maleate 4 mg, pseudoephedrine hydrochloride 20 mg, and dextromethorphan hydrobromide 20 mg per 5 mL (473 mL) [sugar free; contains propylene glycol; vanilla flavor]

Pedia Relief Cough-Cold: Chlorpheniramine maleate 1 mg, pseudoephedrine hydrochloride 15 mg, and dextromethorphan hydrobromide 5 mg per 5 mL (120 mL) [ethanol free; contains propylene glycol and sodium benzoate; cherry flavor]

Pediatric Cough & Cold: Chlorpheniramine maleate 1 mg, pseudoephedrine hydrochloride 15 mg, and dextromethorphan hydrobromide 5 mg per 5 mL (120 mL) [ethanol free; contains propylene glycol, sodium benzoate; wild cherry flavor]

Rescon DM: Chlorpheniramine maleate 2 mg, pseudoephedrine hydrochloride 30 mg, and dextromethorphan hydrobromide 10 mg per 5 mL (120 mL, 480 mL) [dye free, ethanol free, sugar free; cherry flavor]

Tablet, Oral:

Generic: Chlorpheniramine maleate 4 mg, pseudoephedrine hydrochloride 60 mg, and dextromethorphan hydrobromide 20 mg

ChlorproMAZINE

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Injection, as hydrochloride:

Generic: 25 mg/mL (1 mL); 50 mg/2 mL (2 mL)

Tablet, Oral, as hydrochloride:

Generic: 10 mg, 25 mg, 50 mg, 100 mg, 200 mg

ChlorproPAMIDE

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:

Generic: 100 mg, 250 mg

Chlorthalidone

DoD Uniform Formulary Outpatient Dosage Forms

BASIC CORE FORMULARY

Tablet, Oral:

Generic: 25 mg, 50 mg

Chlorzoxazone

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:

Lorzone: 375 mg, 750 mg [contains sodium benzoate]

Generic: 500 mg

Cholecalciferol

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule, Oral:

Decara: 25,000 units [contains soybean oil]

Dialyvit Vitamin D 5000: 5000 units

Pronutrients Vitamin D3: 1000 units [contains soybean oil]

Generic: 10,000 units, 50,000 units

Capsule, Oral [preservative free]:

D3-50: 50,000 units [dairy free, egg free, fish derivatives, gluten free, kosher certified, no artificial color(s), nut free, soy free, sugar free, wheat free, yeast free]

Generic: 2000 units, 5000 units

Liquid, Oral:

Bio-D-Mulsion Forte: 2000 units/0.03 mL (30 mL) [contains sesame oil]

Generic: 400 units/mL (50 mL, 52.5 mL)

Liquid, Oral [preservative free]:

Generic: 5000 units/mL (52.5 mL)

Tablet, Oral:

Dialyvit Vitamin D3 Max: 50,000 units [scored]

Generic: 400 units, 1000 units, 2000 units, 3000 units, 5000 units

Tablet, Oral [preservative free]:

Generic: 400 units, 1000 units, 2000 units, 5000 units

Tablet Chewable, Oral:

Generic: 400 units

Cholera Vaccine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Suspension Reconstituted, Oral:

Vaxchora: *Vibrio cholerae* 4x10⁸ to 2x10⁹ CFU (100 mL)

Cholestyramine Resin

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Packet, Oral:

Generic: 4 g (1 ea, 60 ea)

Powder, Oral:

Generic: 4 g/dose (210 g, 239.4 g, 378 g)

Cholic Acid**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Capsule, Oral:

Cholbam: 50 mg, 250 mg

Choline Magnesium Trisalicylate**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Liquid, Oral:

Generic: 500 mg/5 mL (240 mL)

Chorionic Gonadotropin (Human)**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution Reconstituted, Intramuscular:

Generic: 10,000 units (1 ea)

Chorionic Gonadotropin (Recombinant)**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Injectable, Subcutaneous:

Ovidrel: 250 mcg/0.5 mL (0.5 mL)

Ciclopirox**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Kit, External:

Cicloclan Solution: 8% [contains edetate disodium, isopropyl alcohol, menthol]

Ciclopirox Treatment: 8% [contains edetate disodium, isopropyl alcohol, menthol]

Solution, External:

Generic: 8% (6.6 mL)

NONFORMULARY

Cream, External, as olamine [strength expressed as base]:

Generic: 0.77% (15 g, 30 g, 90 g)

Gel, External:

Generic: 0.77% (30 g, 45 g, 100 g)

Kit, External:

Cicloclan Cream: 0.77% [contains benzyl alcohol, cetyl alcohol, edetate disodium, propylene glycol]

Loprox: 0.77% [contains benzyl alcohol, cetyl alcohol]

Shampoo, External:

Loprox: 1% (120 mL)

Generic: 1% (120 mL)

Suspension, External, as olamine [strength expressed as base]:

Generic: 0.77% (30 mL, 60 mL)

Cidofovir**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution, Intravenous [preservative free]:

Generic: 75 mg/mL (5 mL)

Cilostazol**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Tablet, Oral:

Generic: 50 mg, 100 mg

Cimetidine**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution, Oral, as hydrochloride [strength expressed as base]:

Generic: 300 mg/5 mL (237 mL, 240 mL)

Tablet, Oral:

Generic: 200 mg, 300 mg, 400 mg, 800 mg

Cinacalcet**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Tablet, Oral:

Sensipar: 30 mg, 60 mg, 90 mg

Ciprofloxacin and Dexamethasone**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Suspension, otic:

Ciprodex: Ciprofloxacin 0.3% and dexamethasone 0.1% (7.5 mL) [contains benzalkonium chloride]

Ciprofloxacin and Fluocinolone**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution, Otic [preservative free]:

Otovel: Ciprofloxacin 0.3% and fluocinolone acetonide 0.025% (14 ea) [contains polysorbate 80]

Ciprofloxacin and Hydrocortisone**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Suspension, otic:

Cipro HC: Ciprofloxacin hydrochloride 0.2% and hydrocortisone 1% (10 mL) [contains benzyl alcohol]

Ciprofloxacin (Ophthalmic)**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Ointment, Ophthalmic, as hydrochloride:

Ciloxan: 0.3% (3.5 g)

Solution, Ophthalmic, as hydrochloride:

Generic: 0.3% (2.5 mL, 5 mL, 10 mL)

Ciprofloxacin (Otic)**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Ointment, Ophthalmic, as hydrochloride:

Ciloxan: 0.3% (3.5 g)

Solution, Ophthalmic, as hydrochloride:

Generic: 0.3% (2.5 mL, 5 mL, 10 mL)

Ciprofloxacin (Systemic)**DoD Uniform Formulary Outpatient Dosage Forms****BASIC CORE FORMULARY**

Suspension Reconstituted, Oral:

Generic: 250 mg/5 mL (100 mL)

Tablet, Oral, as hydrochloride [strength expressed as base]:

Generic: 100 mg, 250 mg, 500 mg, 750 mg

UNIFORM FORMULARY

Solution, Intravenous:

Generic: 200 mg/100 mL (100 mL); 400 mg/200 mL (200 mL)

Solution, Intravenous [preservative free]:

Generic: 200 mg/20 mL (20 mL); 200 mg/100 mL (100 mL); 400 mg/40 mL (40 mL); 400 mg/200 mL (200 mL)

Tablet Extended Release 24 Hour, Oral, as base and hydrochloride [strength expressed as base]:

Generic: 500 mg, 1000 mg

Cisatracurium**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Ointment, Ophthalmic, as hydrochloride:

Ciloxan: 0.3% (3.5 g)

Solution, Ophthalmic, as hydrochloride:

Generic: 0.3% (2.5 mL, 5 mL, 10 mL)

CISplatin**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution, Intravenous:

Generic: 50 mg/50 mL (50 mL); 100 mg/100 mL (100 mL); 200 mg/200 mL (200 mL)

Solution, Intravenous [preservative free]:

Generic: 50 mg/50 mL (50 mL); 100 mg/100 mL (100 mL); 200 mg/200 mL (200 mL)

Citalopram**DoD Uniform Formulary Outpatient Dosage Forms****BASIC CORE FORMULARY**

Solution, Oral:

Generic: 10 mg/5 mL (240 mL)

Tablet, Oral:

Generic: 10 mg, 20 mg, 40 mg

Citric Acid, Magnesium Carbonate, and Glucono-Delta-Lactone**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution, irrigation:

Renacidin: Citric acid 1980.6 mg, magnesium carbonate 980.4 mg, glucono-delta-lactone 59.4 mg per 30 mL (30 mL) [contains benzoic acid]

Citric Acid, Sodium Citrate, and Potassium Citrate**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution, Oral:

Generic: Citric acid 334 mg, sodium citrate 500 mg, and potassium citrate 550 mg per 5 mL (473 mL)

Cladribine**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution, Intravenous [preservative free]:

Generic: 10 mg/10 mL (10 mL)

CLADRIBINE

Tablet Therapy Pack, Oral:
Mavenclad (4 Tabs, 5 Tabs, 6 Tabs, 7 Tabs, 8 Tabs, 9 Tabs, 10 Tabs):

Clarithromycin

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Suspension Reconstituted, Oral:

Generic: 125 mg/5 mL (50 mL, 100 mL); 250 mg/5 mL (50 mL, 100 mL)

Tablet, Oral:

Generic: 250 mg, 500 mg

Tablet Extended Release 24 Hour, Oral:

Generic: 500 mg

Cleansing Lotion

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Cream:

Lotion:

Lipid free (C etaphil): 240 mL

Nonalkaline: 180 mL

Clemastine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral, as fumarate:

Dayhist Allergy 12 Hour Relief: 1.34 mg [scored; sodium free]

Tavist Allergy: 1.34 mg [scored; sodium free]

Generic: 2.68 mg

Clevidipine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Emulsion, Intravenous:

Cleviprex: 0.5 mg/mL (50 mL, 100 mL) [contains edetate disodium, egg yolk phospholipids, soybean oil]

Clidinium and Chlordiazepoxide

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule, Oral:

Generic: Clidinium bromide 2.5 mg and chlordiazepoxide hydrochloride 5 mg

Clindamycin and Benzoyl Peroxide

DoD Uniform Formulary Outpatient Dosage Forms

BASIC CORE FORMULARY

Gel, External:

Clindamycin phosphate 1.2% and benzoyl peroxide 5% (45 g)

UNIFORM FORMULARY

Gel, External:

Generic: Clindamycin 1% and benzoyl peroxide 5% (25 g, 50 g)

NONFORMULARY

Gel, External:

Neuac Kit: Clindamycin phosphate 1.2% and benzoyl peroxide 5% (130 g) [with moisturizer]

Onexton: Clindamycin phosphate 1.2% and benzoyl peroxide 3.75% (50 g) [contains propylene glycol]

Clindamycin (Systemic)

DoD Uniform Formulary Outpatient Dosage Forms

BASIC CORE FORMULARY

Capsule, Oral, as hydrochloride [strength expressed as base]:

Generic: 150 mg

UNIFORM FORMULARY

Capsule, Oral, as hydrochloride [strength expressed as base]:

Generic: 75 mg, 300 mg

Kit, Injection, as phosphate [strength expressed as base]:

CLIN Single Use: 300 mg/2 mL [contains benzyl alcohol, edetate disodium]

Solution, Injection, as phosphate [strength expressed as base]:

Generic: 300 mg/2 mL (2 mL); 600 mg/4 mL (4 mL); 900 mg/6 mL (6 mL); 9000 mg/60 mL (60 mL); 9 g/60 mL (60 mL)

Solution, Intravenous, as phosphate [strength expressed as base]:

Generic: 150 mg/mL (2 mL); 300 mg/50 mL (50 mL); 600 mg/50 mL (50 mL); 900 mg/50 mL (50 mL); 900 mg/6 mL (6 mL)

Solution Reconstituted, Oral, as palmitate hydrochloride [strength expressed as base]:

Generic: 75 mg/5 mL (100 mL)

Clindamycin (Topical)

DoD Uniform Formulary Outpatient Dosage Forms

BASIC CORE FORMULARY

Cream, Vaginal, as phosphate [strength expressed as base]:

Generic: 2% (40 g)

Solution, External, as phosphate [strength expressed as base]:

Generic: 1% (30 mL, 60 mL)

UNIFORM FORMULARY

Foam, External, as phosphate [strength expressed as base]:

Generic: 1% (50 g, 100 g)

Gel, External, as phosphate [strength expressed as base]:

Generic: 1% (30 g, 60 g)

Kit, External, as phosphate [strength expressed as base]:

Clindacin ETZ: 1% [contains cetyl alcohol, isopropyl alcohol, propylene glycol]

Clindacin ETZ: 1% [contains cetyl alcohol, isopropyl alcohol, propylene glycol]

Lotion, External, as phosphate [strength expressed as base]:

Generic: 1% (60 mL)

Suppository, Vaginal, as phosphate [strength expressed as base]:

Cleocin: 100 mg (3 ea)

Swab, External, as phosphate [strength expressed as base]:

Generic: 1% (60 ea)

NONFORMULARY

Gel, External, as phosphate [strength expressed as base]:

Clindagel: 1%

Clioquinol and Hydrocortisone

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Cream, External:

Ala-Quin: Clioquinol 3% and hydrocortisone 0.5% (28.4 g, 80 g)

Dermasorb AF: Clioquinol 3% and hydrocortisone 0.5% (30 g) [packaged in a kit with Dermasorb hydrating serum]

CloBAZam

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Suspension, Oral:

Onfi: 2.5 mg/mL (120 mL) [contains methylparaben, polysorbate 80, propylene glycol, propylparaben; berry flavor]

Tablet, Oral:

Onfi: 10 mg [scored], 20 mg [scored]

NONFORMULARY

Film, Oral:

Sympazan: 5 mg (1 ea, 60 ea); 10 mg (1 ea, 60 ea); 20 mg (1 ea, 60 ea)

Clobetasol

DoD Uniform Formulary Outpatient Dosage Forms

BASIC CORE FORMULARY

Cream, External, as propionate:

Generic: 0.05% (15 g, 30 g, 45 g, 60 g)

Ointment, External, as propionate:

Generic: 0.05% (15 g, 30 g, 45 g, 60 g)

UNIFORM FORMULARY

Foam, External, as propionate:

Generic: 0.05% (50 g, 100 g)

Gel, External, as propionate:

Generic: 0.05% (15 g, 30 g, 60 g)

Liquid, External, as propionate:

Generic: 0.05% (59 mL, 125 mL)

Lotion, External, as propionate:

Generic: 0.05% (59 mL, 118 mL)

Shampoo, External, as propionate:

Generic: 0.05% (118 mL)

Solution, External, as propionate:

Generic: 0.05% (25 mL, 50 mL)

NOT COVERED

Cream, External, as propionate:

Impozz: 0.025% (60 g) [contains cetostearyl alcohol, methylparaben, propylparaben]

Kit, External, as propionate:

Clodan: 0.05% [contains alcohol, usp, cetyl alcohol, edetate disodium, propylene glycol]

Clocortolone

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Cream, External, as pivalate:

Generic: 0.1% (45 g, 75 g, 90 g)

NONFORMULARY

Cream, External, as pivalate:

Cloderm: 0.1% (45 g, 90 g)

Cloderm Pump: 0.1% (75 g)

Clofarabine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Intravenous [preservative free]:

Clozar: 1 mg/mL (20 mL)

Clofazimine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule, Oral:

Generic: 50 mg

ClomiPHENE

DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY
 Tablet, Oral, as citrate:
 Generic: 50 mg

ClomiPRAMINE

DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY
 Capsule, Oral, as hydrochloride:
 Generic: 25 mg, 50 mg, 75 mg

ClonazePAM

DoD Uniform Formulary Outpatient Dosage Forms
BASIC CORE FORMULARY
 Tablet, Oral:
 Generic: 0.5 mg
UNIFORM FORMULARY
 Tablet, Oral:
 Generic: 1 mg, 2 mg
 Tablet Dispersible, Oral:
 Generic: 0.125 mg, 0.25 mg, 0.5 mg, 1 mg, 2 mg

CloNIDine

DoD Uniform Formulary Outpatient Dosage Forms
BASIC CORE FORMULARY
 Tablet, Oral, as hydrochloride:
 Generic: 0.1 mg, 0.2 mg, 0.3 mg
UNIFORM FORMULARY
 Patch Weekly, Transdermal:
 Generic: 0.1 mg/24 hr (1 ea, 4 ea); 0.2 mg/24 hr (1 ea, 4 ea); 0.3 mg/24 hr (1 ea, 4 ea)
 Solution, Epidural, as hydrochloride:
 Generic: 100 mcg/mL (10 mL); 500 mcg/mL (10 mL)
 Solution, Epidural, as hydrochloride [preservative free]:
 Generic: 100 mcg/mL (10 mL); 500 mcg/mL (10 mL)
 Tablet Extended Release 12 Hour, Oral, as hydrochloride:
 Generic: 0.1 mg

Clonidine and Chlorthalidone

DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY
 Tablet, Oral:
 0.1: Clonidine hydrochloride 0.1 mg and chlorthalidone 15 mg
 0.2: Clonidine hydrochloride 0.2 mg and chlorthalidone 15 mg
 0.3: Clonidine hydrochloride 0.3 mg and chlorthalidone 15 mg

Clopidogrel

DoD Uniform Formulary Outpatient Dosage Forms
BASIC CORE FORMULARY
 Tablet, Oral:
 Generic: 75 mg, 300 mg

Clorazepate

DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY
 Tablet, Oral, as dipotassium:
 Generic: 3.75 mg, 7.5 mg, 15 mg

Clotrimazole (Oral)

DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY
 Lozenge, Mouth/Throat:
 Generic: 10 mg (70 ea, 140 ea)
 Troche, Mouth/Throat:
 Generic: 10 mg

Clotrimazole (Topical)

DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY
 Cream, External:
 Generic: 1% (15 g, 30 g, 45 g)
 Cream, Vaginal:
 3 Day Vaginal: 2% (21 g) [contains benzyl alcohol, cetyl alcohol]
 Clotrimazole 3 Day: 2% (22.2 g)
 Gyne-Lotrimin 3: 2% (21 g) [contains benzyl alcohol, cetyl alcohol]
 Generic: 1% (45 g)
 Ointment, External:
 Alevazol: 1% (56.7 g)
 Solution, External:
 Generic: 1% (10 mL, 30 mL)

CloZAPine

DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY
 Suspension, Oral:
 Versacloz: 50 mg/mL (100 mL) [contains methylparaben sodium, propylparaben sodium]

Tablet, Oral:
 Generic: 25 mg, 50 mg, 100 mg, 200 mg
 Tablet Dispersible, Oral:
 Generic: 12.5 mg, 25 mg, 100 mg, 150 mg, 200 mg

Coal Tar

DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY
 Foam, External:
 Scytera: 2% (100 g) [contains disodium edta]
 Ointment, External:
 Psoriasis: 2% (113 g) [contains alcohol, usp, polysorbate 80]
 Shampoo, External:
 Beta Care Betatar Gel: 2.5% (480 mL) [contains trolamine (triethanolamine)]
 DHS Tar: 0.5% (120 mL, 240 mL)
 DHS Tar Gel: 0.5% (240 mL)
 Ionil-T: 1% (473 mL) [contains alcohol, usp, benzalkonium chloride, edetate sodium (tetrasodium), isopropyl alcohol]
 PC-Tar: 1% (177 mL)
 Pentrax Gold: 4% (168 mL)
 Tera-Gel Tar: 0.5% (118 mL, 235 mL) [contains edetate sodium (tetrasodium), methylparaben, polysorbate 80, propylparaben]
 Therapeutic: 0.5% (251 mL)
 Theraplex T: 1% (240 mL)
 X-Seb T Pearl: 10% (236 mL) [contains brilliant blue fcf (fd&c blue #1), edetate disodium]
 X-Seb T Plus: 10% (236 mL) [contains brilliant blue fcf (fd&c blue #1), edetate disodium]
 Solution, External:
 Generic: 20% (100 mL, 500 mL, 4000 mL)

Coal Tar and Salicylic Acid

DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY
 Gel, External [shampoo]:
 Tarsum: Coal tar solution 10% [equivalent to coal tar 2%] and salicylic acid (120 mL, 240 mL)
 Shampoo, External:
 X-Seb T Pearl: Coal tar solution 10% [equivalent to coal tar 2%] and salicylic acid (120 mL, 240 mL)
 X-Seb T Plus: Coal tar solution 10% [equivalent to coal tar 2%] and salicylic acid (120 mL, 240 mL) [conditioning shampoo]

Cobicistat

DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY
 Tablet, Oral:
 Tybost: 150 mg

Cobimetinib

DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY
 Tablet, Oral:
 Cotellic: 20 mg

Cocaine (Topical)

DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY
 Solution, External, as hydrochloride:
 Generic: 4% (4 mL, 10 mL)
NONFORMULARY
 Solution, Nasal, as hydrochloride [strength expressed as base]:
 Goprelto: 4% [40 mg/mL] (4mL) (4 mL)
 Generic: 4% [40 mg/mL] (4mL) (4 mL)

Coccidioides immitis Skin Test

DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY
 Solution, Intradermal:
 Spherusol: 127 mcg/0.1 mL (1 mL) [contains phenol, thimerosal]

Codeine

DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY
 Tablet, Oral, as sulfate:
 Generic: 15 mg, 30 mg, 60 mg

Codeine and Chlorpheniramine

DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY
 Liquid, Oral:
 Codar AR: Codeine phosphate 8 mg and chlorpheniramine maleate 2 mg per 5 mL (473 mL) [contains propylene glycol; apple flavor]
 Lexuss 210: Codeine phosphate 10 mg and chlorpheniramine maleate 2 mg per 5 mL (473 mL) [sugar free; contains alcohol 0.1%, propylene glycol; vanilla cream flavor]
 Z-Tuss AC: Codeine phosphate 9 mg and chlorpheniramine maleate 2 mg per 5 mL (473 mL) [alcohol free, gluten free, sugar free; contains propylene glycol, sodium benzoate; cherry flavor]

CODEINE AND CHLORPHENIRAMINE

Suspension Extended Release, Oral, as polistirex [strength expressed as base]:
Tuzistra XR: Codeine 14.7 mg and chlorpheniramine 2.8 mg per 5 mL (473 mL) [contains polysorbate 80; cherry flavor]

Codeine, Phenylephrine, and Triprolidine DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Syrup, Oral:
Histex-AC: Codeine phosphate 10 mg, phenylephrine hydrochloride 10 mg, and triprolidine hydrochloride 2.5 mg per 5 mL (473 mL) [alcohol free, dye free, sugar free; contains methylparaben, propylene glycol, propylparaben; bubble-gum flavor]

Coenzyme Q-10 DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Capsule, Oral:
Generic: 10 mg, 30 mg, 50 mg, 60 mg, 100 mg
Capsule, Oral [preservative free]:
Active Q Maximum Strength: 300 mg [milk free, no artificial color(s), no artificial flavor(s), starch free, sugar free, wheat free, yeast free; contains soybean lecithin]
Generic: 30 mg, 50 mg, 100 mg, 200 mg
Liquid, Oral:
Generic: 30 mg/5 mL (480 mL)
Tablet, Oral:
Generic: 25 mg, 200 mg
Tablet Dispersible, Oral:
QuinZyme: 90 mg [orange-vanilla flavor]

Colchicine DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Capsule, Oral:
Generic: 0.6 mg
Tablet, Oral:
Generic: 0.6 mg

NONFORMULARY

Solution, Oral:
Gloperba: 0.6 mg/5 mL (150 mL) [contains benzyl alcohol, fd&c red #40, propylene glycol; cherry flavor] Tablet, Oral:

Colchicine and Probenecid DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Tablet, Oral:
Generic: Colchicine 0.5 mg and probenecid 0.5 g

Colestipol DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Granules, Oral, as hydrochloride:
Generic: 5 g/5 g scoop (500 g)
Packet, Oral, as hydrochloride:
Generic: 5 g (30 ea, 90 ea)
Tablet, Oral, as hydrochloride:
Generic: 1 g

Colistimethate DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Solution Reconstituted, Injection [strength expressed as base]:
Generic: 150 mg (1 ea)
Solution Reconstituted, Injection [strength expressed as base, preservative free]:
Generic: 150 mg (1 ea)

Collagen (Absorbable/Dental) DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Wound dressing:
3/8" x 3/4"
3/4" x 1 1/2"
1" x 3"

Collagenase (Systemic) DoD Uniform Formulary Outpatient Dosage Forms NOT COVERED

Solution Reconstituted, Injection:
Xiaflex: 0.9 mg (1 ea)

Collagenase (Topical) DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Ointment, External:
Santyl: 250 units/g (30 g, 90 g)

Collagen Hemostat DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Miscellaneous, External:
Actifoam Collagen Sponge: (10 ea)
Endo Avitene: (1 ea)
Syringe Avitene: (1 g)
Ultrafoam Sponge 2x6.25x7CM: 2 cm x 6.25 cm x 7 cm (1 ea)
Ultrafoam Sponge 8x12.5x1CM: 8 cm x 12.5 cm x 1 cm (1 ea)
Ultrafoam Sponge 8x12.5x3CM: 8 cm x 12.5 cm x 3 cm (1 ea)
Ultrafoam Sponge 8x25x1CM: 8 cm x 25 cm x 1 cm (1 ea)
Ultrafoam Sponge 8x6.25x1CM: 8 cm x 6.25 cm x 1 cm (1 ea)
Pad, External:
Avitene: (1 ea)
Powder, External:
Avitene Flour: (6 ea, 1 g, 5 g)

Collodion, Flexible DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Liquid, External:
Generic: (100 mL, 500 mL, 4000 mL)

Conivaptan DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Solution, Intravenous, as hydrochloride:
Vaprisol: 20 mg (100 mL)

Continuous Renal Replacement Therapy Solutions DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Solution, Intravenous [concentrate; preservative free]:
Normocarb HF 25: Bicarbonate 25 mEq/L, chloride 116.5 mEq/L, magnesium 1.5 mEq/L, sodium 140 mEq/L (240 mL)
Normocarb HF 35: Bicarbonate 35 mEq/L, chloride 106.5 mEq/L, magnesium 1.5 mEq/L, sodium 140 mEq/L (240 mL)
Solution, Intravenous [preservative free]:
Phoxillum B22K4/0: Bicarbonate 22 mEq/L, chloride 122 mEq/L, magnesium 1.5 mEq/L, phosphate 1 mmol/L, potassium 4 mEq/L, sodium 140 mEq/L (5000 mL)
Phoxillum BK4/2.5: Bicarbonate 32 mEq/L, calcium 2.5 mEq/L, chloride 114.5 mEq/L, magnesium 1.5 mEq/L, phosphate 1 mmol/L, potassium 4 mEq/L, sodium 140 mEq/L (5000 mL)
PrismaSol B22GK 4/0: Bicarbonate 22 mEq/L, chloride 120.5 mEq/L, dextrose 100 mg/dL, lactate 3 mEq/L, magnesium 1.5 mEq/L, potassium 4 mEq/L, sodium 140 mEq/L (5000 mL)
PrismaSol BGK 0/2.5: Bicarbonate 32 mEq/L, calcium 2.5 mEq/L, chloride 109 mEq/L, dextrose 100 mg/dL, lactate 3 mEq/L, magnesium 1.5 mEq/L, sodium 140 mEq/L (5000 mL)
PrismaSol BGK 2/0: Bicarbonate 32 mEq/L, chloride 108 mEq/L, dextrose 100 mg/dL, lactate 3 mEq/L, magnesium 1 mEq/L, potassium 2 mEq/L, sodium 140 mEq/L (5000 mL)
PrismaSol BGK 2/3.5: Bicarbonate 32 mEq/L, calcium 3.5 mEq/L, chloride 111.5 mEq/L, dextrose 100 mg/dL, lactate 3 mEq/L, magnesium 1 mEq/L, potassium 2 mEq/L, sodium 140 mEq/L (5000 mL)
PrismaSol BGK 4/0/1.2: Bicarbonate 32 mEq/L, chloride 110.2 mEq/L, dextrose 100 mg/dL, lactate 3 mEq/L, magnesium 1.2 mEq/L, potassium 4 mEq/L, sodium 140 mEq/L (5000 mL)
PrismaSol BGK 4/2.5: Bicarbonate 32 mEq/L, calcium 2.5 mEq/L, chloride 113 mEq/L, dextrose 100 mg/dL, lactate 3 mEq/L, magnesium 1.5 mEq/L, potassium 4 mEq/L, sodium 140 mEq/L (5000 mL)
PrismaSol BK 0/0/1.2: Bicarbonate 32 mEq/L, chloride 106.2 mEq/L, lactate 3 mEq/L, magnesium 1.2 mEq/L, sodium 140 mEq/L (5000 mL)

Coplanlisib DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Solution Reconstituted, Intravenous:
Aliqopa: 60 mg (1 ea)

Copper DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Capsule, Oral [preservative free]:
Cu-5: 5 mg [dye free]
Solution, Intravenous:
Generic: 0.4 mg/mL (10 mL)
Tablet, Oral:
Coppermin: 5 mg [corn free, rye free, wheat free]

Copper IUD**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Intrauterine Device, Intrauterine:
Paragard Intrauterine Copper:

Corticoreslin**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Solution Reconstituted, Intravenous, as trifluoroacetate:
Acthrel: 100 mcg (1 ea)

Corticotropin**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Gel, Injection:
Acthar: 80 units/mL (5 mL) [contains phenol]

Cortisone**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Tablet, Oral, as acetate:
Generic: 25 mg

Cosyntropin**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Solution Reconstituted, Injection:
Generic: 0.25 mg (1 ea)
Solution Reconstituted, Injection [preservative free]:
Generic: 0.25 mg (1 ea)

COVID-19 Vaccine (Adenovirus Vector)**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Suspension, Intramuscular [preservative free]:
Janssen COVID-19 Vaccine: 50 billion viral particles per 0.5 mL (2.5 mL)
[contains alcohol, usp, polysorbate 80]

COVID-19 Vaccine (mRNA)**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Suspension, Intramuscular:
Pfizer-BioNTech COVID-19 Vacc: 30 mcg/0.3 mL (1.5 mL) [contains 2-((peg)-
2000)-n,n-ditetradecylacetamide]
Suspension, Intramuscular [preservative free]:
Moderna COVID-19 Vaccine: 100 mcg/0.5 mL (5 mL) [contains dmg-peg 2000]

Crizotinib**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Capsule, Oral:
Xalkori: 200 mg, 250 mg

Crofelemer**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Tablet Delayed Release, Oral:
Mytesi: 125 mg [contains methylparaben, propylparaben]

Cromolyn (Nasal)**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Aerosol Solution, Nasal, as sodium:
Generic: 5.2 mg/actuation (26 mL)

Cromolyn (Ophthalmic)**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Solution, Ophthalmic, as sodium:
Generic: 4% (10 mL)

Cromolyn (Oral Inhalation)**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Nebulization Solution, Inhalation, as sodium:
Generic: 20 mg/2 mL (2 mL)

Cromolyn (Systemic)**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Concentrate, Oral, as sodium:
Generic: 100 mg/5 mL (5 mL)
Concentrate, Oral, as sodium [preservative free]:
Generic: 100 mg/5 mL (5 mL)

Crotalidae Polyvalent Immune FAB (Ovine)**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Solution Reconstituted, Intravenous:
CroFab: (1 ea) [contains thimerosal]

Crotamiton**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Cream, External:
Eurax: 10% (60 g)
Lotion, External:
Crotan: 10% (60 g, 227 g, 454 g) [contains benzyl alcohol, cetyl alcohol,
propylene glycol]
Eurax: 10% (60 g, 454 g)

Cyanocobalamin**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Kit, Injection:
B-12 Compliance Injection: 1000 mcg/mL [contains benzyl alcohol]
Physicians EZ Use B-12: 1000 mcg/mL [contains benzyl alcohol]
Vitamin Deficiency System-B12: 1000 mcg/mL [contains benzyl alcohol]
Liquid, Sublingual:
Generic: 3000 mcg/mL (52 mL)
Lozenge, Oral:
Generic: 50 mcg (100 ea); 100 mcg (100 ea); 250 mcg (100 ea, 250 ea); 500
mcg (100 ea, 250 ea)
Solution, Injection:
Generic: 1000 mcg/mL (1 mL, 10 mL, 30 mL)
Solution, Nasal:
Nascobal: 500 mcg/0.1 mL (1 ea) [contains benzalkonium chloride]
Tablet, Oral:
Generic: 100 mcg, 250 mcg, 500 mcg, 1000 mcg
Tablet, Oral [preservative free]:
Generic: 100 mcg, 500 mcg, 1000 mcg
Tablet Extended Release, Oral:
Generic: 1000 mcg
Tablet, Sublingual:
Generic: 2500 mcg
Tablet, Sublingual [preservative free]:
Generic: 2500 mcg

Cyclobenzaprine**DoD Uniform Formulary Outpatient Dosage Forms
BASIC CORE FORMULARY**

Tablet, Oral, as hydrochloride:
Generic: 10 mg

UNIFORM FORMULARY

Capsule Extended Release 24 Hour, Oral, as hydrochloride:
Generic: 15 mg, 30 mg
Tablet, Oral, as hydrochloride:
Generic: 5 mg, 7.5 mg

Cyclopentolate**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Solution, Ophthalmic, as hydrochloride:
Generic: 0.5% (15 mL); 1% (2 mL, 15 mL); 2% (2 mL, 5 mL, 15 mL)

Cyclopentolate and Phenylephrine**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Solution, ophthalmic:
Cyclomydril: Cyclopentolate hydrochloride 0.2% and phenylephrine hydro-
chloride 1% (2 mL, 5 mL) [contains benzalkonium chloride]

Cyclophosphamide**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Capsule, Oral:
Generic: 25 mg, 50 mg
Solution Reconstituted, Injection:
Generic: 500 mg (1 ea); 1 g (1 ea); 2 g (1 ea)

CycloSERINE**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Capsule, Oral:
Generic: 250 mg

CycloSPORINE (Ophthalmic)**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Emulsion, Ophthalmic [preservative free]:
Restasis: 0.05% (1 ea) [contains polysorbate 80]
Restasis Multidose: 0.05% (5.5 mL) [contains polysorbate 80]

NONFORMULARY

Solution, Ophthalmic [preservative free]:
Cequa: 0.09% (1 ea)

CYCLOSPORINE (SYSTEMIC)

CycloSPORINE (Systemic)

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule, Oral:

Generic: 25 mg, 50 mg, 100 mg

Solution, Intravenous:

Generic: 50 mg/mL (5 mL)

Solution, Oral:

Generic: 100 mg/mL (50 mL)

Cyproheptadine

DoD Uniform Formulary Outpatient Dosage Forms

BASIC CORE FORMULARY

Syrup, Oral, as hydrochloride:

Generic: 2 mg/5 mL (473 mL)

Tablet, Oral, as hydrochloride:

Generic: 4 mg

Cysteamine (Ophthalmic)

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Ophthalmic:

Cystaran: 0.44% (15 mL) [contains benzalkonium chloride]

Solution, Ophthalmic, as hydrochloride:

Cystadrops: 0.37% (5 mL) [contains benzalkonium chloride, disodium edta]

Cysteamine (Systemic)

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule, Oral:

Cystagon: 50 mg, 150 mg

Capsule Delayed Release, Oral:

Procsybi: 25 mg, 75 mg

Cysteine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule, Oral, as hydrochloride [preservative free]:

Cystech: 500 mg [dye free]

Solution, Intravenous, as hydrochloride:

Generic: 50 mg/mL (10 mL, 50 mL)

Cytarabine (Conventional)

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Injection:

Generic: 20 mg/mL (25 mL)

Solution, Injection [preservative free]:

Generic: 20 mg/mL (5 mL, 50 mL); 100 mg/mL (20 mL)

Solution Reconstituted, Injection:

Generic: 100 mg (1 ea); 500 mg (1 ea); 1 g (1 ea)

Cytarabine (Liposomal)

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Suspension, Intrathecal:

DepoCyt: 50 mg/5 mL (5 mL) [contains cholesterol, dioleoylphosphatidylcholine (dopc), dipalmitoylphosphatidylglycerol (dppg), triolein]

Cytomegalovirus Immune Globulin (Intravenous-Human)

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Injection, solution [preservative free]:

CytoGam: 50 mg (\pm 10 mg)/mL (50 mL) [contains sodium 20-30 mEq/L, human albumin, and sucrose 50 mg/mL]

Dabigatran Etxelate

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule, Oral:

Pradaxa: 75 mg, 110 mg, 150 mg

Dabrafenib

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule, Oral:

Tafinlar: 50 mg, 75 mg

Dacarbazine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution Reconstituted, Intravenous:

Generic: 100 mg (1 ea); 200 mg (1 ea)

Solution Reconstituted, Intravenous [preservative free]:

Generic: 200 mg (1 ea)

Dacomitinib

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:

Vizimpro: 15 mg, 30 mg, 45 mg

DACTINomycin

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution Reconstituted, Intravenous:

Cosmegen: 0.5 mg (1 ea)

Dalbavancin

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution Reconstituted, Intravenous [preservative free]:

Dalvance: 500 mg (1 ea)

Dalfampridine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet Extended Release 12 Hour, Oral:

Ampyra: 10 mg

Dalteparin

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Subcutaneous:

Fragmin: 95,000 units/3.8 mL (3.8 mL) [contains benzyl alcohol]

Solution, Subcutaneous [preservative free]:

Fragmin: 10,000 units/mL (1 mL); 2500 units/0.2 mL (0.2 mL); 5000 units/0.2 mL (0.2 mL); 7500 units/0.3 mL (0.3 mL); 12,500 units/0.5 mL (0.5 mL); 15,000 units/0.6 mL (0.6 mL); 18,000 units/0.72 mL (0.72 mL)

Danazol

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule, Oral:

Generic: 50 mg, 100 mg, 200 mg

Dantrolene

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule, Oral, as sodium:

Generic: 25 mg, 50 mg, 100 mg

Solution Reconstituted, Intravenous, as sodium:

Dantrium: 20 mg (1 ea)

Revonto: 20 mg (1 ea)

Suspension Reconstituted, Intravenous, as sodium:

Ryanodex: 250 mg (1 ea) [contains polysorbate 80]

Dapsone (Systemic)

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:

Generic: 25 mg, 100 mg

DAPTOmycin

DoD Uniform Formulary Outpatient Dosage Forms

NOT COVERED

Solution Reconstituted, Intravenous [preservative free]:

Generic: 500 mg (1 ea)

Daratumumab

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Intravenous [preservative free]:

Darzalex: 100 mg/5 mL (5 mL); 400 mg/20 mL (20 mL) [contains mouse (murine) and/or hamster protein]

Darbepoetin Alfa

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Injection [preservative free]:

Aranesp (Albumin Free): 25 mcg/mL (1 mL); 40 mcg/mL (1 mL); 60 mcg/mL (1 mL); 100 mcg/mL (1 mL); 200 mcg/mL (1 mL); 300 mcg/mL (1 mL) [albumin free; contains mouse (murine) and/or hamster protein, polysorbate 80]

Solution Prefilled Syringe, Injection [preservative free]:

Aranesp (Albumin Free): 10 mcg/0.4 mL (0.4 mL); 25 mcg/0.42 mL (0.42 mL); 40 mcg/0.4 mL (0.4 mL); 60 mcg/0.3 mL (0.3 mL); 100 mcg/0.5 mL (0.5 mL); 150 mcg/0.3 mL (0.3 mL); 200 mcg/0.4 mL (0.4 mL); 300 mcg/0.6 mL (0.6 mL); 500 mcg/mL (1 mL) [albumin free; contains mouse (murine) and/or hamster protein, polysorbate 80]

Darunavir

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Suspension, Oral:

Prezista: 100 mg/mL (200 mL) [contains methylparaben sodium; strawberry cream flavor]

Tablet, Oral:

Prezista: 75 mg, 150 mg, 600 mg, 800 mg

Darunavir and Cobicistat**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Tablet, Oral:

Prezcobix: Darunavir 800 mg and cobicistat 150 mg

Solution Reconstituted, Intravenous:

Baxdela: 300 mg (1 ea) [contains edetate disodium]

NONFORMULARY

Tablet, Oral:

Baxdela: 450 mg

Darunavir, Cobicistat, Emtricitabine, and Tenofovir Alafenamide**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Tablet, Oral:

Symtuza: 800 mg - 150 mg - 200 mg -10 mg

Delavirdine**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Tablet, Oral, as mesylate:

Rescriptor: 100 mg, 200 mg

Dasatinib**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Tablet, Oral:

Sprycel: 20 mg, 50 mg, 70 mg, 80 mg, 100 mg, 140 mg

Demeclocycline**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Tablet, Oral, as hydrochloride:

Generic: 150 mg, 300 mg

DAUNOrubicin (Conventional)**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Injectable, Intravenous:

Generic: 5 mg/mL (4 mL)

Injectable, Intravenous [preservative free]:

Generic: 5 mg/mL (4 mL, 10 mL)

Denosumab**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution, Subcutaneous [preservative free]:

Prolia: 60 mg/mL (1 mL) [contains mouse (murine) and/or hamster protein]

Xgeva: 120 mg/1.7 mL (1.7 mL)

Decitabine**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution Reconstituted, Intravenous:

Generic: 50 mg (1 ea)

Desflurane**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution, Inhalation:

Suprane: 100% (240 mL)

Decitabine and Cedazuridine**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Tablet, Oral:

Inqovi: 35-100 MG

Desipramine**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Tablet, Oral, as hydrochloride:

Generic: 10 mg, 25 mg, 50 mg, 75 mg, 100 mg, 150 mg

Deferasirox**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Packet, Oral:

Jadenu Sprinkle: 90 mg (30 ea); 180 mg (30 ea); 360 mg (30 ea)

Tablet, Oral:

Jadenu: 90 mg, 180 mg, 360 mg

Tablet Soluble, Oral:

Exjade: 125 mg, 250 mg, 500 mg

Desirudin**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution Reconstituted, Subcutaneous:

Iprivask: 15 mg (1 ea)

Desmopressin**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution, Injection, as acetate:

Generic: 4 mcg/mL (1 mL, 10 mL)

Solution, Injection, as acetate [preservative free]:

Generic: 4 mcg/mL (1 mL)

Solution, Nasal, as acetate:

Stimate: 1.5 mg/mL (2.5 mL) [contains benzalkonium chloride]

Generic: 0.01% (2.5 mL, 5 mL)

Tablet, Oral, as acetate:

Generic: 0.1 mg, 0.2 mg

NONFORMULARY

Emulsion, Nasal, as acetate:

Noctiva: 0.83 mcg/0.1 mL (3.8 g); 1.66 mcg/0.1 mL (3.8 g)

Tablet, Sublingual:

Nocurna: 27.7 mcg, 55.3 mcg

Deferiprone**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Tablet, Oral:

Ferriprox: 500 mg [scored]

NONFORMULARY

Solution, Oral:

Ferriprox: 100 mg/mL (500 mL) [cherry-peppermint flavor]

Deferoxamine**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution Reconstituted, Injection, as mesylate:

Generic: 500 mg (1 ea); 2 g (1 ea)

Defibrotide**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution, Intravenous, as sodium [preservative free]:

Defitelio: 200 mg/2.5 mL (2.5 mL)

Deflazacort**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Suspension, Oral:

Emflaza: 22.75 mg/mL (13 mL) [contains polysorbate 80, sorbitol]

Tablet, Oral:

Emflaza: 6 mg, 18 mg, 30 mg, 36 mg [contains corn starch]

Degarelix**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Suspension, Oral:

Emflaza: 22.75 mg/mL (13 mL) [contains polysorbate 80, sorbitol]

Tablet, Oral:

Emflaza: 6 mg, 18 mg, 30 mg, 36 mg [contains corn starch]

Desonide**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Cream, External:

Generic: 0.05% (15 g, 60 g)

Ointment, External:

Generic: 0.05% (15 g, 60 g)

NONFORMULARY

Foam, External:

Verdeso: 0.05% (100 g) [contains cetyl alcohol, propylene glycol]

Gel, External:

Desonate: 0.05% (60 g) [contains edetate disodium dihydrate, methylparaben, propylene glycol, propylparaben]

Lotion, External:

Generic: 0.05% (59 mL, 118 mL)

Desoximetasone**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Cream, External:

Generic: 0.05% (15 g, 60 g, 100 g); 0.25% (15 g, 60 g, 100 g)

Liquid, External:

Topicort Spray: 0.25% (100 mL) [contains isopropyl alcohol, levomenthol]

Ointment, External:

Generic: 0.05% (60 g, 100 g); 0.25% (15 g, 60 g, 100 g)

NONFORMULARY

Gel, External:

Generic: 0.05% (15 g, 60 g)

Delafloxacin**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

DESVENLAFAXINE

Desvenlafaxine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet Extended Release 24 Hour, Oral:
Generic: 50 mg, 100 mg

NONFORMULARY

Tablet Extended Release 24 Hour, Oral:
Khedezla: 50 mg, 100 mg
Tablet Extended Release 24 Hour, Oral, as succinate [strength expressed as base]:
Pristiq: 25 mg, 50 mg, 100 mg
Generic: 25 mg, 50 mg, 100 mg

Deutetrabenazine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:
Austedo: 6 mg, 9 mg, 12 mg

DexAMETHasone (Ophthalmic)

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Implant, Intraocular [preservative free]:
Ozurdex: 0.7 mg (1 ea)
Solution, Ophthalmic, as phosphate:
Generic: 0.1% (5 mL)
Suspension, Ophthalmic:
Maxidex: 0.1% (5 mL)

DexAMETHasone (Systemic)

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Concentrate, Oral:
Dexamethasone Intensol: 1 mg/mL (30 mL) [contains alcohol, usp; unflavored flavor]
Elixir, Oral:
Generic: 0.5 mg/5 mL (237 mL)
Kit, Injection, as sodium phosphate:
ReadySharp Dexamethasone: 10 mg/mL [contains benzyl alcohol, sodium sulfite]
Kit, Injection, as sodium phosphate [preservative free]:
Active Injection D: 10 mg/mL
DoubleDex: 10 mg/mL
Solution, Oral:
Generic: 0.5 mg/5 mL (240 mL, 500 mL)
Solution, Injection, as sodium phosphate:
Generic: 4 mg/mL (1 mL); 20 mg/5 mL (5 mL); 120 mg/30 mL (30 mL); 10 mg/mL (1 mL); 100 mg/10 mL (10 mL)
Solution, Injection, as sodium phosphate [preservative free]:
Generic: 4 mg/mL (1 mL); 10 mg/mL (1 mL)
Tablet, Oral:
Generic: 0.5 mg, 0.75 mg, 1 mg, 1.5 mg, 2 mg, 4 mg, 6 mg
Tablet Therapy Pack, Oral:
LoCort 11-Day: 1.5 mg (41 ea) [scored; contains fd&c red #40]
LoCort 7-Day: 1.5 mg (27 ea) [scored; contains fd&c red #40]
ZonaCort 11 Day: 1.5 mg (41 ea) [scored; contains fd&c red #40]
ZonaCort 7 Day: 1.5 mg (27 ea) [scored; contains fd&c red #40]

Dexbrompheniramine and Phenylephrine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Syrup, Oral:
Dallergy: Dexbrompheniramine maleate 1 mg and phenylephrine hydrochloride 5 mg per 5 mL (473 mL) [contains propylene glycol, saccharin sodium; grape flavor]

Dexchlorpheniramine and Pseudoephedrine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:
Rescon: Dexchlorpheniramine maleate 2 mg and pseudoephedrine hydrochloride 60 mg

Dexchlorpheniramine, Dextromethorphan, and Phenylephrine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Syrup, Oral:
Polytussin DM: Dexchlorpheniramine 1 mg, dextromethorphan 10 mg, and phenylephrine 5 mg per 5 mL (480 mL)

Dexmedetomidine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Intravenous:
Generic: 400 mcg/4 mL (4 mL); 1000 mcg/10 mL (10 mL)
Solution, Intravenous [preservative free]:
Precedex: 400 mcg/100 mL (100 mL); 200 mcg/2 mL (2 mL) [additive free, latex free]
Precedex: 200 mcg/50 mL (50 mL) [latex free]

Precedex: 80 mcg/20 mL (20 mL)
Generic: 200 mcg/2 mL (2 mL)

Dexmethylphenidate

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral, as hydrochloride:
Generic: 2.5 mg, 5 mg, 10 mg
Capsule Extended Release 24 Hour, Oral, as hydrochloride:
Generic: 5 mg, 10 mg, 15 mg, 20 mg, 25 mg, 30 mg, 35 mg, 40 mg

Dexrazoxane

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution Reconstituted, Intravenous:
Generic: 250 mg (1 ea); 500 mg (1 ea)

Dextran

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Intravenous:
LMD in D5W: 10% Dextran 40 (500 mL) [latex free]
LMD in NaCl: 10% Dextran 40 (500 mL) [latex free]

Dextranomer and Hyaluronate Derivatives

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Injection, gel:
Solesta: Dextranomer 50 mg and sodium hyaluronate 15 mg per 1 mL (1 mL)

Dextroamphetamine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule Extended Release 24 Hour, Oral, as sulfate:
Generic: 5 mg, 10 mg, 15 mg
Solution, Oral, as sulfate:
Generic: 5 mg/5 mL (473 mL)
Tablet, Oral, as sulfate:
Zenzedi: 2.5 mg, 5 mg, 7.5 mg, 10 mg, 15 mg, 20 mg, 30 mg
Generic: 5 mg, 10 mg

Dextroamphetamine and Amphetamine

DoD Uniform Formulary Outpatient Dosage Forms

BASIC CORE FORMULARY

Capsule, Extended release, Oral:
Generic: 5 mg [dextroamphetamine sulfate 1.25 mg, dextroamphetamine saccharate 1.25 mg, amphetamine aspartate monohydrate 1.25 mg, amphetamine sulfate 1.25 mg (equivalent to amphetamine base 3.1 mg)]
Generic: 10 mg [dextroamphetamine sulfate 2.5 mg, dextroamphetamine saccharate 2.5 mg, amphetamine aspartate monohydrate 2.5 mg, amphetamine sulfate 2.5 mg (equivalent to amphetamine base 6.3 mg)]
Generic: 15 mg [dextroamphetamine sulfate 3.75 mg, dextroamphetamine saccharate 3.75 mg, amphetamine aspartate monohydrate 3.75 mg, amphetamine sulfate 3.75 mg (equivalent to amphetamine base 9.4 mg)]
Generic: 20 mg [dextroamphetamine sulfate 5 mg, dextroamphetamine saccharate 5 mg, amphetamine aspartate monohydrate 5 mg, amphetamine sulfate 5 mg (equivalent to amphetamine base 12.5 mg)]
Generic: 25 mg [dextroamphetamine sulfate 6.25 mg, dextroamphetamine saccharate 6.25 mg, amphetamine aspartate monohydrate 6.25 mg, amphetamine sulfate 6.25 mg (equivalent to amphetamine base 15.6 mg)]
Generic: 30 mg [dextroamphetamine sulfate 7.5 mg, dextroamphetamine saccharate 7.5 mg, amphetamine aspartate monohydrate 7.5 mg, amphetamine sulfate 7.5 mg (equivalent to amphetamine base 18.8 mg)]

UNIFORM FORMULARY

Tablet, oral:
5 mg [dextroamphetamine sulfate 1.25 mg, dextroamphetamine saccharate 1.25 mg, amphetamine aspartate monohydrate 1.25 mg, amphetamine sulfate 1.25 mg (equivalent to amphetamine base 3.13 mg)]
7.5 mg [dextroamphetamine sulfate 1.875 mg, dextroamphetamine saccharate 1.875 mg, amphetamine aspartate monohydrate 1.875 mg, amphetamine sulfate 1.875 mg (equivalent to amphetamine base 4.7 mg)]
10 mg [dextroamphetamine sulfate 2.5 mg, dextroamphetamine saccharate 2.5 mg, amphetamine aspartate monohydrate 2.5 mg, amphetamine sulfate 2.5 mg (equivalent to amphetamine base 6.3 mg)]
12.5 mg [dextroamphetamine sulfate 3.125 mg, dextroamphetamine saccharate 3.125 mg, amphetamine aspartate monohydrate 3.125 mg, amphetamine sulfate 3.125 mg (equivalent to amphetamine base 7.8 mg)]
15 mg [dextroamphetamine sulfate 3.75 mg, dextroamphetamine saccharate 3.75 mg, amphetamine aspartate monohydrate 3.75 mg, amphetamine sulfate 3.75 mg (equivalent to amphetamine base 9.4 mg)]
20 mg [dextroamphetamine sulfate 5 mg, dextroamphetamine saccharate 5 mg, amphetamine aspartate monohydrate 5 mg, amphetamine sulfate 5 mg (equivalent to amphetamine base 12.6 mg)]
30 mg [dextroamphetamine sulfate 7.5 mg, dextroamphetamine saccharate 7.5 mg, amphetamine aspartate monohydrate 7.5 mg, amphetamine sulfate 7.5 mg (equivalent to amphetamine base 18.8 mg)]

NONFORMULARY

Mydayis: 25 mg, 37.5 mg, 50 mg

Dextromethorphan**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Capsule, Oral, as hydrobromide:

Robafen Cough: 15 mg

Robitussin Lingerin CoughGels: 15 mg [contains polyethylene glycol, propylene glycol]

Gel, Oral, as hydrobromide:

ElixSure Cough: 7.5 mg/5 mL (120 mL) [alcohol free; contains carbomer 934P, propylene glycol, propylparaben; cherry bubblegum flavor]

Liquid, Oral, as hydrobromide:

Buckleys Cough: 12.5 mg/5 mL (118 mL) [alcohol free, sugar free; contains butylparaben, menthol, propylparaben, saccharin sodium]

Little Colds Cough Formula: 7.5 mg/mL (30 mL) [alcohol free, dye free, saccharin free; contains sodium benzoate; grape flavor]

PediaCare Childrens Long-Act: 7.5 mg/5 mL (118 mL) [contains brilliant blue fcf (fd&c blue #1), saccharin sodium, sodium benzoate]

Robitussin Lingerin LA Cough: 15 mg/5 mL (118 mL) [contains alcohol, usp, fd&c red #40, menthol, saccharin sodium, sodium benzoate]

Scot-Tussin Diabetes CF: 10 mg/5 mL (480 mL, 3780 mL) [alcohol free, dye free, fructose free, sodium free, sorbitol free, sugar free]

Triaminic Long Acting Cough: 7.5 mg/5 mL (118 mL) [alcohol free, dye free, pseudoephedrine free; contains benzoic acid, propylene glycol]

Lozenge, Mouth/Throat, as hydrobromide:

Hold: 5 mg (10 ea)

Trocal Cough Suppressant: 7.5 mg (1 ea) [cherry flavor]

Strip, Oral, as hydrobromide:

Triaminic Long Acting Cough: 7.5 mg (14 ea, 16 ea) [contains alcohol, usp]

Suspension Extended Release, Oral:

Generic: Dextromethorphan polistirex [equivalent to dextromethorphan hydrobromide 30 mg/5 mL] (89 mL)

Syrup, Oral, as hydrobromide:

Creomulsion Adult: 20 mg/15 mL (118 mL)

Creomulsion for Children: 5 mg/5 mL (118 mL) [cherry flavor]

Robitussin Childrens Cough LA: 7.5 mg/5 mL (118 mL) [contains fd&c red #40, propylene glycol, saccharin sodium, sodium benzoate]

Silphen DM Cough: 10 mg/5 mL (118 mL) [contains alcohol, usp; strawberry flavor]

Triaminic Long Acting Cough: 7.5 mg/5 mL (118 mL) [alcohol free, dye free; contains benzoic acid, edetate disodium, propylene glycol]

Dextromethorphan and Chlorpheniramine**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Syrup, Oral:

Dimetapp Children's Long Acting Cough Plus Cold: Dextromethorphan hydrobromide 7.5 mg and chlorpheniramine maleate 1 mg per 5 mL (118 mL) [ethanol free, sugar free; contains sodium 3 mg/5 mL, sodium benzoate, propylene glycol; grape flavor]

Robitussin Childrens Cough and Cold Long-Acting: Dextromethorphan hydrobromide 7.5 mg and chlorpheniramine maleate 1 mg per 5 mL (118 mL) [ethanol free; contains sodium 3 mg/5 mL, sodium benzoate, propylene glycol; fruit punch flavor]

Scot-Tussin DM Maximum Strength: Dextromethorphan hydrobromide 15 mg and chlorpheniramine maleate 2 mg per 5 mL (118 mL) [ethanol free, dye free, sugar free; cherry-strawberry flavor]

Tablet, Oral:

Coricidin HBP Cough and Cold: Dextromethorphan hydrobromide 30 mg and chlorpheniramine maleate 4 mg

Tablet, Softchew, Oral:

Triaminic Children's Softchews Cough & Runny Nose: Dextromethorphan hydrobromide 5 mg and chlorpheniramine maleate 1 mg [contains coconut oil, phenylalanine 17.6 mg/softchew, sodium 5 mg/softchew; cherry flavor]

Dextromethorphan and Menthol**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Lozenge, Mouth/Throat:

Delsym Cough Relief: Dextromethorphan hydrobromide 5 mg and menthol 5 mg (16 ea) [honey-lemon flavor]

Delsym Cough Relief: Dextromethorphan hydrobromide 5 mg and menthol 5 mg (16 ea) [sugar free; cherry flavor]

Delsym Cough+ Soothing Action: Dextromethorphan hydrobromide 5 mg and menthol 5 mg (16 ea) [honey-lemon flavor]

Delsym Cough+ Soothing Action: Dextromethorphan hydrobromide 5 mg and menthol 5 mg (16 ea) [sugar free; cherry flavor]

Robitussin Medi-Soothers: Dextromethorphan hydrobromide 5 mg and menthol 5 mg (4 ea, 16 ea) [honey-lemon flavor]

Dextromethorphan and Phenylephrine**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Liquid, Oral:

Sudafed PE Children's Cold & Cough: Dextromethorphan hydrobromide 5 mg and phenylephrine hydrochloride 2.5 mg per 5 mL (118 mL) [ethanol free, sugar free; contains sodium 15 mg/5 mL, sodium benzoate; grape flavor]

Syrup, Oral:

PediaCare Children's Multi-Symptom Cold: Dextromethorphan hydrobromide 5 mg and phenylephrine hydrochloride 2.5 mg per 5 mL (118 mL) [contains sodium 15 mg/5 mL; sodium benzoate; grape flavor]

Safetussin CD: Dextromethorphan hydrobromide 15 mg and phenylephrine hydrochloride 2.5 mg per 5 mL (120 mL), [alcohol free; sugar free; contains menthol, propylene glycol; orange flavor]

Triaminic Day Time Cold & Cough: Dextromethorphan hydrobromide 5 mg and phenylephrine hydrochloride 2.5 mg per 5 mL (120 mL, 240 mL) [contains benzoic acid; sodium 2 mg/5 mL; propylene glycol; cherry flavor]

Dextromethorphan and Quinidine**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Capsule, Oral:

Nuedexta: Dextromethorphan hydrobromide 20 mg and quinidine sulfate 10 mg

Dextrose**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Gel, Oral:

Glucose 15: 40% (37.5 g)

Insta-Glucose: 77.4% (31 g) [contains fd&c red #40, methylparaben, propylparaben, sodium benzoate]

Liquid, Oral:

Glutol: 100 g/180 mL (180 mL) [lemon flavor]

Solution, Intravenous:

Generic: 250 mg/mL (10 mL); 5% (25 mL, 50 mL, 100 mL, 150 mL, 250 mL, 500 mL, 1000 mL); 10% (250 mL, 500 mL, 1000 mL); 20% (500 mL); 30% (500 mL); 40% (500 mL); 50% (50 mL, 500 mL); 70% (500 mL, 1000 mL, 2000 mL)

Solution, Oral:

Glucose Nurse: 5% (59 mL)

Good Start 5% Glucose Water: 5% (88.7 mL)

Tablet Chewable, Oral:

Generic: 4 g

Dextrose and Ringer's Injection (Lactated)**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution, Intravenous:

Generic: Dextrose 5% in Lactated Ringer's (500 mL, 1000 mL)

Dextrose and Sodium Chloride**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution, Intravenous:

Dextrose 10% and sodium chloride 0.2% (250 mL)

Dextrose 10% and sodium chloride 0.225% (250 mL)

Dextrose 10% and sodium chloride 0.45% (1000 mL)

Dextrose 2.5% and sodium chloride 0.45% (1000 mL)

Dextrose 5% and sodium chloride 0.2% (250 mL, 500 mL, 1000 mL)

Dextrose 5% and sodium chloride 0.3% (500 mL, 1000 mL)

Dextrose 5% and sodium chloride 0.33% (500 mL, 1000 mL)

Dextrose 5% and sodium chloride 0.45% (250 mL, 500 mL, 1000 mL)

Dextrose 5% and sodium chloride 0.9% (500 mL, 1000 mL)

Diabetic Supplies**DoD Uniform Formulary Outpatient Dosage Forms****BASIC CORE FORMULARY**

Syringe and needle: 31 gauge x 5/16"

Advocate Syringes; BD Syringe 1 mL (Ultra-Fine II); Comfort EZ; Easy Comfort Insulin Syringe; Easy Touch; Easy-Touch Insulin Syringe; FreeStyle Precision; Lite Touch; Monoject Insulin Syringe; Pro Comfort Insulin Syringe; Sure-Ject Insulin Syringe; Techlite; Topcare Ultra Comfort; TrueComfort; TruePlus Insulin Syringe; UltiCare; Ultilet Insulin Syringe; Ultra Comfort; Ultra-Thin II

Test Strips/Kit:

FreeStyle Test Strips

FreeStyle Lite Test Strips: 50/box, 100/box

NONFORMULARY

Accu-Chek; Accutrend; Advanced; Advocate Redi-Code; Agamatrix; Assure; Breeze 2; Carezens N; Caretouch; Clever Choice; Contour Next; Control AST; Cool; Diatrue Plus; Easy Plus II; East Step; Easy Talk; Easy Touch; Easy Trak; Easygluco; Easymax; Element; Embrace; Evencare; Evolution; EZ Smart; Fifty50; Fora D15G; ForaCare; Fortiscare; Freestyle InsulinX; Freestyle Precision Neo; Freestyle; GE100; Genstrip; Gluco Navii; Glucocard; Glucocom; Gmate; HealthPro; Iglucose; Infinity; Liberty; Microdot; MyglucoHealth; Neutek 2Tek; Novo Max; On Call; OneTouch Ultra Blue; Optium; Pharmacist Choice; Precision PCX; Precision Point of Care; Precision Q-I-D; Premier; Premium; Pro Voice; Prodigy No Coding; Quintet AC; Refuah Plus; Relion Confirm-Micro; Relion Prime; Reveal; RightTest; Smart Sense; Smartest; Solus V2; Sure-Test; TelCare; Test N'Go; True Matrix; TrueTest; TrueTrack; Ultima; UltraTrak; Unistrip1; Verasens; WaveSense Jazz; VGO 20; VGO 30; VGO 40; WaveSense Presto

DIAGNOSTIC TEST FOR GLUCOSE IN URINE

Diagnostic Test for Glucose in Urine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Strip: 50s

Tablet, reagent: 36s

Diatrizoate Meglumine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Urethral:

Cystografin: 30% (100 mL, 300 mL)

Cystografin-Dilute: 18% (300 mL)

Diatrizoate Meglumine and Diatrizoate Sodium

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, injection:

MD-76 R: Diatrizoate meglumine 660 mg and diatrizoate sodium 100 mg per 1 mL (50 mL, 100 mL, 200 mL) [provides organically-bound iodine 370 mg/mL; contains edetate calcium disodium, sodium 3.65 mg (0.16 mEq)/mL]

Solution, oral/rectal:

Gastrografin: Diatrizoate meglumine 660 mg and diatrizoate sodium 100 mg per 1 mL (30 mL, 120 mL) [provides organically-bound iodine 367 mg/mL; contains edetate disodium, sodium 4.8 mg (0.21 mEq)/mL; lemon flavor]

MD-Gastroview: Diatrizoate meglumine 660 mg and diatrizoate sodium 100 mg per 1 mL (30 mL, 120 mL, 240 mL) [provides organically-bound iodine 367 mg/mL; contains edetate disodium, sodium 4.8 mg (0.21 mEq)/mL; lemon-vanilla flavor]

Diatrizoate Meglumine and Iodipamide Meglumine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Injection, solution [for intrauterine instillation]:

Sinografin: Diatrizoate meglumine 527 mg and iodipamide meglumine 268 mg per mL (10 mL) [provides organically-bound iodine 380 mg/mL; contains edetate disodium, sodium 0.91 mg (0.04 mEq)/mL]

DiazePAM

DoD Uniform Formulary Outpatient Dosage Forms

BASIC CORE FORMULARY

Tablet, Oral:

Generic: 5 mg

UNIFORM FORMULARY

Concentrate, Oral:

Generic: 5 mg/mL (30 mL)

Gel, Rectal:

Generic: 2.5 mg (1 ea); 10 mg (1 ea); 20 mg (1 ea)

Solution, Injection:

Generic: 5 mg/mL (2 mL, 10 mL)

Solution, Oral:

Generic: 1 mg/mL (500 mL)

Solution Auto-injector, Intramuscular:

Generic: 10 mg/2 mL (2 mL)

NONFORMULARY

Liquid, Nasal:

Valtoco 10 MG Dose: 10 mg/0.1 mL (1 ea) [contains alcohol, usp]

Valtoco 5 MG Dose: 5 mg/0.1 mL (1 ea) [contains alcohol, usp]

Liquid Therapy Pack, Nasal:

Valtoco 15 MG Dose: 7.5 mg/0.1 mL (1 ea) [contains alcohol, usp]

Valtoco 20 MG Dose: 10 mg/0.1 mL (1 ea) [contains alcohol, usp]

Diazoxide

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Suspension, Oral:

Proglycem: 50 mg/mL (30 mL) [chocolate mint flavor]

Dibucaine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Ointment, External:

Generic: 1% (28 g, 28.35 g)

Ointment, Rectal:

Nupercainal: 1% (28.4 g, 60 g)

Dichlorphenamide

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:

Keveyis: 50 mg [contains corn starch]

Diclofenac and Misoprostol

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:

Generic: Diclofenac sodium 50 mg and misoprostol 200 mcg

Generic: Diclofenac sodium 75 mg and misoprostol 200 mcg

Diclofenac (Ophthalmic)

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Ophthalmic, as sodium:

Generic: 0.1% (2.5 mL, 5 mL)

Diclofenac (Systemic)

DoD Uniform Formulary Outpatient Dosage Forms

BASIC CORE FORMULARY

Tablet Delayed Release, Oral, as sodium:

Generic: 25 mg, 50 mg, 75 mg

Tablet Extended Release 24 Hour, Oral, as sodium:

Generic: 100 mg

UNIFORM FORMULARY

Solution, Intravenous, as sodium:

Dyloject: 37.5 mg/mL (1 mL)

Tablet, Oral, as potassium:

Generic: 50 mg

NONFORMULARY

Packet, Oral, as potassium:

Cambia: 50 mg (1 ea, 9 ea) [anise-mint flavor]

Tier 4 - NOT COVERED

Capsule, Oral, as base:

Zorvolex: 18 mg, 35 mg

Capsule, Oral, as potassium:

Zipsor: 25 mg [contains gelatin (bovine)]

Diclofenac (Topical)

DoD Uniform Formulary Outpatient Dosage Forms

BASIC CORE FORMULARY

Gel, Transdermal, as sodium:

Generic: 1% (100 g)

UNIFORM FORMULARY

Cream, Transdermal, as sodium:

EnovaRX-Diclofenac Sodium: 2.5% (60 g) [contains cetyl alcohol]

Rexaphenac: 1% (120 g) [contains isopropyl alcohol, propylene glycol]

Gel, Transdermal, as sodium:

Generic: 3% (100 g)

Solution, Transdermal, as sodium:

Generic: 1.5% (150 mL)

Therapy Pack, External, as sodium:

Diclo Gel with Xrylix Sheets: 1% (1 ea) [contains isopropyl alcohol, propylene glycol]

Therapy Pack, Transdermal, as sodium:

Diclozor: 1% (1 ea) [contains isopropyl alcohol, propylene glycol]

Lexixryl: 1.5% (1 ea) [contains propylene glycol]

Xrylix: 1.5% (1 ea) [contains propylene glycol]

Tier 4 - NOT COVERED

Patch, Transdermal, as epolamine:

Flector: 1.3% (5 ea, 30 ea) [contains edetate disodium, methylparaben, polysorbate 80, propylparaben]

Solution, Transdermal, as sodium:

Pennsaid: 2% (112 g) [contains propylene glycol]

Dicloxacillin

DoD Uniform Formulary Outpatient Dosage Forms

BASIC CORE FORMULARY

Capsule, Oral:

Generic: 250 mg, 500 mg

Dicyclomine

DoD Uniform Formulary Outpatient Dosage Forms

BASIC CORE FORMULARY

Capsule, Oral, as hydrochloride:

Generic: 10 mg

Tablet, Oral, as hydrochloride:

Generic: 20 mg

UNIFORM FORMULARY

Solution, Intramuscular, as hydrochloride:

Generic: 10 mg/mL (2 mL)

Solution, Oral, as hydrochloride:

Generic: 10 mg/5 mL (473 mL)

Didanosine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule Delayed Release, Oral:

Generic: 125 mg, 200 mg, 250 mg, 400 mg

Solution Reconstituted, Oral:

Videx: 2 g (100 mL); 4 g (200 mL)

Diethylpropion**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Tablet, Oral, as hydrochloride:
Generic: 25 mg
Tablet Extended Release 24 Hour, Oral, as hydrochloride:
Generic: 75 mg

Difenoxin and Atropine**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Tablet, Oral:
Motofen: Difenoxin hydrochloride 1 mg and atropine sulfate 0.025 mg
[dye free]

Diflunisal**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Tablet, Oral:
Generic: 500 mg

Difluprednate**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Emulsion, Ophthalmic:
Durezol: 0.05% (5 mL) [contains edetate sodium (tetrasodium), polysorbate 80]

Digoxin**DoD Uniform Formulary Outpatient Dosage Forms
BASIC CORE FORMULARY**

Tablet, Oral:
Generic: 125 mcg, 250 mcg

UNIFORM FORMULARY

Solution, Injection:
Lanoxin Pediatric: 0.1 mg/mL (1 mL) [contains alcohol, usp, propylene glycol]
Generic: 0.25 mg/mL (2 mL)
Solution, Oral:
Generic: 0.05 mg/mL (60 mL)
Tablet, Oral:
Lanoxin: 62.5 mcg, 187.5 mcg

Digoxin Immune Fab**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Solution Reconstituted, Intravenous [preservative free]:
DigiFab: 40 mg (1 ea)

Dihydrocodeine, Aspirin, and Caffeine**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Capsule, oral:
Generic: Dihydrocodeine bitartrate 16 mg, aspirin 356.4 mg, and caffeine 30 mg

Dihydroergotamine**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Solution, Injection, as mesylate:
Generic: 1 mg/mL (1 mL)
Solution, Nasal, as mesylate:
Generic: 4 mg/mL (1 mL)

DiTIAZem**DoD Uniform Formulary Outpatient Dosage Forms
BASIC CORE FORMULARY**

Capsule Extended Release 24 Hour, Oral, as hydrochloride:
Generic: 120 mg, 180 mg, 240 mg, 300 mg, 360 mg, 420 mg

UNIFORM FORMULARY

Capsule Extended Release 12 Hour, Oral, as hydrochloride:
Generic: 60 mg, 90 mg, 120 mg
Solution, Intravenous, as hydrochloride:
Generic: 25 mg/5 mL (5 mL); 50 mg/10 mL (10 mL); 125 mg/25 mL (25 mL)
Solution Reconstituted, Intravenous, as hydrochloride:
Generic: 100 mg (1 ea)
Tablet, Oral, as hydrochloride:
Generic: 30 mg, 60 mg, 90 mg, 120 mg

NONFORMULARY

Tablet Extended Release 24 Hour, Oral, as hydrochloride:
Cardizem LA: 120 mg, 180 mg, 240 mg, 300 mg, 360 mg, 420 mg
Matzim LA: 180 mg, 240 mg, 300 mg, 360 mg, 420 mg
Generic: 180 mg, 240 mg, 300 mg, 360 mg, 420 mg

Dimenhydrinate**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Solution, Injection:
Generic: 50 mg/mL (1 mL)

Tablet, Oral:
Generic: 50 mg
Tablet Chewable, Oral:
Dramamine: 50 mg [contains aspartame, fd&c yellow #6 aluminum lake]

Dimercaprol**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Solution, Intramuscular:
Bal in Oil: 100 mg/mL (3 mL) [contains benzyl benzoate, peanut oil]

Dimethyl Fumarate**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Capsule Delayed Release, Oral:
Tecfidera: 120 mg, 240 mg [contains brilliant blue fcf (fd&c blue #1)]
Miscellaneous, Oral:
Tecfidera: Capsule, delayed release: 120 mg (14s) and Capsule, delayed release: 240 mg (46s) (60 ea) [contains brilliant blue fcf (fd&c blue #1)]

Dimethyl Sulfoxide**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Solution, Intravesical:
Rimso-50: 50% (50 mL)

Dinoprostone**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Gel, Vaginal:
Prepidil: 0.5 mg/3 g (3 g)
Insert, Vaginal:
Cervidil: 10 mg (1 ea)
Suppository, Vaginal:
Prostin E2: 20 mg (5 ea)

Dinutuximab**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Solution, Intravenous [preservative free]:
Unituxin: 17.5 mg/5 mL (5 mL) [contains mouse (murine) and/or hamster protein]

Diphenhydramine, Aluminum Hydroxide, and Magnesium Hydroxide**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Suspension, Oral:
Generic: Diphenhydramine elixir 50% and Maalox suspension 50%

Diphenhydramine and Ibuprofen**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Capsule, Oral:
Advil PM: Diphenhydramine hydrochloride 25 mg and ibuprofen 200 mg
Tablet, Oral:
Advil PM: Diphenhydramine citrate 38 mg and ibuprofen 200 mg
Motrin PM: Diphenhydramine citrate 38 mg and ibuprofen 200 mg

Diphenhydramine and Phenylephrine**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Liquid, Oral:
Benadryl-D Children's Allergy & Sinus: Diphenhydramine hydrochloride 12.5 mg and phenylephrine hydrochloride 5 mg per 5 mL (118 mL) [ethanol free, sugar free; contains sodium 10 mg/5 mL, sodium benzoate; grape flavor]
Syrup, Oral:
Dimetapp Children's Nighttime Cold and Congestion: Diphenhydramine hydrochloride 6.25 mg and phenylephrine hydrochloride 2.5 mg per 5 mL (120 mL) [ethanol free, sugar free; contains propylene glycol, sodium 4 mg/5 mL, sodium benzoate; grape flavor]
Triaminic Children's Night Time Cold & Cough: Diphenhydramine hydrochloride 6.25 mg and phenylephrine hydrochloride 2.5 mg per 5 mL (118 mL) [contains edetate disodium, propylene glycol, sodium 3 mg/5 mL, sodium benzoate; grape flavor]
Tablet, Oral:
Generic: Diphenhydramine hydrochloride 25 mg and phenylephrine hydrochloride 10 mg

DiphenhydrAMINE (Systemic)**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Capsule, Oral, as hydrochloride:
Generic: 25 mg, 50 mg
Elixir, Oral, as hydrochloride:
Generic: 12.5 mg/5 mL (5 mL, 10 mL)
Liquid, Oral, as hydrochloride:
Allergy Relief Childrens: 12.5 mg/5 mL (118 mL, 480 mL) [alcohol free; contains sodium benzoate]

DIPHENHYDRAMINE (SYSTEMIC)

- Banophen: 12.5 mg/5 mL (118 mL) [alcohol free; cherry flavor]
Banophen: 12.5 mg/5 mL (473 mL) [alcohol free, sugar free; cherry flavor]
Benadryl Allergy Childrens: 12.5 mg/5 mL (118 mL, 236 mL) [alcohol free; contains sodium benzoate]
Benadryl Allergy Childrens: 12.5 mg/5 mL (118 mL) [alcohol free, dye free, sugar free; contains saccharin sodium, sodium benzoate]
Diphenhist: 12.5 mg/5 mL (118 mL, 473 mL) [alcohol free; contains saccharin sodium, sodium benzoate; fruit flavor]
Naramin: 12.5 mg/5 mL (5 mL) [alcohol free; contains sodium benzoate; cherry flavor]
PediaCare Childrens Allergy: 12.5 mg/5 mL (118 mL) [alcohol free; contains sodium benzoate]
Q-Dryl: 12.5 mg/5 mL (118 mL, 237 mL, 473 mL) [alcohol free; contains saccharin sodium, sodium benzoate; cherry flavor]
Scot-Tussin Allergy Relief: 12.5 mg/5 mL (118.3 mL, 240 mL, 480 mL, 3780 mL) [alcohol free, dye free, saccharin free, sodium free, sorbitol free, sugar free]
Siladryl Allergy: 12.5 mg/5 mL (118 mL, 237 mL, 473 mL) [alcohol free, sugar free; contains methylparaben, propylene glycol, propylparaben, saccharin sodium; cherry flavor]
Total Allergy Medicine: 12.5 mg/5 mL (118 mL) [alcohol free]
ZzzQuil: 50 mg/30 mL (177 mL, 354 mL) [contains alcohol, usp, propylene glycol, saccharin sodium, sodium benzoate]
ZzzQuil: 50 mg/30 mL (177 mL, 354 mL) [alcohol free; contains propylene glycol, saccharin sodium, sodium benzoate]
Solution, Injection, as hydrochloride:
Generic: 50 mg/mL (1 mL, 10 mL)
Solution, Injection, as hydrochloride [preservative free]:
Generic: 50 mg/mL (1 mL)
Strip, Oral, as hydrochloride:
Triaminic Cough/Runny Nose: 12.5 mg (14 ea) [contains alcohol, usp]
Triaminic Cough/Runny Nose: 12.5 mg (16 ea) [contains alcohol, usp; grape flavor]
Suspension Reconstituted, Oral, as hydrochloride:
Dicopanol FusePaq: 5 mg/mL (150 mL) [contains sodium benzoate]
Dicopanol RapidPaq: 5 mg/mL (150 mL) [dye free, paraben free, sugar free; contains sodium benzoate]
Syrup, Oral, as hydrochloride:
Altaryl: 12.5 mg/5 mL (120 mL, 480 mL, 3785 mL) [alcohol free; cherry flavor]
Silphen Cough: 12.5 mg/5 mL (118 mL, 237 mL, 473 mL) [contains alcohol, usp, menthol, methylparaben, propylene glycol, propylparaben; strawberry flavor]
Tablet, Oral, as hydrochloride:
Aler-Dryl: 50 mg
Nytol Maximum Strength: 50 mg
Tetra-Formula Nighttime Sleep: 50 mg
Generic: 25 mg
Tablet Chewable, Oral, as hydrochloride:
Benadryl Allergy Childrens: 12.5 mg

Diphenhydramine (Topical)

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

- Cream, External, as hydrochloride:
Anti-Itch: 2% (28.4 g) [contains methylparaben, propylparaben]
Anti-Itch Maximum Strength: 2% (30 g)
Banophen: 2% (28 g) [contains cetyl alcohol, methylparaben, propylene glycol, propylparaben]
Benadryl Itch Stopping: 1% (28.3 g) [contains cetyl alcohol]
Benadryl Itch Stopping: 1% (28.3 g) [contains cetyl alcohol, methylparaben, propylene glycol, propylparaben]
Itch Relief: 2% (15 g, 30 g, 56.8 g)
Stick, External, as hydrochloride:
Benadryl Itch Relief: 2% (14 mL) [contains alcohol, usp]

Diphenoxylate and Atropine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

- Solution, Oral:
Generic: Diphenoxylate hydrochloride 2.5 mg and atropine sulfate 0.025 mg per 5 mL (5 mL, 10 mL, 60 mL)
Tablet, Oral:
Generic: Diphenoxylate hydrochloride 2.5 mg and atropine sulfate 0.025 mg

Diphtheria and Tetanus Toxoids

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

- Injection, Suspension [Td, adult; preservative free]:
Generic: Diphtheria 2 Lf units and tetanus 2 Lf units per 0.5 mL (0.5 mL)
Injection, suspension [DT, pediatric; preservative free]:
Generic: Diphtheria 25 Lf units and tetanus 5 Lf units per 0.5 mL (0.5 mL)

Diphtheria and Tetanus Toxoids, Acellular Pertussis, and Poliovirus Vaccine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

- Injection, suspension [preservative free]:
Kinrix: Diphtheria toxoid 25 Lf, tetanus toxoid 10 Lf, acellular pertussis antigens [inactivated pertussis toxin 25 mcg, filamentous hemagglutinin 25

- mcg, pertactin 8 mcg], type 1 poliovirus 40 D-antigen units, type 2 poliovirus 8 D-antigen units, and type 3 poliovirus 32 D-antigen units per 0.5 mL (0.5 mL) [contains aluminum, neomycin sulfate, polymyxin B, polysorbate 80; may contain natural rubber/natural latex in prefilled syringe]
Quadracel: Diphtheria toxoid 15 Lf, tetanus toxoid 5 Lf, acellular pertussis antigens [detoxified pertussis toxin 20 mcg, filamentous hemagglutinin 20 mcg, pertactin 3 mcg, fimbriae (types 2 and 3) 5 mcg], type 1 poliovirus 40 D-antigen units, type 2 poliovirus 8 D-antigen units, and type 3 poliovirus 32 D-antigen units per 0.5 mL (0.5 mL) [contains aluminum, neomycin sulfate, polymyxin B, polysorbate 80]

Diphtheria and Tetanus Toxoids, Acellular Pertussis, Poliovirus and Haemophilus b Conjugate Vaccine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Injection, suspension:

- Pentacel: Diphtheria toxoid 15 Lf, tetanus toxoid 5 Lf, acellular pertussis antigens [pertussis toxin detoxified 20 mcg, filamentous hemagglutinin 20 mcg, pertactin 3 mcg, fimbriae (types 2 and 3) 5 mcg], type 1 poliovirus 40 D-antigen units; type 2 poliovirus 8 D-antigen units; type 3 poliovirus 32 D-antigen units, and *Haemophilus b* capsular polysaccharide 10 mcg [bound to tetanus toxoid 24 mcg] per 0.5 mL (0.5 mL) [contains albumin, aluminum, neomycin, polymyxin B sulfate, and polysorbate 80; supplied in two vials, one containing DTaP-IPV liquid and one containing Hib powder]

Diphtheria and Tetanus Toxoids, and Acellular Pertussis Vaccine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Injection, suspension [Tdap, booster formulation]:

- Adacel: Diphtheria 2 Lf units, tetanus 5 Lf units, and acellular pertussis antigens [detoxified pertussis toxin 2.5 mcg, filamentous hemagglutinin 5 mcg, pertactin 3 mcg, fimbriae (types 2 and 3) 5 mcg] per 0.5 mL (0.5 mL) [contains aluminum; may contain natural rubber/natural latex in prefilled syringe]
Boostrix: Diphtheria 2.5 Lf units, tetanus 5 Lf units, and acellular pertussis antigens [inactivated pertussis toxin 8 mcg, filamentous hemagglutinin 8 mcg, pertactin 2.5 mcg] per 0.5 mL (0.5 mL) [contains aluminum and polysorbate 80; may contain natural rubber/natural latex in prefilled syringe]
Injection, suspension [DTaP, active immunization formulation]:
Daptacel: Diphtheria 15 Lf units, tetanus 5 Lf units, and acellular pertussis antigens [detoxified pertussis toxin 10 mcg, filamentous hemagglutinin 5 mcg, pertactin 3 mcg, fimbriae (types 2 and 3) 5 mcg] per 0.5 mL (0.5 mL) [preservative free; contains aluminum]
Infanrix: Diphtheria 25 Lf units, tetanus 10 Lf units, and acellular pertussis antigens [inactivated pertussis toxin 25 mcg, filamentous hemagglutinin 25 mcg, pertactin 8 mcg] per 0.5 mL (0.5 mL) [preservative free; contains aluminum and polysorbate 80; prefilled syringes contain natural rubber/natural latex]

Diphtheria, Tetanus Toxoids, Acellular Pertussis, Hepatitis B (Recombinant), and Poliovirus (Inactivated) Vaccine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Injection, suspension [preservative free]:

- Pediarix: Diphtheria toxoid 25 Lf, tetanus toxoid 10 Lf, acellular pertussis antigens [inactivated pertussis toxin 25 mcg, filamentous hemagglutinin 25 mcg, pertactin 8 mcg, HBsAg 10 mcg, type 1 poliovirus 40 D antigen units, type 2 poliovirus 8 D antigen units and type 3 poliovirus 32 D antigen units] per 0.5 mL (0.5 mL) [contains aluminum, neomycin sulfate (trace amounts), polymyxin B (trace amounts), polysorbate 80, and yeast protein ≤5%; may contain natural rubber/natural latex in prefilled syringe]

Dipyridamole

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Intravenous:

- Generic: 5 mg/mL (10 mL)

Tablet, Oral:

- Generic: 25 mg, 50 mg, 75 mg

Disopyramide

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule, Oral:

- Generic: 100 mg, 150 mg

Capsule Extended Release 12 Hour, Oral:

- Norpace CR: 100 mg, 150 mg

Disulfiram

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:

- Generic: 250 mg, 500 mg

DOBUTamine**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution, Intravenous, as hydrochloride:

Generic: 1 mg/mL (250 mL); 2 mg/mL (250 mL); 4 mg/mL (250 mL); 250 mg/20 mL (20 mL); 500 mg/40 mL (40 mL)

DOCEtaxel**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Concentrate, Intravenous:

Generic: 20 mg/mL (1 mL); 80 mg/4 mL (4 mL); 160 mg/8 mL (8 mL); 20 mg/0.5 mL (0.5 mL); 80 mg/2 mL (2 mL)

Concentrate, Intravenous [preservative free]:

Generic: 20 mg/mL (1 mL); 80 mg/4 mL (4 mL); 160 mg/8 mL (8 mL)

Solution, Intravenous:

Generic: 20 mg/2 mL (2 mL); 80 mg/8 mL (8 mL); 160 mg/16 mL (16 mL); 20 mg/mL (1 mL); 80 mg/4 mL (4 mL); 160 mg/8 mL (8 mL)

Docosanol**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Cream, External:

Abreva: 10% (2 g) [contains benzyl alcohol]

Docusate**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Capsule, Oral, as calcium:

Generic: 240 mg

Capsule, Oral, as sodium:

Colace Clear: 50 mg [dye free]

Generic: 100 mg, 250 mg

Enema, Rectal, as sodium:

DocuSol Kids: 100 mg/5 mL (5 ea) [contains polyethylene glycol]

DocuSol Mini: 283 mg (5 ea)

Enemeez Mini: 283 mg (5 mL)

Liquid, Oral, as sodium:

Pedia-Lax: 50 mg/15 mL (118 mL) [contains edetate disodium, methylparaben, polyethylene glycol, propylene glycol, propylparaben; fruit punch flavor]

Silace: 150 mg/15 mL (473 mL) [lemon-vanilla flavor]

Generic: 50 mg/5 mL (10 mL)

Syrup, Oral, as sodium:

Generic: 60 mg/15 mL (25 mL)

Tablet, Oral, as sodium:

Generic: 100 mg

Docusate and Senna**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Tablet, Oral:

Generic: Docusate sodium 50 mg and sennosides 8.6 mg

Dofetilide**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Capsule, Oral:

Generic: 125 mcg, 250 mcg, 500 mcg

Dolutegravir**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Tablet, Oral:

Tivicay: 10 mg, 25 mg, 50 mg

Donepezil**DoD Uniform Formulary Outpatient Dosage Forms****Extended Core Formulary**

Tablet, Oral, as hydrochloride:

Generic: 5 mg, 10 mg

Tablet Disintegrating, Oral, as hydrochloride:

Generic: 5 mg, 10 mg

UNIFORM FORMULARY

Tablet, Oral, as hydrochloride:

Aricept: 5 mg, 10 mg

NONFORMULARY

Tablet, Oral, as hydrochloride:

Generic: 23 mg

DOPamine**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution, Intravenous, as hydrochloride:

Generic: 0.8 mg/mL (250 mL, 500 mL); 1.6 mg/mL (250 mL, 500 mL); 3.2 mg/mL (250 mL); 40 mg/mL (5 mL, 10 mL); 80 mg/mL (5 mL); 160 mg/mL (5 mL)

Doravirine**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Tablet, Oral:

Pifeltro: 100 mg

Doravirine, Lamivudine, and Tenofovir Disoproxil Fumarate**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Tablet, Oral:

Delstrigo: Doravirine 100 mg, lamivudine 300 mg, and tenofovir disoproxil fumarate 300 mg

Doripenem**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution Reconstituted, Intravenous:

Generic: 250 mg (1 ea); 500 mg (1 ea)

Dornase Alfa**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution, Inhalation:

Pulmozyme: 1 mg/mL (2.5 mL)

Dorzolamide**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution, Ophthalmic:

Generic: 2% (10 mL)

Dorzolamide and Timolol**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution, Ophthalmic [drops]:

Generic: Dorzolamide 2% [20 mg/mL] and timolol 0.5% [5 mg/mL] (10 mL)

Solution, Ophthalmic [drops, preservative free]:

Cosopt PF: Dorzolamide 2% [20 mg/mL] and timolol 0.5% [5 mg/mL] (0.2 mL)

Dostarlimab**DoD Uniform Formulary Outpatient Dosage Forms****NOT COVERED**

Solution, Intravenous:

Jemperli: Dostarlimab-gxly 500 mg/10 mL (10 mL) [contains polysorbate 80]

Doxazosin**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Tablet, Oral:

Generic: 1 mg, 2 mg, 4 mg, 8 mg

NONFORMULARY

Tablet Extended Release 24 Hour, Oral:

Cardura XL: 4 mg, 8 mg

Doxepin (Systemic)**DoD Uniform Formulary Outpatient Dosage Forms****BASIC CORE FORMULARY**

Capsule, Oral:

Generic: 10 mg, 25 mg, 50 mg, 75 mg

Concentrate, Oral:

Generic: 10 mg/mL (118 mL, 120 mL)

UNIFORM FORMULARY

Capsule, Oral:

Generic: 100 mg, 150 mg

Tablet, Oral:

Generic: 3 mg, 6 mg

Doxepin (Topical)**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Cream, External, as hydrochloride:

Generic: 5% (45 g)

Doxercalciferol**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Capsule, Oral:

Generic: 0.5 mcg, 1 mcg, 2.5 mcg

Solution, Intravenous:

Hectorol: 2 mcg/mL (1 mL) [contains alcohol, usp, disodium edta]

Generic: 4 mcg/2 mL (2 mL)

DOXOrubicin (Conventional)**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution, Intravenous, as hydrochloride:

Generic: 2 mg/mL (5 mL, 10 mL, 25 mL, 100 mL)

Solution, Intravenous, as hydrochloride [preservative free]:

Generic: 2 mg/mL (5 mL, 10 mL, 25 mL, 75 mL, 100 mL)

DOXORUBICIN (CONVENTIONAL)

Solution Reconstituted, Intravenous, as hydrochloride:

Adriamycin: 10 mg (1 ea); 20 mg (1 ea)
Generic: 50 mg (1 ea)

Solution Reconstituted, Intravenous, as hydrochloride [preservative free]:
Generic: 10 mg (1 ea)

DOXOrubicin (Liposomal)

**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Injectable, Intravenous, as hydrochloride:
Generic: 2 mg/mL (10 mL, 25 mL)

Doxycycline

**DoD Uniform Formulary Outpatient Dosage Forms
BASIC CORE FORMULARY**

Capsule, Oral, as hyclate [strength expressed as base]:
Generic: 100 mg

Tablet, Oral, as hyclate [strength expressed as base]:
Generic: 100 mg

UNIFORM FORMULARY

Capsule, Oral, as hyclate [strength expressed as base]:
Generic: 50 mg

Capsule, Oral, as monohydrate [strength expressed as base]:
Generic: 50 mg, 75 mg, 100 mg, 150 mg

Kit, Combination, as hyclate [strength expressed as base]:
Morgidox: 1 x 50 mg, 2 x 100 mg, 1 x 100 mg [contains cetyl alcohol, edetate disodium]

Solution Reconstituted, Intravenous, as hyclate [strength expressed as base, preservative free]:
Generic: 100 mg (1 ea)

Suspension Reconstituted, Oral, as monohydrate:
Generic: 25 mg/5 mL (60 mL)

Suspension Reconstituted, Oral, as monohydrate [strength expressed as base]:
Suspension Reconstituted, Oral, as monohydrate [strength expressed as base]:

Syrup, Oral, as calcium [strength expressed as base]:
Vibramycin: 50 mg/5 mL (473 mL) [contains butylparaben, propylene glycol, propylparaben, sodium metabisulfite; raspberry-apple flavor]

Tablet, Oral, as hyclate [strength expressed as base]:
Generic: 20 mg, 50 mg, 75 mg, 150 mg

Tablet, Oral, as monohydrate [strength expressed as base]:
Generic: 50 mg, 75 mg, 100 mg, 150 mg

Tablet Delayed Release, Oral, as hyclate [strength expressed as base]:
Soloxide: 150 mg [scored]

NONFORMULARY

Capsule, Oral, as hyclate [strength expressed as base]:
Morgidox: 50 mg, 100 mg
Vibramycin: 100 mg

Capsule, Oral, as monohydrate [strength expressed as base]:
Mondoxyne NL: 50 mg, 75 mg, 100 mg
Monodox, Okebo: 75 mg, 100 mg

Capsule Delayed Release, Oral, as monohydrate [strength expressed as base]:
Oracea, Generic: 40 mg

Tablet, Oral, as hyclate [strength expressed as base]:
Acticlate: 75 mg, 150 mg
TargaDOX: 50 mg

Tablet, Oral, as monohydrate [strength expressed as base]:
Avidoxy: 100 mg

Tablet Delayed Release, Oral, as hyclate [strength expressed as base]:
Doryx: 200 mg [scored]

Doryx MPC: 120 mg [contains corn starch]
Generic: 50 mg, 75 mg, 100 mg, 150 mg, 200 mg

Doxylamine

**DoD Uniform Formulary Outpatient Dosage Forms
BASIC CORE FORMULARY**

Tablet, Oral, as succinate:
Sleep Aid: 25 mg [scored]

Dronabinol

**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Capsule, Oral:
Generic: 2.5 mg, 5 mg, 10 mg

NONFORMULARY

Solution, Oral:
Syndros: 5 mg/mL (30 mL)

Dronedarone

**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Tablet, Oral:
Multaq: 400 mg

Droperidol

**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Solution, Injection:
Generic: 2.5 mg/mL (2 mL)

Drospirenone and Estradiol

**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Tablet, Oral:
Angeliq: Drospirenone 0.25 mg and estradiol 0.5 mg; drospirenone 0.5 mg and estradiol 1 mg

Droxidopa

**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Capsule, Oral:
Northera: 100 mg, 200 mg, 300 mg

DULoxetine

**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Capsule Delayed Release Particles, Oral:
Generic: 20 mg, 30 mg, 40 mg, 60 mg

Dupilumab

**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Solution Prefilled Syringe, Subcutaneous [preservative free]:
Dupixent: 300 mg/2 mL (2 mL) [contains polysorbate 80]

Durvalumab

**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Solution, Intravenous [preservative free]:
Imfinzi: 120 mg/2.4 mL (2.4 mL); 500 mg/10 mL (10 mL) [contains polysorbate 80]

Duvelisib

**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Capsule, Oral:
Copiktra: 15 mg, 25 mg

Dyclonine

**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Lozenge, Oral, as hydrochloride:
Sucrets Children's: 1.2 mg (18s) [cherry flavor]
Sucrets Maximum Strength: 3 mg (18s) [black-cherry flavor; wintergreen flavor]
Sucrets Regular Strength: 2 mg (18s)

Ecallantide

**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Solution, Subcutaneous [preservative free]:
Kalbitor: 10 mg/mL (1 mL)

Echothiophate Iodide

**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Solution Reconstituted, Ophthalmic:
Phospholine Iodide: 0.125% (5 mL)

Econazole

**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Foam, External, as nitrate:
Ecoza: 1% (70 g) [contains propylene glycol, trolamine (triethanolamine)]
NONFORMULARY
Cream, External, as nitrate:
Generic: 1% (15 g, 30 g, 85 g)

Eculizumab

**DoD Uniform Formulary Outpatient Dosage Forms
NOT COVERED**

Solution, Intravenous [preservative free]:
Soliris: 10 mg/mL (30 mL)

Edaravone

**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Solution, Intravenous:
Radicava: 30 mg/100 mL (100 mL) [contains sodium bisulfite]

Edrophonium

**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Solution, Injection, as chloride:
Enlon: 10 mg/mL (15 mL) [contains phenol]

Edrophonium and Atropine**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution, Intravenous:

Enlon-Plus: Edrophonium chloride 10 mg/mL and atropine sulfate 0.14 mg/mL (5 mL [DSC]) [contains sodium sulfite]

Efavirenz**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Capsule, Oral:

Sustiva: 50 mg, 200 mg

Tablet, Oral:

Sustiva: 600 mg

Efavirenz, Emtricitabine, and Tenofovir Disoproxil Fumarate**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Tablet, Oral:

Atripla: Efavirenz 600 mg, emtricitabine 200 mg, and tenofovir disoproxil fumarate 300 mg

Efavirenz, Lamivudine, and Tenofovir Disoproxil Fumarate**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Tablet, Oral:

Symfi: Efavirenz 600 mg, lamivudine 300 mg, and tenofovir disoproxil fumarate 300 mg

Symfi Lo: Efavirenz 400 mg, lamivudine 300 mg, and tenofovir disoproxil fumarate 300 mg

Eflornithine**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Cream, External, as hydrochloride:

Vaniqa: 13.9% (45 g) [contains cetearyl alcohol, methylparaben, propylparaben]

Elapegademase**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution, Intramuscular [preservative free]:

Revcovi: 2.4 mg/1.5 mL (1.5 mL)

Electrolyte Replacement Solution**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution, Intravenous:

Hyperlyte-CR: (250 mL)

Isolyte-S: (1000 mL)

Isolyte-S pH 7.4: (500 mL, 1000 mL)

Normosol-R: (500 mL, 1000 mL) [latex free]

Normosol-R in D5W: (1000 mL) [latex free]

Normosol-R pH 7.4: (500 mL, 1000 mL) [latex free]

Plasma-Lyte 148: (500 mL, 1000 mL)

Plasma-Lyte A: (500 mL, 1000 mL)

Eletriptan**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Tablet, Oral:

Relpax: 20 mg, 40 mg

Eliglustat**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Capsule, Oral:

Cerdelga: 84 mg

Elosulfase Alfa**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution, Intravenous [preservative free]:

Vimizim: 5 mg/5 mL (5 mL) [contains mouse (murine) and/or hamster protein]

Elotuzumab**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution Reconstituted, Intravenous:

Empliciti: 300 mg (1 ea); 400 mg (1 ea) [contains mouse (murine) and/or hamster protein, polysorbate 80]

Eltrombopag**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Tablet, Oral:

Promacta: 12.5 mg, 25 mg, 50 mg, 75 mg

NONFORMULARY

Packet, Oral:

Promacta: 12.5 mg (1 ea, 30 ea)

Eluxadoline**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Tablet, Oral:

Viberzi: 75 mg, 100 mg

Elvitegravir**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Tablet, Oral:

Vitekta: 85 mg [DSC], 150 mg [DSC]

Elvitegravir, Cobicistat, Emtricitabine, and Tenofovir**Alafenamide****DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Tablet, Oral:

Genvoya: Elvitegravir 150 mg, cobicistat 150 mg, emtricitabine 200 mg, and tenofovir alafenamide 10 mg

Elvitegravir, Cobicistat, Emtricitabine, and Tenofovir Disoproxil Fumarate**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Tablet, oral:

Stribild: Elvitegravir 150 mg, cobicistat 150 mg, emtricitabine 200 mg, and tenofovir disoproxil fumarate 300 mg

Emapalumab**DoD Uniform Formulary Outpatient Dosage Forms****NOT COVERED**

Solution, Intravenous [preservative free]:

Gamifant: 10 mg/2 mL (2 mL); 50 mg/10 mL (10 mL) [contains polysorbate 80]

Emollients**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Aerosol, Foam, External:

HylatopicPlus: (100 g, 150 g)

Neosalus: (70 g, 200 g)

Cream, External:

Atopiclair: (100 g) [dye free; contains shea nut derivatives]

CeraVe: (340 g, 453 g)

Droxy: (56.7 g)

Eletone: (100 g)

HylatopicPlus: (100 g, 450 g)

Loutrex: (30 g)

Niseko: (85 g)

Nivatopic Plus: (100 g, 450 g)

Normlshield: (120 g)

Pen-Kera: (118 mL, 236 mL) [dye free]

Pentran Plus: (500 g, 2500 g, 10000 g)

Promiseb: (30 g) [contains shea nut derivatives]

PruClair: (100 g) [contains shea nut derivatives]

PR Cream: (56.7 g) [packaged with moisturizing cream]

Vanicream: (57 g, 113 g, 453 g) [dye free, fragrance free]

Cream, External [preservative free]:

PruMyx: (140 g)

Emulsion, External:

AVO Cream: (45 g, 90 g)

Ceracade: (90 g, 270 g)

Emulsion SB: (90 g)

EpiCeram Skin Barrier: (90 g, 225 g)

KamDoy: (60 mL) [contains lidocaine <1%]

PruTect: (45 g, 90 g)

Gel, topical:

Atrapro Antipruritic: (113 g)

Lotion, External:

CeraVe: (237 mL, 355 mL)

HylatopicPlus: (420 mL)

Moisturel: (226 g, 397 g) [contains benzyl alcohol]

Neosalus: (236 mL)

Ointment, External:

DermaPhor: (106 g) [contains benzyl alcohol]

CeraVe: (144 g, 340 g)

Empagliflozin**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Tablet, Oral:

Jardiance: 10 mg, 25 mg

Empagliflozin and Linagliptin**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Tablet, Oral:

Glyxambi: Empagliflozin 10 mg and linagliptin 5 mg, Empagliflozin 25 mg and linagliptin 5 mg [contains corn starch]

EMPAGLIFLOZIN AND METFORMIN

Empagliflozin and Metformin

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:

Synjardy: Empagliflozin 5 mg and metformin hydrochloride 500 mg [contains corn starch]

Synjardy: Empagliflozin 5 mg and metformin hydrochloride 1000 mg [contains corn starch]

Synjardy: Empagliflozin 12.5 mg and metformin hydrochloride 500 mg [contains corn starch]

Synjardy: Empagliflozin 12.5 mg and metformin hydrochloride 1000 mg [contains corn starch]

Empagliflozin, Linagliptin, and Metformin

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet Extended Release 24 Hour, Oral:

Trijardy XR: Empagliflozin 10 mg, linagliptin 5 mg, and metformin 1,000 mg

Trijardy XR: Empagliflozin 25 mg, linagliptin 5 mg, and metformin 1,000 mg

Trijardy XR: Empagliflozin 5 mg, linagliptin 2.5 mg, and metformin 1,000 mg

Trijardy XR: Empagliflozin 12.5 mg, linagliptin 2.5 mg, and metformin 1,000 mg

Emtricitabine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule, Oral:

Emtriva: 200 mg

Solution, Oral:

Emtriva: 10 mg/mL (170 mL) [contains edetate disodium, methylparaben, propylene glycol, propylparaben; cotton candy flavor]

Emtricitabine and Tenofovir Alafenamide

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:

Descovy: Emtricitabine 200 mg and tenofovir alafenamide 25 mg

Emtricitabine and Tenofovir Disoproxil Fumarate

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:

Truvada: Emtricitabine 100 mg and tenofovir disoproxil fumarate 150 mg

Truvada: Emtricitabine 133 mg and tenofovir disoproxil fumarate 200 mg

Truvada: Emtricitabine 167 mg and tenofovir disoproxil fumarate 250 mg

Truvada: Emtricitabine 200 mg and tenofovir disoproxil fumarate 300 mg

Emtricitabine, Rilpivirine, and Tenofovir Alafenamide

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:

Odefsey: Emtricitabine 200 mg, rilpivirine 25 mg, and tenofovir alafenamide 25 mg

Emtricitabine, Rilpivirine, and Tenofovir Disoproxil Fumarate

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:

Complera: Emtricitabine 200 mg, rilpivirine 25 mg, and tenofovir disoproxil fumarate 300 mg

Enalapril

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Oral, as maleate:

Epaned: 1 mg/mL (150 mL) [contains sodium benzoate]

Solution Reconstituted, Oral, as maleate:

Epaned: 1 mg/mL (150 mL) [contains methylparaben, propylparaben, saccharin sodium; berry-citrus flavor]

Tablet, Oral, as maleate:

Generic: 2.5 mg, 5 mg, 10 mg, 20 mg

Enalapril and Hydrochlorothiazide

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:

5/12.5: Enalapril maleate 5 mg and hydrochlorothiazide 12.5 mg

10/25: Enalapril maleate 10 mg and hydrochlorothiazide 25 mg

Enalaprilat

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Injectable, Intravenous:

Generic: 1.25 mg/mL (1 mL, 2 mL)

Enasidenib

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:

IDHIFA: 50 mg, 100 mg

Encorafenib

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule, Oral:

Braftovi: 50 mg, 75 mg

Enfortumab Vedotin

DoD Uniform Formulary Outpatient Dosage Forms

NOT COVERED

Solution Reconstituted, Intravenous [preservative free]:

Padcev: enfortumab vedotin-ejfv 20 mg (1 ea); enfortumab vedotin-ejfv 30 mg (1 ea)

Enfuvirtide

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution Reconstituted, Subcutaneous:

Fuzeon: 90 mg (1 ea)

Enoxaparin

DoD Uniform Formulary Outpatient Dosage Forms

BASIC CORE FORMULARY

Solution, Injection, as sodium:

Generic: 300 mg/3 mL (3 mL)

Solution, Subcutaneous, as sodium [preservative free]:

Generic: 30 mg/0.3 mL (0.3 mL); 40 mg/0.4 mL (0.4 mL); 60 mg/0.6 mL (0.6 mL); 80 mg/0.8 mL (0.8 mL); 100 mg/mL (1 mL); 120 mg/0.8 mL (0.8 mL); 150 mg/mL (1 mL)

Entacapone

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:

Generic: 200 mg

Entecavir

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Oral:

Baraclude: 0.05 mg/mL (210 mL) [contains methylparaben, propylparaben; orange flavor]

Tablet, Oral:

Generic: 0.5 mg, 1 mg

Enzalutamide

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule, Oral:

Xtandi: 40 mg

Ephedrine and Guaifenesin

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:

Bronkaid: Ephedrine sulfate 25 mg and guaifenesin 400 mg

Primatene Asthma: Ephedrine sulfate 12.5 mg and guaifenesin 200 mg [scored]

EPHEDrine (Systemic)

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Injection, as sulfate:

Generic: 50 mg/mL (1 mL)

Solution, Injection, as sulfate [preservative free]:

Generic: 50 mg/mL (1 mL)

Solution, Intravenous, as sulfate:

Generic: 50 mg/mL (1 mL)

Solution, Intravenous, as sulfate [preservative free]:

Generic: 50 mg/mL (1 mL)

Solution Prefilled Syringe, Intravenous, as sulfate:

Generic: 250 mg/5 mL (5 mL); 10 mg/5 mL in NaCl 0.9% (5 mL); 10 mg/mL in NaCl 0.9% (1 mL); 100 mg/10 mL in NaCl 0.9% (10 mL); 25 mg/5 mL (5 mL); 50 mg/10 mL in NaCl 0.9% (10 mL); 50 mg/5 mL in NaCl 0.9% (5 mL)

Epinastine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Ophthalmic, as hydrochloride:

Generic: 0.05% (5 mL)

EPINEPHrine (Nasal)

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Nasal, as hydrochloride:

Adrenalin: 0.1% (30 mL)

EPINEPHrine (Oral Inhalation)**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Nebulization Solution, Inhalation:
Asthmanefrin Refill: 2.25% (1 ea) [contains edetate disodium]
Nebulization Solution, Inhalation [preservative free]:
S2: 2.25% (1 ea) [sulfite free; contains edetate disodium]

Epinephrine (Racemic) and Aluminum Potassium Sulfate**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Retraction cord, for gingival sulcus placement:
GingiBRAID †:
0e fine: Epinephrine 0.10 – 0.30 mg and aluminum potassium sulfate 0.05 – 0.25 mg per inch
1e small: Epinephrine 0.20 – 0.60 mg and aluminum potassium sulfate 0.15 – 0.35 mg per inch
2e medium: Epinephrine 0.40 – 0.80 mg and aluminum potassium sulfate 0.20 – 0.50 mg per inch
3e large: Epinephrine 0.60 – 1.20 mg and aluminum potassium sulfate 0.30 – 0.80 mg per inch

EPINEPHrine (Systemic)**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Kit, Injection:
Adyphren; Adyphren II; Adyphren Amp; Adyphren Amp II: 1 mg/mL [contains sodium metabisulfite]
EpinephrineSnap-EMS; Epinephrinesnap-v: 1 mg/mL [contains sodium metabisulfite]
EPIsnap: 1 mg/mL [contains sodium metabisulfite]
Kit, Injection [preservative free]:
Epinephrinesnap-v: 1 mg/mL
Solution, Injection:
Generic: 30 mg/30 mL (30 mL)
Solution, Injection [preservative free]:
Generic: 30 mg/30 mL (30 mL)
Solution Auto-injector, Injection:
Auvi-Q: 0.1 mg/0.1 mL (2 ea); 0.15 mg/0.15 mL (2 ea); 0.3 mg/0.3 mL (2 ea) [contains sodium bisulfite]
EpiPen 2-Pak: 0.3 mg/0.3 mL (2 ea) [latex free; contains sodium metabisulfite]
EpiPen Jr 2-Pak: 0.15 mg/0.3 mL (2 ea) [contains sodium metabisulfite]
Generic: 0.15 mg/0.3 mL (2 ea); 0.15 mg/0.15 mL (1 ea, 2 ea); 0.3 mg/0.3 mL (1 ea, 2 ea)
Solution Prefilled Syringe, Injection [preservative free]:
Generic: 1 mg/10 mL (10 mL)

NONFORMULARY

Solution Prefilled Syringe, Injection [preservative free]:
Symjepi: 0.3 mg/0.3 mL (2 ea) [contains sodium metabisulfite]

EpiRUBicin**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Solution, Intravenous, as hydrochloride [preservative free]:
Generic: 50 mg/25 mL (25 mL); 200 mg/100 mL (100 mL)

Eplerenone**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Tablet, Oral:
Generic: 25 mg, 50 mg

Epoetin Alfa**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Solution, Injection:
Epogen: 10,000 units/mL (2 mL); 20,000 units/mL (1 mL) [contains benzyl alcohol]
Procrit: 10,000 units/mL (2 mL); 20,000 units/mL (1 mL) [contains benzyl alcohol]
Solution, Injection [preservative free]:
Epogen: 2000 units/mL (1 mL); 3000 units/mL (1 mL); 4000 units/mL (1 mL); 10,000 units/mL (1 mL)
Procrit: 2000 units/mL (1 mL); 3000 units/mL (1 mL); 4000 units/mL (1 mL); 10,000 units/mL (1 mL); 40,000 units/mL (1 mL)
Retacrit: 2000 units/mL (1 mL); 3000 units/mL (1 mL); 4000 units/mL (1 mL); 10,000 units/mL (1 mL); 40,000 units/mL (1 mL)

Epoprostenol**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Solution Reconstituted, Intravenous:
Generic: 0.5 mg (1 ea); 1.5 mg (1 ea)

Eprosartan**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Tablet, Oral:
Generic: 600 mg

Eptifibatide**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Solution, Intravenous:
Integrilin: 75 mg/100 mL (100 mL); 20 mg/10 mL (10 mL); 200 mg/100 mL (100 mL)
Generic: 75 mg/100 mL (100 mL); 20 mg/10 mL (10 mL)
Solution, Intravenous [preservative free]:
Generic: 75 mg/100 mL (100 mL); 20 mg/10 mL (10 mL); 200 mg/100 mL (100 mL)

Eravacycline**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Solution Reconstituted, Intravenous [preservative free]:
Xerava: 50 mg (1 ea)

Erenumab**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Solution Auto-injector, Subcutaneous [preservative free]:
Aimovig: 70 mg/mL (1 mL) [contains polysorbate 80]
Aimovig 140 Dose: 70 mg/mL (1 mL) [contains polysorbate 80]

Ergocalciferol**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Capsule, Oral:
Generic: 50,000 units
Solution, Oral:
Generic: 8000 units/mL (60 mL)
Tablet, Oral:
Generic: 400 units, 2000 units

Ergoloid Mesylates**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Tablet, Oral:
Generic: 1 mg

Ergotamine**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Tablet, Sublingual, as tartrate:
Ergomar: 2 mg [contains saccharin sodium]

Ergotamine and Caffeine**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Suppository, Rectal:
Migergot: Ergotamine tartrate 2 mg and caffeine 100 mg (12s)
Tablet, Oral:
Generic: Ergotamine tartrate 1 mg and caffeine 100 mg

Eribulin**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Solution, Intravenous, as mesylate:
Halaven: 1 mg/2 mL (2 mL) [contains alcohol, usp]

Erlotinib**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Tablet, Oral:
Tarceva: 25 mg, 100 mg, 150 mg

Ertapenem**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Solution Reconstituted, Injection:
INVanz: 1 g (1 ea)
Solution Reconstituted, Intravenous:
INVanz: 1 g (1 ea)

Erythromycin and Benzoyl Peroxide**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Gel, External:
Generic: Erythromycin 30 mg and benzoyl peroxide 50 mg per g (23 g, 47 g)

Erythromycin (Ophthalmic)**DoD Uniform Formulary Outpatient Dosage Forms
BASIC CORE FORMULARY**

Ointment, Ophthalmic:
Generic: 5 mg/g (1 g, 3.5 g)

ERYTHROMYCIN (SYSTEMIC)

Erythromycin (Systemic)

DoD Uniform Formulary Outpatient Dosage Forms

BASIC CORE FORMULARY

Suspension Reconstituted, Oral, as ethylsuccinate:

E.E.S. Granules: 200 mg/5 mL (100 mL, 200 mL) [cherry flavor]

EryPed: 200 mg/5 mL (100 mL) [fruit flavor]

Generic: 200 mg/5 mL (100 mL, 200 mL)

Tablet, Oral, as stearate:

Erythrocin Stearate: 250 mg

Tablet Delayed Release, Oral, as base:

Ery-Tab: 250 mg

UNIFORM FORMULARY

Capsule Delayed Release Particles, Oral, as base:

Generic: 250 mg

Solution Reconstituted, Intravenous, as lactobionate:

Erythrocin Lactobionate: 500 mg (1 ea)

Tablet, Oral, as base:

Generic: 250 mg, 500 mg

Tablet, Oral, as ethylsuccinate:

Generic: 400 mg

Erythromycin (Topical)

DoD Uniform Formulary Outpatient Dosage Forms

BASIC CORE FORMULARY

Gel, External:

Generic: 2% (30 g, 60 g)

Solution, External:

Generic: 2% (60 mL)

UNIFORM FORMULARY

Pad, External:

Generic: 2% (60 ea)

Escitalopram

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Oral:

Generic: 5 mg/5 mL (240 mL)

Tablet, Oral:

Generic: 5 mg, 10 mg, 20 mg

Esketamine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution Therapy Pack, Nasal, as hydrochloride:

Spravato (56 MG Dose): 28 mg/device (dose pack of 2) (1 ea) [contains edetate disodium]

Spravato (84 MG Dose): 28 mg/device (dose pack of 3) (1 ea) [contains edetate disodium]

Esclicarbazepine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:

Aptiom: 200 mg, 400 mg, 600 mg, 800 mg

Esmolol

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Intravenous, as hydrochloride:

Brevibloc: 100 mg/10 mL (10 mL)

Brevibloc in NaCl: 2000 mg (100 mL); 2500 mg (250 mL)

Solution, Intravenous, as hydrochloride [preservative free]:

Generic: 100 mg/10 mL (10 mL)

Estazolam

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:

Generic: 1 mg, 2 mg

Estradiol and Levonorgestrel

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Patch, transdermal:

ClimaraPro: Estradiol 0.045 mg and levonorgestrel 0.015 mg per 24 hours (4s) [22 cm²; contains estradiol 4.4 mg and levonorgestrel 1.39 mg]

Estradiol and Norethindrone

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Patch, transdermal:

CombiPatch: 0.05/0.14: Estradiol 0.05 mg and norethindrone acetate 0.14 mg per day (8s) [9 sq cm]

CombiPatch: 0.05/0.25: Estradiol 0.05 mg and norethindrone acetate 0.25 mg per day (8s) [16 sq cm]

Tablet, Oral:

Generic: 0.5/0.1: Estradiol 0.5 mg and norethindrone acetate 0.1 mg (28s)

Generic: 1/0.5: Estradiol 1 mg and norethindrone acetate 0.5 mg (28s)

Estradiol and Norgestimate

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:

Prefest: Estradiol 1 mg [15 peach tablets] and estradiol 1 mg and norgestimate 0.09 mg [15 white tablets]

Estradiol (Systemic)

DoD Uniform Formulary Outpatient Dosage Forms

BASIC CORE FORMULARY

Patch Weekly, Transdermal:

Generic: 0.025 mg/24 hours (4 ea); 0.0375 mg/24 hours (4 ea); 0.05 mg/24 hours (4 ea); 0.06 mg/24 hours (4 ea); 0.075 mg/24 hours (4 ea); 0.1 mg/24 hours (4 ea)

UNIFORM FORMULARY

Cream, Transdermal:

EC-RX Estradiol: 0.4% (30 g, 60 g); 0.6% (30 g, 60 g) [contains cetearyl alcohol]

Emulsion, Transdermal, as hemihydrate:

Estrasorb: 4.35 mg/1.74 g (1.74 g [DSC]) [contains polysorbate 80, soybean oil]

Gel, Transdermal:

Divigel: 0.25 mg/0.25 g (1 ea); 0.5 mg/0.5 g (1 ea); 1 mg/g (1 g) [contains propylene glycol, trolamine (triethanolamine)]

Elestrin: 0.06% (26 g) [contains edetate disodium, propylene glycol, trolamine (triethanolamine)]

EstroGel: 0.06% (50 g) [contains alcohol, usp, trolamine (triethanolamine)]

Oil, Intramuscular, as cypionate:

Depo-Estradiol: 5 mg/mL (5 mL)

Oil, Intramuscular, as valerate:

Delestrogen: 10 mg/mL (5 mL) [contains chlorobutanol (chlorobutol), sesame oil]

Generic: 20 mg/mL (5 mL); 40 mg/mL (5 mL)

Patch Twice Weekly, Transdermal:

Generic: 0.025 mg/24 hr (8 ea); 0.0375 mg/24 hr (8 ea); 0.05 mg/24 hr (1 ea, 8 ea); 0.075 mg/24 hr (8 ea); 0.1 mg/24 hr (8 ea)

Patch Weekly, Transdermal:

Menostar: 14 mcg/24 hr (4 ea)

Ring, Vaginal, as acetate:

Femring: 0.05 mg/24 hr (1 ea); 0.1 mg/24 hr (1 ea)

Solution, Transdermal:

Evamist: 1.53 mg/spray (8.1 mL)

Tablet, Oral:

Generic: 0.5 mg, 1 mg, 2 mg

Estradiol (Topical)

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Cream, Vaginal:

Estrace; Generic: 0.1 mg/g (42.5 g)

Ring, Vaginal, as base:

Estring: 2 mg (1 ea)

Tablet, Vaginal, as base:

Generic, Vagifem, Yuvafen: 10 mcg

NONFORMULARY

Insert, Vaginal:

Imvexxy Maintenance Pack: 4 mcg (8 ea); 10 mcg (8 ea)

Imvexxy Starter Pack: 4 mcg (18 ea); 10 mcg (18 ea)

Estramustine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule, Oral, as phosphate sodium:

Emcyt: 140 mg

Estrogens (Conjugated/Equine) and Bazedoxifene

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:

Duavee: Conjugated estrogens 0.45 mg and bazedoxifene 20 mg

Estrogens (Conjugated/Equine) and Medroxyprogesterone

DoD Uniform Formulary Outpatient Dosage Forms

BASIC CORE FORMULARY

Tablet, Oral:

Prempro: 0.3/1.5: Conjugated estrogens 0.3 mg and medroxyprogesterone acetate 1.5 mg

Prempro: 0.45/1.5: Conjugated estrogens 0.45 mg and medroxyprogesterone acetate 1.5 mg

Prempro: 0.625/2.5: Conjugated estrogens 0.625 mg and medroxyprogesterone acetate 2.5 mg

Prempro: 0.625/5: Conjugated estrogens 0.625 mg and medroxyprogesterone acetate 5 mg

UNIFORM FORMULARY

Tablet, Oral:

Premphase [therapy pack contains 2 separate tablet formulations]: Conjugated estrogens 0.625 mg [14 maroon tablets] and conjugated estrogen 0.625 mg/medroxyprogesterone acetate 5 mg [14 light blue tablets] (28s)

Estrogens (Conjugated/Equine, Systemic)**DoD Uniform Formulary Outpatient Dosage Forms****BASIC CORE FORMULARY**

Tablet, Oral:

Premarin: 0.3 mg, 0.45 mg, 0.625 mg, 1.25 mg

UNIFORM FORMULARY

Solution Reconstituted, Injection:

Premarin: 25 mg (1 ea) [contains benzyl alcohol]

Tablet, Oral:

Premarin: 0.9 mg

Estrogens (Conjugated/Equine, Topical)**DoD Uniform Formulary Outpatient Dosage Forms****BASIC CORE FORMULARY**

Cream, Vaginal:

Premarin: 0.625 mg/g (30 g)

Estrogens (Esterified)**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Tablet, Oral:

Menest: 0.3 mg, 0.625 mg, 1.25 mg

Estrogens (Esterified) and Methyltestosterone**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Tablet, Oral:

Generic:

Esterified estrogen 0.625 mg and methyltestosterone 1.25 mg

Esterified estrogens 1.25 mg and methyltestosterone 2.5 mg

Eszopiclone**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Tablet, Oral:

Generic: 1 mg, 2 mg, 3 mg

Etelcalcetide**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution, Intravenous [preservative free]:

Parsabiv: 5 mg/mL (1 mL); 10 mg/2 mL (2 mL); 2.5 mg/0.5 mL (0.5 mL)

Eteplirsén**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution, Intravenous [preservative free]:

Exondys 51: 50 mg/mL (2 mL, 10 mL)

Ethacrynic Acid**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution Reconstituted, Intravenous, as ethacrynate sodium:

Generic: 50 mg (1 ea)

Tablet, Oral:

Generic: 25 mg

Ethambutol**DoD Uniform Formulary Outpatient Dosage Forms****BASIC CORE FORMULARY**

Tablet, Oral, as hydrochloride:

Generic: 100 mg, 400 mg

Ethanolamine Oleate**DoD Uniform Formulary Outpatient Dosage Forms****NOT COVERED**

Solution, Intravenous:

Ethamolin: 5% (2 mL) [contains benzyl alcohol]

Ethinyl Estradiol and Desogestrel**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Tablet, Oral [low dose formulation]:

Azurette:

Day 1-21: Ethinyl estradiol 0.02 mg and desogestrel 0.15 mg [21 white tablets]

Day 22-23: 2 inactive green tablets

Day 24-28: Ethinyl estradiol 0.01 mg [5 blue tablets] (28s)

Bekyree:

Day 1-21: Ethinyl estradiol 0.02 mg and desogestrel 0.15 mg [21 white tablets]

Day 22-23: 2 inactive green tablets

Day 24-28: Ethinyl estradiol 0.01 mg [5 yellow tablets] (28s)

Kariva:

Day 1-21: Ethinyl estradiol 0.02 mg and desogestrel 0.15 mg [21 white tablets]

Day 22-23: 2 inactive light green tablets

Day 24-28: Ethinyl estradiol 0.01 mg [5 light blue tablets] (28s)

Kimidess:

Day 1-21: Ethinyl estradiol 0.02 mg and desogestrel 0.15 mg [21 white tablets]

Day 22-23: 2 inactive green tablets

Day 24-28: Ethinyl estradiol 0.01 mg [5 yellow tablets] (28s)

Mircette:

Day 1-21: Ethinyl estradiol 0.02 mg and desogestrel 0.15 mg [21 white tablets]

Day 22-23: 2 inactive green tablets

Day 24-28: Ethinyl estradiol 0.01 mg [5 yellow tablets] (28s)

Pimtrea:

Day 1-21: Ethinyl estradiol 0.02 mg and desogestrel 0.15 mg [21 dark blue tablets]

Day 22-23: 2 inactive white tablets

Day 24-28: Ethinyl estradiol 0.01 mg [5 green tablets] (28s)

Viorele:

Day 1-21: Ethinyl estradiol 0.02 mg and desogestrel 0.15 mg [21 white tablets]

Day 22-23: 2 inactive green tablets

Day 24-28: Ethinyl estradiol 0.01 mg [5 yellow tablets] (28s)

Tablet, Oral [monophasic formulation]:

Apri 28: Ethinyl estradiol 0.03 mg and desogestrel 0.15 mg [21 rose tablets and 7 white inactive tablets] (28s)

Cyred: Ethinyl estradiol 0.03 mg and desogestrel 0.15 mg [21 active and 7 inactive tablets] (28s)

Desogen: Ethinyl estradiol 0.03 mg and desogestrel 0.15 mg [21 white tablets and 7 green inactive tablets] (28s)

Emoquette: Ethinyl estradiol 0.03 mg and desogestrel 0.15 mg [21 white tablets and 7 light green inactive tablets] (28s)

Enskyce: Ethinyl estradiol 0.03 mg and desogestrel 0.15 mg [21 light orange tablets and 7 green inactive tablets] (28s)

Juleber: Ethinyl estradiol 0.03 mg and desogestrel 0.15 mg [21 yellow tablets and 7 white inactive tablets] (28s)

Reclipsen: Ethinyl estradiol 0.03 mg and desogestrel 0.15 mg [21 rose tablets and 7 white inactive tablets] (28s)

Solia: Ethinyl estradiol 0.03 mg and desogestrel 0.15 mg (28s)

Tablet, Oral [triphasic formulation]:

Caziant:

Day 1-7: Ethinyl estradiol 0.025 mg and desogestrel 0.1 mg [7 beige tablets]

Day 8-14: Ethinyl estradiol 0.025 mg and desogestrel 0.125 mg [7 orange tablets]

Day 15-21: Ethinyl estradiol 0.025 mg and desogestrel 0.15 mg [7 pink tablets]

Day 22-28: 7 white inactive tablets (28s)

Cyclessa:

Day 1-7: Ethinyl estradiol 0.025 mg and desogestrel 0.1 mg [7 light yellow tablets]

Day 8-14: Ethinyl estradiol 0.025 mg and desogestrel 0.125 mg [7 orange tablets]

Day 15-21: Ethinyl estradiol 0.025 mg and desogestrel 0.15 mg [7 red tablets]

Day 22-28: 7 green inactive tablets (28s)

Velivet:

Day 1-7: Ethinyl estradiol 0.025 mg and desogestrel 0.1 mg [7 beige tablets]

Day 8-14: Ethinyl estradiol 0.025 mg and desogestrel 0.125 mg [7 orange tablets]

Day 15-21: Ethinyl estradiol 0.025 mg and desogestrel 0.15 mg [7 pink tablets]

Day 22-28: 7 white inactive tablets (28s)

Ethinyl Estradiol and Drospirenone**DoD Uniform Formulary Outpatient Dosage Forms****BASIC CORE FORMULARY**

Tablet, Oral:

Generic: Ethinyl estradiol 0.02 mg and drospirenone 3 mg [21 active tablets and 7 inactive tablets] (28s)

Generic: Ethinyl estradiol 0.03 mg and drospirenone 3 mg [21 active tablets and 7 inactive tablets] (28s)

Ethinyl Estradiol and Ethynodiol Diacetate**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Tablet, Oral [monophasic formulation]:

Generic: Ethinyl estradiol 0.05 mg and ethynodiol diacetate 1 mg [21 active tablets and 7 inactive tablets] (28s)

Ethinyl Estradiol and Etonogestrel**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Ring, vaginal:

NuvaRing: Ethinyl estradiol 0.015 mg/day and etonogestrel 0.12 mg/day (3s) [3-week duration]

Ethinyl Estradiol and Levonorgestrel

DoD Uniform Formulary Outpatient Dosage Forms

BASIC CORE FORMULARY

Tablet, Oral [extended cycle regimen]:
 Generic: Ethinyl estradiol 0.03 mg and levonorgestrel 0.15 mg [84 tablets and 7 inactive tablets] (91s)
 Tablet, Oral [low dose formulation]:
 Generic: Ethinyl estradiol 0.02 mg and levonorgestrel 0.1 mg [21 tablets and 7 inactive tablets] (28s)
 Tablet, Oral [monophasic formulation]:
 Generic: Ethinyl estradiol 0.03 mg and levonorgestrel 0.15 mg [21 tablets and 7 inactive tablets] (28s)

UNIFORM FORMULARY

Tablet, Oral [triphasic formulation]:
 Day 1-6: Ethinyl estradiol 0.03 mg and levonorgestrel 0.05 mg [6 tablets]
 Day 7-11: Ethinyl estradiol 0.04 mg and levonorgestrel 0.075 mg [5 tablets]
 Day 12-21: Ethinyl estradiol 0.03 mg and levonorgestrel 0.125 mg [10 tablets]
 Day 22-28: 7 inactive tablets (28s)

NONFORMULARY

Tablet, Oral:
 Amethia: Ethinyl estradiol 0.03 mg and levonorgestrel 0.15 mg [84 white tablets] and ethinyl estradiol 0.01 mg [7 light blue tablets] (91s)
 Amethia Lo: Ethinyl estradiol 0.02 mg and levonorgestrel 0.1 mg [84 orange tablets] and ethinyl estradiol 0.01 mg [7 yellow tablets] (91s)
 Amethyst: Ethinyl estradiol 0.02 mg and levonorgestrel 0.09 mg [28 white tablets] (28s)
 Ashlyna: Ethinyl estradiol 0.03 mg and levonorgestrel 0.15 mg [84 blue tablets] and ethinyl estradiol 0.01 mg [7 yellow tablets] (91s)
 Balcoltra: Ethinyl estradiol 0.02 mg and levonorgestrel 0.1 mg [21 tablets] and ferrous bisglycinate 36.5 mg [7 tablets]
 camrese: Ethinyl estradiol 0.03 mg and levonorgestrel 0.15 mg [84 light blue-green tablets] and ethinyl estradiol 0.01 mg [7 yellow tablets] (91s)
 camrese lo: Ethinyl estradiol 0.02 mg and levonorgestrel 0.1 mg [84 orange tablets] and ethinyl estradiol 0.01 mg [7 yellow tablets] (91s)
 Daysee: Ethinyl estradiol 0.03 mg and levonorgestrel 0.15 mg [84 light blue tablets] and ethinyl estradiol 0.01 mg [7 mustard tablets] (91s)
 LoSeasonique: Ethinyl estradiol 0.02 mg and levonorgestrel 0.1 mg [84 orange tablets] and ethinyl estradiol 0.01 mg [7 yellow tablets] (91s)
 Seasonique: Ethinyl estradiol 0.03 mg and levonorgestrel 0.15 mg [84 light blue-green tablets] and ethinyl estradiol 0.01 mg [7 yellow tablets] (91s)
 Generic: Ethinyl estradiol 0.02 mg and levonorgestrel 0.1 mg [84 tablets] and ethinyl estradiol 0.01 mg [7 tablets] (91s)
 Generic: Ethinyl estradiol 0.03 mg and levonorgestrel 0.15 mg [84 tablets] and ethinyl estradiol 0.01 mg [7 tablets] (91s)
 Generic: Ethinyl estradiol 0.03 mg and levonorgestrel 0.15 mg [84 tablets and 7 inactive tablets] (91s)

Ethinyl Estradiol and Norelgestromin

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Patch, Transdermal:
 Xulane: Ethinyl estradiol 0.53 mg and norelgestromin 4.86 mg [releases ethinyl estradiol 35 mcg and norelgestromin 150 mcg per day] (3s)

Ethinyl Estradiol and Norethindrone

DoD Uniform Formulary Outpatient Dosage Forms

BASIC CORE FORMULARY

Tablet, Oral [monophasic formulation]:
 Alyacen 1/35: Ethinyl estradiol 0.035 mg and norethindrone 1 mg [21 peach tablets and 7 light green inactive tablets] (28s)
 Cyclofem 1/35: Ethinyl estradiol 0.035 mg and norethindrone 1 mg [21 pink tablets and 7 light green inactive tablets] (28s)
 Dasetta 1/35: Ethinyl estradiol 0.035 mg and norethindrone 1 mg [21 orange tablets and 7 white inactive tablets] (28s) [contains soya lecithin, tartrazine]
 Nortrel 1/35:
 Ethinyl estradiol 0.035 mg and norethindrone 1 mg [yellow tablets] (21s)
 Ethinyl estradiol 0.035 mg and norethindrone 1 mg [21 yellow tablets and 7 white inactive tablets] (28s)
 Ortho-Novum 1/35: Ethinyl estradiol 0.035 mg and norethindrone 1 mg (28s) [21 peach tablets and 7 green inactive tablets]
 Pirmella 1/35: Ethinyl estradiol 0.035 mg and norethindrone 1 mg [21 peach tablets and 7 green inactive tablets] (28s)

UNIFORM FORMULARY

Tablet, Oral:
 Generic: Ethinyl estradiol 0.0025 mg and norethindrone acetate 0.5 mg (28s)
 Generic: Ethinyl estradiol 0.005 mg and norethindrone acetate 1 mg (28s, 90s)
 Tablet, Chewable, Oral [monophasic formulation]:
 Generic: Ethinyl estradiol 0.025 mg and norethindrone 0.8 mg [24 tablets] and ferrous fumarate 75 mg [4 tablets] (28s)
 Generic: Ethinyl estradiol 0.035 mg and norethindrone 0.4 mg [21 tablets] and ferrous fumarate 75 mg [7 tablets] (28s)
 Tablet, Oral [biphasic formulation]:
 Necon 10/11:
 Day 1-10: Ethinyl estradiol 0.035 mg and norethindrone 0.5 mg [10 light yellow tablets]

Day 11-21: Ethinyl estradiol 0.035 mg and norethindrone 1 mg [11 dark yellow tablets]
 Day 22-28: 7 white inactive tablets (28s)
 Tablet, Oral [triphasic formulation]:
 Alyacen 7/7/7; Cyclofem 7/7/7; Dasetta 7/7/7; Necon 7/7/7; Ortho-Novum 7/7/7; Nortrel 7/7/7; Pirmella 7/7/7:
 Day 1-7: Ethinyl estradiol 0.035 mg and norethindrone 0.5 mg [7 tablets]
 Day 8-14: Ethinyl estradiol 0.035 mg and norethindrone 0.75 mg [7 tablets]
 Day 15-21: Ethinyl estradiol 0.035 mg and norethindrone 1 mg [7 tablets]
 Day 22-28: 7 inactive tablets (28s)
 Aranelle; Leena; Tri-Norinyl:
 Day 1-7: Ethinyl estradiol 0.035 mg and norethindrone 0.5 mg [7 tablets]
 Day 8-16: Ethinyl estradiol 0.035 mg and norethindrone 1 mg [9 tablets]
 Day 17-21: Ethinyl estradiol 0.035 mg and norethindrone 0.5 mg [5 tablets]
 Day 22-28: 7 inactive tablets (28s)

NONFORMULARY

Capsule, Oral:
 Taytulla: Ethinyl estradiol 0.02 mg and norethindrone acetate 1 mg [21 pale pink capsules] and ferrous fumarate 75 mg [7 maroon capsules] (28s)
 Tablet, Oral:
 Aurovela 1/20; Balziva; Blisovi 24 Fe; Briellyn; Estrostep Fe; Gildagia; Gildess 24 Fe; Junel Fe 24; Larin 24 Fe; Lo Loestrin Fe; Loestrin 24 Fe; Lomedia 24 Fe; Microgestin 24 Fe; Minastrin 24 Fe; Ovcon 35; Philith; Tilia Fe; Tri-Legest Fe; Vyfemla; Zenchent
 Generess Fe; Kaitlib Fe; Layolis Fe; Melodetta 24 Fe; Mibelas 24 Fe; Minastrin 24 Fe; Wymzya Fe; Zenchent Fe, Zeosa
 Generic: Ethinyl estradiol 0.025 mg and norethindrone 0.8 mg [24 tablets] and ferrous fumarate 75 mg [4 tablets] (28s);
 Generic: Ethinyl estradiol 0.035 mg and norethindrone 0.4 mg [21 tablets] and ferrous fumarate 75 mg [7 tablets] (28s)

Ethinyl Estradiol and Norgestimate

DoD Uniform Formulary Outpatient Dosage Forms

BASIC CORE FORMULARY

Tablet, Oral [monophasic formulation]:
 Estarylla: Ethinyl estradiol 0.035 mg and norgestimate 0.25 mg [21 blue tablets and 7 green inactive tablets] (28s)
 Mili: Ethinyl estradiol 0.035 mg and norgestimate 0.25 mg [21 dark blue tablets and 7 green inactive tablets] (28s)
 Mono-Linya: Ethinyl estradiol 0.035 mg and norgestimate 0.25 mg [21 blue tablets and 7 white inactive tablets] (28s)
 MonoNessa: Ethinyl estradiol 0.035 mg and norgestimate 0.25 mg [21 blue tablets and 7 green inactive tablets]
 Ortho-Cyclen: Ethinyl estradiol 0.035 mg and norgestimate 0.25 mg [21 blue tablets and 7 dark green inactive tablets] (28s)
 Previfem: Ethinyl estradiol 0.035 mg and norgestimate 0.25 mg [21 blue tablets and 7 light green inactive tablets] (28s)
 Sprintec: Ethinyl estradiol 0.035 mg and norgestimate 0.25 mg [21 blue tablets and 7 white inactive tablets]
 VyLibra: Ethinyl estradiol 0.035 mg and norgestimate 0.25 mg [21 dark blue tablets and 7 green inactive tablets] (28s)
 Tablet, Oral [triphasic formulation]:
 Ortho Tri-Cyclen:
 Day 1-7: Ethinyl estradiol 0.035 mg and norgestimate 0.18 mg [7 white tablets]
 Day 8-14: Ethinyl estradiol 0.035 mg and norgestimate 0.215 mg [7 light blue tablets]
 Day 15-21: Ethinyl estradiol 0.035 mg and norgestimate 0.25 mg [7 blue tablets]
 Day 22-28: 7 dark green inactive tablets (28s)
 Tri-Estarylla:
 Day 1-7: Ethinyl estradiol 0.035 mg and norgestimate 0.18 mg [7 white tablets]
 Day 8-14: Ethinyl estradiol 0.035 mg and norgestimate 0.215 mg [7 light blue tablets]
 Day 15-21: Ethinyl estradiol 0.035 mg and norgestimate 0.25 mg [7 blue tablets]
 Day 22-28: 7 green inactive tablets (28s)
 Tri-Linyah:
 Day 1 to 7: Ethinyl estradiol 0.035 mg and norgestimate 0.18 mg [7 green tablets]
 Day 8 to 14: Ethinyl estradiol 0.035 mg and norgestimate 0.215 mg [7 light blue tablets]
 Day 15 to 21: Ethinyl estradiol 0.035 mg and norgestimate 0.25 mg [7 blue tablets]
 Day 22 to 28: 7 white inactive tablets (28s)
 Tri-Previfem:
 Day 1-7: Ethinyl estradiol 0.035 mg and norgestimate 0.18 mg [7 white tablets]
 Day 8-14: Ethinyl estradiol 0.035 mg and norgestimate 0.215 mg [7 light blue tablets]
 Day 15-21: Ethinyl estradiol 0.035 mg and norgestimate 0.25 mg [7 blue tablets]
 Day 22-28: 7 light green inactive tablets (28s)
 Tri-Sprintec 28:
 Day 1-7: Ethinyl estradiol 0.035 mg and norgestimate 0.18 mg [7 gray tablets]

Day 8-14: Ethinyl estradiol 0.035 mg and norgestimate 0.215 mg [7 light blue tablets]
 Day 15-21: Ethinyl estradiol 0.035 mg and norgestimate 0.25 mg [7 blue tablets]
 Day 22-28: 7 white inactive tablets

TriNessa:

Day 1-7: Ethinyl estradiol 0.035 mg and norgestimate 0.18 mg [7 white tablets]
 Day 8-14: Ethinyl estradiol 0.035 mg and norgestimate 0.215 mg [7 light blue tablets]
 Day 15-21: Ethinyl estradiol 0.035 mg and norgestimate 0.25 mg [7 blue tablets]
 Day 22-28: 7 green inactive tablets

Tri-Mili; Tri-VylLibra:

Day 1 to 7: Ethinyl estradiol 0.035 mg and norgestimate 0.18 mg [7 white tablets]
 Day 8 to 14: Ethinyl estradiol 0.035 mg and norgestimate 0.215 mg [7 light blue tablets]
 Day 15 to 21: Ethinyl estradiol 0.035 mg and norgestimate 0.25 mg [7 dark blue tablets]
 Day 22 to 28: 7 green inactive tablets

UNIFORM FORMULARY

Tablet, Oral [triphasic formulation]:

Ortho Tri-Cyclen Lo:

Day 1 to 7: Ethinyl estradiol 0.025 mg and norgestimate 0.18 mg [7 white tablets]
 Day 8 to 14: Ethinyl estradiol 0.025 mg and norgestimate 0.215 mg [7 light blue tablets]
 Day 15 to 21: Ethinyl estradiol 0.025 mg and norgestimate 0.25 mg [7 dark blue tablets]
 Day 22 to 28: 7 dark green inactive tablets (28s)

Tri-Lo-Estarylla; Tri-Lo-Marzia; Tri-Lo-Sprintec; TriNessa Lo:

Day 1 to 7: Ethinyl estradiol 0.025 mg and norgestimate 0.18 mg [7 tablets]
 Day 8 to 14: Ethinyl estradiol 0.025 mg and norgestimate 0.215 mg [7 tablets]
 Day 15 to 21: Ethinyl estradiol 0.025 mg and norgestimate 0.25 mg [7 tablets]
 Day 22 to 28: 7 inactive tablets (28s)

Ethinyl Estradiol and Norgestrel**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Tablet, Oral [monophasic formulation]:

Ogestrel: Ethinyl estradiol 0.05 mg and norgestrel 0.5 mg [21 white tablets and 7 peach inactive tablets] (28s)
 Generic: Ethinyl estradiol 0.03 mg and norgestrel 0.3 mg [21 tablets and 7 inactive tablets] (28s)

Ethiodized Oil**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Injection: Iodine 37% (10 mL)

Ethionamide**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Tablet, Oral:

Trecator: 250 mg

Ethosuximide**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Capsule, Oral:

Generic: 250 mg

Solution, Oral:

Generic: 250 mg/5 mL (473 mL, 474 mL)

Ethotoin**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Tablet, Oral:

Peganone: 250 mg [scored]

Ethyl Chloride**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Aerosol, External:

Generic: 100% (103.5 mL, 105 mL)

Etidronate**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Tablet, Oral, as disodium:

Generic: 200 mg, 400 mg

Etodolac**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Capsule, Oral:

Generic: 200 mg, 300 mg

Tablet, Oral:

Generic: 400 mg, 500 mg

Tablet Extended Release 24 Hour, Oral:

Generic: 400 mg, 500 mg, 600 mg

Etomidate**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution, Intravenous:

Generic: 2 mg/mL (10 mL, 20 mL)

Solution, Intravenous [preservative free]:

Generic: 2 mg/mL (10 mL, 20 mL)

Etonogestrel**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Implant, Subcutaneous:

Nexplanon: 68 mg (1 ea)

Etoposide**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Capsule, Oral:

Generic: 50 mg

Solution, Intravenous:

Generic: 100 mg/5 mL (5 mL); 500 mg/25 mL (25 mL); 1 g/50 mL (50 mL)

Etoposide Phosphate**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution Reconstituted, Intravenous [strength expressed as base]:

Etopophos: 100 mg (1 ea)

Etravirine**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Tablet, Oral:

Intelence: 25 mg [scored]

Intelence: 100 mg, 200 mg

Everolimus**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Tablet, Oral:

Afinitor: 2.5 mg, 5 mg, 7.5 mg, 10 mg

Zortress: 0.25 mg, 0.5 mg, 0.75 mg

Tablet Soluble, Oral:

Afinitor Disperz: 2 mg, 3 mg, 5 mg

Evinacumab**DoD Uniform Formulary Outpatient Dosage Forms****NOT COVERED**

Solution, Intravenous [preservative free]:Evinceza:

Evinacumab-dgnb 1200 mg/8 mL (150 mg/mL) (8 mL)

Evinacumab-dgnb 345 mg/2.3 mL (150 mg/mL) (2.3 mL)

Evolocumab**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution Auto-injector, Subcutaneous [preservative free]:

Repatha SureClick: 140 mg/mL (1 mL) [contains mouse (murine) and/or hamster protein, polysorbate 80]

Solution Cartridge, Subcutaneous [preservative free]:

Repatha Pushtronex System: 420 mg/3.5 mL (3.5 mL) [contains polysorbate 80]

Solution Prefilled Syringe, Subcutaneous [preservative free]:

Repatha: 140 mg/mL (1 mL) [contains mouse (murine) and/or hamster protein, polysorbate 80]

Exemestane**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Tablet, Oral:

Generic: 25 mg

Exenatide**DoD Uniform Formulary Outpatient Dosage Forms****BASIC CORE FORMULARY**

Auto-injector, Subcutaneous:

Bydureon BCise: 2 mg/0.85 mL (0.85 mL)

Pen-injector, Subcutaneous:

Bydureon: 2 mg (1 ea)

Suspension Reconstituted, Subcutaneous:

Bydureon: 2 mg (1 ea)

NONFORMULARY

Solution Pen-injector, Subcutaneous:

Byetta 10 MCG Pen: 10 mcg/0.04 mL (2.4 mL)

EXENATIDE

Byetta 5 MCG Pen: 5 mcg/0.02 mL (1.2 mL)

Ezetimibe

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Tablet, Oral:
Generic: 10 mg

Ezogabine

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Tablet, Oral:
Potiga: 50 mg, 200 mg, 300 mg, 400 mg

Factor IX Complex (Human) [(Factors II, IX, X)]

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Solution Reconstituted, Intravenous:
Bebulin: 200-1200 units (1 ea)
Proflinine: 500 units (1 ea); 1000 units (1 ea); 1500 units (1 ea) [contains polysorbate 80]
Proflinine SD: 500 units (1 ea); 1000 units (1 ea); 1500 units (1 ea) [contains polysorbate 80]

Factor IX (Human)

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Solution Reconstituted, Intravenous [preservative free]:
AlphaNine SD: 500 units (1 ea); 1000 units (1 ea); 1500 units (1 ea) [contains polysorbate 80]

Factor IX (Recombinant [Albumin Fusion Protein])

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Solution Reconstituted, Intravenous:
Idelvion: 250 units (1 ea); 500 units (1 ea); 1000 units (1 ea); 2000 units (1 ea) [contains hamster protein, polysorbate 80]

Factor IX (Recombinant [Fc Fusion Protein])

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Solution Reconstituted, Intravenous [preservative free]:
Alprolix: 250 units (1 ea); 500 units (1 ea); 1000 units (1 ea); 2000 units (1 ea); 3000 units (1 ea); 4000 units (1 ea)

Factor IX (Recombinant)

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Kit, Intravenous [preservative free]:
BeneFIX: 250 units (1 ea); 500 units (1 ea); 1000 units (1 ea); 2000 units (1 ea) [contains polysorbate 80]
Solution Reconstituted, Intravenous [preservative free]:
Ixinity: 250 units (1 ea); 500 units (1 ea); 1000 units (1 ea); 1500 units (1 ea); 2000 units (1 ea); 3000 units (1 ea) [contains mouse (murine) and/or hamster protein, polysorbate 80]
Rixubis: 250 units (1 ea); 500 units (1 ea); 1000 units (1 ea); 2000 units (1 ea); 3000 units (1 ea) [contains polysorbate 80]

Factor X (Human)

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Solution Reconstituted, Intravenous [preservative free]:
Coagadex: 250 units (1 ea); 500 units (1 ea) [latex free]

Factor XIII A-Subunit (Recombinant)

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Solution Reconstituted, Intravenous:
Tretten: 2000 - 3125 units (1 ea)

Factor XIII Concentrate (Human)

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Kit, Intravenous [preservative free]:
Corifact: 1000 - 1600 units

Factor VIIa (Recombinant)

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Solution Reconstituted, Intravenous:
Sevenfact: Factor VIIa, recombinant-jncw 1 mg (1 ea); Factor VIIa, recombinant-jncw 5 mg (1 ea) [contains polysorbate 80]
Solution Reconstituted, Intravenous [preservative free]:
NovoSeven RT: 1 mg (1 ea); 2 mg (1 ea); 5 mg (1 ea); 8 mg (1 ea) [contains polysorbate 80]

Famciclovir

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Tablet, Oral:
Generic: 125 mg, 250 mg, 500 mg

Famotidine

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Solution, Intravenous:
Generic: 20 mg (50 mL); 20 mg/2 mL (2 mL); 40 mg/4 mL (4 mL); 200 mg/20 mL (20 mL)
Solution, Intravenous [preservative free]:
Generic: 20 mg/2 mL (2 mL)
Suspension Reconstituted, Oral:
Generic: 40 mg/5 mL (50 mL)
Tablet, Oral:
Generic: 10 mg, 20 mg, 40 mg

Famotidine, Calcium Carbonate, and Magnesium Hydroxide

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Tablet, Chewable, Oral:
Famotidine 10 mg, calcium carbonate 800 mg, and magnesium hydroxide 165 mg
Dual Action Complete: Famotidine 10 mg, calcium carbonate 800 mg, and magnesium hydroxide 165 mg [contains calcium 320 mg/tablet, magnesium 70 mg/tablet, phenylalanine 2.2 mg/tablet; berry flavor]
Pepcid Complete: Famotidine 10 mg, calcium carbonate 800 mg, and magnesium hydroxide 165 mg [contains calcium 320 mg/tablet, magnesium 70 mg/tablet; berry flavor]
Pepcid Complete: Famotidine 10 mg, calcium carbonate 800 mg, and magnesium hydroxide 165 mg [contains calcium 320 mg/tablet, magnesium 70 mg/tablet; mint flavor]
Pepcid Complete: Famotidine 10 mg, calcium carbonate 800 mg, and magnesium hydroxide 165 mg [contains calcium 320 mg/tablet, magnesium 70 mg/tablet, tartrazine; tropical fruit flavor]

Fam-Trastuzumab Deruxtecan

DoD Uniform Formulary Outpatient Dosage Forms NOT COVERED

Solution Reconstituted, Intravenous [preservative free]:
Enhertu: fam-trastuzumab deruxtecan-nxki 100 mg (1 ea) [contains polysorbate 80]

Fat Emulsion (Fish Oil and Plant Based)

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Emulsion, Intravenous:
Smoflipid: 20% (100 mL, 250 mL, 500 mL) [contains egg phospholipids (egg lecithin)]

Fat Emulsion (Fish Oil Based)

DoD Uniform Formulary Outpatient Dosage Forms NOT COVERED

Emulsion, Intravenous:
Omegaven: 5 g/50 mL (50 mL); 10% (100 mL) [contains egg phospholipids (egg lecithin)]

Fat Emulsion (Plant Based)

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Emulsion, Intravenous:
Intralipid: 20% (100 mL, 250 mL, 500 mL, 1000 mL); 30% (500 mL) [contains egg yolk phospholipids, glycerin]
Nutrilipid: 20% (250 mL, 500 mL, 1000 mL) [contains egg yolk phospholipids, glycerin]

Fedratinib

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Capsule, Oral, as hydrochloride:
Inrebic: 100 mg

Felbamate

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Suspension, Oral:
Generic: 600 mg/5 mL (237 mL, 240 mL, 473 mL, 946 mL)
Tablet, Oral:
Generic: 400 mg, 600 mg

Felodipine

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Tablet Extended Release 24 Hour, Oral:
Generic: 2.5 mg, 5 mg, 10 mg

Fenfluramine

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Solution, Oral, as hydrochloride:
Fintepla: 2.2 mg/mL (30 mL, 360 mL)

Fenofibrate and Derivatives

DoD Uniform Formulary Outpatient Dosage Forms

BASIC CORE FORMULARY

Tablet, Oral, as fenofibrate:
Generic: 48 mg, 145 mg

UNIFORM FORMULARY

Capsule, Oral, as fenofibrate:
Generic: 50 mg, 67 mg, 134 mg, 150 mg, 200 mg
Capsule Delayed Release, Oral, as choline fenofibrate:
Generic: 45 mg, 135 mg
Capsule, Oral, Micronized, as fenofibrate:
Generic: 43 mg, 130 mg
Tablet, Oral, as fenofibrate:
Generic: 40 mg, 54 mg, 120 mg, 160 mg
Tablet, Oral, as fenofibric acid:
Generic: 35 mg, 105 mg

Fenoldopam

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Intravenous:
Corlopam: 10 mg/mL (1 mL); 20 mg/2 mL (2 mL) [contains propylene glycol, sodium metabisulfite]

Fenoprofen

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:
Generic: 600 mg
Tier 4 - NOT COVERED
Capsule, Oral:
Generic: 200 mg, 400 mg

FentaNYL

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Film, for buccal application, as citrate [strength expressed as base]:
Onsolis: 200 mcg (30s); 400 mcg (30s); 600 mcg (30s); 800 mcg (30s)
Injection, solution, as citrate [strength expressed as base, preservative free]:
Generic: 100 mcg/2 mL (2 mL); 250 mcg/5 mL (5 mL); 500 mcg/10 mL (10 mL); 1000 mcg/ 20 mL (20 mL); 2500 mcg/50 mL (50 mL)
Lozenge, oral, as citrate [strength expressed as base, transmucosal]:
Actiq: 1600 mcg (30s) [contains sugar 2 g/lozenge; berry flavor]
Generic: 200 mcg (30s); 400 mcg (30s); 600 mcg (30s); 800 mcg (30s); 1200 mcg (30s); 1600 mcg (30s)
Patch, transdermal, as base:
Generic: 12 [delivers 12.5 mcg/hr] (5s); 25 [delivers 25 mcg/hr] (5s); 50 [delivers 50 mcg/hr] (5s); 75 [delivers 75 mcg/hr] (5s); 87.5 [delivers 87.5 mcg/hr] (5s); 100 [delivers 100 mcg/hr] (5s)
Powder, for prescription compounding, as citrate: USP: 100% (1 g)
NONFORMULARY
Liquid, sublingual, as base [spray]:
Subsys: 100 mcg (30s); 200 mcg (30s); 400 mcg (30s); 600 mcg (30s); 800 mcg (30s) [contains dehydrated ethanol 63.6%, propylene glycol]
Solution, intranasal, as citrate [strength expressed as base, spray]:
Lazanda: 100 mcg/spray (5 mL); 300 mcg/spray (5 mL); 400 mcg/spray (5 mL) [delivers 8 metered sprays]
Tablet, for buccal application, as citrate [strength expressed as base]:
Fentora: 100 mcg (28s); 200 mcg (28s); 400 mcg (28s); 600 mcg (28s); 800 mcg (28s)
Tablet, sublingual, as citrate [strength expressed as base]:
Abstral: 100 mcg (12s, 32s); 200 mcg (12s, 32s); 300 mcg (12s, 32s); 400 mcg (12s, 32s); 600 mcg (32s); 800 mcg (32s)

Ferric Carboxymaltose

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Intravenous:
Injectafer: 750 mg/15 mL (15 mL)

Ferric Citrate

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:
Auryxia: Ferric iron 210 mg (ferric citrate 1 g)

Ferric Gluconate

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Intravenous:
Generic: 12.5 mg/mL (5 mL)

Ferric Hexacyanoferrate

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule, Oral:
Radiogardase: 0.5 g

Ferric Pyrophosphate Citrate

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Packet, Hemodialysis:
Triferic: 272 mg (1 ea, 100 ea)
Solution, Hemodialysis:
Triferic: 27.2 mg/5 mL (50 mL)

Ferric Sulfate

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, External:
Astringyn: 259 mg/g (8 g) [contains benzalkonium chloride, glycerin, povidone (polyvinylpyrrolidone)]
Monsels Ferric Sulfate: (8 mL, 60 mL)

Ferrous Fumarate

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:
Ferrets: 325 mg (106 mg elemental iron) [scored]
Ferrimin 150: Elemental iron 150 mg
Generic: 324 mg (106 mg elemental iron), Elemental iron 29 mg

Ferrous Gluconate

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:
Generic: 240 mg [elemental iron 27 mg], 324 mg [elemental iron 38 mg]
Tablet, Oral [preservative free]:
Ferate: 240 mg [elemental iron 27 mg] [corn free, dairy free, egg free, fragrance free, gluten free, no artificial flavor(s), sodium free, soy free, starch free, sugar free, wheat free, yeast free]
Generic: 324 mg [elemental iron 37.5 mg]

Ferrous Sulfate

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Elixir, Oral:
Generic: 220 (44 Fe) MG/5ML (5 mL [DSC], 473 mL)
Liquid, Oral:
Generic: 220 (44 Fe) MG/5ML (473 mL)
Solution, Oral:
Generic: 75 (15 Fe) mg/mL (50 mL)
Syrup, Oral:
Generic: 300 (60 Fe) MG/5ML (5 mL)
Tablet, Oral:
Generic: 325 (65 Fe) MG
Tablet, Oral [preservative free]:
Generic: 325 (65 Fe) MG
Tablet Delayed Release, Oral:
Generic: 324 (65 Fe) MG, 325 (65 Fe) MG
Tablet Extended Release, Oral:
Slow Fe: 142 (45 Fe) MG
Tablet Extended Release, Oral [preservative free]:
Slow Iron: 160 (50 Fe) MG [gluten free]
Generic: 140 (45 Fe) MG

Ferumoxylol

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Intravenous [preservative free]:
Feraheme: 510 mg/17 mL (17 mL)

Fexofenadine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Suspension, Oral, as hydrochloride:
Allegra Allergy Childrens: 30 mg/5 mL (240 mL) [alcohol free, dye free; contains butylparaben, edetate disodium, propylene glycol, propylparaben]
Fexofenadine HCl Childrens: 30 mg/5 mL (118 mL) [alcohol free, dye free; contains butylparaben, edetate disodium, propylene glycol, propylparaben; berry flavor]
Tablet, Oral, as hydrochloride:
Generic: 60 mg, 180 mg
Tablet Dispersible, Oral, as hydrochloride:
Allegra Allergy Childrens: 30 mg [contains aspartame; orange cream flavor]

Fexofenadine and Pseudoephedrine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, extended release:
Fexofenadine hydrochloride 60 mg [immediate release] and pseudoephedrine hydrochloride 120 mg [extended release]
Fexofenadine hydrochloride 180 mg [immediate release] and pseudoephedrine hydrochloride 240 mg [extended release]

FIBRINOGEN CONCENTRATE (HUMAN)

Fibrinogen Concentrate (Human)

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Injection, powder for reconstitution:

RiaSTAP: 900-1300 mg [contains albumin (human); exact potency labeled on vial]

NONFORMULARY

Injection, powder for reconstitution:

Fibryga: ~1 g [exact potency labeled on vial]

Fibrin Sealant

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Kit:

Artiss: Solution, topical: Fibrinogen 67-106 mg/mL and thrombin 2.5-6.5 units/mL (2 mL, 4 mL, 10 mL) [contains albumin (human), aprotinin, polysorbate 80; prefilled syringe]

Tisseel: Powder for solution, topical: Fibrinogen 67-106 mg/mL and thrombin 400-625 units/mL (2 mL, 4 mL, 10 mL) [contains albumin (human), aprotinin, polysorbate 80; packaged with reconstituting solutions]

Tisseel: Solution, topical: Fibrinogen 67-106 mg/mL and thrombin 400-625 units/mL (2 mL, 4 mL, 10 mL) [contains albumin (human), aprotinin, polysorbate 80; prefilled syringe]

Kit [preservative free]:

Evicel: Solution, topical: Fibrinogen 55-85 mg/mL and thrombin 800-1200 units/mL (2 mL, 4 mL, 10 mL) [contains albumin (human)]

Patch, topical:

Evarrest: Fibrinogen 8.6 mg/cm² and thrombin 37.5 units/cm² (1s) [contains albumin (human); 10.2 cm x 10.2 cm]

Evarrest: Fibrinogen 8.6 mg/cm² and thrombin 37.5 units/cm² (2s) [contains albumin (human); 5.1 cm x 10.2 cm]

TachoSil: Fibrinogen 3.6-7.4 mg/cm² and thrombin 1.3-2.7 units/cm² (1s) [contains albumin (human), collagen (equine); 9.5 cm x 4.8 cm]

TachoSil: Fibrinogen 3.6-7.4 mg/cm² and thrombin 1.3-2.7 units/cm² (2s) [contains albumin (human), collagen (equine); 4.8 cm x 4.8 cm]

Fidaxomicin

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:

Dificid: 200 mg [contains soybean lecithin]

Filgrastim

DoD Uniform Formulary Outpatient Dosage Forms

BASIC CORE FORMULARY

Solution, Subcutaneous [preservative free]:

Granix: tbo-filgrastim 300 mcg/mL (1 mL); tbo-filgrastim 480 mcg/1.6 mL (1.6 mL) [contains polysorbate 80]

Solution Prefilled Syringe, Subcutaneous [preservative free]:

Granix: tbo-filgrastim 300 mcg/0.5 mL (0.5 mL); tbo-filgrastim 480 mcg/0.8 mL (0.8 mL) [contains polysorbate 80]

UNIFORM FORMULARY

Solution, Injection:

Neupogen: filgrastim 300 mcg/mL (1 mL); filgrastim 480 mcg/1.6 mL (1.6 mL) [contains polysorbate 80]

Solution, Injection [preservative free]:

Nivestym: filgrastim-aafi 300 mcg/mL (1 mL); filgrastim-aafi 480 mcg/1.6 mL (1.6 mL) [contains polysorbate 80]

Solution Prefilled Syringe, Injection [preservative free]:

Neupogen: filgrastim 300 mcg/0.5 mL (0.5 mL); filgrastim 480 mcg/0.8 mL (0.8 mL) [contains polysorbate 80]

Nivestym: filgrastim-aafi 300 mcg/0.5 mL (0.5 mL); filgrastim-aafi 480 mcg/0.8 mL (0.8 mL) [contains polysorbate 80]

Zarxio: filgrastim-sndz 300 mcg/0.5 mL (0.5 mL); filgrastim-sndz 480 mcg/0.8 mL (0.8 mL) [contains polysorbate 80]

Finasteride

DoD Uniform Formulary Outpatient Dosage Forms

BASIC CORE FORMULARY

Tablet, Oral:

Generic: 5 mg

UNIFORM FORMULARY

Tablet, Oral:

Generic 1 mg

Fingolimod

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule, Oral:

Gilenya: 0.5 mg

FlavoxATE

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral, as hydrochloride:

Generic: 100 mg

Flecainide

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral, as acetate:

Generic: 50 mg, 100 mg, 150 mg

Flibanserin

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:

Addyi: 100 mg

Florbetapir F18

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Intravenous:

Amvivid: 500-1900 MBQ/ML (1 ea) [contains alcohol, usp]

Floxuridine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution Reconstituted, Injection:

Generic: 0.5 g (1 ea)

Fluciclovine F 18

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Intravenous:

Axumin: 335-8200 MBq/mL (9-221 mCi/mL)

Fluconazole

DoD Uniform Formulary Outpatient Dosage Forms

BASIC CORE FORMULARY

Tablet, Oral:

Generic: 150 mg

UNIFORM FORMULARY

Solution, Intravenous:

Generic: 100 mg (50 mL); 200 mg (100 mL); 400 mg (200 mL)

Solution, Intravenous [preservative free]:

Generic: 200 mg (100 mL); 400 mg (200 mL)

Suspension Reconstituted, Oral:

Generic: 10 mg/mL (35 mL); 40 mg/mL (35 mL)

Tablet, Oral:

Generic: 50 mg, 100 mg, 200 mg

Flucytosine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule, Oral:

Generic: 250 mg, 500 mg

Fludarabine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Intravenous, as phosphate:

Generic: 50 mg/2 mL (2 mL)

Solution, Intravenous, as phosphate [preservative free]:

Generic: 50 mg/2 mL (2 mL)

Solution Reconstituted, Intravenous, as phosphate:

Generic: 50 mg (1 ea)

Solution Reconstituted, Intravenous, as phosphate [preservative free]:

Generic: 50 mg (1 ea)

Fludeoxyglucose F 18

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, for Injection [preservative free]:

Generic: 20-300 mCi/mL (20 mL)

Fludrocortisone

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral, as acetate:

Generic: 0.1 mg

Flumazenil

DoD Uniform Formulary Outpatient Dosage Forms

NOT COVERED

Solution, Intravenous:

Generic: 0.5 mg/5 mL (5 mL); 1 mg/10 mL (10 mL)

Flunisolide (Nasal)

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Nasal:

Generic: 25 mcg/actuation (0.025%) (25 mL)

Fluocinolone, Hydroquinone, and Tretinoin
DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY

Cream, External:
 Tri-Luma: Fluocinolone acetonide 0.01%, hydroquinone 4%, and tretinoin 0.05% (30 g) [contains sodium metabisulfite]

Fluocinolone (Ophthalmic)
DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY

Implant, Intraocular, as acetonide:
 Iluvien: 0.19 mg (1 ea)
 Retisert: 0.59 mg (1 ea)

Fluocinolone (Otic)
DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY

Oil, Otic, as acetonide:
 Generic: 0.01% (20 mL)

Fluocinolone (Topical)
DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY

Cream, External, as acetonide:
 Generic: 0.01% (15 g, 60 g); 0.025% (15 g, 60 g)
 Kit, External, as acetonide:
 Synalar (Cream): 0.025% [contains cetyl alcohol, edetate disodium, methylparaben, propylene glycol, propylparaben]
 Synalar (Ointment): 0.025%
 Synalar TS: 0.01% [contains propylene glycol]
 Xilapak: 0.01% [contains butylparaben, cetyl alcohol, methylparaben, propylene glycol, propylparaben]
 Ointment, External, as acetonide:
 Generic: 0.025% (15 g, 60 g)
 Solution, External, as acetonide:
 Generic: 0.01% (60 mL)
NONFORMULARY
 Oil, External, as acetonide:
 Derma-Smoother/FS Body: 0.01% (118.28 mL) [contains isopropyl alcohol, peanut oil]
 Generic: 0.01% (118.28 mL)
 Shampoo, External, as acetonide:
 Capex: 0.01% (120 mL)

Fluocinonide
DoD Uniform Formulary Outpatient Dosage Forms
BASIC CORE FORMULARY

Cream, External:
 Generic: 0.05% (15 g, 30 g, 60 g, 120 g)
 Ointment, External:
 Generic: 0.05% (15 g, 30 g, 60 g)
 Solution, External:
 Generic: 0.05% (20 mL, 60 mL)

UNIFORM FORMULARY
 Cream, External:
 Generic: 0.1% (30 g, 60 g, 120 g)
 Gel, External:
 Generic: 0.05% (15 g, 30 g, 60 g)

NONFORMULARY
 Cream, External:
 Vanos: 0.1% (30 g, 60 g, 120 g)

Fluorescein
DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY

Solution, Intravenous, as sodium:
 AK-Fluor: 10% (5 mL); 25% (2 mL)
 Fluorescite: 10% (5 mL)
 Strip, Ophthalmic, as sodium:
 Bio Glo: 1 mg (100 ea, 300 ea)
 Fluor-I-Strips A.T.: 1 mg (300 ea)
 Ful-Glo: 0.6 mg (300 ea); 1 mg (100 ea)

Fluorescein and Benoxinate
DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY

Solution, ophthalmic:
 Generic: Fluorescein sodium 0.25% and benoxinate hydrochloride 0.4% (5 mL)

Fluoride
DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY

Cream, Oral, as sodium [toothpaste]:
 Denta 5000 Plus: 1.1% (51 g) [equivalent to fluoride 2.5 mg/dose]
 Gel, Oral, as sodium [toothpaste]:
 PreviDent 5000 Booster: 1.1% (100 mL, 106 mL) [contains sodium benzoate; equivalent to fluoride 2.5 mg/dose]

PreviDent 5000 Dry Mouth: 1.1% (100 mL) [mint flavor; equivalent to fluoride 2.5 mg/dose]
 Gel, Topical, as sodium:
 DentaGel: 1.1% (56 g) [fresh mint flavor; neutral pH; equivalent to fluoride 2 mg/dose]
 NeutraCare: 1.1% (60 g) [neutral pH]
 NeutraGard Advanced: 1.1% (60 g) [neutral pH]
 Phos-Flur: 1.1% (51 g) [contains propylene glycol, sodium benzoate; mint flavor; equivalent to fluoride 0.5%]
 PreviDent: 1.1% (56 g) [neutral pH; equivalent to fluoride 2 mg/dose]
 Gel, topical, as stannous fluoride:
 Gel-Kam: 0.4% (129 g)
 Just For Kids: 0.4% (122 g)
 Omni Gel: 0.4% (122 g)
 Liquid, Oral, as base:
 Fluoritab: 0.125 mg/drop [dye free]
 Lozenge, oral, as sodium:
 Lozi-Flur: 2.21 mg (90s) [sugar free; cherry flavor; equivalent to fluoride 1 mg]
 Paste, oral, as sodium [toothpaste]:
 Clinpro 5000: 1.1% (113 g) [vanilla-mint flavor]
 Fluoridex: 1.1% (112 g)
 Fluoridex Enhanced Whitening: 1.1% (112 g) [mint flavor]
 Paste, Oral, as stannous fluoride [toothpaste]:
 parodontax: 0.454% (96.4 g) [mint flavor]
 Sensodyne Repair & Protect: 0.454% (96.4 g) [mint flavor]
 Solution, Oral, as sodium [drops]:
 Fluor-A-Day: 0.278 mg/drop (30 mL) [equivalent to fluoride 0.125 mg/drop]
 Fluorabon: 0.55 mg/0.6 mL (60 mL) [dye free, sugar free; equivalent to fluoride 0.25 mg/0.6 mL]
 Flura-Drops: 0.55 mg/drop (24 mL) [dye free, sugar free; contains natural rubber/natural latex in packaging; equivalent to fluoride 0.25 mg/drop]
 Solution, Oral, as sodium [rinse]:
 Act: 0.05% (532 mL) [contains benzyl alcohol, propylene glycol, sodium benzoate, tartrazine; cinnamon flavor; equivalent to fluoride 0.02%]
 Act: 0.05% (532 mL) [contains propylene glycol, sodium benzoate, tartrazine; mint flavor; equivalent to fluoride 0.02%]
 Act Kids: 0.05% (532 mL) [ethanol free; contains benzyl alcohol, propylene glycol, sodium benzoate; bubblegum flavor; equivalent to fluoride 0.02%]
 Act Kids: 0.05% (500 mL) [ethanol free; contains benzyl alcohol, propylene glycol, sodium benzoate; ocean berry flavor; equivalent to fluoride 0.02%]
 Act Restoring: 0.02% (1000 mL) [contains ethanol 11%, propylene glycol, sodium benzoate; equivalent to fluoride 0.009%]
 Act Restoring: 0.05% (532 mL) [contains ethanol 11%, propylene glycol, sodium benzoate; equivalent to fluoride 0.02%]
 Act Total Care: 0.05% (88 mL, 532 mL, 1000 mL) [contains ethanol 11%, propylene glycol, sodium benzoate; equivalent to fluoride 0.02%]
 Act Total Care Dry Mouth: 0.02% (532 mL, 1000 mL) [ethanol free; contains propylene glycol, sodium benzoate; soothing mint flavor; equivalent to fluoride 0.009%]
 Act Total Care Sensitive: 0.02% (532 mL, 1000 mL) [ethanol free; contains propylene glycol, sodium benzoate; mint flavor; equivalent to fluoride 0.009%]
 Fluorinse: 0.2% (480 mL) [ethanol free]
 OrthoWash: 0.044% (480 mL) [contains sodium benzoate]
 Phos-Flur Rinse: 0.044% (473 mL) [ethanol free, sugar free]
 Phos-Flur Rinse: 0.044% (500 mL) [sugar free; cool mint flavor]
 PreviDent: 0.2% (473 mL) [ethanol free; contains benzoic acid, propylene glycol, sodium benzoate; cool mint flavor]
 Solution, Oral, as stannous fluoride [concentrated rinse]:
 Fluoridex Daily Renewal: 0.63% (248 mL) [mint flavor; equivalent to fluoride 7 mg/30 mL dose]
 Gel-Kam Rinse: 0.63% (300 mL) [mint flavor; equivalent to fluoride 7 mg/30 mL dose]
 PerioMed: 0.63% (284 mL) [ethanol free; cinnamon flavor; equivalent to fluoride 7 mg/30 mL dose]
 PerioMed: 0.63% (284 mL) [ethanol free; equivalent to fluoride 7 mg/30 mL dose]
 StanGard Perio: 0.63% (284 mL) [mint flavor]
 Tablet, Chewable, oral, as sodium:
 Generic: 0.55 mg [equivalent to fluoride 0.25 mg], 1.1 mg [equivalent to fluoride 0.5 mg], 2.2 mg [equivalent to fluoride 1 mg]

Fluorometholone
DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY

Ointment, Ophthalmic, as base:
 FML: 0.1% (3.5 g) [contains phenylmercuric acetate]
 Suspension, Ophthalmic, as acetate:
 Flarex: 0.1% (5 mL)
 Suspension, Ophthalmic, as base:
 FML Forte: 0.25% (5 mL, 10 mL)
 Generic: 0.1% (5 mL, 10 mL, 15 mL)

Fluorouracil (Systemic)
DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY

Solution, Intravenous:
 Generic: 500 mg/10 mL (10 mL); 1 g/20 mL (20 mL); 2.5 g/50 mL (50 mL); 5 g/100 mL (100 mL)

FLUOROURACIL (SYSTEMIC)

Solution, Intravenous [preservative free]:
Generic: 2.5 g/50 mL (50 mL); 5 g/100 mL (100 mL)

Fluorouracil (Topical)

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Cream, External:

Fluoroplex: 1% (30 g) [contains benzyl alcohol]

Generic: 0.5% (30 g); 5% (40 g)

Solution, External:

Generic: 2% (10 mL); 5% (10 mL)

NONFORMULARY

Cream, External:

Tolak: 4% (40 g)

FLUoxetine

DoD Uniform Formulary Outpatient Dosage Forms

BASIC CORE FORMULARY

Capsule, Oral:

Generic: 10 mg, 20 mg, 40 mg

Solution, Oral:

Generic: 20 mg/5 mL (5 mL, 120 mL)

UNIFORM FORMULARY

Tablet, Oral:

Generic: 60 mg

NONFORMULARY

Capsule Delayed Release, Oral:

Generic: 90 mg

Tablet, Oral:

Generic: 10 mg, 20 mg

Fluoxymesterone

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:

Androxy: 10 mg [scored]

FluPHENAZine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Concentrate, Oral, as hydrochloride:

Generic: 5 mg/mL (120 mL)

Elixir, Oral, as hydrochloride:

Generic: 2.5 mg/5 mL (60 mL, 473 mL)

Solution, Injection, as decanoate:

Generic: 25 mg/mL (5 mL)

Solution, Injection, as hydrochloride:

Generic: 2.5 mg/mL (10 mL)

Tablet, Oral, as hydrochloride:

Generic: 1 mg, 2.5 mg, 5 mg, 10 mg

Flurandrenolide

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Cream, External:

Generic: 0.05% (60 g, 120 g)

Lotion, External:

Generic: 0.05% (120 mL)

Ointment, External:

Generic: 0.05% (60 g)

Tape, External:

Cordran: 4 mcg/cm² (1 ea)

Flurazepam

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule, Oral, as hydrochloride:

Generic: 15 mg, 30 mg

Flurbiprofen (Ophthalmic)

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Ophthalmic, as sodium:

Generic: 0.03% (2.5 mL)

Flurbiprofen (Systemic)

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:

Generic: 50 mg, 100 mg

Flutamide

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule, Oral:

Generic: 125 mg

Flutemetamol F18

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Intravenous [preservative free]:

Vizamyl: 4.05 mCi/mL (1 ea) [contains alcohol, usp, polysorbate 80]

Fluticasone and Salmeterol

DoD Uniform Formulary Outpatient Dosage Forms

BASIC CORE FORMULARY

Aerosol, for Oral Inhalation:

Advair HFA: 45/21: Fluticasone propionate 45 mcg and salmeterol 21 mcg per inhalation (8 g) [chlorofluorocarbon free; 60 metered actuations]

Advair HFA: 45/21: Fluticasone propionate 45 mcg and salmeterol 21 mcg per inhalation (12 g) [chlorofluorocarbon free; 120 metered actuations]

Advair HFA: 115/21: Fluticasone propionate 115 mcg and salmeterol 21 mcg per inhalation (8 g) [chlorofluorocarbon free; 60 metered actuations]

Advair HFA: 115/21: Fluticasone propionate 115 mcg and salmeterol 21 mcg per inhalation (12 g) [chlorofluorocarbon free; 120 metered actuations]

Advair HFA: 230/21: Fluticasone propionate 230 mcg and salmeterol 21 mcg per inhalation (8 g) [chlorofluorocarbon free; 60 metered actuations]

Advair HFA: 230/21: Fluticasone propionate 230 mcg and salmeterol 21 mcg per inhalation (12 g) [chlorofluorocarbon free; 120 metered actuations]

Powder, for Oral Inhalation:

Advair Diskus: 100/50: Fluticasone propionate 100 mcg and salmeterol 50 mcg (14s, 60s) [contains lactose]

Advair Diskus: 250/50: Fluticasone propionate 250 mcg and salmeterol 50 mcg (14s, 60s) [contains lactose]

Advair Diskus: 500/50: Fluticasone propionate 500 mcg and salmeterol 50 mcg (14s, 60s) [contains lactose]

UNIFORM FORMULARY

Powder, for Oral Inhalation:

Wixela Inhub: Fluticasone propionate 100 mcg and salmeterol 50 mcg (60 units)

Wixela Inhub: Fluticasone propionate 250 mcg and salmeterol 50 mcg (60 units)

Wixela Inhub: Fluticasone propionate 500 mcg and salmeterol 50 mcg (60 units)

NONFORMULARY

Powder, for Oral Inhalation:

AirDuo RespiClick: 55/14: Fluticasone propionate 55 mcg and salmeterol 14 mcg (0.45 g) [contains lactose]

AirDuo RespiClick: 113/14: Fluticasone propionate 113 mcg and salmeterol 14 mcg (0.45 g) [contains lactose]

AirDuo RespiClick: 232/14: Fluticasone propionate 232 mcg and salmeterol 14 mcg (0.45 g) [contains lactose]

Generic: 55/14; 113/14; 232/14

Fluticasone (Nasal)

DoD Uniform Formulary Outpatient Dosage Forms

BASIC CORE FORMULARY

Suspension, Nasal, as propionate:

Generic: 50 mcg/actuation (16 g)

UNIFORM FORMULARY

Suspension, Nasal, as furoate:

Flonase Allergy Relief: 50 mcg/actuation (9.9 mL, 11.1 mL, 15.8 mL, 18.2 mL)

Flonase Sensimist: 27.5 mcg/spray (9.9 mL, 15.8 mL)

Therapy Pack, Nasal, as propionate:

Ticaspray: 50 mcg/actuation (1 ea) [contains benzalkonium chloride, polysorbate 80]

NONFORMULARY

Exhaler Suspension, Nasal, as propionate:

Xhance: 93 mcg/actuation (16 mL) [contains benzalkonium chloride, edetate disodium dihydrate, polysorbate 80]

Fluticasone (Oral Inhalation)

DoD Uniform Formulary Outpatient Dosage Forms

BASIC CORE FORMULARY

Aerosol, Inhalation, as propionate:

Flovent HFA: 44 mcg/inhalation (10.6 g) [chlorofluorocarbon free; 120 metered actuations]

Flovent HFA: 110 mcg/inhalation (12 g) [chlorofluorocarbon free; 120 metered actuations]

Flovent HFA: 220 mcg/inhalation (12 g) [chlorofluorocarbon free; 120 metered actuations]

Aerosol Powder Breath Activated, Inhalation, as propionate:

Flovent Diskus: 50 mcg (60s) [contains lactose]

Flovent Diskus: 100 mcg (60s) [contains lactose]

Flovent Diskus: 250 mcg (60s) [contains lactose]

UNIFORM FORMULARY

Aerosol Powder Breath Activated, Inhalation, as furoate:

Arnuity Ellipta: 100 mcg/actuation (14 ea, 30 ea); 200 mcg/actuation (14 ea, 30 ea) [contains lactose monohydrate]

NONFORMULARY

Aerosol Powder Breath Activated, Inhalation, as propionate:

ArmonAir RespiClick: 55 mcg/actuation (1 ea); 232 mcg/actuation (1 ea); 113 mcg/actuation (1 ea) [contains lactose monohydrate]

Fluticasone (Topical)**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Cream, External, as propionate:
 Generic: 0.05% (15 g, 30 g, 60 g)
 Lotion, External, as propionate:
 Generic: 0.05% (60 mL, 120 mL)
 Ointment, External, as propionate:
 Generic: 0.005% (15 g, 30 g, 60 g)

Fluvastatin**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Capsule, Oral:
 Generic: 20 mg, 40 mg

NONFORMULARY

Tablet Extended Release 24 Hour, Oral:
 Generic: 80 mg

Fluvoxamine**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Capsule Extended Release 24 Hour, Oral, as maleate:
 Generic: 100 mg, 150 mg
 Tablet, Oral, as maleate:
 Generic: 25 mg, 50 mg, 100 mg

Folic Acid**DoD Uniform Formulary Outpatient Dosage Forms****BASIC CORE FORMULARY**

Tablet, Oral:
 Generic: 1 mg

UNIFORM FORMULARY

Capsule, Oral [preservative free]:
 FA-8: 0.8 mg [dye free, sugar free, yeast free]
 Generic: 5 mg, 20 mg
 Solution, Injection, as sodium folate:
 Generic: 5 mg/mL (10 mL)
 Tablet, Oral:
 Generic: 400 mcg, 800 mcg
 Tablet, Oral [preservative free]:
 Generic: 400 mcg, 800 mcg

Folic Acid, Cyanocobalamin, and Pyridoxine**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Capsule, Oral:
 Generic: Folic acid 1 mg, cyanocobalamin 400 mcg, and pyridoxine hydrochloride 50 mg
 Tablet, Oral:
 Airavite: Folic acid 2.5 mg, cyanocobalamin 1000 mcg, and pyridoxine hydrochloride 25 mg
 Av-VITE FB: Folic acid 2.5 mg, cyanocobalamin 1000 mcg, and pyridoxine hydrochloride 25 mg
 CenFol: Folic acid 2.3 mg, cyanocobalamin 2000 mcg, and pyridoxine hydrochloride 24.5 mg
 FaBB: Folic acid 2.2 mg, cyanocobalamin 1000 mcg, and pyridoxine hydrochloride 25 mg
 Folastin: Folic acid 2.5 mg, cyanocobalamin 2000 mcg, and pyridoxine hydrochloride 25 mg [DSC]
 Folbee: Folic acid 2.5 mg, cyanocobalamin 1000 mcg, and pyridoxine hydrochloride 25 mg [dye free, lactose free, and sugar free]
 Folic: Folic acid 2.5 mg, cyanocobalamin 2000 mcg, and pyridoxine hydrochloride 25 mg
 Folgard RX: Folic acid 2.2 mg, cyanocobalamin 1000 mcg, and pyridoxine hydrochloride 25 mg
 Folplex 2.2: Folic acid 2.2 mg, cyanocobalamin 500 mcg, and pyridoxine hydrochloride 25 mg
 Foltabs 800: Folic acid 0.8 mg, cyanocobalamin 115 mcg, and pyridoxine hydrochloride 10 mg [gluten free]
 Homocysteine Formula: Folic acid 0.8 mg, cyanocobalamin 100 mcg, and pyridoxine hydrochloride 50 mg
 Niva-Fol: Folic acid 2.5 mg, cyanocobalamin 2000 mcg, and pyridoxine hydrochloride 25 mg
 NuFol: Folic acid 2.5 mg, cyanocobalamin 1000 mcg, and pyridoxine hydrochloride 25 mg
 Virt-Gard: Folic acid 2.2 mg, cyanocobalamin 1000 mcg, and pyridoxine hydrochloride 25 mg
 Virt-Vite: Folic acid 2.5 mg, cyanocobalamin 1000 mcg, and pyridoxine hydrochloride 25 mg
 Virt-Vite Forte: Folic acid 2.5 mg, cyanocobalamin 2000 mcg, and pyridoxine hydrochloride 25 mg
 Generic: Folic acid 0.5 mg, cyanocobalamin 200 mcg, pyridoxine hydrochloride 5 mg
 Generic: Folic acid 0.8 mg, cyanocobalamin 100 mcg, and pyridoxine hydrochloride 50 mg
 Generic: Folic acid 2.2 mg, cyanocobalamin 500 mcg, and pyridoxine hydrochloride 25 mg

Generic: Folic acid 2.5 mg, cyanocobalamin 200 mcg, and pyridoxine hydrochloride 25 mg

Follitropin Alfa**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution, Subcutaneous:
 Gonal-f RFF Rediject: 300 units/0.5 mL (0.5 mL); 450 units/0.75 mL (0.75 mL); 900 units/1.5 mL (1.5 mL) [contains metacresol]
 Solution Reconstituted, Injection:
 Gonal-f: 450 units (1 ea); 1050 units (1 ea)
 Solution Reconstituted, Subcutaneous:
 Gonal-f RFF: 75 units (1 ea)

Follitropin Beta**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution, Injection:
 Follistim AQ: 75 units/0.5 mL (0.5 mL)
 Solution, Subcutaneous:
 Follistim AQ: 300 units/0.36 mL (0.42 mL); 600 units/0.72 mL (0.78 mL); 900 units/1.08 mL (1.17 mL) [contains benzyl alcohol]

Fomepizole**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution, Intravenous [preservative free]:
 Generic: 1 g/mL (1.5 mL); 1.5 g/1.5 mL (1.5 mL)

Fondaparinux**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution, Subcutaneous, as sodium:
 Generic: 2.5 mg/0.5 mL (0.5 mL); 5 mg/0.4 mL (0.4 mL); 7.5 mg/0.6 mL (0.6 mL); 10 mg/0.8 mL (0.8 mL)
 Solution, Subcutaneous, as sodium [preservative free]:
 Generic: 2.5 mg/0.5 mL (0.5 mL); 5 mg/0.4 mL (0.4 mL); 7.5 mg/0.6 mL (0.6 mL); 10 mg/0.8 mL (0.8 mL)

Formaldehyde**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution, External: 10%

Fosamprenavir**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Suspension, Oral, as calcium:
 Lexiva: 50 mg/mL (225 mL) [contains methylparaben, polysorbate 80, propylene glycol, propylparaben; grape bubblegum peppermint flavor]
 Tablet, Oral, as calcium:
 Lexiva: 700 mg

Fosaprepitant**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution Reconstituted, Intravenous:
 Emend: 150 mg (1 ea) [contains disodium edta, polysorbate 80]

Foscarnet**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution, Intravenous, as sodium [preservative free]:
 Foscavir: 24 mg/mL (250 mL)

Fosdenopterin**DoD Uniform Formulary Outpatient Dosage Forms****NOT COVERED**

Solution Reconstituted, Intravenous, as hydrobromide [preservative free]:
 Nulibry: 9.5 mg (1 ea) [latex free]

Fosfomycin**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Packet, Oral:
 Monurol: 3 g (1 ea) [orange flavor]

Fosinopril**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Tablet, Oral, as sodium:
 Generic: 10 mg, 20 mg, 40 mg

Fosinopril and Hydrochlorothiazide**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Tablet, Oral:
 10/12.5: Fosinopril sodium 10 mg and hydrochlorothiazide 12.5 mg
 20/12.5: Fosinopril sodium 20 mg and hydrochlorothiazide 12.5 mg

FOSNETUPITANT AND PALONOSETRON

Fosnetupitant and Palonosetron

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution Reconstituted, Intravenous:

Akynzeo: 235-0.25 MG (1 ea) [contains edetate disodium]

Fosphenytoin

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Injection, as sodium:

Generic: 100 mg PE/2 mL (2 mL); 500 mg PE/10 mL (10 mL)

Fostamatinib

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:

Tavalisse: 100 mg, 150 mg

Fostemsavir

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet Extended Release 12 Hour, Oral, as tromethamine:

Rukobia: 600 mg

Fremanezumab

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution Prefilled Syringe, Subcutaneous [preservative free]:

Ajovy: 225 mg/1.5 mL (1.5 mL) [contains disodium edta, polysorbate 80]

Fructose, Dextrose, and Phosphoric Acid

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Liquid, Oral:

Generic: Fructose 1.87 g, dextrose 1.87 g, and phosphoric acid 21.5 mg per 5 mL (120 mL)

Fulvestrant

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Intramuscular:

Faslodex: 250 mg/5 mL (5 mL) [contains alcohol, usp, benzyl alcohol, benzyl benzoate]

Furosemide

DoD Uniform Formulary Outpatient Dosage Forms

BASIC CORE FORMULARY

Solution, Oral:

Generic: 10 mg/mL (60 mL, 120 mL)

Tablet, Oral:

Generic: 20 mg, 40 mg

UNIFORM FORMULARY

Solution, Injection:

Generic: 10 mg/mL (2 mL, 4 mL, 10 mL)

Solution, Injection [preservative free]:

Generic: 10 mg/mL (2 mL, 4 mL, 10 mL)

NONFORMULARY

Solution, Intravenous:

Generic: 100 mg/100 mL in NaCl 0.9% (100 mL)

Gabapentin

DoD Uniform Formulary Outpatient Dosage Forms

BASIC CORE FORMULARY

Capsule, Oral:

Generic: 100 mg, 300 mg, 400 mg

Tablet, Oral:

Generic: 600 mg, 800 mg

UNIFORM FORMULARY

Cream, External:

Neuraptine: 10% (30 mL) [contains cetyl alcohol]

Solution, Oral:

Generic: 250 mg/5 mL (5 mL, 470 mL, 473 mL); 300 mg/6 mL (6 mL)

Suspension, Oral:

Fanatrex FusePaq: 25 mg/mL (420 mL) [contains saccharin sodium, sodium benzoate]

NONFORMULARY

Tablet, Oral:

Gralise: 300 mg, 600 mg

Gadobenate Dimeglumine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Intravenous [preservative free]:

MultiHance: 529 mg/mL (5 mL, 10 mL, 15 mL, 20 mL, 50 mL, 100 mL)

Gadobutrol

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Intravenous [preservative free]:

Gadavist: 1 mmol/mL (2 mL, 7.5 mL, 10 mL, 15 mL, 30 mL, 65 mL)

Gadodiamide

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Injection [preservative free]:

Omniscan: 287 mg/mL (5 mL, 10 mL, 15 mL, 20 mL, 50 mL, 100 mL)

Gadofosveset

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Intravenous [preservative free]:

Ablavar: 244 mg/mL (10 mL, 15 mL)

Gadopentetate Dimeglumine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Intravenous:

Magnevist: 469.01 mg/mL (5 mL, 10 mL, 15 mL, 20 mL, 50 mL, 100 mL)
[contains diethylenetriamine pentaacetic acid, meglumine]

Gadoterate Meglumine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Intravenous:

Dotarem: 5 mmol/10 mL (10 mL); 7.5 mmol/15 mL (15 mL); 10 mmol/20 mL (20 mL); 50 mmol/100 mL (100 mL)

Solution Prefilled Syringe, Intravenous:

Dotarem: 5 mmol/10 mL (10 mL); 7.5 mmol/15 mL (15 mL); 10 mmol/20 mL (20 mL)

Gadoteridol

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Intravenous:

Prohance: 279.3 mg/mL (5 mL, 10 mL, 15 mL, 17 mL, 20 mL, 50 mL)

Gadoversetamide

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Intravenous [preservative free]:

OptiMARK: 330.9 mg/mL (5 mL, 10 mL, 15 mL, 20 mL, 30 mL, 50 mL)
[contains calcium chloride dihydrate, calcium versetamide sodium]

Gadoxetate

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Intravenous, as disodium:

Eovist: 0.25 mmol/mL (10 mL, 15 mL)

Galantamine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule Extended Release 24 Hour, Oral, as hydrobromide [strength expressed as base]:

Generic: 8 mg, 16 mg, 24 mg

Solution, Oral, as hydrobromide:

Generic: 4 mg/mL (100 mL)

Tablet, Oral, as hydrobromide [strength expressed as base]:

Generic: 4 mg, 8 mg, 12 mg

Galcanezumab

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution Auto-injector, Subcutaneous [preservative free]:

Emgality: 120 mg/mL (1 mL) [contains polysorbate 80]

Solution Prefilled Syringe, Subcutaneous [preservative free]:

Emgality: galcanezumab-gnlm 120 mg/mL (1 mL) [latex free; contains polysorbate 80]

NONFORMULARY

Solution Prefilled Syringe, Subcutaneous [preservative free]:

Emgality 300 Dose: Galcanezumab-gnlm 100 mg/mL (1 mL) [latex free; contains polysorbate 80]

Galsulfase

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Intravenous [preservative free]:

Naglazyme: 1 mg/mL (5 mL) [contains mouse (murine) and/or hamster protein, polysorbate 80]

Ganciclovir (Ophthalmic)

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Gel, Ophthalmic:

Zirgan: 0.15% (5 g) [contains benzalkonium chloride]

Ganciclovir (Systemic)**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution Reconstituted, Intravenous:

Generic: 500 mg (1 ea)

Solution Reconstituted, Intravenous [preservative free]:

Generic: 500 mg (1 ea)

Ganirelix**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution, Subcutaneous, as acetate:

Generic: 250 mcg/0.5 mL (0.5 mL)

Gatifloxacin**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution, Ophthalmic:

Generic: 0.5% (2.5 mL)

Gefitinib**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Tablet, Oral:

Iressa: 250 mg

Gelatin (Absorbable)**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Film, External:

Gelfilm: (1 ea)

Film, Ophthalmic:

Gelfilm: (6 ea)

Miscellaneous, External:

Gelfoam Compressed Size 100: (6 ea)

Gelfoam Dental Pack Size 4: (2 ea)

Gelfoam Sponge: 12-7 MM (12 ea)

Gelfoam Sponge Size 50: (4 ea)

Gelfoam Sponge Size 100: (6 ea)

Gelfoam Sponge Size 200: (6 ea)

Powder, Mouth/Throat:

Gelfoam: (1 g)

Gemcitabine**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution, Intravenous:

Generic: 200 mg/5.26 mL (5.26 mL); 1 g/26.3 mL (26.3 mL); 2 g/52.6 mL (52.6 mL)

Solution, Intravenous [preservative free]:

Generic: 200 mg/5.26 mL (5.26 mL); 1 g/26.3 mL (26.3 mL); 2 g/52.6 mL (52.6 mL)

Solution Reconstituted, Intravenous:

Generic: 200 mg (1 ea); 1 g (1 ea); 2 g (1 ea)

Solution Reconstituted, Intravenous [preservative free]:

Generic: 200 mg (1 ea); 1 g (1 ea); 2 g (1 ea)

Gemfibrozil**DoD Uniform Formulary Outpatient Dosage Forms****BASIC CORE FORMULARY**

Tablet, Oral:

Generic: 600 mg

Gemifloxacin**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Tablet, Oral:

Factive: 320 mg [scored]

Gemtuzumab Ozogamicin**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution Reconstituted, Intravenous [preservative free]:

Mylotarg: 4.5 mg (1 ea) [contains dextran 40]

Gentamicin (Ophthalmic)**DoD Uniform Formulary Outpatient Dosage Forms****BASIC CORE FORMULARY**

Ointment, Ophthalmic:

Generic: 0.3% (3.5 g)

Solution, Ophthalmic [drops]:

Generic: 0.3% (5 mL, 15 mL)

Gentamicin (Systemic)**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution, Injection:

Generic: 10 mg/mL (2 mL); 40 mg/mL (2 mL, 20 mL)

Solution, Injection [preservative free]:

Generic: 10 mg/mL (2 mL)

Solution, Intravenous:

Generic: 60 mg (50 mL); 70 mg (50 mL); 80 mg (50 mL, 100 mL); 90 mg (100 mL); 100 mg (50 mL, 100 mL); 120 mg (100 mL); 10 mg/mL (6 mL, 10 mL)

Gentamicin (Topical)**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Cream, External:

Generic: 0.1% (15 g, 30 g)

Ointment, External:

Generic: 0.1% (15 g, 30 g)

Gentian Violet**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution, External:

Generic: 1% (59 mL); 2% (59 mL, 59.14 mL)

Gilteritinib**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Tablet, Oral, as fumarate:

Xospata: 40 mg

Givosiran**DoD Uniform Formulary Outpatient Dosage Forms****NOT COVERED**

Solution, Subcutaneous [preservative free]:

Givlaari: 189 mg/mL (1 mL)

Glasdegib**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Tablet, Oral, as maleate:

Daurismo: 25 mg, 100 mg

Glatiramer Acetate**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution Prefilled Syringe, Subcutaneous:

Copaxone: 20 mg/mL (1 mL) [contains mannitol]

Copaxone: 40 mg/mL (1 mL)

Glatopa: 20 mg/mL (1 mL) [contains mannitol]

Glecaprevir and Pibrentasvir**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Tablet, Oral:

Mavyret: Glecaprevir 100 mg and pibrentasvir 40 mg

Glimepiride**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Tablet, Oral:

Generic: 1 mg, 2 mg, 4 mg

GlipiZIDE**DoD Uniform Formulary Outpatient Dosage Forms****BASIC CORE FORMULARY**

Tablet, Oral:

Generic: 5 mg, 10 mg

UNIFORM FORMULARY

Tablet Extended Release 24 Hour, Oral:

Generic: 2.5 mg, 5 mg, 10 mg

Glipizide and Metformin**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Tablet, Oral:

2.5/250: Glipizide 2.5 mg and metformin hydrochloride 250 mg

2.5/500: Glipizide 2.5 mg and metformin hydrochloride 500 mg

5/500: Glipizide 5 mg and metformin hydrochloride 500 mg

Glucagon**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Kit, Injection:

Glucagon Emergency: 1 mg

Solution Reconstituted, Injection:

Generic: 1 mg (1 ea)

Solution Prefilled Syringe, Subcutaneous [preservative free]:

Gvoke PFS: 0.5 mg/0.1 mL (0.1 mL); 1 mg/0.2 mL (0.2 mL)

NONFORMULARY

Powder, Nasal [preservative free]:

Baqsimi One Pack: 3 mg/dose (1 ea)

Baqsimi Two Pack: 3 mg/dose (1 ea)

GLUCARPIDASE

Glucarpidase

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution Reconstituted, Intravenous [preservative free]:
Voraxaze: 1000 units (1 ea)

Glucosamine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule, Oral:
Generic: 500 mg, 750 mg
Capsule, Oral [preservative free]:
Generic: 500 mg
Tablet, Oral:
Generic: 500 mg

Glucosamine and Chondroitin

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule, Oral:
Generic: Glucosamine 250 mg and Chondroitin sulfate 200 mg
Generic: Glucosamine 375 mg and Chondroitin sulfate 300 mg
Generic: Glucosamine 500 mg and Chondroitin sulfate 400 mg
Liquid, Oral:
Generic: Glucosamine 1500 mg and Chondroitin sulfate 1200 mg
Tablet, Oral:
Generic: Glucosamine 500 mg and Chondroitin sulfate 400 mg
Generic: Glucosamine 750 mg and Chondroitin sulfate 600 mg
Generic: Glucosamine 750 mg and Chondroitin sulfate 625 mg

Glutamine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule, Oral:
Generic: 500 mg
Packet, Oral:
Endari: 5 g (60 ea)
Tablet, Oral:
Generic: 500 mg

GlyBURIDE

DoD Uniform Formulary Outpatient Dosage Forms

BASIC CORE FORMULARY

Tablet, Oral:
Generic: 1.25 mg, 2.5 mg, 5 mg
Tablet, Micronized, Oral:
Glynase: 1.5 mg 3 mg, 6 mg [scored]

Glyburide and Metformin

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:
Generic:
1.25 mg/250 mg: Glyburide 1.25 mg and metformin hydrochloride 250 mg
2.5 mg/500 mg: Glyburide 2.5 mg and metformin hydrochloride 500 mg
5 mg/500 mg: Glyburide 5 mg and metformin hydrochloride 500 mg

Glycerin

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Enema, Rectal:
Fleet Liquid Glycerin Supp: 5.4 g/dose (7.5 mL)
Suppository, Rectal:
Glycerin (Adult): 2 g (12 ea, 24 ea, 25 ea, 50 ea); 2.1 g (25 ea)
Glycerin (Infants & Children): 1 g (12 ea, 25 ea)
Pedia-Lax: 1 g (12 ea); 2.8 g (4 mL) [contains edetate disodium]
Sani-Supp Adult: 2 g (10 ea, 25 ea)
Sani-Supp Pediatric: 1.2 g (10 ea, 25 ea)

Glycerin and Lidocaine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Cream, Rectal:
Preparation H: Glycerin 14.4% and lidocaine 5% (30 g) [contains cetyl alcohol, disodium edta, methylparaben, propylene glycol, propylparaben]

Glycerol Phenylbutyrate

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Liquid, Oral:
Ravicti: 1.1 g/mL (25 mL)

Glycopyrrolate (Systemic)

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Oral:
Cuvposa: 1 mg/5 mL (473 mL) [contains methylparaben, propylene glycol, propylparaben, saccharin sodium; cherry flavor]
Tablet, Oral:
Generic: 1 mg, 2 mg

NONFORMULARY

Solution, Injection:
Glyrx-PF: 0.2 mg/mL (1 mL); 0.4 mg/2 mL (2 mL)
Generic: 0.2 mg/mL (1 mL); 0.4 mg/2 mL (2 mL); 1 mg/5 mL (5 mL); 4 mg/20 mL (20 mL)

Glycopyrronium (Topical)

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Pad, External, as tosylate:
Qbrexza: 2.4% (30 ea)

Golimumab

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Intravenous [preservative free]:
Simponi Aria: 50 mg/4 mL (4 mL) [latex free; contains polysorbate 80]
Solution Auto-injector, Subcutaneous [preservative free]:
Simponi: 50 mg/0.5 mL (0.5 mL); 100 mg/mL (1 mL) [contains polysorbate 80]
Solution Prefilled Syringe, Subcutaneous [preservative free]:
Simponi: 50 mg/0.5 mL (0.5 mL); 100 mg/mL (1 mL) [contains polysorbate 80]

Golodirsen

DoD Uniform Formulary Outpatient Dosage Forms

NOT COVERED

Solution, Intravenous [preservative free]:
Vyondys 53: 100 mg/2 mL (2 mL)

Goserelin

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Implant, Subcutaneous:
Zoladex: 3.6 mg (1 ea); 10.8 mg (1 ea)

Granisetron

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Prefilled Syringe, Subcutaneous:
Sustol: 10 mg/0.4 mL (0.4 mL) [contains polyethylene glycol]
Solution, Intravenous:
Generic: 1 mg/mL (1 mL); 4 mg/4 mL (4 mL)
Solution, Intravenous [preservative free]:
Generic: 1 mg/mL (1 mL)
Tablet, Oral:
Generic: 1 mg
NONFORMULARY
Patch, Transdermal:
Sancuso: 3.1 mg/24 hr (1 ea)

Grass Pollen Allergen Extract (5 Grass Extract)

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Sublingual [preservative free]:
Oralair: 300 IR (30s)
Oralair Adult Sample Kit: 300 IR (9s)
Oralair Childrens and Adolescents Sample Kit: 100 IR (3s) & 300 IR (6s)

Grass Pollen Allergen Extract (Timothy Grass)

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Sublingual:
Grastek: 2800 bau [contains gelatin (fish)]

Griseofulvin

DoD Uniform Formulary Outpatient Dosage Forms

BASIC CORE FORMULARY

Suspension, Oral:
Generic: 125 mg/5 mL (120 mL)
Tablet, Oral:
Generic: 125 mg, 250 mg

GuaiFENesin

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Liquid, Oral:
Generic: 100 mg/5 mL (473 mL)
Packet, Oral:
Mucinex For Kids: 100 mg (12 ea) [contains aspartame; bubble-gum flavor]
Solution, Oral:
Generic: 100 mg/5 mL (5 mL, 10 mL, 15 mL); 200 mg/10 mL (10 mL); 300 mg/15 mL (15 mL)
Syrup, Oral:
Generic: 100 mg/5 mL (480 mL)
Tablet, Oral:
Generic: 200 mg, 400 mg
Tablet Extended Release 12 Hour, Oral:
Mucinex: 600 mg
Mucinex Maximum Strength: 1200 mg
Generic: 1200 mg

Guaifenesin and Codeine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule, Oral:

M-Clear: Guaifenesin 200 mg and codeine phosphate 9 mg [contains tartrazine]

Liquid, Oral:

Coditussin AC: Guaifenesin 200 mg and codeine phosphate 10 mg per 5 mL (473 mL) [alcohol free, dye free, sugar free; contains propylene glycol, saccharin sodium, sorbitol; cotton candy flavor]

Dex-Tuss: Guaifenesin 300 mg and codeine phosphate 10 mg per 5 mL (473 mL) [ethanol free, gluten free, sugar free; contains propylene glycol; grape flavor]

M-Clear WC: Guaifenesin 100 mg and codeine phosphate 6.33 mg per 5 mL (473 mL) [contains propylene glycol; cotton candy flavor]

Ninjacof-XG: Guaifenesin 200 mg and codeine phosphate 8 mg per 5 mL (473 mL) [dye free, ethanol free, sugar free; contains propylene glycol; cotton candy flavor]

Solution, Oral:

Mar-Cof CG: Guaifenesin 225 mg and codeine phosphate 7.5 mg per 5 mL (473 mL) [ethanol free, sugar free; contains propylene glycol, sodium benzoate, sodium 6 mg/5 mL]

Generic: Guaifenesin 100 mg and codeine phosphate 10 mg per 5 mL (5 mL, 10 mL, 118 mL, 473 mL)

Syrup, Oral:

Generic: Guaifenesin 100 mg and codeine phosphate 10 mg per 5 mL (473 mL)

Tablet, Oral:

Allfen CD: Guaifenesin 400 mg and codeine phosphate 10 mg
Allfen CDX: Guaifenesin 400 mg and codeine phosphate 20 mg

Guaifenesin and Dextromethorphan

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Caplet, Oral:

Fenesin DM IR: Guaifenesin 400 mg and dextromethorphan hydrobromide 20 mg

Refenesin DM: Guaifenesin 400 mg and dextromethorphan hydrobromide 20 mg

Capsule, Oral:

Coricidin HBP Chest Congestion and Cough: Guaifenesin 200 mg and dextromethorphan hydrobromide 10 mg

Robitussin Maximum Strength Cough + Congestion DM: Guaifenesin 200 mg and dextromethorphan hydrobromide 10 mg

Granules, Oral:

Mucinex Kid's Cough Mini-Melts: Guaifenesin 100 mg and dextromethorphan hydrobromide 5 mg per packet (12s) [contains magnesium 6 mg/pack, phenylalanine 2 mg/packet, sodium 3 mg/packet; orange crème flavor]

Liquid, Oral:

Diabetic Tussin DM Maximum Strength: Guaifenesin 200 mg and dextromethorphan hydrobromide 10 mg per 5 mL (120 mL) [dye free, ethanol free, sugar free; contains phenylalanine 8.4 mg/5 mL]

Double Tussin DM: Guaifenesin 300 mg and dextromethorphan hydrobromide 20 mg per 5 mL (120 mL, 480 mL) [dye free, ethanol free, sugar free]

Kolephrin GG/DM: Guaifenesin 150 mg and dextromethorphan hydrobromide 10 mg per 5 mL (120 mL) [ethanol free; cherry flavor]

Mucinex Fast-Max DM Max: Guaifenesin 400 mg and dextromethorphan hydrobromide 20 mg per 20 mL (180 mL) [contains propylene glycol, potassium 6 mg/20 mL, sodium 13 mg/20 mL]

Mucinex Kid's Cough: Guaifenesin 100 mg and dextromethorphan hydrobromide 5 mg per 5 mL (120 mL) [contains propylene glycol, sodium 3 mg/5 mL; cherry flavor]

Robitussin Peak Cold Maximum Strength Cough + Chest Congestion DM: Guaifenesin 200 mg and dextromethorphan hydrobromide 10 mg per 5 mL (120 mL, 240 mL) [contains menthol, propylene glycol, sodium 5 mg/5 mL, sodium benzoate]

Safe Tussin DM: Guaifenesin 100 mg and dextromethorphan hydrobromide 15 mg per 5 mL (120 mL) [contains benzoic acid, phenylalanine 4.2 mg/5 mL, and propylene glycol; orange and mint flavors]

Scot-Tussin Senior: Guaifenesin 200 mg and dextromethorphan hydrobromide 15 mg per 5 mL (120 mL) [ethanol free, sodium free, sugar free]

Vicks 44E: Guaifenesin 200 mg and dextromethorphan hydrobromide 20 mg per 15 mL (120 mL, 235 mL) [contains ethanol, sodium 31 mg/15 mL, sodium benzoate]

Vicks DayQuil Mucus Control DM: Guaifenesin 200 mg and dextromethorphan hydrobromide 10 mg per 15 mL (295 mL) [contains propylene glycol, sodium 25 mg/15 mL, sodium benzoate; citrus blend flavor]

Generic: Guaifenesin 100 mg and dextromethorphan hydrobromide 10 mg per 5 mL (480 mL)

Syrup, Oral:

Diabetic Siltussin-DM DAS-Na Maximum Strength: Guaifenesin 200 mg and dextromethorphan hydrobromide 10 mg per 5 mL (118 mL) [ethanol free, sugar free; contains benzoic acid, phenylalanine 3 mg/5 mL, propylene glycol; strawberry flavor]

Triaminic Cough & Cold: Guaifenesin 100 mg and dextromethorphan hydrobromide 5 mg per 5 mL (118 mL) [contains propylene glycol, sodium benzoate; cherry flavor]

Zyncof: Guaifenesin 400 mg and dextromethorphan hydrobromide 20 mg per 5 mL (120 mL, 480 mL) [dye free, ethanol free, sugar free; contains propylene glycol; grape flavor]

Generic: Guaifenesin 100 mg and dextromethorphan hydrobromide 10 mg per 5 mL (5 mL, 10 mL, 120 mL, 480 mL)

Tablet, Oral:

Silexin: Guaifenesin 100 mg and dextromethorphan hydrobromide 10 mg
Generic: Guaifenesin 1000 mg and dextromethorphan hydrobromide 60 mg

Generic: Guaifenesin 1200 mg and dextromethorphan hydrobromide 60 mg
Tablet, extended release, oral:

Mucinex DM: Guaifenesin 600 mg and dextromethorphan hydrobromide 30 mg

Generic: Guaifenesin 1200 mg and dextromethorphan hydrobromide 60 mg

Guaifenesin and Phenylephrine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Liquid, Oral:

Ed Bron GP: Guaifenesin 100 mg and phenylephrine hydrochloride 5 mg per 5 mL (480 mL) [dye free, ethanol free, sugar free; contains propylene glycol; orange flavor]

Syrup, oral:

Triaminic Children's Chest & Nasal Congestion: Guaifenesin 50 mg and phenylephrine hydrochloride 2.5 mg per 5 mL (118 mL) [contains benzoic acid, propylene glycol, sodium 3 mg/5 mL; tropical flavor]

Tablet, Oral:

Ambi 10PEH/400GFN: Guaifenesin 400 mg and phenylephrine hydrochloride 10 mg

Deconex IR: Guaifenesin 385 mg and phenylephrine hydrochloride 10 mg [contains tartrazine]

Fenesin PE IR: Guaifenesin 400 mg and phenylephrine hydrochloride 10 mg

Medent-PEI: Guaifenesin 400 mg and phenylephrine hydrochloride 10 mg

MucaphEd: Guaifenesin 400 mg and phenylephrine hydrochloride 10 mg

Mucus Relief Sinus: Guaifenesin 400 mg and phenylephrine hydrochloride 10 mg

Nu-COPD: Guaifenesin 400 mg and phenylephrine hydrochloride 10 mg

OneTab Congestion & Cold: Guaifenesin 400 mg and phenylephrine hydrochloride 10 mg

Refenesin PE: Guaifenesin 400 mg and phenylephrine hydrochloride 10 mg

Relcof IR: Guaifenesin 380 mg and phenylephrine hydrochloride 10 mg

Guaifenesin and Pseudoephedrine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Caplet, Oral:

Congestac: Guaifenesin 400 mg and pseudoephedrine hydrochloride 60 mg

Tablet, Oral:

Ambifed-G: Guaifenesin 400 mg and pseudoephedrine hydrochloride 20 mg

Maxifed: Guaifenesin 400 mg and pseudoephedrine hydrochloride 60 mg

Tablet, Extended Release, Oral:

Mucinex D: Guaifenesin 600 mg and pseudoephedrine hydrochloride 60 mg

Mucinex D Maximum Strength: Guaifenesin 1200 mg and pseudoephedrine hydrochloride 120 mg

Generic: Guaifenesin 600 mg and pseudoephedrine hydrochloride 60 mg

Guaifenesin, Dextromethorphan, and Phenylephrine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Liquid, Oral:

Mucinex Children's Multi-Symptom Cold: Guaifenesin 100 mg, dextromethorphan hydrobromide 5 mg, and phenylephrine hydrochloride 2.5 mg per 5 mL (118 mL, 201 mL) [ethanol free; contains propylene glycol, sodium benzoate, and sodium 3 mg/5 mL; very berry flavor]

Mucinex Children's Congestion & Cough: Guaifenesin 100 mg, dextromethorphan hydrobromide 5 mg, and phenylephrine hydrochloride 2.5 mg per 5 mL (201 mL) [contains propylene glycol, sodium benzoate; berrylicious flavor]

Mucinex Fast-Max Severe Congestion & Cough: Guaifenesin 100 mg, dextromethorphan hydrobromide 5 mg, and phenylephrine hydrochloride 2.5 mg per 5 mL (266 mL) [contains propylene glycol, sodium benzoate]

NeoTuss-D: Guaifenesin 200 mg, dextromethorphan hydrobromide 30 mg, and phenylephrine hydrochloride 7.5 mg per 5 mL (474 mL) [dye free, ethanol free, sugar free; contains propylene glycol]

Robitussin Children's Cough & Cold CF: Guaifenesin 50 mg, dextromethorphan hydrobromide 5 mg, and phenylephrine hydrochloride 2.5 mg per 5 mL (118 mL) [ethanol free; contains propylene glycol, sodium 3 mg/5 mL, and sodium benzoate; grape flavor]

Robitussin Peak Cold Maximum Strength Multi-Symptom Cold: Guaifenesin 200 mg, dextromethorphan hydrobromide 10 mg, and phenylephrine hydrochloride 5 mg per 5 mL (118 mL, 237 mL) [contains menthol, propylene glycol, sodium 3 mg/5 mL, sodium benzoate]

Robitussin Peak Cold Multi-Symptom Cold: Guaifenesin 100 mg, dextromethorphan hydrobromide 10 mg, and phenylephrine hydrochloride 5 mg per 5 mL (118 mL, 237 mL) [contains menthol, propylene glycol, sodium 3 mg/5 mL, sodium benzoate]

Tusico: Guaifenesin 400 mg, dextromethorphan hydrobromide 20 mg, and phenylephrine hydrochloride 10 mg per 5 mL (120 mL, 474 mL) [alcohol free, sugar free, dye free; contains menthol, propylene glycol]

GUAIFENESIN, DEXTROMETHORPHAN, AND PHENYLEPHRINE

Tussin CF Cough & Cold: Guaifenesin 100 mg, dextromethorphan hydrobromide 10 mg, and phenylephrine hydrochloride 5 mg per 5 mL (118 mL, 237 mL) [ethanol free; contains propylene glycol, sodium benzoate]

Tablet, Oral:

Aquanaz: Guaifenesin 400 mg, dextromethorphan hydrobromide 15 mg, and phenylephrine hydrochloride 10 mg

Deconex DMX: Guaifenesin 385 mg, dextromethorphan hydrobromide 17.5 mg, and phenylephrine hydrochloride 10 mg

Duravent DM: Guaifenesin 395 mg, dextromethorphan hydrobromide 15 mg, and phenylephrine hydrochloride 10 mg

Mucinex Fast-Max Severe Congestion & Cough: Guaifenesin 200 mg, dextromethorphan hydrobromide 10 mg, and phenylephrine hydrochloride 5 mg

Nivanex DMX: Guaifenesin 380 mg, dextromethorphan hydrobromide 15 mg, and phenylephrine hydrochloride 10 mg

Relhist DMX: Guaifenesin 380 mg, dextromethorphan hydrobromide 15 mg, and phenylephrine hydrochloride 10 mg

Tusicof: Guaifenesin 400 mg, dextromethorphan hydrobromide 20 mg, and phenylephrine hydrochloride 10 mg

Guaifenesin, Pseudoephedrine, and Codeine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Liquid, Oral:

Coditussin DAC: Guaifenesin 200 mg, pseudoephedrine hydrochloride 30 mg and codeine phosphate 10 mg per 5 mL (473 mL) [alcohol free, dye free, gluten free, sugar free; contains propylene glycol, saccharin sodium, sorbitol; grape flavor]

Lortuss EX: Guaifenesin 100 mg, pseudoephedrine hydrochloride 30 mg and codeine phosphate 10 mg per 5 mL (473 mL) [dye free, ethanol free, sugar free; contains propylene glycol; apple cinnamon flavor]

Virtussin DAC: Guaifenesin 100 mg, pseudoephedrine hydrochloride 30 mg, and codeine phosphate 10 mg per 5 mL (473 mL) [sugar free; contains ethanol 2.1% v/v, propylene glycol, sodium benzoate]

Syrup, Oral:

Generic: Guaifenesin 100 mg, pseudoephedrine hydrochloride 30 mg, and codeine phosphate 10 mg per 5 mL (473 mL)

Guaifenesin, Pseudoephedrine, and Dextromethorphan

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Liquid, Oral:

Entre-Cough: Guaifenesin 175 mg, pseudoephedrine hydrochloride 30 mg, and dextromethorphan hydrobromide 15 mg per 5 mL (473 mL) [contains aspartame, methylparaben, sodium benzoate; cherry flavor]

Tablet, Oral:

Capmist DM: Guaifenesin 400 mg, pseudoephedrine hydrochloride 60 mg, and dextromethorphan hydrobromide 15 mg [scored]

Poly-Vent DM: Guaifenesin 380 mg, pseudoephedrine hydrochloride 60 mg, and dextromethorphan hydrobromide 20 mg [scored; contains tartrazine]

GuanFACINE

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:

Generic: 1 mg, 2 mg

Tablet Extended Release 24 Hour, Oral:

Generic: 1 mg, 2 mg, 3 mg, 4 mg

Guanidine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral, as hydrochloride:

Generic: 125 mg

Haemophilus b Conjugate Vaccine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Injection, powder for reconstitution [preservative free]:

Hiberix: *Haemophilus b* capsular polysaccharide 10 mcg [bound to tetanus toxoid 25 mcg] per 0.5 mL [contains lactose 12.6 mg]

Injection, suspension:

PedvaxHIB: *Haemophilus b* capsular polysaccharide 7.5 mcg [bound to *Neisseria meningitidis* OMPC 125 mcg] per 0.5 mL (0.5 mL) [contains aluminum; natural rubber/natural latex in packaging]

Halcinonide

DoD Uniform Formulary Outpatient Dosage Forms

NOT COVERED

Cream, External:

Halog: 0.1% (30 g, 60 g, 216 g) [contains cetyl alcohol, propylene glycol]

Ointment, External:

Halog: 0.1% (30 g, 60 g)

Halobetasol

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Cream, External, as propionate:

Generic: 0.05% (15 g, 50 g)

Ointment, External, as propionate:

Generic: 0.05% (15 g, 50 g)

NONFORMULARY

Foam, External:

Lexette: 0.05% (50 g)

Halobetasol Propionate: 0.05% (50 g)

Lotion, External:

Bryhali: 0.01% (60 g, 100 g)

Lotion, External, as propionate:

Ultravate: 0.05% (60 mL)

Halobetasol and Tazarotene

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Lotion, External:

Duobrii: Halobetasol propionate 0.01% and tazarotene 0.045% (100 g)

Haloperidol

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Concentrate, Oral, as lactate [strength expressed as base]:

Generic: 2 mg/mL (5 mL, 15 mL, 120 mL)

Solution, Intramuscular, as decanoate [strength expressed as base]:

Generic: 50 mg/mL (1 mL, 5 mL); 100 mg/mL (1 mL, 5 mL)

Solution, Injection, as lactate [strength expressed as base]:

Generic: 5 mg/mL (1 mL, 10 mL)

Solution, Injection, as lactate [strength expressed as base, preservative free]:

Generic: 5 mg/mL (1 mL)

Tablet, Oral:

Generic: 0.5 mg, 1 mg, 2 mg, 5 mg, 10 mg, 20 mg

Hemin

DoD Uniform Formulary Outpatient Dosage Forms

NOT COVERED

Solution Reconstituted, Intravenous:

Panhematin: 313 mg (1 ea)

Heparin

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Injection, as sodium:

Generic: 1000 units ((1 mL, 10 mL, 30 mL, 500 mL); 2000 units (1000 mL);

5000 units/mL (1 mL, 10 mL); 10,000 units/mL (1 mL, 4 mL, 5 mL); 12,500 units (250 mL); 20,000 units/mL (1 mL); 25,000 units (250 mL, 500 mL)

Solution, Injection, as sodium [preservative free]:

Generic: 1000 units/mL (2 mL); 5000 units/0.5 mL (0.5 mL)

Solution, Intravenous, as sodium:

Generic: 1 units/mL (1 mL, 2 mL, 2.5 mL, 3 mL, 5 mL, 10 mL); 10 units/mL (1

mL, 2 mL, 2.5 mL, 3 mL, 5 mL, 10 mL); 100 units/mL (1 mL, 2 mL, 2.5 mL, 3

mL, 5 mL, 10 mL, 250 mL); 10,000 units (250 mL); 12,500 units (250 mL);

20,000 units (500 mL); 25,000 units (250 mL, 500 mL)

Solution, Intravenous, as sodium [preservative free]:

Generic: 10 units/mL (1 mL, 3 mL, 5 mL); 100 units/mL (1 mL, 3 mL, 5 mL)

Hepatitis A and Hepatitis B Recombinant Vaccine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Injection, suspension [preservative free]:

Twinrix: Hepatitis A virus antigen 720 ELISA units and hepatitis B surface

antigen 20 mcg per mL (1 mL) [contains aluminum, yeast protein, and trace

amounts of neomycin; may contain natural rubber/natural latex in prefilled

syringe]

Hepatitis A Vaccine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Injection, suspension [adult, preservative free]:

Havrix: Hepatitis A virus antigen 1440 ELISA units/mL (1 mL) [contains

aluminum, neomycin (may have trace amounts); may contain natural rub-

ber/natural latex in prefilled syringe]

VAQTA: Hepatitis A virus antigen 50 units/mL (1 mL) [contains aluminum,

natural rubber/natural latex in packaging]

Injection, suspension [pediatric, preservative free]:

Havrix: Hepatitis A virus antigen 720 ELISA units/0.5 mL (0.5 mL) [contains

aluminum, neomycin (may have trace amounts); may contain natural rubber/

natural latex in prefilled syringe]

Injection, suspension [pediatric/adolescent, preservative free]:

VAQTA: Hepatitis A virus antigen 25 units/0.5 mL (0.5 mL) [contains alumi-

num, natural rubber/natural latex in packaging]

Hepatitis B Immune Globulin (Human)

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Injection [preservative free]:

HepaGam B: (1 mL, 5 mL) [contains polysorbate 80]

Solution, Intramuscular:

HyperHEP B S/D: (0.5 mL, 1 mL, 5 mL)

Nabi-HB: (1 mL, 5 mL) [thimerosal free]

Hepatitis B Vaccine (Recombinant [Adjuvanted])

**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Solution, Intramuscular [preservative free]:
Hepelisav-B: Hepatitis B surface antigen 20 mcg/0.5 mL (0.5 mL) [contains polysorbate 80]

Hepatitis B Vaccine (Recombinant)

**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Injection, suspension [adult, preservative free]:
Egerix-B: Hepatitis B surface antigen 20 mcg/mL (1 mL) [contains aluminum, yeast protein, may contain natural rubber/natural latex in prefilled syringe]
Egerix-B: Hepatitis B surface antigen 20 mcg/mL (1 mL) [contains aluminum, yeast protein; vial]
Recombivax HB: Hepatitis B surface antigen 10 mcg/mL (1 mL) [contains aluminum, natural rubber/natural latex in packaging, yeast protein]
Injection, suspension [dialysis formulation, preservative free]:
Recombivax HB: Hepatitis B surface antigen 40 mcg/mL (1 mL) [contains aluminum, natural rubber/natural latex in packaging, yeast protein]
Injection, suspension [pediatric/adolescent, preservative free]:
Egerix-B: Hepatitis B surface antigen 10 mcg/0.5 mL (0.5 mL) [contains aluminum, yeast protein, may contain natural rubber/natural latex in prefilled syringe]
Recombivax HB: Hepatitis B surface antigen 5 mcg/0.5 mL (0.5 mL) [contains aluminum, natural rubber/natural latex in packaging, yeast protein]

Hetastarch

**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Solution, Intravenous:
Generic: 6% (500 mL)

Hexaminolevulinat

**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Solution Reconstituted, Intravesical, as hydrochloride:
Cysview: 100 mg (1 ea)

Hexylresorcinol

**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Lozenge, oral:
Screts Original: 2.4 mg (18s) [mint flavor]

Histoplasmin

**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Injection: 1:100 (0.1 mL, 1.3 mL)

Histrelin

**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Kit, Subcutaneous:
Supprelin LA: 50 mg
Vantas: 50 mg

Homatropine

**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Solution, Ophthalmic, as hydrobromide:
Generic: 5% (5 mL)

Hyaluronate and Derivatives

**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Cream, External [sodium hyaluronate]:
Bionect: 0.2% (25 g)
Foam, External [sodium hyaluronate]:
Bionect: 0.2% (113.4 g)
Gel, External [sodium hyaluronate]:
Bionect: 0.2% (30 g, 60 g)
Injection, Gel, Intra-articular [cross-linked hyaluronate]:
Gel-One: 10 mg/mL (3 mL) [derived from or manufactured using an avian source]
Injection, Gel, Intradermal [hyaluronic acid]:
Juvederm Ultra: 24 mg/mL (0.4 mL, 0.8 mL) [derived from or manufactured from bacterial source]
Juvederm Ultra Plus: 24 mg/mL (0.4 mL, 0.8 mL) [derived from or manufactured from bacterial source]
Juvederm Ultra Plus XC: Hyaluronic acid 24 mg/mL and lidocaine 0.3% (0.4 mL, 0.8 mL) [derived from or manufactured from bacterial source]
Juvederm Ultra XC: Hyaluronic acid 24 mg/mL and lidocaine 0.3% (0.4 mL, 0.8 mL) [derived from or manufactured from bacterial source]
Restylane-L: Hyaluronic acid 20 mg/mL and lidocaine 0.3% (0.5 mL, 1 mL, 2 mL) [derived from or manufactured from bacterial source]
Restylane Lyft: Hyaluronic acid 20 mg/mL and lidocaine 0.3% [derived from or manufactured from bacterial source]
Restylane Silk: Hyaluronic acid 20 mg/mL and lidocaine 0.3% [derived from or manufactured from bacterial source]

Injection, Gel, Intradermal [sodium hyaluronate]:
Perlane: 20 mg/mL (1 mL) [derived from or manufactured from bacterial source]
Restylane: 20 mg/mL (0.4 mL, 1 mL, 2 mL) [derived from or manufactured from bacterial source]
Injection, Gel, Subcutaneous/supraperiosteal [cross-linked hyaluronic acid]:
Juvederm Voluma XC: Hyaluronic acid 20 mg/mL and lidocaine 0.3% [derived from or manufactured from bacterial source]
Injection, Solution, Intra-articular [hyaluronan]:
Monovisc: 88 mg/4 mL (4 mL) [derived from or manufactured from bacterial source]
Hymovis: 24 mg/3 mL (3 mL) [derived from or manufactured from bacterial source]
Orthovisc: 30 mg/2 mL (2 mL) [derived from or manufactured from bacterial source]
Injection, Solution, Intra-articular [hylan polymers A and B]:
Synvisc-One: 8 mg/mL (6 mL) [derived from or manufactured using an avian source]
Synvisc: 8 mg/mL (2 mL) [derived from or manufactured using an avian source]
Injection, Solution, Intra-articular [sodium hyaluronate]:
Euflexxa: 10 mg/mL (2 mL)
Gelsyn-3: 8.4 mg/mL (2 mL) [derived from or manufactured from bacterial source]
GenVisc 850: 25 mg/2.5 mL (2.5 mL) [derived from or manufactured from bacterial source]
Hyalgan: 10 mg/mL (2 mL) [derived from or manufactured using an avian source]
Supartz FX: 25 mg/2.5 mL (2.5 mL) [derived from or manufactured using an avian source]
Injection, Solution, Intraocular [sodium hyaluronate]:
Amvisc: 12 mg/mL (0.5 mL, 0.8 mL)
Amvisc Plus: 16 mg/mL (0.5 mL, 0.8 mL)
Provisc: 10 mg/mL (0.4 mL, 0.55 mL, 0.85 mL) [contains natural rubber/natural latex in packaging]

Hyaluronidase

**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Solution, Injection:
Amphadase: 150 units/mL (1 mL) [contains edetate disodium, thimerosal]
Solution, Injection [preservative free]:
Vitrase: 200 units/mL (1.2 mL)
Generic: 150 units/mL (1 mL)

HydrALAZINE

**DoD Uniform Formulary Outpatient Dosage Forms
BASIC CORE FORMULARY**

Tablet, Oral, as hydrochloride:
Generic: 10 mg, 25 mg, 50 mg,

UNIFORM FORMULARY

Solution, Injection, as hydrochloride:
Generic: 20 mg/mL (1 mL)
Tablet, Oral, as hydrochloride:
Generic: 100 mg

HydroCHLORothiazide

**DoD Uniform Formulary Outpatient Dosage Forms
BASIC CORE FORMULARY**

Capsule, Oral:
Generic: 12.5 mg
Tablet, Oral:
Generic: 25 mg, 50 mg

UNIFORM FORMULARY

Tablet, Oral:
Generic: 12.5 mg

Hydrochlorothiazide and Spironolactone

**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Tablet, Oral:
Aldactazide: 25/25: Hydrochlorothiazide 25 mg and spironolactone 25 mg
Aldactazide: 50/50: Hydrochlorothiazide 50 mg and spironolactone 50 mg
Generic: Hydrochlorothiazide 25 mg and spironolactone 25 mg

Hydrochlorothiazide and Triamterene

**DoD Uniform Formulary Outpatient Dosage Forms
BASIC CORE FORMULARY**

Tablet, Oral:
Generic: Hydrochlorothiazide 25 mg and triamterene 37.5 mg
Generic: Hydrochlorothiazide 50 mg and triamterene 75 mg

UNIFORM FORMULARY

Capsule, Oral:
Hydrochlorothiazide 25 mg and triamterene 37.5 mg
Hydrochlorothiazide 25 mg and triamterene 50 mg

HYDROCODONE

HYDROcodone

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule ER 12 Hour Abuse-Deterrent, Oral, as bitartrate:

Zohydro ER: 10 mg (60 ea); 15 mg (60 ea); 20 mg (60 ea); 30 mg (60 ea); 40 mg (60 ea); 50 mg (60 ea)

Capsule Extended Release 12 Hour, Oral, as bitartrate:

Tablet ER 24 Hour Abuse-Deterrent, Oral, as bitartrate:
Hysingla ER: 20 mg, 30 mg, 40 mg, 60 mg, 80 mg, 100 mg, 120 mg

Hydrocodone and Acetaminophen

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Oral:

Zamiset: Hydrocodone bitartrate 10 mg and acetaminophen 325 mg per 15 mL (7.5 mL, 15 mL, 473 mL) [contains ethanol 6.7%, propylene glycol; fruit flavor]

Generic: Hydrocodone bitartrate 7.5 mg and acetaminophen 325 mg per 15 mL

Tablet, Oral:

Generic:

Hydrocodone bitartrate 2.5 mg and acetaminophen 325 mg
Hydrocodone bitartrate 5 mg and acetaminophen 300 mg
Hydrocodone bitartrate 5 mg and acetaminophen 325 mg
Hydrocodone bitartrate 7.5 mg and acetaminophen 300 mg
Hydrocodone bitartrate 7.5 mg and acetaminophen 325 mg
Hydrocodone bitartrate 10 mg and acetaminophen 300 mg
Hydrocodone bitartrate 10 mg and acetaminophen 325 mg

Hydrocodone and Chlorpheniramine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule Extended Release 12 Hour, Oral:

TussiCaps: Hydrocodone polistirex [equivalent to hydrocodone bitartrate 5 mg] and chlorpheniramine polistirex [equivalent to chlorpheniramine maleate 4 mg]

TussiCaps: Hydrocodone polistirex [equivalent to hydrocodone bitartrate 10 mg] and chlorpheniramine polistirex [equivalent to chlorpheniramine maleate 8 mg]

Liquid Extended Release, Oral:

Generic: Hydrocodone polistirex [equivalent to hydrocodone bitartrate 10 mg] and chlorpheniramine polistirex [equivalent to chlorpheniramine maleate 8 mg] per 5 mL (115 mL, 473 mL)

Solution, Oral:

Vituz: Hydrocodone bitartrate 5 mg and chlorpheniramine maleate 4 mg per 5 mL (480 mL) [contains methylparaben, propylene glycol, propylparaben, saccharin sodium; grape flavor]

Suspension Extended Release, Oral:

Generic: Hydrocodone polistirex [equivalent to hydrocodone bitartrate 10 mg] and chlorpheniramine polistirex [equivalent to chlorpheniramine maleate 8 mg] per 5 mL (115 mL, 118 mL, 473 mL)

Hydrocodone and Guaifenesin

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Oral:

Flowtuss: Hydrocodone bitartrate 2.5 mg and guaifenesin 200 mg per 5 mL (473 mL) [contains polyethylene glycol, saccharin; black raspberry flavor]

Obredon: Hydrocodone bitartrate 2.5 mg and guaifenesin 200 mg per 5 mL (118 mL, 473 mL) [contains propylene glycol, saccharin; cherry punch flavor, raspberry flavor]

Hydrocodone and Homatropine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Syrup, Oral:

Generic: Hydrocodone bitartrate 5 mg and homatropine methylbromide 1.5 mg per 5 mL (473 mL)

Tablet, Oral:

Generic: Hydrocodone bitartrate 5 mg and homatropine methylbromide 1.5 mg

Hydrocodone and Ibuprofen

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:

Hydrocodone bitartrate 5 mg and ibuprofen 200 mg
Hydrocodone bitartrate 7.5 mg and ibuprofen 200 mg
Hydrocodone bitartrate 10 mg and ibuprofen 200 mg

Hydrocodone and Pseudoephedrine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Oral:

Rezira: Hydrocodone bitartrate 5 mg and pseudoephedrine hydrochloride 60 mg per 5 mL (480 mL) [contains propylene glycol; grape flavor]

Hydrocodone, Chlorpheniramine, and Pseudoephedrine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Oral:

Generic: Hydrocodone bitartrate 5 mg, chlorpheniramine maleate 4 mg, and pseudoephedrine hydrochloride 60 mg per 5 mL (480 mL)

Hydrocodone, Pseudoephedrine, and Guaifenesin

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Oral:

Hycofenix: Hydrocodone bitartrate 2.5 mg, pseudoephedrine hydrochloride 30 mg, and guaifenesin 200 mg per 5 mL (473 mL) [contains methylparaben, polyethylene glycol, propylparaben, saccharin sodium, sorbitol; black raspberry flavor]

Hydrocortisone (Systemic)

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution Reconstituted, Injection, as sodium succinate [strength expressed as base, preservative free]:

Solu-CORTEF: 100 mg (1 ea); 250 mg (1 ea); 500 mg (1 ea); 1000 mg (1 ea)

Tablet, Oral, as base:

Generic: 5 mg, 10 mg, 20 mg

Hydrocortisone (Topical)

DoD Uniform Formulary Outpatient Dosage Forms

BASIC CORE FORMULARY

Suppository, Rectal, as acetate:

Anusol-HC: 25 mg (12s, 24s)

Hemmorex-HC: 25 mg (12 ea, 24 ea)

Generic: 25 mg (12s)

UNIFORM FORMULARY

Cream, External, as acetate:

MiCort-HC: 2.5% (4 g, 28.4 g)

Cream, External, as base:

Generic: 0.5% (15 g, 28.35 g, 28.4 g); 1% (1 g, 1.5 g, 14.2 g, 20 g, 28 g, 28.35 g, 28.4 g, 30 g, 120 g, 453.6 g); 2.5% (20 g, 28 g, 28.35 g, 30 g, 453.6 g)

Cream, Rectal, as base:

Generic: 1% (28.4 g); 2.5% (30 g)

Cream, External, as valerate:

Generic: 0.2% (15 g, 45 g, 60 g)

Enema, Rectal, as base:

Generic: 100 mg/60 mL (60 mL)

Foam, Rectal, as acetate:

Cortifoam: 10% [90 mg/applicatorful] (15 g) [contains cetyl alcohol, methylparaben, propylene glycol, propylparaben, triethanolamine]

Gel, External, as base:

Corticool: 1% (42.53 g) [contains cremophor el, propylene glycol]

First-Hydrocortisone: 10% (60 g) [contains propylene glycol, simethicone]

Kit, External, as base:

Advanced Allergy Collection: 2.5% [contains cetyl alcohol, methylparaben, propylene glycol, propylparaben]

Dermasorb HC: 2% [contains menthol, methylparaben, propylene glycol, propylparaben]

Scalacort DK: Hydrocortisone lotion 2% and Sal Acid 2% and sulfur 2% [contains benzalkonium chloride, isopropyl alcohol, methylparaben, propylene glycol, propylparaben, soybean lecithin]

Lotion, External, as acetate:

NuCort: 2% (60 g) [contains benzyl alcohol, cetyl alcohol, menthol, triethanolamine]

Lotion, External, as base:

Generic: 1% (114 g); 2.5% (59 mL, 118 mL)

Ointment, External, as base:

Generic: 0.5% (28.35 g, 30 g); 2.5% (20 g, 28.35 g, 453.6 g, 454 g); 1% (25 g, 28 g, 28.35 g, 28.4 g, 30 g, 110 g, 430 g, 453.6 g)

Ointment, External, as valerate:

Generic: 0.2% (15 g, 45 g, 60 g)

Solution, External, as base:

Scalpicin Maximum Strength: 1% (44 mL) [contains disodium edta, menthol, propylene glycol]

Texacort: 2.5% (30 mL) [lipid free, paraben free; contains alcohol, usp]

Suppository, Rectal, as acetate:

Anu-med HC: 25 mg (12s)

Proctocort: 30 mg (12 ea)

Generic: 30 mg (12s)

NONFORMULARY

Cream, External, as butyrate:

Generic: 0.1% (15 g, 45 g, 60 g)

Cream, External, as probutate:

Pandel: 0.1% (45 g, 80 g) [contains butylparaben, methylparaben, propylene glycol]

Lotion, External, as butyrate:

Locoid: 0.1% (59 mL, 118 mL) [contains butylparaben, cetostearyl alcohol, propylparaben]

Ointment, External, as butyrate:

Generic: 0.1% (15 g, 45 g)

Solution, External, as butyrate
Generic: 0.1% (20 mL, 60 mL)

Hydrogen Peroxide

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, External:

Generic: 3% (30 mL, 237 mL, 473 mL, 3840 mL)

NONFORMULARY

Solution, External:

Eskata: 40% (1 ea) [contains isopropyl alcohol]

HYDROmorphone

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Liquid, Oral, as hydrochloride:

Generic: 1 mg/mL (473 mL)

Solution, Injection, as hydrochloride:

Generic: 1 mg/mL (0.5 mL, 1 mL); 2 mg/mL (1 mL, 20 mL); 4 mg/mL (1 mL)

Solution, Injection, as hydrochloride [preservative free]:

Generic: 10 mg/mL (1 mL); 50 mg/5 mL (5 mL); 500 mg/50 mL (50 mL)

Solution, Intravenous, as hydrochloride:

Generic: 6 mg/30 mL (30 mL)

Solution Prefilled Syringe, Intravenous, as hydrochloride:

Generic: 10 mg/50 mL (50 mL); 15 mg/30 mL (30 mL)

Solution Prefilled Syringe, Intravenous, as hydrochloride [preservative free]:

Generic: 12 mg/60 mL (60 mL)

Suppository, Rectal, as hydrochloride:

Generic: 3 mg (6 ea)

Tablet, Oral, as hydrochloride:

Generic: 2 mg, 4 mg, 8 mg

Tablet ER 24 Hour Abuse-Deterrent, Oral, as hydrochloride:

Generic: 8 mg, 12 mg, 16 mg, 32 mg

Hydroquinone

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Cream, External:

AMBI Fade: 2% (56 g) [contains cetyl alcohol, disodium edta, ethylparaben, methylparaben, propylparaben, sodium metabisulfite, soy protein, soya sterol]

Esoterica Daytime: 2% (70 g) [contains disodium edta, methylparaben, propylene glycol, propylparaben]

Esoterica Facial: 2% (85 g)

Esoterica Fade Nighttime: 2% (70 g) [contains disodium edta, methylparaben, propylene glycol, propylparaben, sodium metabisulfite]

Esoterica Sensitive Skin: 1.5% (85 g)

Generic: 4% (28.35 g)

Gel, External:

Exuviance Lightening Complex: 2% (30 g) [contains denatured alcohol, propylene glycol, sodium bisulfite, sodium sulfite, tartrazine (fd&c yellow #5)]

NeoStrata HQ Skin Lightening: 2% (30 g) [fragrance free, oil free; contains propylene glycol, sodium bisulfite, sodium sulfite]

Solution, External:

Melquin 3: 3% (29.57 mL)

Hydroxocobalamin

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Intramuscular:

Generic: 1000 mcg/mL (30 mL)

Solution Reconstituted, Intravenous:

Cyanokit: 5 g (1 ea)

Hydroxyamphetamine and Tropicamide

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Ophthalmic:

Paremyd: Hydroxyamphetamine hydrobromide 1% and tropicamide 0.25% (15 mL) [contains benzalkonium chloride]

Hydroxychloroquine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral, as sulfate:

Generic: 200 mg

HYDROXYprogesterone Caproate

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Oil, Intramuscular:

Makena: 250 mg/mL (5 mL) [contains benzyl alcohol, benzyl benzoate, castor oil (ricine oil)]

Makena: 250 mg/mL (1 mL) [contains benzyl benzoate, castor oil (ricine oil)]

Solution, Intramuscular:

Generic: 1.25 g/5 mL (5 mL)

Hydroxypropyl Cellulose

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Insert, Ophthalmic [preservative free]:

Lacrisert: 5 mg (60 ea)

Hydroxypropyl Methylcellulose

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Gel, Ophthalmic:

GenTeal Severe: 0.3% (10 g)

Systane Overnight Therapy: 0.3% (10 g)

Solution, Intraocular:

OcuCoat Viscoadherent: 2% (1 mL)

Solution, Ophthalmic:

Gonak: 2.5% (15 mL)

Goniosoft: 2.5% (15 mL)

Goniosol: 2.5% (15 mL)

Goniotaire: 2.5% (15 mL)

Goniovisc: 2% (15 mL); 2.5% (15 mL) [contains benzalkonium chloride, edetate disodium]

Isopto Tears: 0.5% (15 mL) [contains benzalkonium chloride]

Pure & Gentle Lubricant: 3 mg/mL (15 mL, 30 mL)

Solution, Ophthalmic [preservative free]:

GenTeal Mild: 0.2% (15 mL)

GenTeal Mild to Moderate: 0.3% (15 mL, 25 mL)

Solution Prefilled Syringe, Ophthalmic [preservative free]:

ImproVue: 1.7% (2 mL)

Hydroxyurea

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule, Oral:

Droxia: 200 mg, 300 mg, 400 mg

Generic: 500 mg

Tablet, Oral:

Siklos: 100 mg, 1000 mg

HydroXYzine

DoD Uniform Formulary Outpatient Dosage Forms

BASIC CORE FORMULARY

Solution, Oral, as hydrochloride:

Generic: 10 mg/5 mL (473 mL)

Syrup, Oral, as hydrochloride:

Generic: 10 mg/5 mL (118 mL, 473 mL)

Tablet, Oral, as hydrochloride:

Generic: 10 mg, 25 mg, 50 mg

UNIFORM FORMULARY

Capsule, Oral, as pamoate:

Generic: 25 mg, 50 mg, 100 mg

Hyoscyamine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Elixir, Oral, as sulfate:

Generic: 0.125 mg/5 mL (473 mL)

Solution, Injection, as sulfate:

Levsin: 0.5 mg/mL (1 mL) [contains benzyl alcohol]

Solution, Oral, as sulfate:

Generic: 0.125 mg/mL (15 mL)

Tablet, Oral, as sulfate:

Generic: 0.125 mg

Tablet Dispersible, Oral, as sulfate:

Generic: 0.125 mg

Tablet Extended Release, Oral, as sulfate:

Symax Duotab: 0.375 mg [contains brilliant blue fcf (fd&c blue #1)]

Tablet Extended Release 12 Hour, Oral, as sulfate:

Generic: 0.375 mg

Tablet Sublingual, as sulfate:

Generic: 0.125 mg

Hyoscyamine, Atropine, Scopolamine, and Phenobarbital

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Elixir, Oral:

Donnatal: Hyoscyamine sulfate 0.1037 mg, atropine sulfate 0.0194 mg, scopolamine hydrobromide 0.0065 mg, and phenobarbital 16.2 mg per 5 mL (120 mL, 480 mL) [contains ethanol <23.8%]

Tablet, Oral:

Donnatal: Hyoscyamine sulfate 0.1037 mg, atropine sulfate 0.0194 mg, scopolamine hydrobromide 0.0065 mg, and phenobarbital 16.2 mg

Phenohytr: Hyoscyamine sulfate 0.1037 mg, atropine sulfate 0.0194 mg, scopolamine hydrobromide 0.0065 mg, and phenobarbital 16.2 mg

Hyoscyamine, Methenamine, Methylene Blue, and Sodium

Phosphate Monobasic

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule, Oral:

Indiomin MB: Hyoscyamine sulfate 0.12 mg, methenamine 120 mg, methylene blue 10 mg, and sodium phosphate monobasic 40.8 mg

HYOSCYAMINE, METHENAMINE, METHYLENE BLUE, AND SODIUM PHOSPHATE MONOBASIC

UTA: Hyoscyamine sulfate 0.12 mg, methenamine 120 mg, methylene blue 10 mg, and sodium phosphate monobasic 40.8 mg

Tablet, Oral:

ME/NaPhos/MB/Hyo1: Hyoscyamine sulfate 0.12 mg, methenamine 81.6 mg, methylene blue 10.8 mg, and sodium phosphate monobasic 40.8 mg [scored; contains brilliant blue fcf (fd&c blue #1)]

Urogesic-Blue: Hyoscyamine sulfate 0.12 mg, methenamine 81.6 mg, methylene blue 10.8 mg, and sodium phosphate monobasic 40.8 mg [scored]

Urolet MB: Hyoscyamine sulfate 0.12 mg, methenamine 81.6 mg, methylene blue 10.8 mg, and sodium phosphate monobasic 40.8 mg [DSC] [scored; contains brilliant blue fcf (fd&c blue #1)]

Ibandronate

**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Tablet, Oral:

Generic: 150 mg

Ibexafungerp

Ibritumomab Tiuxetan

**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Kit, Intravenous [preservative free]:

Zevalin Y-90: 3.2 mg/2 mL [pyrogen free; contains albumin human]

Ibrutinib

**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Capsule, Oral:

Imbruvica: 140 mg

Ibuprofen

**DoD Uniform Formulary Outpatient Dosage Forms
BASIC CORE FORMULARY**

Tablet, Oral:

Generic: 400 mg, 600 mg, 800 mg

UNIFORM FORMULARY

Capsule, Oral:

Generic: 200 mg

Cream, External:

EnovaRX-Ibuprofen: 10% (60 g, 120 g) [contains cetearyl alcohol]

Kit, Combination:

Ibuprofen Comfort Pac: 800 mg [contains methylparaben, trolamine (triethanolamine)]

Solution, Intravenous:

Caldolor: 400 mg/4 mL (4 mL [DSC]); 800 mg/8 mL (8 mL)

Solution, Intravenous, as lysine [preservative free]:

Generic: 10 mg/mL (2 mL)

Suspension, Oral:

Childrens Advil: 100 mg/5 mL (120 mL)

Childrens Motrin: 100 mg/5 mL (120 mL)

GoodSense Ibuprofen Childrens: 100 mg/5 mL (120 mL)

Infants Advil: 50 mg/1.25 mL (15 mL, 30 mL)

Motrin Infants Drops: 50 mg/1.25 mL (15 mL)

Generic: 100 mg/5 mL (5 mL, 118 mL, 120 mL, 473 mL)

Tablet, Oral:

Generic: 200 mg

Tablet Chewable, Oral:

Advil Junior Strength: 100 mg [scored]

Ibuprofen and Phenylephrine

**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Tablet, Oral:

Advil Congestion Relief: Ibuprofen 200 mg and phenylephrine hydrochloride 10 mg

Advil Sinus Congestion & Pain: 10-200 MG, Ibuprofen 200 mg and phenylephrine hydrochloride 10 mg [contains corn starch]

Ibuprofen, Phenylephrine, and Chlorpheniramine

**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Tablet, Oral:

Advil Allergy & Congestion: Ibuprofen 200 mg, phenylephrine hydrochloride 10 mg, and chlorpheniramine maleate 4 mg

Ibuprofen, Pseudoephedrine, and Chlorpheniramine

**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Caplet, Oral:

Advil Allergy Sinus: Ibuprofen 200 mg, pseudoephedrine hydrochloride 30 mg, and chlorpheniramine maleate 2 mg

Advil Multi-Symptom Cold: Ibuprofen 200 mg, pseudoephedrine hydrochloride 30 mg, and chlorpheniramine maleate 2 mg

Ibutilide

**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Solution, Intravenous, as fumarate:

Generic: 1 mg/10 mL (10 mL)

Icatibant

**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Solution, Subcutaneous [preservative free]:

Firazyr: 30 mg/3 mL (3 mL)

Icodextrin

**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Solution, Intraperitoneal:

Adept: 4% (1000 mL, 1500 mL)

Extraneal: 7.5% (2000 mL, 2500 mL)

Icosapent Ethyl

**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Capsule, Oral:

Vascepa: 0.5 g, 1 g

Generic: 1 g

IDArubicin

**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Solution, Intravenous, as hydrochloride [preservative free]:

Generic: 5 mg/5 mL (5 mL); 10 mg/10 mL (10 mL); 20 mg/20 mL (20 mL)

IdaruCIZumab

**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Solution, Intravenous [preservative free]:

Praxbind: 2.5 g/50 mL (50 mL)

Idelalisib

**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Tablet, Oral:

Zydelig: 100 mg, 150 mg

Idursulfase

**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Solution, Intravenous [preservative free]:

Elaprase: 6 mg/3 mL (3 mL)

Ifosfamide

**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Solution, Intravenous:

Generic: 1 g/20 mL (20 mL); 3 g/60 mL (60 mL)

Solution, Intravenous [preservative free]:

Generic: 1 g/20 mL (20 mL); 3 g/60 mL (60 mL)

Solution Reconstituted, Intravenous:

Generic: 1 g (1 ea); 3 g (1 ea)

Solution Reconstituted, Intravenous [preservative free]:

Generic: 1 g (1 ea); 3 g (1 ea)

Iloprost

**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Solution, Inhalation [preservative free]:

Ventavis: 10 mcg/mL (1 mL); 20 mcg/mL (1 mL) [contains alcohol, usp, tromethamine]

Imatinib

**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Tablet, Oral:

Generic: 100 mg, 400 mg

Imiglucerase

**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Solution Reconstituted, Intravenous:

Cerezyme: 400 units (1 ea)

Imipenem and Cilastatin

**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Injection, Powder for Reconstitution:

Imipenem 250 mg and cilastatin 250 mg

Imipenem 500 mg and cilastatin 500 mg

Imipramine

**DoD Uniform Formulary Outpatient Dosage Forms
BASIC CORE FORMULARY**

Capsule, Oral, as pamoate:

Generic: 75 mg

Tablet, Oral, as hydrochloride:
Generic: 10 mg, 25 mg, 50 mg

UNIFORM FORMULARY

Capsule, Oral, as pamoate:
Generic: 100 mg, 125 mg, 150 mg

Imiquimod

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Cream, External:
Zyclara: 3.75% (28 ea) [contains benzyl alcohol, cetyl alcohol, methylparaben, propylparaben]
Zyclara Pump: 2.5% (7.5 g); 3.75% (7.5 g) [contains benzyl alcohol, cetyl alcohol, methylparaben, propylparaben]
Generic: 5% (1 ea, 12 ea, 24 ea)

Immune Globulin

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Injectable, Intramuscular [preservative free]:
GamaSTAN S/D: 15% to 18% [150 to 180 mg/mL] (2 mL, 10 mL)
Kit, Subcutaneous:
Hycvia: 2.5 g/25 mL, 5 g/50 mL, 10 g/100 mL, 20 g/200 mL, 30 g/300 mL [contains albumin human, edetate disodium dihydrate, mouse (murine) and/or hamster protein]
Solution, Injection [preservative free]:
Gammagard: 1 g/10 mL (10 mL); 2.5 g/25 mL (25 mL); 5 g/50 mL (50 mL); 10 g/100 mL (100 mL); 20 g/200 mL (200 mL); 30 g/300 mL (300 mL) [latex free]
Gamunex-C: 1 g/10 mL (10 mL); 2.5 g/25 mL (25 mL); 5 g/50 mL (50 mL); 10 g/100 mL (100 mL); 20 g/200 mL (200 mL); 40 g/400 mL (400 mL) [latex free]
Solution, Intravenous [preservative free]:
Bivigam: 5 g/50 mL (50 mL); 10 g/100 mL (100 mL) [sugar free; contains polysorbate 80]
Flebogamma DIF: 0.5 g/10 mL (10 mL); 5 g/50 mL (50 mL); 5 g/100 mL (100 mL); 10 g/100 mL (100 mL); 20 g/200 mL (200 mL); 20 g/400 mL (400 mL); 10 g/200 mL (200 mL); 2.5 g/50 mL (50 mL) [contains polyethylene glycol]
Gammaplex: 5 g/100 mL (100 mL); 20 g/400 mL (400 mL); 10 g/200 mL (200 mL); 2.5 g/50 mL (50 mL) [DSC] [contains polysorbate 80]
Octagam: 1 g/20 mL (20 mL); 2 g/20 mL (20 mL); 5 g/50 mL (50 mL); 5 g/100 mL (100 mL); 10 g/100 mL (100 mL); 20 g/200 mL (200 mL); 25 g/500 mL (500 mL); 10 g/200 mL (200 mL); 2.5 g/50 mL (50 mL) [sucrose free]
Privigen: 5 g/50 mL (50 mL); 10 g/100 mL (100 mL); 20 g/200 mL (200 mL); 40 g/400 mL (400 mL)
Solution, Subcutaneous [preservative free]:
Cuvitru: 1 g/5 mL (5 mL); 2 g/10 mL (10 mL); 4 g/20 mL (20 mL); 8 g/40 mL (40 mL)
Hizentra: 1 g/5 mL (5 mL); 2 g/10 mL (10 mL); 4 g/20 mL (20 mL); 10 g/50 mL (50 mL) [contains polysorbate 80]
Solution Reconstituted, Intravenous [preservative free]:
Carimune NF: 6 g (1 ea); 12 g (1 ea)
Gammagard S/D Less IgA: 5 g (1 ea); 10 g (1 ea)
NONFORMULARY
Solution, Subcutaneous [preservative free]:
Cutaquig: 1 g/6 mL (6 mL); 1.65 g/10 mL (10 mL); 2 g/12 mL (12 mL); 3.3 g/20 mL (20 mL); 4 g/24 mL (24 mL); 8 g/48 mL (48 mL)
Xembify: Immune globulin (human)-klhw 1 g/5 mL (5 mL); Immune globulin (human)-klhw 2 g/10 mL (10 mL); Immune globulin (human)-klhw 4 g/20 mL (20 mL); Immune globulin (human)-klhw 10 g/50 mL (50 mL) [latex free; contains polysorbate 80]
Solution, Injection [preservative free]:
Gammaked: 1 g/10 mL (10 mL); 2.5 g/25 mL (25 mL); 5 g/50 mL (50 mL); 10 g/100 mL (100 mL); 20 g/200 mL (200 mL) [latex free]

IncobotulinumtoxinA

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution Reconstituted, Intramuscular [preservative free]:
Xeomin: 50 units (1 ea); 100 units (1 ea); 200 units (1 ea) [latex free; contains albumin human]

Indapamide

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:
Generic: 1.25 mg, 2.5 mg

Indigotindisulfonate Sodium

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Injection:
Indigo Carmine: 8 mg/mL (5 mL)

Indinavir

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule, Oral:
Crixivan: 200 mg, 400 mg

Indium 111 Capromab Pendetide

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Kit, Intravenous [preservative free]:
ProstaScint: Capromab pendetide 0.5 mg per vial [to be combined with Indium In 111 (not included)] [pyrogen free; contains mouse (murine) and/or hamster protein]

Indium 111 Oxyquinoline

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Intravenous:
Generic: 1 mCi/mL (1 mL)

Indium In-111 Pentetretotide

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Kit, [preservative free]:
OctreoScan:
Injection, powder for reconstitution: Pentetretotide 10 mcg
Injection, solution: Indium In-111 chloride 111 MBq (3.0 mCi) per 1 mL (1.1 mL)

Indocyanine Green

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution Reconstituted, Intravenous:
Generic: 25 mg (1 ea, 6 ea)

Indomethacin

DoD Uniform Formulary Outpatient Dosage Forms

BASIC CORE FORMULARY

Capsule, Oral:
Generic: 25 mg, 50 mg

UNIFORM FORMULARY

Capsule Extended Release, Oral:
Generic: 75 mg
Solution Reconstituted, Intravenous:
Generic: 1 mg (1 ea)
Suppository, Rectal:
Indocin: 50 mg (30 ea)
Suspension, Oral:
Indocin: 25 mg/5 mL (237 mL) [contains alcohol, usp; pineapple-coconut-mint flavor]

Tier 4 - NOT COVERED

Capsule, Oral:
Tivorbex: 20 mg, 40 mg

Inebilizumab

DoD Uniform Formulary Outpatient Dosage Forms

NOT COVERED

Solution, Intravenous:
Uplizna: Inebilizumab-cdon 100 mg/10 mL (10 mL) [contains polysorbate 80]

Infant Nutritional Formulas

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Liquid, Oral:
PediaSure Pediatric
Powder, Oral:
Similac PM

Infigratinib

InFLIXimab

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution Reconstituted, Intravenous:
Inflectra: 100 mg (1 ea) [contains polysorbate 80]
Solution Reconstituted, Intravenous [preservative free]:
Remicade: 100 mg (1 ea) [contains polysorbate 80]

Influenza A Virus Vaccine (H5N1)

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Injection, emulsion [monovalent]: GlaxoSmithKline product: Adjuvanted Hemagglutinin [A/Indonesia/05/2005 (H5N1)] 3.75 mcg/0.5 mL (5 mL) [contains egg protein, polysorbate 80, and thimerosal]
Injection, suspension [monovalent]: Sanofi Pasteur product: Hemagglutinin [A/Vietnam/1203/2004 (H5N1)] 90 mcg/mL (5 mL) [contains chicken and egg protein, porcine gelatin, and thimerosal]

Influenza Virus Vaccine (Inactivated)

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Suspension, Intramuscular:
Afluria: (5 mL) [DSC] [contains neomycin sulfate, thimerosal]
Afluria Quadrivalent: (5 mL) [contains neomycin sulfate, thimerosal]

INFLUENZA VIRUS VACCINE (INACTIVATED)

Flucelvax Quadrivalent: (5 mL) [contains polysorbate 80, thimerosal]
FluLaval Quadrivalent: (5 mL) [contains egg white (egg protein), formaldehyde solution, polysorbate 80, thimerosal]
Fluzone Quadrivalent: (5 mL) [contains egg white (egg protein), formaldehyde solution, thimerosal]
Suspension, Intramuscular [preservative free]:
Fluzone Quadrivalent: (0.5 mL) [contains egg white (egg protein), formaldehyde solution]
Suspension Pen-injector, Intradermal [preservative free]:
Fluzone Intradermal Quadrivalent: 9 mcg/strain (0.1 mL) [contains egg white (egg protein), formaldehyde solution]
Suspension Prefilled Syringe, Intramuscular [preservative free]:
Afluria: (0.5 mL) [contains neomycin sulfate]
Afluria Quadrivalent: (0.25 mL, 0.5 mL) [contains neomycin sulfate]
Fluad: (0.5 mL) [contains formaldehyde solution, neomycin, polysorbate 80]
Fluarix Quadrivalent: (0.5 mL) [contains egg white (egg protein), formaldehyde solution, gentamicin, polysorbate 80]
Flucelvax Quadrivalent: (0.5 mL) [contains polysorbate 80]
FluLaval Quadrivalent: (0.5 mL) [contains egg white (egg protein), polysorbate 80, formaldehyde solution]
Fluzone High-Dose: (0.5 mL) [contains egg white (egg protein), formaldehyde solution]
Fluzone Quadrivalent: (0.25 mL, 0.5 mL) [contains egg white (egg protein), formaldehyde solution]

Influenza Virus Vaccine (Live/Attenuated)

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Suspension, Nasal [preservative free]:
FluMist Quadrivalent: (1 ea) [latex free; contains egg white (egg protein), gelatin (pork)]

Influenza Virus Vaccine (Recombinant)

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Solution, Intramuscular [preservative free]:
Flublok: (0.5 mL) [no egg protein]

Ingenol Mebutate

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Gel, External:
Picato: 0.015% (3 ea); 0.05% (2 ea) [contains benzyl alcohol, isopropyl alcohol]

Inhalation Devices

DoD Uniform Formulary Outpatient Dosage Forms BASIC CORE FORMULARY

Holding Chamber/Spacer:
Ace Aerosol Cloud Enhancer
Aerochamber MV; Aerochamber Plus Flow-Vu; Aerochamber Plus W-flowsignal; Aerochamber Z-stat Plus
AeroTrach Plus
Aerovent Plus
Breatherite
Breatherite Valved MDI Chamber
Clever Choice Holding Chamber
Compact Space Chamber
Easivent
E-Z Spacer
Flexichamber
Inspirachamber
Liteaire
Optichamber Diamond
Pocket Chamber
Primeaire
Prochamber
Riteflow Spacer
Vortex Holding Chamber
Vortex VHC Frog Child Mask
Vortex VHC Landybug Toddler Mask
Respiratory Therapy:
Ace Aerosol Cloud Enhancer

UNIFORM FORMULARY

Drug delivery system:
OptiHaler
Inhalation kit (InspirEase)
OptiChamber
Peak flow meter
Replacement bags (InspirEase)

Inotersen

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Solution Prefilled Syringe, Subcutaneous [preservative free]:
Tegsedi: 284 mg/1.5 mL (1.5 mL)

Inotuzumab Ozogamicin

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Solution Reconstituted, Intravenous [preservative free]:
Besponsa: 0.9 mg (1 ea) [contains polysorbate 80]

Insulin Aspart

DoD Uniform Formulary Outpatient Dosage Forms BASIC CORE FORMULARY

Solution, Subcutaneous:
NovoLOG: 100 units/mL (10 mL) [contains metacresol, phenol]
Generic: 100 units/mL (10 mL)
Solution Cartridge, Subcutaneous:
NovoLOG Penfill: 100 units/mL (3 mL) [contains metacresol, phenol]
Generic: 100 units/mL (3 mL)
Solution Pen-injector, Subcutaneous:
NovoLOG FlexPen: 100 units/mL (3 mL) [contains metacresol, phenol]
Generic: 100 units/mL (3 mL)

NONFORMULARY

Solution, Subcutaneous:
Fiasp: 100 units/mL (10 mL) [contains metacresol, phenol]
Solution Pen-injector, Subcutaneous:
Fiasp FlexTouch: 100 units/mL (3 mL) [contains metacresol, phenol]

Insulin Aspart Protamine and Insulin Aspart

DoD Uniform Formulary Outpatient Dosage Forms BASIC CORE FORMULARY

Suspension, Subcutaneous:
NovoLOG Mix 70/30 FlexPen: Insulin aspart protamine suspension 70% [intermediate acting] and insulin aspart solution 30% [rapid acting]: 100 units/mL (3 mL)

UNIFORM FORMULARY

Suspension, Subcutaneous:
NovoLOG Mix 70/30: Insulin aspart protamine suspension 70% [intermediate acting] and insulin aspart solution 30% [rapid acting]: 100 units/mL (10 mL)

Insulin Detemir

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Solution, Subcutaneous:
Levemir: 100 units/mL (10 mL) [contains metacresol, phenol]

NONFORMULARY

Solution Pen-injector, Subcutaneous:
Levemir FlexTouch: 100 units/mL (3 mL) [contains metacresol, phenol]

Insulin Glargine

DoD Uniform Formulary Outpatient Dosage Forms BASIC CORE FORMULARY

Solution, Subcutaneous:
Lantus: 100 units/mL (10 mL) [contains metacresol]
Solution Pen-injector, Subcutaneous:
Lantus Solostar: 100 units/mL (3 mL)

UNIFORM FORMULARY

Solution Pen-injector, Subcutaneous:
Toujeo SoloStar: 300 units/mL (1.5 mL) [contains metacresol]
Toujeo Max SoloStar: 300 units/mL (3 mL) [contains metacresol]

NONFORMULARY

Solution Pen-injector, Subcutaneous:
Basaglar KwikPen: 100 units/mL (3 mL) [contains metacresol]
Semglee: 100 units/mL (3 mL) [contains metacresol]

Insulin Glulisine

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Solution, Injection:
Apidra: 100 units/mL (10 mL) [contains metacresol]
Solution Pen-injector, Subcutaneous:
Apidra SoloStar: 100 units/mL (3 mL) [contains metacresol]

Insulin Lispro

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Solution, Subcutaneous:
Admelog: 100 units/mL (10 mL) [contains metacresol]
HumaLOG: 100 units/mL (3 mL, 10 mL) [contains metacresol, phenol]
Solution Pen-injector, Subcutaneous:
Admelog SoloStar: 100 units/mL (3 mL) [contains metacresol]
HumaLOG KwikPen: 100 units/mL (3 mL); 200 units/mL (3 mL) [contains metacresol, phenol]

NONFORMULARY

Solution Pen-injector, Subcutaneous:
HumaLOG Junior KwikPen: 100 units/mL (3 mL) [contains metacresol, phenol]

**Insulin Lispro Protamine and Insulin Lispro
DoD Uniform Formulary Outpatient Dosage Forms**

UNIFORM FORMULARY

Suspension, Subcutaneous:

HumaLOG Mix 50/50: Insulin lispro protamine suspension 50% [intermediate acting] and insulin lispro solution 50% [rapid acting]: 100 units/mL (10 mL)

HumaLOG Mix 75/25: Insulin lispro protamine suspension 75% [intermediate acting] and insulin lispro solution 25% [rapid acting]: 100 units/mL (10 mL)

Suspension Pen-injector, Subcutaneous:

HumaLOG Mix 50/50 KwikPen: Insulin lispro protamine suspension 50% [intermediate acting] and insulin lispro solution 50% [rapid acting]: 100 units/mL (3 mL)

HumaLOG Mix 75/25 KwikPen: Insulin lispro protamine suspension 75% [intermediate acting] and insulin lispro solution 25% [rapid acting]: 100 units/mL (3 mL)

Insulin NPH

DoD Uniform Formulary Outpatient Dosage Forms

BASIC CORE FORMULARY

Suspension, Subcutaneous:

NovoLIN N: 100 units/mL (10 mL) [contains metacresol, phenol]

UNIFORM FORMULARY

Suspension, Subcutaneous:

HumuLIN N: 100 units/mL (3 mL, 10 mL) [contains metacresol, phenol]

NovoLIN N ReliOn: 100 units/mL (10 mL) [contains metacresol, phenol]

Suspension Pen-injector, Subcutaneous:

HumuLIN N KwikPen: 100 units/mL (3 mL) [contains metacresol, phenol]

NovoLIN N FlexPen: 100 units/mL (3 mL) [contains metacresol, phenol]

NovoLIN N FlexPen ReliOn: 100 units/mL (3 mL) [contains metacresol, phenol]

Insulin NPH and Insulin Regular

DoD Uniform Formulary Outpatient Dosage Forms

BASIC CORE FORMULARY

Suspension, Subcutaneous:

NovoLIN 70/30: Insulin NPH suspension 70% [intermediate acting] and insulin regular solution 30% [short acting]: 100 units/mL (10 mL) [contains metacresol, phenol]

UNIFORM FORMULARY

Suspension, Subcutaneous:

HumuLIN 70/30: Insulin NPH suspension 70% [intermediate acting] and insulin regular solution 30% [short acting]: 100 units/mL (3 mL, 10 mL) [vial]

HumuLIN 70/30 KwikPen: Insulin NPH suspension 70% [intermediate acting] and insulin regular solution 30% [short acting]: 100 units/mL (3 mL)

NovoLIN 70/30 FlexPen: Insulin NPH suspension 70% [intermediate acting] and insulin regular solution 30% [short acting]: 100 units/mL (3 mL) [vial]

NovoLIN 70/30 FlexPen Relion: Insulin NPH suspension 70% [intermediate acting] and insulin regular solution 30% [short acting]: 100 units/mL (3 mL) [vial]

Insulin Regular

DoD Uniform Formulary Outpatient Dosage Forms

BASIC CORE FORMULARY

Solution, Injection:

NovoLIN R: 100 units/mL (10 mL) [contains metacresol]

UNIFORM FORMULARY

Solution, Injection:

HumuLIN R: 100 units/mL (3 mL, 10 mL) [contains metacresol, phenol]

NovoLIN R ReliOn: 100 units/mL (10 mL) [contains metacresol]

Solution, Intravenous [preservative free]:

Myxredlin: 100 units/100 mL in NaCl 0.9% (100 mL)

Solution, Subcutaneous:

HumuLIN R U-500 (CONCENTRATED): 500 units/mL (20 mL) [contains metacresol]

Solution Pen-injector, Subcutaneous:

HumuLIN R U-500 KwikPen: 500 units/mL (3 mL) [contains metacresol]

Interferon Alfa-2b

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Injection:

Intron A: 6,000,000 units/mL (3.8 mL); 10,000,000 units/mL (3.2 mL) [contains edetate disodium, metacresol, polysorbate 80]

Solution Reconstituted, Injection [preservative free]:

Intron A: 10,000,000 units (1 ea); 18,000,000 units (1 ea); 50,000,000 units (1 ea) [contains albumin human]

Interferon Alfa-n3

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Injection:

Alferon N: 5,000,000 units/mL (1 mL)

Interferon Beta-1a

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Injection, Powder for Reconstitution [preservative free]:

Avonex: 30 mcg [contains albumin (human), mouse (murine) and/or hamster protein; supplied with diluent]

Solution, Injection:

Avonex: 30 mcg/0.5 mL (0.5 mL) [albumin free; contains mouse (murine) and/or hamster protein; prefilled syringe]

Avonex Pen: 30 mcg/0.5 mL (0.5 mL) [albumin free; contains mouse (murine) and/or hamster protein]

Solution, Injection [preservative free]:

Rebif: 22 mcg/0.5 mL (0.5 mL), 44 mcg/0.5 mL (0.5 mL) [contains albumin (human), mouse (murine) and/or hamster protein; prefilled syringe]

Rebif Rebidose: 22 mcg/0.5 mL (0.5 mL), 44 mcg/0.5 mL (0.5 mL) [contains albumin (human), mouse (murine) and/or hamster protein; autoinjector]

Solution, Injection [preservative free, combination package]:

Rebif Titration Pack: 8.8 mcg/0.2 mL (6s) and 22 mcg/0.5 mL (6s) [contains albumin (human), mouse (murine) and/or hamster protein; prefilled syringe]

Rebif Rebidose Titration Pack: 8.8 mcg/0.2 mL (6s) and 22 mcg/0.5 mL (6s) [contains albumin (human), mouse (murine) and/or hamster protein; autoinjector]

Interferon Beta-1b

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Kit, Subcutaneous:

Betaseron: 0.3 mg [contains albumin human]

Kit, Subcutaneous [preservative free]:

Extavia: 0.3 mg [contains albumin human]

Interferon Gamma-1b

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Subcutaneous:

Actimmune: 2,000,000 units/0.5 mL (0.5 mL)

Iobenguane I 123

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Injection:

AdreView: iobenguane sulfate 0.08 mg and I 123 74 MBq (2 mCi) per mL (5 mL) [contains benzyl alcohol]

Iobenguane I 131

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Intravenous:

Azedra Dosimetric: 555 MBq/mL (15 mCi/mL) (1 ea)

Azedra Therapeutic: 555 MBq/mL (15 mCi/mL) (1 ea)

Iodinated I 131 Albumin

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Intravenous:

Megatope: 1 mCi/mL (8 mL) [contains benzyl alcohol]

Solution Prefilled Syringe, Intravenous:

Volumex: 25 mCi/mL (1 ea) [contains benzyl alcohol]

Iodine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Gel, External [Cadexomer Iodine]:

Generic: 9% (10 g, 40 g)

Tincture, External:

Generic: 2% (30 mL, 473 mL, 500 mL, 4000 mL, 20000 mL); 7% (59 mL, 480 mL); (30 mL)

Iodine I-125 Human Serum Albumin

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, for injection:

Jeanatope: 18.5 megabecquerels (500 µCi)/0.5 mL [contains albumin (human), benzyl alcohol]

Iodixanol

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Intravenous:

Visipaque: 320 mg/mL (50 mL, 100 mL, 150 mL, 200 mL, 500 mL) [contains edetate calcium disodium]

Visipaque: 270 mg/mL (50 mL, 100 mL, 150 mL, 200 mL) [pyrogen free; contains edetate calcium disodium, trolamine (triethanolamine)]

Solution, Intravenous [preservative free]:

Visipaque: 320 mg/mL (50 mL) [pyrogen free; contains edetate calcium disodium]

Iodoquinol

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Gel, External:

Quinja: 1.25% (60 g)

IDOQUINOL AND HYDROCORTISONE

Iodoquinol and Hydrocortisone

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Cream, External:

Generic: Iodoquinol 1% and hydrocortisone acetate 1% (30 g)

Generic: Iodoquinol 1% and hydrocortisone 1.9% per 2 g packet (30s)

Gel, External:

Alcortin A: Iodoquinol 1% and hydrocortisone 2% (2 g, 48 g) [contains aloe, benzyl alcohol]

Nonormulary

Cream, External:

Dermazene: Iodoquinol 1% and hydrocortisone acetate 1% (2 g, 30 g) [contains cetyl alcohol]

Ioflupane I 123

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Intravenous:

DaTscan: 185 MBq/2.5 mL (2.5 mL) [pyrogen free; contains alcohol, usp]

Iohexol

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Injection:

Omnipaque: 180 mg/mL (10 mL, 20 mL); 240 mg/mL (50 mL); 300 mg/mL (10 mL, 30 mL, 50 mL, 75 mL, 100 mL, 125 mL, 150 mL, 200 mL, 500 mL) [contains edetate calcium disodium]

Solution, Injection [preservative free]:

Omnipaque: 240 mg/mL (10 mL, 20 mL, 50 mL, 100 mL, 150 mL, 200 mL) [pyrogen free; contains edetate calcium disodium]

Solution, Intravenous:

Omnipaque: 140 mg/mL (50 mL)

Omnipaque: 350 mg/mL (50 mL, 75 mL, 100 mL, 125 mL, 150 mL, 200 mL, 500 mL) [contains edetate calcium disodium]

Iopamidol

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Injection:

Isovue-M 200: 41% (10 mL, 20 mL) [contains edetate calcium disodium]

Isovue-M 300: 61% (15 mL)

Solution, Intravenous:

Isovue-200: 41% (50 mL, 200 mL) [contains edetate calcium disodium]

Isovue-250: 51% (50 mL, 100 mL, 150 mL, 200 mL) [contains edetate calcium disodium]

Isovue-300: 61% (30 mL, 50 mL, 75 mL, 100 mL, 125 mL, 150 mL, 200 mL, 500 mL) [contains edetate calcium disodium]

Isovue-370: 76% (50 mL, 75 mL, 100 mL, 125 mL, 150 mL, 200 mL, 500 mL) [contains edetate calcium disodium]

Iopromide

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Injection:

Ultravist: 50% (100 mL, 200 mL); 62% (50 mL, 100 mL, 125 mL, 150 mL, 200 mL, 500 mL); 77% (50 mL, 100 mL, 150 mL, 200 mL, 500 mL)

Iothalamate Meglumine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Injection:

Conray: 60% (30 mL, 50 mL, 100 mL, 150 mL)

Solution, Intravenous:

Conray 30: 30% (150 mL)

Conray 43: 43% (50 mL, 250 mL)

Solution, Urethral:

Cysto-Conray II: 17.2% (250 mL)

Ioversol

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Intravenous:

Optiray 240: 51% (50 mL, 100 mL, 125 mL, 200 mL) [contains edetate calcium disodium]

Optiray 300: 64% (50 mL, 100 mL, 150 mL, 200 mL, 500 mL) [contains edetate calcium disodium]

Optiray 320: 68% (20 mL, 30 mL, 50 mL, 75 mL, 100 mL, 125 mL, 150 mL, 200 mL) [contains edetate calcium disodium]

Optiray 350: 74% (50 mL, 75 mL, 100 mL, 125 mL, 150 mL, 200 mL, 250 mL, 500 mL) [contains edetate calcium disodium]

Ioxilan

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Injection, solution [preservative free]:

Oxilan 300: 62% (50 mL, 100 mL, 150 mL, 200 mL, 500 mL) [contains edetate calcium disodium, sodium 0.2 mg (0.01 mEq)/mL; provides organically-bound iodine 300 mg/mL]

Oxilan 350: 73% (50 mL, 100 mL, 150 mL, 200 mL, 500 mL) [contains edetate calcium disodium, sodium 0.2 mg (0.01 mEq)/mL; provides organically-bound iodine 350 mg/mL]

Ipilimumab

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Intravenous [preservative free]:

Yervoy: 50 mg/10 mL (10 mL); 200 mg/40 mL (40 mL) [contains polysorbate 80]

Ipratropium and Albuterol

DoD Uniform Formulary Outpatient Dosage Forms

BASIC CORE FORMULARY

Solution, for Nebulization:

Generic: Ipratropium bromide 0.5 mg and albuterol (base) 2.5 mg per 3 mL (30s, 60s)

Solution, for Oral Inhalation [spray]:

Combivent Respimat: Ipratropium bromide 20 mcg and albuterol (base) 100 mcg per inhalation (4 g) [contains benzalkonium chloride]

Ipratropium (Nasal)

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Nasal, as bromide:

Generic: 0.03% (30 mL); 0.06% (15 mL)

Ipratropium (Oral Inhalation)

DoD Uniform Formulary Outpatient Dosage Forms

BASIC CORE FORMULARY

Aerosol Solution, Inhalation, as bromide:

Atrovent HFA: 17 mcg/actuation (12.9 g) [contains alcohol, usp]

Solution, Inhalation, as bromide:

Generic: 0.02% (2.5 mL)

Solution, Inhalation, as bromide [preservative free]:

Generic: 0.02% (2.5 mL)

Irbesartan

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:

Generic: 75 mg, 150 mg, 300 mg

Irbesartan and Hydrochlorothiazide

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:

Generic: 150/12.5: Irbesartan 150 mg and hydrochlorothiazide 12.5 mg

Generic: 300/12.5: Irbesartan 300 mg and hydrochlorothiazide 12.5 mg

Irinotecan (Conventional)

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Intravenous, as hydrochloride:

Camptosar: 300 mg/15 mL (15 mL)

Generic: 40 mg/2 mL (2 mL); 100 mg/5 mL (5 mL); 500 mg/25 mL (25 mL)

Solution, Intravenous, as hydrochloride [preservative free]:

Generic: 40 mg/2 mL (2 mL); 100 mg/5 mL (5 mL)

Irinotecan (Liposomal)

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Injectable, Intravenous:

Onivyde: 43 mg/10 mL (10 mL) [contains mpeg-2000-dspe (methoxy-terminated peg)]

Iron Dextran Complex

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Injection:

Infed: 50 mg/mL (2 mL)

Iron Sucrose

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Intravenous [preservative free]:

Venofer: 20 mg/mL (2.5 mL, 5 mL, 10 mL)

Isavuconazonium Sulfate

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule, Oral:

Cresemba: 186 mg [contains disodium edta]

Solution Reconstituted, Intravenous:

Cresemba: 372 mg (1 ea)

Isocarboxazid**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Tablet, Oral:
Marplan: 10 mg [scored]

Isoflurane**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Solution, Inhalation:
Forane: USP: ≥99.9 mL/100 mL (100 mL, 250 mL)
Terrell: USP: ≥99.9 mL/100 mL (100 mL, 250 mL)
Generic: USP: ≥99.9 mL/100 mL (100 mL, 250 mL)

Isoniazid**DoD Uniform Formulary Outpatient Dosage Forms
BASIC CORE FORMULARY**

Tablet, Oral:
Generic: 100 mg, 300 mg

UNIFORM FORMULARY

Solution, Injection:
Generic: 100 mg/mL (10 mL)
Syrup, Oral:
Generic: 50 mg/5 mL (473 mL)

Isoproterenol**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Solution, Injection, as hydrochloride:
Isuprel: 0.2 mg/mL (1 mL, 5 mL) [contains disodium edta]

Isosorbide Dinitrate**DoD Uniform Formulary Outpatient Dosage Forms
BASIC CORE FORMULARY**

Tablet, Oral:
Generic: 5 mg, 10 mg, 20 mg, 30 mg
Tablet Extended Release, Oral:
Generic: 40 mg

UNIFORM FORMULARY

Capsule Extended Release, Oral:
Dilatrate-SR: 40 mg

Isosorbide Dinitrate and Hydralazine**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Tablet, Oral:
BiDiI: Isosorbide dinitrate 20 mg and hydralazine hydrochloride 37.5 mg

Isosorbide Mononitrate**DoD Uniform Formulary Outpatient Dosage Forms
BASIC CORE FORMULARY**

Tablet Extended Release 24 Hour, Oral:
Generic: 30 mg, 60 mg, 120 mg

UNIFORM FORMULARY

Tablet, Oral:
Generic: 10 mg, 20 mg

Isosulfan Blue**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Solution, Subcutaneous:
Generic: 1% (5 mL)
Solution, Subcutaneous [preservative free]:
Generic: 1% (5 mL)

ISOTretinoin (Systemic)**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Capsule, Oral:
Generic: 10 mg, 20 mg, 30 mg, 40 mg

NONFORMULARY

Capsule, Oral:
Generic: 25 mg, 35 mg
Absorica LD: 8 mg, 16 mg, 24 mg, 32 mg

Isoxsuprine**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Tablet, Oral, as hydrochloride:
Generic: 10 mg, 20 mg

Itraconazole**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Capsule, Oral:
Generic: 100 mg

Solution, Oral:

Sporanox: 10 mg/mL (150 mL) [contains propylene glycol, saccharin sodium, sorbitol]

Tablet, Oral:
Onmel: 200 mg

NONFORMULARY

Capsule, Oral:
Tolsura: 65 mg

Ivabradine**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Solution, Oral [preservative free]:
Corlanor: 5 mg/5 mL (5 mL)
Tablet, Oral:
Corlanor: 5 mg [scored], 7.5 mg

Ivacaftor**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Packet, Oral:
Kalydeco: 60 mg (56 ea); 75 mg (56 ea)
Tablet, Oral:
Kalydeco: 150 mg

Ivermectin (Systemic)**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Tablet, Oral:
Generic: 3 mg

Ivermectin (Topical)**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Lotion, External:
Sklice: 0.5% (117 g) [contains methylparaben, propylparaben]

NONFORMULARY

Cream, External:
Soolantra: 1% (30 g, 45 g) [contains cetyl alcohol, edetate disodium, methylparaben, propylene glycol, propylparaben]

Ivosidenib**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Tablet, Oral:
Tibsovo: 250 mg

Ixabepilone**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Solution Reconstituted, Intravenous:
Ixempra Kit: 15 mg (1 ea); 45 mg (1 ea) [contains alcohol, usp, cremophor el]

Ixazomib**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Capsule, Oral:
Ninlaro: 2.3 mg, 3 mg, 4 mg

Japanese Encephalitis Virus Vaccine (Inactivated)**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Suspension, Intramuscular:
Ixiaro: (0.5 mL) [latex free; contains albumin bovine, protamine sulfate, sodium metabisulfite]

Ketamine**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Solution, Injection:
Ketalar: 10 mg/mL (20 mL); 50 mg/mL (10 mL); 100 mg/mL (5 mL)
Generic: 10 mg/mL (20 mL); 50 mg/mL (10 mL); 100 mg/mL (5 mL, 10 mL)

Ketoconazole (Systemic)**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Tablet, Oral:
Generic: 200 mg

Ketoconazole (Topical)**DoD Uniform Formulary Outpatient Dosage Forms
BASIC CORE FORMULARY**

Cream, External:
Generic: 2% (15 g, 30 g, 60 g)

UNIFORM FORMULARY

Foam, External:
Generic: 2% (50 g)
Gel, External:
Xolegel: 2% (45 g) [contains alcohol, usp]

KETOCONAZOLE (TOPICAL)

Kit, External:
Ketodan: 2% [contains cetyl alcohol, edetate disodium, propylene glycol]
Shampoo, External:
Nizoral A-D: 1% (125 mL, 200 mL)
Generic: 2% (120 mL)

Ketorolac (Ophthalmic)

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Ophthalmic, as tromethamine:
Generic: 0.4% (5 mL); 0.5% (3 mL, 5 mL, 10 mL)
Solution, Ophthalmic, as tromethamine [preservative free]:
Acuvail: 0.45% (30 ea)

Ketorolac (Systemic)

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Kit, Injection, as tromethamine:
ReadySharp Ketorolac: 15 mg/mL [contains alcohol, usp]
Solution, Injection, as tromethamine:
Generic: 15 mg/mL (1 mL); 30 mg/mL (1 mL); 60 mg/2 mL (2 mL)
Solution, Injection, as tromethamine [preservative free]:
Generic: 15 mg/mL (1 mL); 30 mg/mL (1 mL)
Solution, Intramuscular, as tromethamine:
Generic: 60 mg/2 mL (2 mL)
Solution, Intramuscular, as tromethamine [preservative free]:
Generic: 60 mg/2 mL (2 mL)
Tablet, Oral, as tromethamine:
Generic: 10 mg

Ketotifen (Ophthalmic)

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Ophthalmic:
Generic: 0.025% (5 mL)

Labetalol

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Intravenous, as hydrochloride:
Generic: 5 mg/mL (4 mL, 20 mL, 40 mL)
Tablet, Oral, as hydrochloride:
Generic: 100 mg, 200 mg, 300 mg

Lacosamide

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Intravenous:
Vimpat: 200 mg/20 mL (20 mL)
Solution, Oral:
Vimpat: 10 mg/mL (200 mL, 465 mL) [contains aspartame, methylparaben, polyethylene glycol, propylene glycol; strawberry flavor]
Tablet, Oral:
Vimpat: 50 mg, 100 mg, 150 mg, 200 mg

Lactase

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:
Lac-Dose: 3000 units
Lactaid: 3000 units
Lactaid Fast Act: 9000 units
Lactase Enzyme: 3000 units
Lactase Fast Acting: 9000 units
Surelac: 3000 units
Tablet Chewable, Oral:
Lactaid Fast Act: 9000 units [vanilla flavor]

Lactic Acid

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Cream, External:
Generic: 10% (113.4 g, 226.8 g)
Lotion, External:
Generic: 10% (354.84 mL, 473.12 mL)

Lactic Acid and Ammonium Hydroxide

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Cream, External:
Generic: Lactic acid 12% with ammonium hydroxide (140 g, 280 g, 385 g)
Lotion, External:
Generic: Lactic acid 12% with ammonium hydroxide (225 g, 400 g)
Geri-Hydrolac, Lac-Hydrin Five: Lactic acid 5% with ammonium hydroxide (120 mL, 240 mL)

Lactobacillus

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule, Oral:

Advanced Probiotic: *L. acidophilus*, *L. casei*, *L. delbrueckii*, and *L. rhamnosus* GG 10 billion live cultures [also includes *Bifidobacterium lactis*, and *B. longum*]

Culturelle: *L. rhamnosus* GG 10 billion colony-forming units [contains casein and whey]

Dofus: *L. acidophilus* and *L. bifidus* 10:1 ratio [beet root powder base]

Flora-Q: *L. acidophilus* and *L. paracasei* ≥8 billion colony-forming units [also contains *Bifidobacterium* and *S. thermophilus*]

Lacto-Key:

100: *L. acidophilus* 1 billion colony-forming units [milk, soy, and yeast free; rice derived]

600: *L. acidophilus* 6 billion colony-forming units [milk, soy, and yeast free; rice derived]

Lacto-Bifidus:

100: *L. bifidus* 1 billion colony-forming units [milk, soy, and yeast free; rice derived]

600: *L. bifidus* 6 billion colony-forming units [milk, soy, and yeast free; rice derived]

Lacto-Pectin: *L. acidophilus*, *L. casei*, *L. plantarum*, *L. rhamnosus*, *Bifidobacterium breve*, and *B. longum* 20 billion colony-forming units

Lacto-TriBlend:

100: *L. acidophilus*, *L. bifidus*, and *L. bulgaricus* 1 billion colony-forming units [milk, soy and yeast free; rice derived]

600: *L. acidophilus*, *L. bifidus*, and *L. bulgaricus* 6 billion colony-forming units [milk, soy and yeast free; rice derived]

Megadophilus, Superdophilus: *L. acidophilus* 2 billion units [available in dairy based or dairy free formulations]

RisaQuad: *L. acidophilus* and *L. paracasei* 8 billion colony-forming units [also includes *Bifidobacterium* and *Streptococcus thermophilus*]

RisaQuad-2: *L. acidophilus* and *L. paracasei* 16 billion colony-forming units [gluten free; also includes *Bifidobacterium* and *Streptococcus thermophilus*]

Visbiome: *L. acidophilus*, *L. plantarum*, *L. paracasei*, *L. bulgaricus*, *Bifidobacterium breve*, *B. longum*, *B. infantis*, and *Streptococcus thermophilus* 112 billion live cells [gluten free; contains lactose, milk protein]

VSL #3: *L. acidophilus*, *L. plantarum*, *L. paracasei*, *L. bulgaricus*, *Bifidobacterium breve*, *B. longum*, *B. infantis*, and *Streptococcus thermophilus* 112 billion live cells [gluten free]

Caplet, Oral:

Bacid: *L. acidophilus* and *L. bulgaricus* [also contains *Bifidobacterium bifidum* and *Streptococcus thermophilus*]

Risa-Bid: *L. acidophilus* and *L. bulgaricus* [also contains *Bifidobacterium bifidum* and *Streptococcus thermophilus*]

Granules:

Floranex: *L. acidophilus* and *L. bulgaricus* 100 million live cells per 1 g packet (12s) [contains milk, sodium 5 mg/packet, soy]

Lactinex: *L. acidophilus* and *L. bulgaricus* 100 million live cells per 1 g packet (12s) [gluten free; contains calcium 5 mg/packet, lactose 380 mg/packet, potassium 20 mg/packet, sodium 5 mg/packet, sucrose 34 mg/packet, whey, evaporated milk, and soy peptone]

Powder:

Lacto-TriBlend: *L. acidophilus*, *L. bifidus*, and *L. bulgaricus* 10 billion colony-forming units per ¼ teaspoon (60 g) [milk, soy, and yeast free; rice derived]

Megadophilus, Superdophilus: *L. acidophilus* 2 billion units per half-teaspoon (49 g, 70 g, 84 g, 126 g) [available in dairy based or dairy free (garbanzo bean) formulations]

MoreDophilus: *L. acidophilus* 12.4 billion units per teaspoon (30 g, 120 g) [dairy free, yeast free; soy and carrot derived]

Visbiome: *L. acidophilus*, *L. plantarum*, *L. paracasei*, *L. bulgaricus* 450 billion live cells per packet (30s) [gluten free; contains lactose, milk protein; also contains *Bifidobacterium breve*, *B. longum*, *B. infantis*, and *Streptococcus thermophilus*; lemon flavor and unflavored]

VSL #3: *L. acidophilus*, *L. plantarum*, *L. paracasei*, *L. bulgaricus* 450 billion live cells per sachet (10s, 30s) [gluten free; also contains *Bifidobacterium breve*, *B. longum*, *B. infantis*, and *Streptococcus thermophilus*; lemon cream flavor and unflavored]

VSL #3-DS: *L. acidophilus*, *L. plantarum*, *L. paracasei*, *L. bulgaricus* 900 billion live cells per packet (20s.) [gluten free; also contains *Bifidobacterium breve*, *B. longum*, *B. infantis*, and *Streptococcus thermophilus*]

Tablet, Oral: *L. acidophilus* 35 million and *L. sporogenes* 25 million

Floranex: *L. acidophilus* and *L. bulgaricus* 1 million colony-forming units [contains lactose, nonfat dried milk, whey]

Kala: *L. acidophilus* 200 million units [dairy free, yeast free; soy based]

Tablet, Chewable, Oral: *L. reuteri* 100 million organisms

Dialyvit Probiotic: *L. acidophilus* and *Bifidobacterium lactis* 10 billion cells [orange cream flavor]

Lactinex: *L. acidophilus* and *L. bulgaricus* 1 million live cells [gluten free; contains calcium 5.2 mg/4 tablets, lactose 960 mg/4 tablets, potassium 20 mg/4 tablets, sodium 5.6 mg/4 tablets, and sucrose 500 sucrose/4 tablets; contains whey, evaporated milk, and soy peptone]

Pedia-Lax Probiotic Yums: *L. reuteri* 100 million organisms [dye free, gluten free, sugar free; contains milk protein; strawberry flavor]

ReZyst IM: *L. acidophilus* and *Bifidobacterium* 150 mg [3 billion live cells; berry flavor]

Wafer: *L. acidophilus* 90 mg and *L. bifidus* 25 mg (100s) [provides 1 billion organisms/wafer at time of manufacture; milk free]

Lactulose**DoD Uniform Formulary Outpatient Dosage Forms****BASIC CORE FORMULARY**

Solution, Oral:

Generic: 10 g/15 mL (15 mL, 30 mL, 236 mL, 237 mL, 473 mL, 500 mL, 946 mL, 1892 mL)

UNIFORM FORMULARY

Packet, Oral:

Kristalose: 10 g (30 ea); 20 g (30 ea)

LamiVUDine**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution, Oral:

EpiVir HBV: 5 mg/mL (240 mL) [contains methylparaben, propylene glycol, propylparaben; strawberry-banana flavor]

Generic: 10 mg/mL (240 mL)

Tablet, Oral:

Generic: 100 mg, 150 mg, 300 mg

Lamivudine and Zidovudine**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Tablet, Oral:

Generic: Lamivudine 150 mg and zidovudine 300 mg

LamoTRigine**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Kit, Oral:

LaMiCtAl ODT: Blue Kit: 25 mg (21s) & 50 mg (7s), Orange Kit: 25 mg (14s) & 50 mg (14s) & 100 mg (7s), Green Kit: 50 mg (42s) & 100 mg (14s)

LaMiCtAl Starter: Blue Kit: 25 mg (35s)

LaMiCtAl Starter: Green Kit: 25 mg (84s) & 100 mg (14s), Orange Kit: 25 mg (42s) & 100 mg (7s) [contains fd&c yellow #6 aluminum lake]

LaMiCtAl XR: Green Kit: 50 mg (14s) & 100 mg (14s) & 200 mg (7s) [contains fd&c blue #2 aluminum lake, polysorbate 80]

LaMiCtAl XR: Blue Kit: 25 mg (21s) & 50 mg (7s), Orange Kit: 25 mg (14s) & 50 mg (14s) & 100 mg (7s) [contains polysorbate 80]

Generic: Blue Kit: 25 mg (21s) & 50 mg (7s), Green Kit: 50 mg (42s) & 100 mg (14s), Orange Kit: 25 mg (14s) & 50 mg (14s) & 100 mg (7s)

Tablet, Oral:

Generic: 25 mg, 100 mg, 150 mg, 200 mg

Tablet Chewable, Oral:

Generic: 5 mg, 25 mg

Tablet Dispersible, Oral:

Generic: 25 mg, 50 mg, 100 mg, 200 mg

Tablet Extended Release 24 Hour, Oral:

Generic: 25 mg, 50 mg, 100 mg, 200 mg, 250 mg, 300 mg

Lanadelumab**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution, Subcutaneous [preservative free]:

Takhzyro: 300 mg/2 mL (2 mL) [contains polysorbate 80]

Lanolin**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Cream, External:

HPA Lanolin: (7 g, 40 g)

Lan-O-Soothe: (7 g, 28 g, 56 g)

Lanolin, Cetyl Alcohol, Glycerin, Petrolatum, and Mineral Oil**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Lotion, External [bottle]:

Generic: 180 mL, 300 mL, 480 mL

Lotion, External [tube]:

Generic: 100 mL

Lanreotide**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution, Subcutaneous:

Somatuline Depot: 120 mg/0.5 mL (0.5 mL); 60 mg/0.2 mL (0.2 mL); 90 mg/0.3 mL (0.3 mL)

Lansoprazole, Amoxicillin, and Clarithromycin**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Combination package [each administration card contains]:

Generic:

Capsule: Amoxicillin 500 mg (4 capsules/day)

Capsule, delayed release: Lansoprazole 30 mg (2 capsules/day)

Tablet: Clarithromycin 500 mg (2 tablets/day)

Lanthanum**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Packet, Oral:

Fosrenol: 750 mg (10 ea, 90 ea); 1000 mg (10 ea, 90 ea)

Tablet Chewable, Oral:

Fosrenol: 500 mg, 750 mg, 1000 mg

Lapatinib**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Tablet, Oral:

Tykerb: 250 mg

Laronidase**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution, Intravenous:

Aldurazyme: 2.9 mg/5 mL (5 mL) [contains mouse (murine) and/or hamster protein, polysorbate 80]

Larotrectinib**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Capsule, Oral, as sulfate:

Vittrakvi: 25 mg

Solution, Oral, as sulfate:

Vittrakvi: 20 mg/mL (100 mL)

Latanoprost**DoD Uniform Formulary Outpatient Dosage Forms****BASIC CORE FORMULARY**

Solution, Ophthalmic:

Generic: 0.005% (2.5 mL)

UNIFORM FORMULARY

Solution, Ophthalmic:

Xalatan: 0.005% (2.5 mL)

NONFORMULARY

Emulsion, Ophthalmic:

Xelpros: 0.005% (2.5 mL)

Ledipasvir and Sofosbuvir**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Packet, Oral:

Harvoni: Ledipasvir 45 mg and sofosbuvir 200 mg (28 ea)

Harvoni: Ledipasvir 33.75 mg and sofosbuvir 150 mg (28 ea)

Tablet, Oral:

Harvoni: Ledipasvir 45 mg and sofosbuvir 200 mg

Harvoni: Ledipasvir 90 mg and sofosbuvir 400 mg

Leflunomide**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Tablet, Oral:

Generic: 10 mg, 20 mg

Lemborexant**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Tablet, Oral:

DayVigo: 5 mg, 10 mg

Lenalidomide**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Capsule, Oral:

Revlimid: 2.5 mg, 5 mg, 10 mg, 15 mg, 20 mg, 25 mg

Lenvatinib**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Capsule Therapy Pack, Oral:

Lenvima 10 MG Daily Dose: 10 mg (30 ea)

Lenvima 14 MG Daily Dose: 10 mg & 4 mg (60 ea)

Lenvima 18 MG Daily Dose: 10 mg & 2x4 mg (15 ea, 90 ea)

Lenvima 20 MG Daily Dose: 2x10 mg (60 ea)

Lenvima 24 MG Daily Dose: 2x10 mg & 4 mg (90 ea)

Lenvima 8 MG Daily Dose: 2x4 mg (10 ea, 60 ea)

Lesinurad and Allopurinol**DoD Uniform Formulary Outpatient Dosage Forms****NONFORMULARY**

Tablet, Oral:

Duzallo: Lesinurad 200 mg and allopurinol 200 mg, Lesinurad 200 mg and allopurinol 300 mg

LETTERMOVIR

Letermovir

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Intravenous [preservative free]:

Prevymis: 240 mg/12 mL (12 mL); 480 mg/24 mL (24 mL)

NONFORMULARY

Tablet, Oral:

Prevymis: 240 mg, 480 mg

Letrozole

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:

Generic: 2.5 mg

Leucovorin Calcium

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution Reconstituted, Injection [strength expressed as base]:

Generic: 100 mg (1 ea); 200 mg (1 ea); 350 mg (1 ea); 500 mg (1 ea)

Solution Reconstituted, Injection [strength expressed as base, preservative free]:

Generic: 50 mg (1 ea); 100 mg (1 ea); 200 mg (1 ea); 350 mg (1 ea)

Tablet, Oral [strength expressed as base]:

Generic: 5 mg, 10 mg, 15 mg, 25 mg

Leuprolide

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Kit, Injection, as acetate:

Generic: 1 mg/0.2 mL

Kit, Intramuscular, as acetate:

Lupron Depot (1-Month): 7.5 mg [latex free; contains polysorbate 80]

Lupron Depot (6-Month): 45 mg [latex free; contains polysorbate 80]

Kit, Intramuscular, as acetate [preservative free]:

Lupron Depot (1-Month): 3.75 mg [latex free; contains polysorbate 80]

Lupron Depot (3-Month): 11.25 mg, 22.5 mg [latex free; contains polysorbate 80]

Lupron Depot (4-Month): 30 mg [latex free; contains polysorbate 80]

Lupron Depot-Ped (1-Month): 7.5 mg, 11.25 mg, 15 mg [latex free; contains polysorbate 80]

Lupron Depot-Ped (3-Month): 30 mg (Ped), 11.25 mg (Ped) [latex free; contains polysorbate 80]

Kit, Subcutaneous, as acetate:

Eligard: 7.5 mg, 22.5 mg, 30 mg, 45 mg

Leuprolide and Norethindrone

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Kit, Combination:

Lupaneta Pack: 1-month kit: leuprolide acetate 3.75 mg depot suspension for injection (1) and norethindrone acetate 5 mg oral tablets (30), 3-month kit: leuprolide acetate 11.25 mg depot suspension for injection (1) and norethindrone acetate 5 mg oral tablets (90) [contains polysorbate 80]

Levalbuterol

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Aerosol, Inhalation, as tartrate [strength expressed as base]:

Generic: 45 mcg/actuation (15 g)

Nebulization Solution, Inhalation, as hydrochloride [strength expressed as base]:

Generic: 0.63 mg/3 mL (3 mL)

Nebulization Solution, Inhalation, as hydrochloride [strength expressed as base, preservative free]:

Generic: 0.31 mg/3 mL (3 mL); 0.63 mg/3 mL (3 mL); 1.25 mg/3 mL (3 mL); 1.25 mg/0.5 mL (1 ea, 30 ea)

NONFORMULARY

Aerosol, Inhalation, as tartrate [strength expressed as base]:

Xopenex HFA: 45 mcg/actuation (15 g)

Levetiracetam

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Intravenous:

Generic: 500 mg/100 mL (100 mL); 1000 mg/100 mL (100 mL); 1500 mg/100 mL (100 mL); 500 mg/5 mL (5 mL)

Solution, Intravenous [preservative free]:

Generic: 500 mg/5 mL (5 mL)

Solution, Oral:

Generic: 100 mg/mL (5 mL, 473 mL, 500 mL)

Tablet, Oral:

Generic: 250 mg, 500 mg, 750 mg, 1000 mg

Tablet Disintegrating Soluble, Oral:

Spritam: 250 mg, 500 mg, 750 mg, 1000 mg [spearmint flavor]

Tablet Extended Release 24 Hour, Oral:

Generic: 500 mg, 750 mg

Levobunolol

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Ophthalmic, as hydrochloride:

Generic: 0.5% (5 mL, 10 mL, 15 mL)

Levocarnitine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule, Oral:

Generic: 250 mg

Capsule, Oral [preservative free]:

Generic: 250 mg

Solution, Intravenous:

Carnitor: 200 mg/mL (5 mL)

Solution, Intravenous [preservative free]:

Generic: 200 mg/mL (5 mL)

Solution, Oral:

Generic: 1 g/10 mL (118 mL)

Tablet, Oral:

Generic: 250 mg, 330 mg

Levodopa, Carbidopa, and Entacapone

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:

Generic: Levodopa 50 mg, carbidopa 12.5 mg, and entacapone 200 mg

Generic: Levodopa 75 mg, carbidopa 18.75 mg, and entacapone 200 mg

Generic: Levodopa 100 mg, carbidopa 25 mg, and entacapone 200 mg

Generic: Levodopa 125 mg, carbidopa 31.25 mg, and entacapone 200 mg

Generic: Levodopa 150 mg, carbidopa 37.5 mg, and entacapone 200 mg

Generic: Levodopa 200 mg, carbidopa 50 mg, and entacapone 200 mg

Levodopa (Oral Inhalation)

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule, Inhalation:

Inbrija: 42 mg per inhalation

LevoFLOXacin (Ophthalmic)

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Ophthalmic:

Generic: 0.5% (5 mL)

LevoFLOXacin (Systemic)

DoD Uniform Formulary Outpatient Dosage Forms

BASIC CORE FORMULARY

Solution, Oral:

Generic: 25 mg/mL (100 mL, 200 mL, 480 mL)

Tablet, Oral:

Generic: 250 mg, 500 mg, 750 mg

UNIFORM FORMULARY

Solution, Intravenous:

Generic: 250 mg/50 mL (50 mL); 500 mg/100 mL (100 mL); 750 mg/150 mL (150 mL)

Solution, Intravenous [preservative free]:

Generic: 250 mg/50 mL (50 mL); 500 mg/100 mL (100 mL); 750 mg/150 mL (150 mL); 25 mg/mL (20 mL, 30 mL)

LEVOleucovorin

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Intravenous:

Generic: 175 mg/17.5 mL (17.5 mL)

Solution, Intravenous [preservative free]:

Generic: 175 mg/17.5 mL (17.5 mL); 250 mg/25 mL (25 mL)

Solution Reconstituted, Intravenous:

Generic: 50 mg (1 ea)

Solution Reconstituted, Intravenous [preservative free]:

Generic: 175 mg (1 ea)

Levonorgestrel (IUD)

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Intrauterine Device, Intrauterine:

Kyleena: 19.5 mg

Liletta (52 MG): 18.6 mcg/day

Mirena (52 MG): 20 mcg/24 hr

Skyla: 13.5 mg

Levonorgestrel (Systemic)

DoD Uniform Formulary Outpatient Dosage Forms

BASIC CORE FORMULARY

Tablet, Oral:

Generic: 1.5 mg

UNIFORM FORMULARY

Tablet, Oral:
 Aftera: 1.5 mg
 EContra EZ: 1.5 mg
 Fallback Solo: 1.5 mg
 My Way: 1.5 mg
 Next Choice One Dose: 1.5 mg
 Opcicon One-Step: 1.5 mg
 React: 1.5 mg [contains corn starch]
 Take Action: 1.5 mg

Levorphanol**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Tablet, Oral, as tartrate:
 Generic: 2 mg

Levothyroxine**DoD Uniform Formulary Outpatient Dosage Forms****BASIC CORE FORMULARY**

Tablet, Oral, as sodium:
 Generic (Euthyrox, Synthroid, Levothroid, Levoxy): 25 mcg, 50 mcg, 75 mcg, 88 mcg, 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 300 mcg

UNIFORM FORMULARY

Capsule, Oral, as sodium:
 Tirosint: 13 mcg, 25 mcg, 50 mcg, 75 mcg, 88 mcg, 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg
 Solution, Oral, as sodium:
 Tirosint-SOL: 13 mcg/mL (1 mL); 25 mcg/mL (1 mL); 50 mcg/mL (1 mL); 75 mcg/mL (1 mL); 88 mcg/mL (1 mL); 100 mcg/mL (1 mL); 112 mcg/mL (1 mL); 125 mcg/mL (1 mL); 137 mcg/mL (1 mL); 150 mcg/mL (1 mL); 175 mcg/mL (1 mL); 200 mcg/mL (1 mL)
 Solution Reconstituted, Intravenous, as sodium [preservative free]:
 Generic: 100 mcg (1 ea); 200 mcg (1 ea); 500 mcg (1 ea)

NONFORMULARY

Tablet, Oral, as sodium:
 Unithroid: 25 mcg, 50 mcg, 75 mcg, 88 mcg, 100 mcg, 112 mcg, 125 mcg, 150 mcg, 175 mcg, 200 mcg, 300 mcg

Lidocaine and Epinephrine**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution, Injection:
 Generic:
 0.5% / 1:200,000: Lidocaine hydrochloride 0.5% [5 mg/mL] and epinephrine 1:200,000 (50 mL)
 1% / 1:100,000: Lidocaine hydrochloride 1% [10 mg/mL] and epinephrine 1:100,000 (20 mL, 30 mL, 50 mL)
 2% / 1:100,000: Lidocaine hydrochloride 2% [20 mg/mL] and epinephrine 1:100,000 (30 mL, 50 mL)
 Solution, Injection [preservative free]:
 Xylocaine-MPF with Epinephrine:
 1% / 1:200,000: Lidocaine hydrochloride 1% [10 mg/mL] and epinephrine 1:200,000 (5 mL, 10 mL, 30 mL) [contains sodium metabisulfite]
 Generic:
 1.5% / 1:200,000: Lidocaine hydrochloride 1.5% [15 mg/mL] and epinephrine 1:200,000 (5 mL, 30 mL)
 2% / 1:200,000: Lidocaine hydrochloride 2% [20 mg/mL] and epinephrine 1:200,000 (20 mL)
 Solution, Injection [for dental use]:
 Generic:
 2% / 1:50,000: Lidocaine hydrochloride 2% [20 mg/mL] and epinephrine 1:50,000 (1.7 mL, 1.8 mL)
 2% / 1:100,000: Lidocaine hydrochloride 2% [20 mg/mL] and epinephrine 1:100,000 (1.7 mL, 1.8 mL)

Lidocaine and Hydrocortisone**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Cream, Rectal:
 Lidocaine 2% and hydrocortisone 2% (7 g)
 Lidocaine hydrochloride 3% and hydrocortisone acetate 0.5% (7 g)
 Lidocaine hydrochloride 3% and hydrocortisone acetate 1% (7 g)
 Cream, External:
 LidaMantle HC: Lidocaine hydrochloride 3% and hydrocortisone acetate 0.5% (85 g)
 Gel, Rectal:
 Lidocaine hydrochloride 3% and hydrocortisone acetate 2.5% (7 g)
 RectaGel HC: Lidocaine hydrochloride 2.8% and hydrocortisone acetate 0.55% (20 g) [contains propylene glycol; kit contains 5 tubes (20 g each) and 15 single-use applicators]
 Lotion, External:
 LidaMantle HC: Lidocaine hydrochloride 3% and hydrocortisone acetate 0.5% (177 mL)
 Pad, External:
 LidaMantle HC Relief Pad: Lidocaine hydrochloride 2% and hydrocortisone acetate 2% (60s) [6 mL solution/pad]

Lidocaine and Menthol**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Cream, External:
 LevigoLT: Lidocaine 4% and menthol 1% (76.5 g) [paraben free; contains cetearyl alcohol, disodium edta]
 Synvexia TC: Lidocaine 4% and menthol 1% (60 g) [contains cetyl alcohol, naproxen, trolamine salicylate]
 Gel, External:
 LenzaGel: Lidocaine 4% and menthol 1% (120 g) []
 Kit, External:
 Mentho-Caine: Lidocaine 5% and menthol 8%
 Liquid, External:
 Mentholix: Lidocaine 4% and menthol 1% (120 mL [DSC]) [contains propylene glycol]
 1st Relief Spray: Lidocaine 4% and menthol 1% (118 mL) [contains sodium benzoate]
 Patch, External:
 Avalin: Lidocaine 4% and menthol 1% (15 ea) [contains polysorbate 80]
 Endoxcin: Lidocaine 4% and menthol 1% (15 ea, 30 ea)
 LenzaPatch: Lidocaine 4% and menthol 1% (5 ea)
 Lidenza: Lidocaine 4% and menthol 1% (15 ea) []
 LidoPatch Pain Relief: Lidocaine 3.99% and menthol 1.25% (3 ea)
 Lidothol: Lidocaine 4.5% and menthol 5% (1 ea, 15 ea) [contains polysorbate 80]
 LidozenPatch: Lidocaine 4% and menthol 1% (5 ea)
 Limencin: Lidocaine 4% and menthol 4% (10 ea)
 Lorenza: Lidocaine 4% and menthol 1% (15 ea) [contains edetate disodium]
 MaL Patch: Lidocaine 4% and menthol 5% (15 ea)
 Prolida: Lidocaine 4% and menthol 1% (15 ea) [contains polysorbate 80]
 Releevia ML: Lidocaine 4% and menthol 1% (15 ea)
 Siterol: Lidocaine 3.99% and menthol 1% (15 ea)
 Synvexia: Lidocaine 4% and menthol 1% (5 ea, 10 ea, 15 ea, 30 ea) [contains disodium edta, polysorbate 80]
 Terocin: Lidocaine 4% and menthol 4% (10 ea)
 Venia: Lidocaine 4% and menthol 4% (10 ea) [contains polysorbate 80]
 Zeruvia: Lidocaine 4% and menthol 1% (15 ea, 30 ea) [contains disodium edta, polysorbate 80]

Lidocaine and Prilocaine**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Cream, External:
 AgonEaze: Lidocaine 2.5% and prilocaine 2.5% (2 x 30 g) [packaged with occlusive dressing]
 Anodyne LPT: Lidocaine 2.5% and prilocaine 2.5% (3 x 30 g) [packaged with occlusive dressing]
 DermacinRx Empricaine: Lidocaine 2.5% and prilocaine 2.5% (1 x 30 g) [packaged with occlusive dressing]
 DermacinRx Prizopak: Lidocaine 2.5% and prilocaine 2.5% (3 x 30 g) [packaged with occlusive dressing]
 Leva Set: Lidocaine 2.5% and prilocaine 2.5% (3 x 30 g) [packaged with occlusive dressing]
 Lidopril: Lidocaine 2.5% and prilocaine 2.5% (3 x 30 g) [packaged with occlusive dressing]
 Lidopril XR: Lidocaine 2.5% and prilocaine 2.5% (2 x 30 g) [packaged with occlusive dressing]
 LiProZonePak: Lidocaine 2.5% and prilocaine 2.5% (3 x 30 g) [packaged with occlusive dressing]
 Livixil Pak: Lidocaine 2.5% and prilocaine 2.5% (3 x 30 g) [packaged with occlusive dressing]
 LP Lite Pak: Lidocaine 2.5% and prilocaine 2.5% (2 x 30 g) [packaged with occlusive dressing]
 Medolor Pak: Lidocaine 2.5% and prilocaine 2.5% (3 x 30 g) [packaged with occlusive dressing]
 Prilolid: Lidocaine 2.5% and prilocaine 2.5% (1 x 30 g) [packaged with occlusive dressing]
 Relador Pak: Lidocaine 2.5% and prilocaine 2.5% (3 x 30 g) [packaged with occlusive dressing]
 Venipuncture CPI: Lidocaine 2.5% and prilocaine 2.5% (5 g)
 Generic: Lidocaine 2.5% and prilocaine 2.5% (5 g, 30 g, 5800 g, 18,000 g)
 Gel, periodontal:
 Oraqix: Lidocaine 2.5% and prilocaine 2.5% (1.7 g)

Lidocaine and Tetracaine**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Cream, external:
 Generic: Lidocaine 7% and tetracaine 7% (30 g)
 Patch, transdermal:
 Synera: Lidocaine 70 mg and tetracaine 70 mg (10s) [contains heating component, metal; each patch is ~50 cm²]

Lidocaine (Ophthalmic)**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Gel, Ophthalmic, as hydrochloride [preservative free]:
 Akten: 3.5% (1 mL)

LIDOCAINE (SYSTEMIC)

Lidocaine (Systemic)

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Kit, Injection, as hydrochloride:

ReadySharp Lidocaine: 1%

Solution, Injection, as hydrochloride:

Generic: 0.5% (50 mL); 1% (2 mL, 10 mL, 20 mL, 50 mL); 2% (2 mL, 20 mL, 50 mL)

Solution, Injection, as hydrochloride [preservative free]:

Generic: 0.5% (50 mL); 1% (2 mL, 5 mL, 30 mL); 1.5% (20 mL); 2% (2 mL, 5 mL, 10 mL); 4% (5 mL)

Solution, Intravenous, as hydrochloride:

Generic: 0.4% [4 mg/mL] (250 mL, 500 mL); 0.8% [8 mg/mL] (250 mL); 1% [10 mg/mL] (5 mL); 2% [20 mg/mL] (5 mL); 5% [50 mg/mL] (2 mL)

Solution, Intravenous, as hydrochloride [preservative free]:

Generic: 1% [10 mg/mL] (5 mL); 2% [20 mg/mL] (5 mL)

Lidocaine (Topical)

DoD Uniform Formulary Outpatient Dosage Forms

BASIC CORE FORMULARY

Patch, External:

Generic: 5% (1 ea, 15 ea, 30 ea)

UNIFORM FORMULARY

Cream, External:

Lidotral: 3.88% (85 g) [contains cetearyl alcohol, methylparaben, propylene glycol, propylparaben]

Lidovin: 3.95% (60 g) [contains peg-40 castor oil]

Lidozol: 3.75% (60 g) [contains peg-40 castor oil]

Generic: 5% (15 g, 30 g)

Cream, External, as hydrochloride:

CidalEaze: 3% (453.6 g) [contains aluminum sulfate, calcium acetate, cetyl alcohol, methylparaben, propylparaben]

EnovaRX-Lidocaine HCl: 5% (60 g, 120 g); 10% (60 g, 120 g) [contains cetyl alcohol]

Lidopin: 3% (28 g, 85 g); 3.25% (28 g, 85 g) [contains cetyl alcohol, methylparaben, propylparaben]

Xolido: 2% (118 mL) [contains methylisothiazolinone]

Generic: 3% (28.3 g, 28.35 g, 85 g)

Gel, External:

Topicaine 5: 5% (10 g, 30 g, 113 g) [contains benzyl alcohol, disodium edta]

Generic: 2% (5 mL, 20 mL, 30 mL)

Gel, External, as hydrochloride [preservative free]:

Glydo: 2% (6 mL, 11 mL) [pvc free]

Generic: 2% (5 mL, 10 mL)

Jet-injector, Intradermal, as hydrochloride:

Zingo: 0.5 mg (1 ea)

Kit, External:

Lidopac: 5% [contains polyethylene glycol]

Lidotrans 5 Pak: 5% [contains polyethylene glycol]

Xryliderm: 5% [contains edetate disodium, methylparaben, propylene glycol, propylparaben]

Zeyocaine: 5%

Generic: 4%

Kit, External, as hydrochloride:

Venipuncture Px1 Phlebotomy: 2% [latex free; contains methylparaben, propylparaben]

Lotion, External, as hydrochloride:

Anastia: 2.75% (15 g) [contains cetyl alcohol, methylparaben, propylparaben]

Eha: 4% (88 mL) [contains methylisothiazolinone]

Numbonex: 2.75% (30 g) [contains cetyl alcohol, methylparaben, propylparaben]

Generic: 3% (118 mL, 177 mL)

Ointment, External:

Generic: 5% (30 g, 35.44 g, 50 g, 2500 g)

Solution, External, as hydrochloride:

Generic: 4% (50 mL)

Solution, Mouth/Throat, as hydrochloride:

Generic: 2% (15 mL, 100 mL)

Solution, Mouth/Throat, as hydrochloride [preservative free]:

Generic: 4% (4 mL)

NONFORMULARY

Patch, External:

ZTlido: 1.8% (1 ea, 30 ea)

NOT COVERED

Cream, External:

Lidovex: 3.75% (60 g) [contains cetyl alcohol, methylparaben, propylparaben]

Xolido XP: 4% (118 mL) [contains methylisothiazolinone]

Generic: 4% (5 g, 15 g, 30 g, 120 g)

Gel, External, as hydrochloride:

LidoRx: 3% (10 mL, 30 mL, 90 mL) [contains isopropyl alcohol, trolamine (triethanolamine)]

Astero: 4% (30 mL)

LDO Plus: 4% (30 mL)

Lifitegrast

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Ophthalmic:

Xiidra: 5% (5 ea)

LinaCLOtide

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule, Oral:

LinZess: 72 mcg, 145 mcg, 290 mcg

LinaGLIptin

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:

Tradjenta: 5 mg

Linagliptin and Metformin

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:

Jentaduetto 2.5/500: Linagliptin 2.5 mg and metformin hydrochloride 500 mg

Jentaduetto 2.5/850: Linagliptin 2.5 mg and metformin hydrochloride 850 mg

Jentaduetto 2.5/1000: Linagliptin 2.5 mg and metformin hydrochloride 1000 mg

Tablet Extended Release, Oral:

Jentaduetto XR 2.5/1000: Linagliptin 2.5 mg and metformin hydrochloride 1000 mg

Jentaduetto XR 5/1000: Linagliptin 5 mg and metformin hydrochloride 1000 mg

Lincomycin

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Injection, as hydrochloride:

Lincozin: 300 mg/mL (2 mL, 10 mL) [contains benzyl alcohol]

Generic: 300 mg/mL (2 mL, 10 mL)

Lindane

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Shampoo, External:

Generic: 1% (60 mL)

Linezolid

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Intravenous:

Generic: 2 mg/mL (300 mL); 600 mg/300 mL (300 mL)

Suspension Reconstituted, Oral:

Generic: 100 mg/5 mL (150 mL)

Tablet, Oral:

Generic: 600 mg

Liothyronine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Intravenous:

Generic: 10 mcg/mL (1 mL)

Tablet, Oral:

Generic: 5 mcg, 25 mcg, 50 mcg

Liotrix

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:

Thyrolar: 1/4 [levothyroxine sodium 12.5 mcg and liothyronine sodium 3.1 mcg]

Thyrolar: 1/2 [levothyroxine sodium 25 mcg and liothyronine sodium 6.25 mcg]

Thyrolar: 1 [levothyroxine sodium 50 mcg and liothyronine sodium 12.5 mcg]

Thyrolar: 2 [levothyroxine sodium 100 mcg and liothyronine sodium 25 mcg]

Thyrolar: 3 [levothyroxine sodium 150 mcg and liothyronine sodium 37.5 mcg]

Lisdexamfetamine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule, Oral, as dimesylate:

Vyvanse: 10 mg, 20 mg, 30 mg, 40 mg, 50 mg, 60 mg, 70 mg

Tablet Chewable, Oral, as dimesylate:

Vyvanse: 10 mg, 20 mg, 30 mg, 40 mg, 50 mg, 60 mg

Lisinopril

DoD Uniform Formulary Outpatient Dosage Forms

BASIC CORE FORMULARY

Tablet, Oral:

Generic: 2.5 mg, 5 mg, 10 mg, 20 mg, 30 mg, 40 mg

NONFORMULARY

Solution, Oral:

Qbrelis: 1 mg/mL (150 mL) [contains sodium benzoate]

Lisinopril and Hydrochlorothiazide

DoD Uniform Formulary Outpatient Dosage Forms

BASIC CORE FORMULARY

Tablet, Oral:
 Generic: 10/12.5: Lisinopril 10 mg and hydrochlorothiazide 12.5 mg
 Generic: 20/12.5: Lisinopril 20 mg and hydrochlorothiazide 12.5 mg
 Generic: 20/25: Lisinopril 20 mg and hydrochlorothiazide 25 mg

Lisocabtagene Maraleucel

DoD Uniform Formulary Outpatient Dosage Forms

NOT COVERED

Suspension, Intravenous:
 Breyanzi: (1 ea) [contains albumin human]

Lithium

DoD Uniform Formulary Outpatient Dosage Forms

BASIC CORE FORMULARY

Capsule, Oral, as carbonate:
 Generic: 150 mg, 300 mg
 Solution, Oral, as citrate:
 Generic: 8 mEq/5 mL (500 mL)

UNIFORM FORMULARY

Tablet, Oral, as carbonate:
 Generic: 300 mg
 Tablet Extended Release, Oral, as carbonate:
 Generic: 300 mg, 450 mg

L-Lysine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule, Oral:
 Generic: 500 mg
 Packet, Oral:
 Lysine4000: 4000 mg (30 ea)
 Tablet, Oral:
 Generic: 500 mg, 1000 mg

Lodoxamide

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Ophthalmic:
 Alomide: 0.1% (10 mL)

Lomitapide

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule, Oral:
 Juxtapid: 5 mg, 10 mg, 20 mg, 30 mg, 40 mg, 60 mg

Lomustine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule, Oral:
 Gleostine: 5 mg, 10 mg, 40 mg, 100 mg

Loperamide

DoD Uniform Formulary Outpatient Dosage Forms

BASIC CORE FORMULARY

Capsule, Oral, as hydrochloride:
 Generic: 2 mg

UNIFORM FORMULARY

Liquid, Oral, as hydrochloride:
 Generic: 1 mg/5 mL (5 mL, 10 mL, 118 mL)
 Suspension, Oral, as hydrochloride:
 Generic: 1 mg/7.5 mL (120 mL)
 Tablet, Oral, as hydrochloride:
 Anti-Diarrheal: 2 mg
 Diamode: 2 mg
 Imodium A-D: 2 mg
 Loperamide A-D: 2 mg

Loperamide and Simethicone

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Caplet, Oral:
 Imodium Multi-Symptom Relief: Loperamide hydrochloride 2 mg and simethicone 125 mg [contains calcium 65 mg/caplet, sodium 4 mg/caplet]

Lopinavir and Ritonavir

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Oral:
 Kaletra: Lopinavir 80 mg and ritonavir 20 mg per 1 mL (160 mL) [contains ethanol 42.4%, menthol, propylene glycol; cotton candy flavor]
 Tablet, Oral:
 Kaletra:
 Lopinavir 100 mg and ritonavir 25 mg
 Lopinavir 200 mg and ritonavir 50 mg

Loratadine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule, Oral:
 Generic: 10 mg
 Solution, Oral:
 Childrens Loratadine: 5 mg/5 mL (120 mL) [alcohol free, dye free, sugar free; contains propylene glycol, sodium benzoate; grape flavor]
 Loratadine Childrens: 5 mg/5 mL (120 mL) [alcohol free, dye free, sugar free; contains propylene glycol, sodium benzoate; fruit flavor]
 Loratadine Hives Relief: 5 mg/5 mL (120 mL) [alcohol free, dye free, sugar free; contains propylene glycol, sodium benzoate; grape flavor]

Syrup, Oral:
 Allergy Relief For Kids: 5 mg/5 mL (120 mL) [contains propylene glycol, sodium benzoate; fruit flavor]

Childrens Loratadine: 5 mg/5 mL (120 mL) [fruit flavor]
 Childrens Loratadine: 5 mg/5 mL (120 mL) [alcohol free, dye free; contains propylene glycol, sodium benzoate, sodium metabisulfite; grape flavor]

Claritin: 5 mg/5 mL (60 mL, 120 mL, 150 mL) [alcohol free, color free, dye free, sugar free; contains edetate disodium, propylene glycol, sodium benzoate; grape flavor]

Loratadine Childrens: 5 mg/5 mL (120 mL) [sugar free; contains polyethylene glycol, propylene glycol, sodium benzoate, sodium metabisulfite; grape flavor]

Tablet, Oral:
 Generic: 10 mg

Tablet Chewable, Oral:
 Claritin: 5 mg [contains aspartame; grape flavor]

Claritin Childrens: 5 mg [contains aspartame]

Tablet Dispersible, Oral:
 Alavert: 10 mg [contains aspartame]

Allergy Relief: 10 mg [contains aspartame; fruit flavor]

Claritin Reditabs: 5 mg, 10 mg

Triaminic Allerchews: 10 mg

Loratadine and Pseudoephedrine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Extended Release:
 Generic: Loratadine 5 mg and pseudoephedrine sulfate 120 mg
 Generic: Loratadine 10 mg and pseudoephedrine sulfate 240 mg

LORazepam

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Concentrate, Oral:
 Generic: 2 mg/mL (30 mL)

Tablet, Oral:
 Generic: 0.5 mg, 1 mg, 2 mg

NONFORMULARY

Solution, Injection:
 Generic: 2 mg/mL (1 mL, 10 mL); 4 mg/mL (1 mL, 10 mL)

Lorlatinib

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:
 Lorbrena: 25 mg, 100 mg

Losartan

DoD Uniform Formulary Outpatient Dosage Forms

BASIC CORE FORMULARY

Tablet, Oral, as potassium:
 Generic: 25 mg, 50 mg, 100 mg

Losartan and Hydrochlorothiazide

DoD Uniform Formulary Outpatient Dosage Forms

BASIC CORE FORMULARY

Tablet, Oral:
 Generic: 50/12.5: Losartan potassium 50 mg and hydrochlorothiazide 12.5 mg
 Generic: 100/12.5: Losartan potassium 100 mg and hydrochlorothiazide 12.5 mg
 Generic: 100/25: Losartan potassium 100 mg and hydrochlorothiazide 25 mg

Loteprednol

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Gel, Ophthalmic, as etabonate:
 Lotemax: 0.5% (5 g) [contains benzalkonium chloride, edetate disodium dihydrate, propylene glycol]

Ointment, Ophthalmic, as etabonate:
 Lotemax: 0.5% (3.5 g)

Suspension, Ophthalmic, as etabonate:
 Alrex: 0.2% (5 mL, 10 mL)
 Lotemax: 0.5% (5 mL, 10 mL, 15 mL)

NONFORMULARY

Gel, Ophthalmic, as etabonate:
 Lotemax SM: 0.38% (5 g) [contains benzalkonium chloride, edetate disodium dihydrate, propylene glycol]

LOTEPREDNOL AND TOBRAMYCIN

Loteprednol and Tobramycin

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Suspension, Ophthalmic [drops]:

Zylet: Loteprednol etabonate 0.5% and tobramycin 0.3% (2.5 mL, 5 mL, 10 mL) [contains benzalkonium chloride]

Lovastatin

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Tablet, Oral:

Generic: 10 mg, 20 mg, 40 mg

NONFORMULARY

Tablet Extended Release 24 Hour, Oral:

Alltoprev: 20 mg, 40 mg, 60 mg [contains corn starch]

Loxapine

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Aerosol Powder Breath Activated, Inhalation [preservative free]:

Adasuve: 10 mg (1 ea)

Capsule, Oral:

Generic: 5 mg, 10 mg, 25 mg, 50 mg

Lubiprostone

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Capsule, Oral:

Amitiza: 8 mcg, 24 mcg

Lucinactant

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Suspension, Intratracheal:

Surfaxin: 30 mg/mL (8.5 mL [DSC])

Luliconazole

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Cream, External:

Luzu: 1% (60 g) [contains benzyl alcohol, methylparaben, propylene glycol]

Lumacaftor and Ivacaftor

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Packet, Oral:

Orkambi: Lumacaftor 100 mg and ivacaftor 125 mg (56 ea); Lumacaftor 150 mg and ivacaftor 188 mg (56 ea)

Tablet, Oral:

Orkambi: Lumacaftor 200 mg and ivacaftor 125 mg

Orkambi: Lumacaftor 100 mg and ivacaftor 125 mg

Lumasiran

DoD Uniform Formulary Outpatient Dosage Forms NOT COVERED

Solution, Subcutaneous, as sodium [preservative free]:

Oxlumo: 94.5 mg/0.5 mL (0.5 mL)

Lurasidone

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Tablet, Oral, as hydrochloride:

Latuda: 20 mg, 40 mg, 60 mg, 80 mg, 120 mg

Luspatercept

DoD Uniform Formulary Outpatient Dosage Forms

NOT COVERED

Solution Reconstituted, Subcutaneous [preservative free]:

Reblozyl: luspatercept-aamt 25 mg (1 ea); luspatercept-aamt 75 mg (1 ea) [contains polysorbate 80]

Lusutrombopag

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Tablet, Oral:

Mulpleta: 3 mg

Macitentan

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Tablet, Oral:

Opsumit: 10 mg [contains soybean lecithin]

Mafenide

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Cream, External, as acetate [strength expressed as base]:

Sulfamylon: 85 mg/g (56.7 g, 113.4 g, 453.6 g) [contains methylparaben, propylparaben, sodium metabisulfite]

Packet, External, as acetate:

Sulfamylon: 50 g (1 ea, 5 ea)

Magnesium L-aspartate Hydrochloride

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Granules for solution, oral [preservative free]:

Maginex DS: 1230 mg/packet (30s) [sugar free; lemon flavor; equivalent to elemental magnesium 122 mg]

Tablet, enteric coated, oral [preservative free]:

Maginex: 615 mg [sugar free; equivalent to elemental magnesium 61 mg]

Magnesium L-lactate

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Tablet Extended Release, Oral:

Mag-Tab SR: Elemental magnesium 84 mg [7 mEq]

Magnesium Carbonate

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Liquid, Oral:

Magonate: Elemental magnesium 54 mg/5 mL (355 mL) [contains sodium benzoate; mixed melon flavor]

Powder, Oral:

Generic: Elemental magnesium 250 mg/g (480 g)

Magnesium Carbonate, Calcium Carbonate, and Folic Acid

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Tablet, Oral:

MagneBind 400: Magnesium carbonate 400 mg, calcium carbonate 200 mg, and folic acid 1 mg

Magnesium Chloride

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Solution, Injection, as hexahydrate:

Generic: 200 mg/mL (50 mL)

Tablet Delayed Release, Oral:

Mag-SR Plus Calcium: 535 mg (elemental magnesium 64 mg, plus calcium 106 mg) [starch free, sugar free]

Magdelay: Elemental magnesium 70 mg (plus calcium 118 mg)

Nu-Mag: Elemental magnesium 71.5 mg (plus calcium 119 mg)

Slow Magnesium/Calcium: 535 mg (elemental magnesium 64 mg, plus calcium 106 mg)

Slow-Mag: Elemental magnesium 71.5 mg (plus calcium 119 mg)

Magnesium Citrate

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Solution, Oral:

Generic: 1.745 g/30 mL (296 mL)

Tablet, Oral:

Generic: 100 mg

Magnesium Gluconate

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Liquid, Oral:

Magonate: Magnesium carbonate equivalent to magnesium gluconate 1000 mg (54 mg elemental magnesium) per 5 mL (355 mL) [contains sodium benzoate; mixed melon flavor]

Tablet, Oral:

Generic: Elemental magnesium 27.5 mg

Tablet, Oral [preservative free]:

Generic: 500 mg (27 mg elemental magnesium)

Magnesium Hydroxide

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Suspension, Oral:

Dulcolax Milk of Magnesia: 400 mg/5 mL (355 mL) [sugar free]

Milk of Magnesia: 400 mg/5 mL (355 mL, 473 mL, 480 mL, 769 mL); 1200 mg/15 mL (355 mL)

Milk of Magnesia: 7.75% (360 mL, 480 mL)

Milk of Magnesia Concentrate: 2400 mg/10 mL (100 mL, 400 mL)

Tablet Chewable, Oral:

Pedia-Lax: 400 mg [scored; stimulant free; watermelon flavor]

Magnesium Hydroxide and Mineral Oil

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Suspension, oral:

Phillips' M-O: Magnesium hydroxide 300 mg and mineral oil 1.25 mL per 5 mL (360 mL, 780 mL) [contains magnesium 125 mg and sodium 1.5 mg per 5 mL mint flavors]

Magnesium Oxide**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Capsule, Oral:

Uro-Mag: 140 mg

Tablet, Oral:

Generic: 400 mg, 420 mg, 400 mg

Tablet, Oral [preservative free]:

Generic: 400 mg, 500 mg

NONFORMULARY

Packet, Oral:

Magnesium Oxide 400: 240 mg (80 ea)

Magnesium Salicylate**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Tablet, Oral:

Doans Pills: 325 mg

Tablet, Oral, as tetrahydrate:

Doans Extra Strength: 580 mg

Magnesium Sulfate**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Capsule, Oral:

Generic: 70 mg

Granules, Oral:

Epsom Salt: (454 g, 1810 g)

GoodSense Epsom Salt: (1810 g)

Solution, Injection:

Generic: 50% (2 mL, 10 mL, 20 mL)

Solution, Injection [preservative free]:

Generic: 50% (20 mL, 50 mL)

Solution, Intravenous:

Generic: 1 g/100 mL (100 mL); 2 g/50 mL (50 mL); 4 g/100 mL (100 mL); 4 g/50 mL (50 mL); 20 g/500 mL (500 mL); 40 g/1000 mL (1000 mL)

Malathion**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Lotion, External:

Generic: 0.5% (59 mL)

Maltodextrin**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Gel, topical:

Multidex: (7.1 mL, 14.2 mL, 85.2 mL)

Powder, topical:

Multidex: (6 g, 12 g, 25 g, 45 g)

Manganese**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Capsule, Oral, as chelated:

MN-50: Elemental manganese 16.67 mg

Solution, Intravenous, as chloride:

Generic: Elemental manganese 0.1 mg/mL (10 mL)

Tablet, Oral, as aspartate:

Generic: 93 mg [elemental manganese 25 mg]

Tablet, Oral, as chelated:

Mangimin: Elemental manganese 10 mg [corn free, rye free, wheat free]

Elemental manganese 15 mg, Elemental manganese 50 mg

Tablet, Oral, as gluconate:

Generic: 50 mg [elemental manganese 5.7 mg]

Mannitol (Systemic)**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution, Intravenous:

Osmitrol: 5% (1000 mL); 10% (500 mL); 15% (500 mL); 20% (250 mL, 500 mL)

Generic: 20% (250 mL, 500 mL); 25% (50 mL)

Solution, Intravenous [preservative free]:

Generic: 25% (50 mL)

Solution, Irrigation:

Resectisol: 5% (2000 mL)

Maprotiline**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Tablet, Oral, as hydrochloride:

Generic: 25 mg, 50 mg, 75 mg

Maraviroc**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution, Oral:

Selzentry: 20 mg/mL (230 mL) [contains sodium benzoate; strawberry flavor]

Tablet, Oral:

Selzentry: 25 mg, 75 mg, 150 mg, 300 mg [contains soybean lecithin]

Measles, Mumps, and Rubella Virus Vaccine**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Injection, powder for reconstitution [preservative free]:

M-M-R II: Measles virus ≥ 1000 TCID₅₀, mumps virus $\geq 20,000$ TCID₅₀, and rubella virus ≥ 1000 TCID₅₀ [contains albumin (human), bovine serum, chicken egg protein, gelatin, neomycin, sorbitol, and sucrose 1.9 mg/vial; supplied with diluent]**Measles, Mumps, Rubella, and Varicella Virus Vaccine****DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Injection, powder for reconstitution [preservative free]:

ProQuad: Measles virus ≥ 3.00 log₁₀ TCID₅₀, mumps virus ≥ 4.3 log₁₀ TCID₅₀, rubella virus ≥ 3.00 log₁₀ TCID₅₀, and varicella virus ≥ 3.99 log₁₀ PFU [contains albumin (human), bovine serum, chicken egg protein, gelatin, neomycin, sorbitol, and sucrose (≤ 21 mg/vial)]ProQuad: Measles virus ≥ 3.00 log₁₀ TCID₅₀, mumps virus ≥ 4.3 log₁₀ TCID₅₀, rubella virus ≥ 3.00 log₁₀ TCID₅₀, and varicella virus ≥ 3.99 log₁₀ PFU [contains recombinant albumin (human), bovine serum, chicken egg protein, gelatin, neomycin, sorbitol, and sucrose (≤ 21 mg/vial)]**Mebendazole****DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Tablet Chewable, Oral:

Emverm: 100 mg [contains saccharin sodium]

Mecamylamine**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Tablet, Oral, as hydrochloride:

Vecamyl: 2.5 mg

Mecasermin**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution, Subcutaneous:

Increlex: 40 mg/4 mL (4 mL) [contains benzyl alcohol]

Mechlorethamine (Systemic)**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution Reconstituted, Injection, as hydrochloride:

Mustargen: 10 mg (1 ea)

Mechlorethamine (Topical)**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Gel, External:

Valchlor: 0.016% (60 g) [contains edetate disodium, isopropyl alcohol, menthol, propylene glycol]

Meclizine**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Tablet, Oral, as hydrochloride:

Generic: 12.5 mg, 25 mg

Tablet Chewable, Oral, as hydrochloride:

Generic: 25 mg

Medium Chain Triglycerides**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Emulsion, Oral:

Betaquik: (250 mL)

Liquigen: (250 mL)

Oil, Oral:

MCT Oil: (946 mL)

MedroxyPROGESTERone**DoD Uniform Formulary Outpatient Dosage Forms****BASIC CORE FORMULARY**

Tablet, Oral, as acetate:

Generic: 2.5 mg, 5 mg, 10 mg

UNIFORM FORMULARY

Suspension, Intramuscular, as acetate:

Generic: 150 mg/mL (1 mL)

Suspension Prefilled Syringe, Intramuscular, as acetate:

Generic: 150 mg/mL (1 mL)

Suspension Prefilled Syringe, Subcutaneous, as acetate:

Depo-SubQ Provera 104: 104 mg/0.65 mL (0.65 mL) [contains methylparaben, propylparaben]

MEFLOQUINE

Mefloquine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral, as hydrochloride:

Generic: 250 mg

Megestrol

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Suspension, Oral, as acetate:

Generic: 40 mg/mL (10 mL, 240 mL, 480 mL); 400 mg/10 mL (10 mL); 625 mg/5 mL (150 mL)

Tablet, Oral, as acetate:

Generic: 20 mg, 40 mg

Melatonin

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule, Oral:

Generic: 1 mg, 2.5 mg, 3 mg, 5 mg

Tablet, Oral:

Generic: 3 mg

Tablet, Oral [preservative free]:

Generic: 1 mg, 3 mg, 5 mg

Tablet Extended Release, Oral [preservative free]:

Melatonin TR: 1 mg [gluten free]

Generic: 3 mg

Tablet, Sublingual:

Generic: 5 mg

Meloxicam

DoD Uniform Formulary Outpatient Dosage Forms

BASIC CORE FORMULARY

Tablet, Oral:

Generic: 7.5 mg, 15 mg

NONFORMULARY

Tablet Disintegrating, Oral:

Qmiiiz ODT: 7.5 mg, 15 mg [contains aspartame]

Tier 4 - NOT COVERED

Capsule, Oral:

Vivlodex: 5 mg, 10 mg

Melphalan

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution Reconstituted, Intravenous:

Generic: 50 mg (1 ea)

Solution Reconstituted, Intravenous [preservative free]:

Generic: 50 mg (1 ea)

Tablet, Oral:

Alkeran: 2 mg

Melphalan Flufenamide

DoD Uniform Formulary Outpatient Dosage Forms

NOT COVERED

Solution Reconstituted, Intravenous, as hydrochloride [preservative free]:

Pepaxto: 20 mg (1 ea)

Memantine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Oral, as hydrochloride:

Generic: 2 mg/mL (360 mL)

Tablet, Oral, as hydrochloride:

Generic: 5 mg, 10 mg, 5 mg (28s) and 10 mg (21s)

NONFORMULARY

Capsule Extended Release 24 Hour, Oral, as hydrochloride:

Namenda XR: 7 mg, 14 mg, 21 mg, 28 mg

Namenda XR Titration Pack: 7 mg (7s) and 14 mg (7s) and 21 mg (7s) and 28 mg (7s)

Generic: 7 mg, 14 mg, 21 mg, 28 mg

Meningococcal Group B Vaccine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Suspension Prefilled Syringe, Intramuscular:

Bexsero: (0.5 mL)

Trumenba: (0.5 mL) [contains polysorbate 80]

Meningococcal (Groups A / C / Y and W-135) Conjugate Vaccine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Injection [preservative free]:

Menactra: 4 mcg each of polysaccharide antigen groups A, C, Y, and W-135 [bound to diphtheria toxoid 48 mcg] per 0.5 mL [MCV4 or MenACWY-D]

Menveo: MenA oligosaccharide 10 mcg, MenC oligosaccharide 5 mcg, MenY oligosaccharide 5 mcg, and MenW-135 oligosaccharide 5 mcg [bound to CRM₁₉₇ protein 32.7-64.1 mcg] per 0.5 mL (0.5 mL) [MenACWY-CRM;

supplied in two vials, one containing MenA powder and one containing MenCYW-135 liquid]

Meningococcal Polysaccharide (Groups C and Y) and Haemophilus b Tetanus Toxoid Conjugate Vaccine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution Reconstituted, Intramuscular [preservative free]:

Menhibrix: 5 mcg each of polysaccharide antigen groups C and Y, and 2.5 mcg

Haemophilus b capsular polysaccharide per 0.5 mL dose (1 ea) [contains tetanus toxoid]

Menotropins

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Injection, powder for reconstitution:

Menopur: 75 units [supplied with diluent]

Menthol

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Aerosol, External:

Biofreeze: 10.5% (89 mL) [aspirin free, ibuprofen free, paraben free, salicylate free]

Cream, External:

Relief Pain Relieving: 3% (5 g) [contains benzyl alcohol, cetearyl alcohol, cetyl alcohol]

Gel, External:

Bama Freeze: 3.7% (90 mL, 120 mL, 3785 mL) [contains isopropyl alcohol, trolamine (triethanolamine)]

Biofreeze: 4% (89 mL, 237 mL) [aspirin free, ibuprofen free, paraben free, salicylate free; contains brilliant blue fcf (fd&c blue #1), isopropyl alcohol, tartrazine (fd&c yellow #5), trolamine (triethanolamine)]

Biofreeze Colorless: 4% (89 mL) [aspirin free, ibuprofen free, paraben free, salicylate free; contains isopropyl alcohol, trolamine (triethanolamine)]

Biofreeze Roll-On: 4% (74 mL) [aspirin free, ibuprofen free, paraben free, salicylate free; contains brilliant blue fcf (fd&c blue #1), isopropyl alcohol, tartrazine (fd&c yellow #5), trolamine (triethanolamine)]

Mineral Freez: 2% (226.8 g) [contains brilliant blue fcf (fd&c blue #1), isopropyl alcohol, trolamine (triethanolamine)]

Mineral Ice: 2% (99.2 g, 226.8 g, 453.6 g) [contains brilliant blue fcf (fd&c blue #1), isopropyl alcohol]

Perform Pain Relieving: 3.1% (118 mL) [contains brilliant blue fcf (fd&c blue #1), isopropyl alcohol, methylparaben, propylene glycol, trolamine (triethanolamine)]

Perform Pain Relieving: 3.5% (118 mL) [aspirin free, ibuprofen free, paraben free, salicylate free; contains isopropyl alcohol, trolamine (triethanolamine)]

Polar Frost: 4% (150 mL) [contains alcohol, usp, brilliant blue fcf (fd&c blue #1), methylparaben, propylene glycol, propylparaben, trolamine (triethanolamine)]

Ultracin M: 5% (120 mL) [paraben free; contains benzyl alcohol]

Ultracin-M: 10% (120 mL) [contains benzyl alcohol]

Liquid, External:

Berri-Freez Pain Relieving: 10% (118 mL)

Perform Pain Relieving: 10.4% (118 mL) [aspirin free, ibuprofen free, paraben free, salicylate free]

Perform Pain Relieving Roll-On: 3.1% (89 mL) [contains isopropyl alcohol, methylparaben, propylene glycol, trolamine (triethanolamine)]

Perform Pain Relieving Roll-On: 3.5% (89 mL) [aspirin free, ibuprofen free, paraben free, salicylate free; contains isopropyl alcohol, trolamine (triethanolamine)]

Lozenge, Mouth/Throat:

Cherry Cough Drops: 6.1 mg (1 ea) [cherry eucalyptus flavor]

Medikoff Drops: 7.6 mg (600 ea)

Lozenge, Mouth/Throat, as hydrobromide:

Nycoff: 15 mg (500 ea)

Patch, External:

Cold/Hot Pain Relief Therapy: 5% (5 ea) [contains disodium edta, polysorbate 80]

Thritex: 5% (15 ea) [contains edetate disodium, methylparaben, polysorbate 80, propylparaben]

Menthol and Zinc Oxide (Topical)

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Ointment, External:

Caladrox: Menthol 0.44% and zinc oxide 20% (113 g) [contains phenol]

Calmoseptine: Menthol 0.44% and zinc oxide 20.6% (3.5 g, 71 g, 113 g) [contains phenol]

Lantiseptic Multi-Purpose: Menthol 0.45% and zinc oxide 20% (5 g, 113 g) [contains disodium edta, methylparaben, propylparaben]

Risamine: Menthol 0.44% and zinc oxide 20.625% (113 g) [contains phenol]

Paste, External:

Remedy Calazime: Menthol 0.4% and zinc oxide 20.5% (113 g)

Meperidine**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution, Injection, as hydrochloride:

Demerol: 25 mg/mL (1 mL); 25 mg/0.5 mL (0.5 mL); 50 mg/mL (1 mL, 30 mL); 75 mg/1.5 mL (1.5 mL); 100 mg/2 mL (2 mL); 75 mg/mL (1 mL); 100 mg/mL (1 mL, 20 mL)

Generic: 10 mg/mL (30 mL); 25 mg/mL (1 mL); 50 mg/mL (1 mL); 100 mg/mL (1 mL)

Solution, Oral, as hydrochloride:

Generic: 50 mg/5 mL (500 mL)

Tablet, Oral, as hydrochloride:

Generic: 50 mg, 100 mg

Capsule Delayed Release, Oral:

Delzicol: 400 mg

Capsule Extended Release 24 Hour, Oral:

Apriso: 0.375 g [contains aspartame]

Enema, Rectal:

Generic: 4 g (60 mL)

Kit, Rectal:

Generic: 4 g

Suppository, Rectal:

Canasa: 1000 mg (30 ea, 42 ea)

NONFORMULARY

Capsule Extended Release, Oral:

Pentasa: 250 mg, 500 mg

Tablet Delayed Release, Oral:

Asacol HD: 800 mg

Generic: 800 mg

Mepivacaine**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution, Injection, as hydrochloride:

Carbocaine: 1% (50 mL); 2% (50 mL) [contains methylparaben]

Polocaine: 1% (50 mL); 2% (50 mL) [contains methylparaben]

Solution, Injection, as hydrochloride [preservative free]:

Carbocaine Preservative-Free: 1% (30 mL); 1.5% (30 mL); 2% (20 mL)

Polocaine-MPF: 1% (30 mL); 1.5% (30 mL); 2% (20 mL) [methylparaben free]

Solution, Injection, as hydrochloride [dental use]:

Carbocaine: 3% (1.7 mL)

Polocaine Dental: 3% (1.7 mL)

Scandonest 3% Plain: 3% (1.7 mL)

Mepivacaine and Levonordefrin**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Injection, solution [for dental use]:

Carbocaine 2% with Neo-Cobefrin: Mepivacaine hydrochloride 2% and levonordefrin 1:20,000 (1.7 mL) [contains edetate disodium, potassium metabisulfite]

Scandonest 2% L: Mepivacaine hydrochloride 2% and levonordefrin 1:20,000 (1.7 mL) [contains edetate disodium, potassium metabisulfite]

Mepolizumab**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution Auto-injector, Subcutaneous [preservative free]:

Nucala: 100 mg/mL (1 mL) [contains disodium edta, polysorbate 80]

Solution Prefilled Syringe, Subcutaneous [preservative free]:

Nucala: 100 mg/mL (1 mL) [contains edetate (edta) disodium dihydrate, polysorbate 80]

NOT COVERED

Solution Reconstituted, Subcutaneous [preservative free]:

Nucala: 100 mg (1 ea) [contains polysorbate 80]

Meprobamate**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Tablet, Oral:

Generic: 200 mg, 400 mg

Mercaptopurine**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Suspension, Oral:

Purixan: 2000 mg/100 mL (100 mL) [contains aspartame, methylparaben, propylparaben]

NONFORMULARY

Tablet, Oral:

Generic: 50 mg

Meropenem**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution Reconstituted, Intravenous:

Generic: 500 mg (1 ea); 1 g (1 ea)

Solution Reconstituted, Intravenous [preservative free]:

Generic: 500 mg (1 ea); 1 g (1 ea)

Meropenem and Vaborbactam**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution Reconstituted, Intravenous:

Vabomere: 2 g: Meropenem 1 g and vaborbactam 1 g (1 ea)

Mesalamine**DoD Uniform Formulary Outpatient Dosage Forms****BASIC CORE FORMULARY**

Tablet Delayed Release, Oral:

Lialda: 1.2 g

Generic: 1.2 g

UNIFORM FORMULARY**Mesna****DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution, Intravenous:

Generic: 100 mg/mL (10 mL)

Tablet, Oral:

Mesnex: 400 mg [scored]

Metaproterenol**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Syrup, Oral, as sulfate:

Generic: 10 mg/5 mL (473 mL)

Tablet, Oral, as sulfate:

Generic: 10 mg, 20 mg

Metaxalone**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Tablet, Oral:

Generic: 400 mg, 800 mg

MetFORMIN**DoD Uniform Formulary Outpatient Dosage Forms****BASIC CORE FORMULARY**

Tablet, Oral, as hydrochloride:

Generic: 500 mg, 850 mg, 1000 mg

Tablet Extended Release 24 Hour, Oral, as hydrochloride:

Generic (Glucophage XR): 750 mg

UNIFORM FORMULARY

Solution, Oral, as hydrochloride:

Riomet: 500 mg/5 mL (118 mL, 473 mL)

NONFORMULARY

Tablet Extended Release 24 Hour, Oral, as hydrochloride:

Fortamet: 500 mg, 1000 mg

Generic: 500 mg, 1000 mg

NOT COVERED

Tablet Extended Release 24 Hour, Oral, as hydrochloride:

Glumetza: 500 mg, 1000 mg

Methacholine**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution Reconstituted, Inhalation, as chloride:

Provocholine: 100 mg (1 ea)

Methadone**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Concentrate, Oral, as hydrochloride:

Generic: 10 mg/mL (30 mL, 1000 mL)

Solution, Injection, as hydrochloride:

Generic: 10 mg/mL (20 mL)

Solution, Oral, as hydrochloride:

Generic: 5 mg/5 mL (500 mL); 10 mg/5 mL (500 mL)

Tablet, Oral, as hydrochloride:

Generic: 5 mg, 10 mg

Tablet Soluble, Oral, as hydrochloride:

Generic: 40 mg

Methamphetamine**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Tablet, Oral, as hydrochloride:

Generic: 5 mg

MethazolAMIDE**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Tablet, Oral:

Generic: 25 mg, 50 mg

METHENAMINE

Methenamine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral, as hippurate:

Generic: 1 g

Tablet, Oral, as mandelate:

Generic: 0.5 g, 1 g

Methenamine, Phenyl Salicylate, Atropine, Hyoscyamine, Benzoic Acid, and Methylene Blue

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:

Methenamine 40.8 mg, phenyl salicylate 18.1 mg, atropine sulfate 0.03 mg, hyoscyamine sulfate 0.03 mg, benzoic acid 4.5 mg, and methylene blue 5.4 mg

Methenamine, Phenyl Salicylate, Methylene Blue, Benzoic Acid, and Hyoscyamine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:

Hyophen: Methenamine 81.6 mg, phenyl salicylate 36.2 mg, methylene blue 10.8 mg, benzoic acid 9 mg, hyoscyamine sulfate 0.12 mg

Urophen MB: Methenamine 81.6 mg, phenyl salicylate 36.2 mg, methylene blue 10.8 mg, benzoic acid 9 mg, hyoscyamine sulfate 0.12 mg

Methenamine, Sodium Phosphate Monobasic, Phenyl Salicylate, Methylene Blue, and Hyoscyamine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule, oral:

Azuphen MB: Methenamine 120 mg, sodium phosphate monobasic 40.8 mg, phenyl salicylate 36 mg, methylene blue 10 mg, hyoscyamine sulfate 0.12 mg

Uramit MB: Methenamine 118 mg, sodium phosphate monobasic 40.8 mg, phenyl salicylate 36 mg, methylene blue 10 mg, hyoscyamine sulfate 0.12 mg

Uribel: Methenamine 118 mg, sodium phosphate monobasic 40.8 mg, phenyl salicylate 36 mg, methylene blue 10 mg, hyoscyamine sulfate 0.12 mg

UroAv-B: Methenamine 118 mg, sodium phosphate monobasic 40.8 mg, phenyl salicylate 36 mg, methylene blue 10 mg, hyoscyamine sulfate 0.12 mg

Uro-MP: Methenamine 118 mg, sodium phosphate monobasic 40.8 mg, phenyl salicylate 36 mg, methylene blue 10 mg, hyoscyamine sulfate 0.12 mg

Ustell: Methenamine 120 mg, sodium phosphate monobasic 40.8 mg, phenyl salicylate 36 mg, methylene blue 10 mg, hyoscyamine sulfate 0.12 mg

Uticap: Methenamine 120 mg, sodium phosphate monobasic 40.8 mg, phenyl salicylate 36 mg, methylene blue 10 mg, hyoscyamine sulfate 0.12 mg

Tablet, oral:

Hyolev MB: Methenamine 81 mg, sodium phosphate monobasic 40.8 mg, phenyl salicylate 32.4 mg, methylene blue 10.8 mg, hyoscyamine sulfate 0.12 mg

Phosphasal: Methenamine 81.6 mg, sodium phosphate monobasic 40.8 mg, phenyl salicylate 36.2 mg, methylene blue 10.8 mg, hyoscyamine sulfate 0.12 mg

Ur N-C: Methenamine 81.6 mg, sodium phosphate monobasic 40.8 mg, phenyl salicylate 36.2 mg, methylene blue 10.8 mg, hyoscyamine sulfate 0.12 mg

Urelle: Methenamine 81 mg, sodium phosphate monobasic 40.8 mg, phenyl salicylate 32.4 mg, methylene blue 10.8 mg, hyoscyamine sulfate 0.12 mg

UretroN D/S: Methenamine 81.6 mg, sodium phosphate monobasic 40.8 mg, phenyl salicylate 36.2 mg, methylene blue 10.8 mg, hyoscyamine sulfate 0.12 mg

Urimar-T: Methenamine 120 mg, sodium phosphate monobasic 40.8 mg, phenyl salicylate 36.2 mg, methylene blue 10.8 mg, hyoscyamine sulfate 0.12 mg

Urin DS: Methenamine 81.6 mg, sodium phosphate monobasic 40.8 mg, phenyl salicylate 36.2 mg, methylene blue 10.8 mg, hyoscyamine sulfate 0.12 mg

Uro-458: Methenamine 81 mg, sodium phosphate monobasic 40.8 mg, phenyl salicylate 32.4 mg, methylene blue 10.8 mg, hyoscyamine sulfate 0.12 mg

UroAv-81: Methenamine 81 mg, sodium phosphate monobasic 40.8 mg, phenyl salicylate 32.4 mg, methylene blue 10.8 mg, hyoscyamine sulfate 0.12 mg

Uro-L: Methenamine 81 mg, sodium phosphate monobasic 40.8 mg, phenyl salicylate 32.4 mg, methylene blue 10.8 mg, hyoscyamine sulfate 0.12 mg [DSC]

Utira-C: Methenamine 81.6 mg, sodium phosphate monobasic 40.8 mg, phenyl salicylate 36.2 mg, methylene blue 10.8 mg, hyoscyamine sulfate 0.12 mg

Utrona-C: Methenamine 81.6 mg, sodium phosphate monobasic 40.8 mg, phenyl salicylate 36.2 mg, methylene blue 10.8 mg, hyoscyamine sulfate 0.12 mg

MethIMazole

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:

Generic: 5 mg, 10 mg

Methionine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule, oral:

ME-500: 500 mg

Tablet, Oral:

Generic: 500 mg

Methocarbamol

DoD Uniform Formulary Outpatient Dosage Forms

BASIC CORE FORMULARY

Tablet, Oral:

Generic: 500 mg

UNIFORM FORMULARY

Solution, Injection: Robaxin:

Generic: 1000 mg/10 mL (10 mL)

Solution, Injection [preservative free]:

Generic: 1000 mg/10 mL (10 mL)

NONFORMULARY

Solution, Injection:

Robaxin: 1000 mg/10 mL (10 mL) [contains polyethylene glycol 300]

Methohexital

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution Prefilled Syringe, Intravenous, as sodium:

Generic: 100 mg/10 mL (10 mL)

Solution Reconstituted, Injection, as sodium:

Brevital Sodium: 500 mg (1 ea); 2.5 g (1 ea)

Methotrexate

DoD Uniform Formulary Outpatient Dosage Forms

BASIC CORE FORMULARY

Tablet, Oral:

Generic: 2.5 mg

UNIFORM FORMULARY

Solution, Injection:

Generic: 250 mg/10 mL (10 mL); 50 mg/2 mL (2 mL)

Solution, Injection [preservative free]:

Generic: 1 g/40 mL (40 mL); 100 mg/4 mL (4 mL); 200 mg/8 mL (8 mL); 250 mg/10 mL (10 mL); 50 mg/2 mL (2 mL)

Solution, Oral:

Xatmep: 2.5 mg/mL (120 mL)

Solution Reconstituted, Injection [preservative free]:

Generic: 1 g (1 ea)

Tablet, Oral:

Trexall: 5 mg, 7.5 mg, 10 mg, 15 mg [scored]

NONFORMULARY

Solution Auto-injector, Subcutaneous [preservative free]:

Otrexup: 7.5 mg/0.4 mL (0.4 mL); 10 mg/0.4 mL (0.4 mL); 12.5 mg/0.4 mL (0.4 mL); 15 mg/0.4 mL (0.4 mL); 17.5 mg/0.4 mL (0.4 mL); 20 mg/0.4 mL (0.4 mL); 22.5 mg/0.4 mL (0.4 mL); 25 mg/0.4 mL (0.4 mL)

Rasuvo: 7.5 mg/0.15 mL (0.15 mL); 10 mg/0.2 mL (0.2 mL); 12.5 mg/0.25 mL (0.25 mL); 15 mg/0.3 mL (0.3 mL); 17.5 mg/0.35 mL (0.35 mL); 20 mg/0.4 mL (0.4 mL); 22.5 mg/0.45 mL (0.45 mL); 25 mg/0.5 mL (0.5 mL); 27.5 mg/0.55 mL (0.55 mL); 30 mg/0.6 mL (0.6 mL)

Methoxsalen (Systemic)

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule, Oral:

Generic: 10 mg

Methoxy Polyethylene Glycol-Epoetin Beta

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Injection [preservative free]:

Mircera: 50 mcg/0.3 mL (0.3 mL); 75 mcg/0.3 mL (0.3 mL); 100 mcg/0.3 mL (0.3 mL); 200 mcg/0.3 mL (0.3 mL)

Solution Prefilled Syringe, Injection:

Mircera: 30 mcg/0.3 mL (0.3 mL); 50 mcg/0.3 mL (0.3 mL); 75 mcg/0.3 mL (0.3 mL); 100 mcg/0.3 mL (0.3 mL); 200 mcg/0.3 mL (0.3 mL)

Solution Prefilled Syringe, Injection [preservative free]:

Mircera: 150 mcg/0.3 mL (0.3 mL)

Methscopolamine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral, as bromide:

Generic: 2.5 mg, 5 mg

Methsuximide**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Capsule, Oral:
Celontin: 300 mg

Methyclothiazide**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Tablet, Oral:
Generic: 5 mg

Methylcellulose**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Powder, Oral:
Citrucel: (454 g, 850 g)
Citrucel: (479 g, 907 g, 1191 g) [gluten free, sugar free; orange flavor]
Soluble Fiber Therapy: (454 g)
Tablet, Oral:
Citrucel: 500 mg

Methyldopa**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution, Intravenous, as hydrochloride:
Generic: 250 mg/5 mL (5 mL)
Tablet, Oral:
Generic: 250 mg, 500 mg

Methyldopa and Hydrochlorothiazide**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Tablet, Oral:
Methyldopa 250 mg and hydrochlorothiazide 15 mg
Methyldopa 250 mg and hydrochlorothiazide 25 mg

Methylene Blue**DoD Uniform Formulary Outpatient Dosage Forms****NOT COVERED**

Solution, Injection:
Generic: 1% (1 mL, 10 mL)
Solution, Intravenous:
ProvyBlue: 50 mg/10 mL (10 mL)

Methylergonovine**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution, Injection, as maleate:
Generic: 0.2 mg/mL (1 mL)
Solution, Injection, as maleate [preservative free]:
Generic: 0.2 mg/mL (1 mL)
Tablet, Oral, as maleate:
Methergine: 0.2 mg [contains methylparaben, propylparaben]

Methylfolate**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Capsule, Oral:
Deplin 7.5: L-methylfolate 7.5 mg and Schizochytrium algae [contains fd&c red #40, fd&c yellow #6 (sunset yellow), fd&c yellow #6 aluminum lake, sodium caseinate, soy protein, soybean lecithin]
Deplin 15: L-methylfolate 15 mg and Schizochytrium algae [contains fd&c red #40, fd&c yellow #6 (sunset yellow), sodium caseinate, soy protein, soybean lecithin]
L-Methylfolate Formula 15: L-methylfolate 15 mg and Schizochytrium algae [contains sodium caseinate, soy protein, soybean lecithin]
L-Methylfolate Formula 7.5: L-methylfolate 7.5 mg and Schizochytrium algae [contains sodium caseinate, soy protein, soybean lecithin]
L-Methylfolate Forte: L-methylfolate 7.5 mg and Schizochytrium algae [contains sodium caseinate, soy protein, soybean lecithin]
L-Methylfolate Forte: L-methylfolate 15 mg and Schizochytrium algae [contains sodium caseinate, soy protein, soybean lecithin]
Tablet, Oral:
Generic: 7.5 mg, 15 mg

Methylfolate, Methylcobalamin, and Acetylcysteine**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Tablet, Oral:
Cerefolin NAC: L-methylfolate 6 mg, methylcobalamin 2 mg, N-acetylcysteine 600 mg, and Schizochytrium algae [contains soy; gluten free, lactose free, yeast free]
Metafolbic Plus: L-methylfolate 6 mg, methylcobalamin 2 mg, and N-acetylcysteine 600 mg [gluten free, lactose free, sugar free, yeast free]
Metafolbic Plus RF: L-methylfolate 6 mg, methylcobalamin 2 mg, N-acetylcysteine 600 mg, and Schizochytrium algae [contains soy; gluten free, yeast free]

Methylphenidate**DoD Uniform Formulary Outpatient Dosage Forms****BASIC CORE FORMULARY**

Tablet Extended Release 24 Hour, Oral, as hydrochloride:
Generic: 18 mg, 27 mg, 36 mg, 54 mg

UNIFORM FORMULARY

Capsule Extended Release, Oral, as hydrochloride:
Generic: 10 mg, 20 mg, 30 mg, 40 mg, 50 mg, 60 mg
Capsule Extended Release 24 Hour, Oral, as hydrochloride:
Generic: 20 mg, 30 mg, 40 mg, 60 mg
Solution, Oral, as hydrochloride:
Generic: 5 mg/5 mL (500 mL); 10 mg/5 mL (500 mL)
Tablet, Oral, as hydrochloride:
Generic: 5 mg, 10 mg, 20 mg
Tablet Chewable, Oral, as hydrochloride:
Generic: 2.5 mg, 5 mg, 10 mg
Tablet Extended Release, Oral, as hydrochloride:
Generic: 10 mg, 20 mg

NONFORMULARY

Capsule Extended Release, Oral, as hydrochloride:
Jornay PM: 20 mg, 40 mg, 60 mg, 80 mg, 100 mg
Patch, Transdermal:
Daytrana: 10 mg/9 hr (30 ea); 15 mg/9 hr (30 ea); 20 mg/9 hr (30 ea); 30 mg/9 hr (30 ea)
Tablet Chewable Extended Release, Oral, as hydrochloride:
QuilliChew ER: 20 mg, 30 mg, 40 mg [contains aspartame]
Tablet Extended Release Disintegrating, Oral:
Cotempla XR-ODT: 8.6 mg, 17.3 mg, 25.9 mg

NOT COVERED

Capsule Extended Release 24 Hour, Oral, as hydrochloride:
Adhansia XR: 25 mg, 35 mg, 45 mg, 55 mg, 70 mg, 85 mg

MethylPREDNISolone**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Kit, Injection, as acetate:
ReadySharp Methylprednisolone: 80 mg/mL [contains polyethylene glycol]
Solution Reconstituted, Injection, as sodium succinate [strength expressed as base]:
SOLU-medrol: 500 mg (1 ea); 1000 mg (1 ea); 2 g (1 ea)
Generic: 40 mg (1 ea); 125 mg (1 ea); 1000 mg (1 ea)
Solution Reconstituted, Injection, as sodium succinate [strength expressed as base, preservative free]:
SOLU-medrol: 40 mg (1 ea); 125 mg (1 ea); 500 mg (1 ea); 1000 mg (1 ea)
Suspension, Injection, as acetate:
DEPO-Medrol: 20 mg/mL (5 mL); 40 mg/mL (5 mL, 10 mL) [contains benzyl alcohol, polyethylene glycol, polysorbate 80]
Generic: 40 mg/mL (1 mL, 10 mL); 80 mg/mL (1 mL, 5 mL)
Tablet, Oral:
Medrol: 2 mg
Generic: 4 mg, 8 mg, 16 mg, 32 mg
Tablet Therapy Pack, Oral:
Generic: 4 mg (21 ea)

MethylTESTOSTERone**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Capsule, Oral:
Generic: 10 mg
Tablet, Oral:
Methitest: 10 mg [scored]

Metipranolol**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution, Ophthalmic:
Generic: 0.3% (5 mL, 10 mL)

Metoclopramide**DoD Uniform Formulary Outpatient Dosage Forms****BASIC CORE FORMULARY**

Solution, Oral:
Generic: 5 mg/5 mL (10 mL, 473 mL)
Tablet, Oral:
Generic: 10 mg

UNIFORM FORMULARY

Solution, Injection:
Generic: 5 mg/mL (2 mL)
Solution, Injection [preservative free]:
Generic: 5 mg/mL (2 mL)
Solution, Oral:
Generic: 10 mg/10 mL (10 mL)
Tablet, Oral:
Generic: 5 mg
Tablet Dispersible, Oral:
Generic: 5 mg, 10 mg

METOLAZONE

MetOLazone

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Tablet, Oral:
Generic: 2.5 mg, 5 mg, 10 mg

Metoprolol

DoD Uniform Formulary Outpatient Dosage Forms BASIC CORE FORMULARY

Tablet, Oral, as tartrate:
Generic: 25 mg, 50 mg, 100 mg
Tablet Extended Release 24 Hour, Oral, as succinate:
Generic: 25 mg, 50 mg, 100 mg, 200 mg

UNIFORM FORMULARY

Capsule ER 24 Hour Sprinkle, Oral:
Kapspargo Sprinkle: 25 mg, 50 mg, 100 mg, 200 mg [contains corn starch]
Solution, Intravenous, as tartrate:
Generic: 1 mg/mL (5 mL); 5 mg/5 mL (5 mL)
Solution, Intravenous, as tartrate [preservative free]:
Generic: 5 mg/5 mL (5 mL)
Tablet, Oral, as tartrate:
Generic: 37.5 mg, 75 mg

Metoprolol and Hydrochlorothiazide

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Tablet, Oral:
50/25: Metoprolol tartrate 50 mg and hydrochlorothiazide 25 mg
100/25: Metoprolol tartrate 100 mg and hydrochlorothiazide 25 mg
100/50: Metoprolol tartrate 100 mg and hydrochlorothiazide 50 mg
Tablet, Extended Release, Oral:
25/12.5: Metoprolol succinate 25 mg [extended release, expressed as mg equivalent to tartrate] and hydrochlorothiazide 12.5 mg
50/12.5: Metoprolol succinate 50 mg [extended release, expressed as mg equivalent to tartrate] and hydrochlorothiazide 12.5 mg
100/12.5: Metoprolol succinate 100 mg [extended release, expressed as mg equivalent to tartrate] and hydrochlorothiazide 12.5 mg

Metreleptin

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Solution Reconstituted, Subcutaneous:
Myalept: 11.3 mg (1 ea)

MetroNIDAZOLE (Systemic)

DoD Uniform Formulary Outpatient Dosage Forms BASIC CORE FORMULARY

Tablet, Oral:
Generic: 250 mg, 500 mg

UNIFORM FORMULARY

Capsule, Oral:
Generic: 375 mg
Solution, Intravenous:
Generic: 500 mg (100 mL)

MetroNIDAZOLE (Topical)

DoD Uniform Formulary Outpatient Dosage Forms BASIC CORE FORMULARY

Gel, External:
Generic: 1% (60 g)
Gel, Vaginal:
Generic: 0.75% (70 g)

UNIFORM FORMULARY

Cream, External:
Generic: 0.75% (45 g)
Lotion, External:
Generic: 0.75% (59 mL)

NONFORMULARY

Cream, External:
Noritate: 1% (60 g) [contains methylparaben, propylparaben, trolamine (triethanolamine)]
Kit, External:
Rosadan: 0.75% [contains benzyl alcohol]
Rosadan: 0.75% [contains edetate disodium, methylparaben, propylene glycol, propylparaben]

MetyraPONE

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Capsule, Oral:
Metopirone: 250 mg

MetyroSINE

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Capsule, Oral:
Demser: 250 mg

Mexiletine

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Capsule, Oral, as hydrochloride:
Generic: 150 mg, 200 mg, 250 mg

Micafungin

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Solution Reconstituted, Intravenous, as sodium:
Mycamine: 50 mg (1 ea); 100 mg (1 ea)
Solution Reconstituted, Intravenous, as sodium [preservative free]:
Mycamine: 50 mg (1 ea); 100 mg (1 ea)

Miconazole (Oral)

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Tablet, Buccal:
Oravig: 50 mg [contains corn starch, milk protein concentrate]

Miconazole (Topical)

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Aerosol, External, as nitrate:
Lotrimin AF: 2% (150 g)
Aerosol Powder, External, as nitrate:
Cruex Prescription Strength: 2% (85 g)
Desenex Jock Itch: 2% (113 g)
Lotrimin AF Deodorant Powder: 2% (133 g)
Lotrimin AF Jock Itch Powder: 2% (133 g)
Lotrimin AF Powder: 2% (133 g)
Cream, External, as nitrate:
Antifungal: 2% (14 g, 28 g, 42.5 g) [contains benzoic acid]
Antifungal: 2% (113 g, 198 g) [contains cetyl alcohol, methylparaben, propylene glycol, propylparaben]
Baza Antifungal: 2% (4 g, 57 g, 142 g)
Carrington Antifungal: 2% (141 g) [contains disodium edta, methylparaben, propylene glycol, propylparaben]
Micaderm: 2% (30 g)
Micasin: 2% (14 g) [contains benzoic acid]
Podactin: 2% (28.35 g) [contains benzoic acid]
Remedy Antifungal: 2% (118 mL) [contains methylparaben, propylparaben, trolamine (triethanolamine)]
Secura Antifungal: 2% (57 g) [contains cetearyl alcohol, methylparaben, propylparaben]
Secura Antifungal Extra Thick: 2% (92 g) [contains cetearyl alcohol, methylparaben, propylparaben]
Soothe & Cool INZO Antifungal: 2% (56.7 g, 141.7 g)
Generic: 2% (15 g, 30 g)
Cream, Vaginal, as nitrate:
Miconazole 7: 2% (45 g) [contains benzoic acid]
Generic: 2% (45 g)
Kit, External, as nitrate:
Fungoid Tincture: 2% [contains benzyl alcohol]
Kit, Vaginal, as nitrate:
Miconazole 3 Combo Pack: Cream, topical: 2% (9 g) and Suppository, vaginal: 200 mg (3s)
Miconazole 3 Combo Pack: Cream, topical: 2% (9 g) and Suppository, vaginal: 200 mg (3s) [contains benzoic acid]
Vagistat-3: Cream, topical: 2% (9 g) and Suppository, vaginal: 200 mg (3s) [contains benzoic acid]
Lotion, External, as nitrate:
Zeasorb-AF: 2% (56 g) [contains alcohol, usp]
Ointment, External, as nitrate:
Aloe Vesta Antifungal: 2% (56 g, 141 g)
Aloe Vesta Clear Antifungal: 2% (56 g, 141 g) [dye free, fragrance free]
Critic-Aid Clear AF: 2% (4 g, 57 g, 142 g)
DermaFungal: 2% (113 g)
Remedy Antifungal Clear: 2% (71 g) [contains soybean oil]
Triple Paste AF: 2% (56.7 g) [contains polysorbate 80]
Powder, External, as nitrate:
Desenex: 2% (43 g, 85 g)
Lotrimin AF: 2% (90 g)
Micro Guard: 2% (85 g)
Remedy Antifungal: 2% (85 g)
Remedy Antifungal: 2% (85 g) [talc free; contains methylparaben]
Remedy Phytoplex Antifungal: 2% (85 g) [paraben free; contains sodium benzoate, soy protein]
Zeasorb-AF: 2% (71 g)
Zeasorb-AF: 2% (71 g) [starch free]
Solution, External, as nitrate:
Azolen Tincture: 2% (29.57 mL) [contains benzyl alcohol, isopropyl alcohol]
Fungoid Tincture: 2% (29.57 mL) [contains benzyl alcohol]
Miranel AF: 2% (28 g) [contains disodium edta, menthol, propylene glycol, sd alcohol 40b]
Suppository, Vaginal, as nitrate:
Miconazole 7: 100 mg (7 ea)
Miconazole 3: 200 mg (3 ea)
Generic: 100 mg (7 ea)

Midazolam**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution, Injection:

Generic: 2 mg/2 mL (2 mL); 5 mg/5 mL (5 mL); 10 mg/10 mL (10 mL); 5 mg/mL (1 mL); 10 mg/2 mL (2 mL); 25 mg/5 mL (5 mL); 50 mg/10 mL (10 mL)

Solution, Injection [preservative free]:

Generic: 2 mg/2 mL (2 mL); 5 mg/5 mL (5 mL); 5 mg/mL (1 mL); 10 mg/2 mL (2 mL)

Syrup, Oral:

Generic: 2 mg/mL (118 mL)

NONFORMULARY

Solution, Nasal:

Nayzilam: 5 mg/0.1 mL (2 ea)

Midodrine**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Tablet, Oral, as hydrochloride:

Generic: 2.5 mg, 5 mg, 10 mg

Midostaurin**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Capsule, Oral:

Rydapt: 25 mg [contains cremophor rh40]

MiFEPRIStone**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Tablet, Oral:

Korlym: 300 mg

Mifeprex: 200 mg [contains corn starch]

Migalastat**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Capsule, Oral:

Galafold: 123 mg

Miglitol**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Tablet, Oral:

Generic: 25 mg, 50 mg, 100 mg

Miglustat**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Capsule, Oral:

Zavesca: 100 mg [contains soybean lecithin]

Milrinone**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution, Intravenous:

Generic: 200 mcg/mL (100 mL, 200 mL); 10 mg/10 mL (10 mL); 20 mg/20 mL (20 mL); 50 mg/50 mL (50 mL)

Solution, Intravenous [preservative free]:

Generic: 200 mcg/mL (100 mL, 200 mL)

Miltefosine**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Capsule, Oral:

Impavido: 50 mg

Mineral Oil**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Enema, Rectal:

Generic: (135 mL)

Oil, Oral:

Generic: (30 mL, 472 mL, 473 mL, 500 mL, 1000 mL, 4000 mL)

Mineral Oil (Light)**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Liquid, sterile: 10 mL

Minocycline Hydrochloride Periodontal Microspheres**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Miscellaneous, Dental [strength expressed as base]:

Arestin: 1 mg (1 ea)

Minocycline (Systemic)**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Capsule, Oral:

Generic: 50 mg, 75 mg, 100 mg

Solution Reconstituted, Intravenous:

Minocin: 100 mg (1 ea)

Tablet, Oral:

Generic: 50 mg, 75 mg, 100 mg

NONFORMULARY

Capsule, Oral:

Minocin: 50 mg, 75 mg, 100 mg

Capsule Extended Release 24 Hour, Oral:

Ximino: 45 mg, 90 mg, 135 mg

Tablet Extended Release 24 Hour, Oral:

Minolira: 105 mg, 135 mg [scored]

Solodyn: 55 mg, 65 mg, 80 mg, 105 mg, 115 mg

Generic: 45 mg, 90 mg, 135 mg

Minoxidil (Systemic)**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Tablet, Oral:

Generic: 2.5 mg, 10 mg

Minoxidil (Topical)**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Foam, External:

Rogaine Mens: 5% (60 g) [contains cetyl alcohol, sd alcohol 40b]

Rogaine Womens: 5% (60 g) [contains cetyl alcohol, sd alcohol 40b]

Solution, External:

Generic: 2% (60 mL); 5% (60 mL)

Mipomersen**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution Prefilled Syringe, Subcutaneous, as sodium [preservative free]:

Kynamro: 200 mg/mL (1 mL)

Mirabegron**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Tablet Extended Release 24 Hour, Oral:

Myrbetriq: 25 mg, 50 mg

Mirtazapine**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Tablet, Oral:

Generic: 7.5 mg, 15 mg, 30 mg, 45 mg

Tablet Dispersible, Oral:

Generic: 15 mg, 30 mg, 45 mg

MiSOPROStol**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Tablet, Oral:

Generic: 100 mcg, 200 mcg

MitoMYcin (Ophthalmic)**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Kit, Ophthalmic:

Mitosol: 0.2 mg

MitoMYcin (Systemic)**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution Reconstituted, Intravenous:

Generic: 5 mg (1 ea); 20 mg (1 ea); 40 mg (1 ea)

Mitotane**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Tablet, Oral:

Lysodren: 500 mg [scored]

MitoXANTRONE**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Concentrate, Intravenous:

Generic: 20 mg/10 mL (10 mL); 25 mg/12.5 mL (12.5 mL); 30 mg/15 mL (15 mL)

MIVACURIUM

Mivacurium

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Intravenous:

Mivacron: 10 mg/5 mL (5 mL); 20 mg/10 mL (10 mL)

Modafinil

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:

Generic: 100 mg, 200 mg

Moexipril

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral, as hydrochloride:

Generic: 7.5 mg, 15 mg

Moexipril and Hydrochlorothiazide

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:

7.5/12.5: Moexipril hydrochloride 7.5 mg and hydrochlorothiazide 12.5 mg

15/12.5: Moexipril hydrochloride 15 mg and hydrochlorothiazide 12.5 mg

15/25: Moexipril hydrochloride 15 mg and hydrochlorothiazide 25 mg

Mogamulizumab

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Intravenous [preservative free]:

Poteligeo: 20 mg/5 mL (5 mL) [contains polysorbate 80]

Molindone

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral, as hydrochloride:

Generic: 5 mg, 10 mg, 25 mg

Mometasone (Nasal)

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Implant, Nasal, as furoate:

Sinuva: 1350 mcg (1 ea)

NONFORMULARY

Suspension, Nasal, as furoate:

Nasonex: 50 mcg/actuation (17 g)

Generic: 50 mcg/actuation (17 g)

Mometasone (Oral Inhalation)

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Aerosol, Inhalation, as furoate:

Asmanex HFA: 100 mcg/actuation (13 g); 200 mcg/actuation (13 g)

NONFORMULARY

Aerosol Powder Breath Activated, Inhalation, as furoate:

Asmanex 7 Metered Doses: 110 mcg/INH (1 ea) [contains milk protein]

Asmanex 14 Metered Doses: 220 mcg/INH (1 ea) [contains milk protein]

Asmanex 30 Metered Doses: 110 mcg/INH (1 ea); 220 mcg/INH (1 ea)

[contains milk protein]

Asmanex 60 Metered Doses: 220 mcg/INH (1 ea) [contains milk protein]

Asmanex 120 Metered Doses: 220 mcg/INH (1 ea) [contains milk protein]

Mometasone (Topical)

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Cream, External, as furoate:

Generic: 0.1% (15 g, 45 g)

Lotion, External, as furoate:

Elocon: 0.1% (30 mL, 60 mL) [contains isopropyl alcohol, propylene glycol]

Ointment, External, as furoate:

Generic: 0.1% (15 g, 45 g)

Solution, External, as furoate:

Generic: 0.1% (30 mL, 60 mL)

Montelukast

DoD Uniform Formulary Outpatient Dosage Forms

BASIC CORE FORMULARY

Packet, Oral:

Generic: 4 mg/packet (1s, 30s)

Tablet, Oral:

Generic: 10 mg

Tablet Chewable, Oral:

Generic: 4 mg, 5 mg

Morphine and Naltrexone

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule, extended release, oral:

Embeda 20/0.8: Morphine sulfate 20 mg and naltrexone hydrochloride 0.8 mg

Embeda 30/1.2: Morphine sulfate 30 mg and naltrexone hydrochloride 1.2 mg

Embeda 50/2: Morphine sulfate 50 mg and naltrexone hydrochloride 2 mg

Embeda 60/2.4: Morphine sulfate 60 mg and naltrexone hydrochloride 2.4 mg

Embeda 80/3.2: Morphine sulfate 80 mg and naltrexone hydrochloride 3.2 mg

Embeda 100/4: Morphine sulfate 100 mg and naltrexone hydrochloride 4 mg

Morphine (Systemic)

DoD Uniform Formulary Outpatient Dosage Forms

BASIC CORE FORMULARY

Tablet Extended Release, Oral, as sulfate:

Generic: 15 mg, 30 mg, 60 mg, 100 mg, 200 mg

UNIFORM FORMULARY

Capsule Extended Release 24 Hour, Oral, as sulfate:

Generic: 10 mg, 20 mg, 30 mg, 45 mg, 50 mg, 60 mg, 75 mg, 80 mg, 90 mg,

100 mg, 120 mg

Device, Intramuscular, as sulfate:

Generic: 10 mg/0.7 mL (0.7 mL)

Solution, Injection, as sulfate:

Generic: 2 mg/mL (1 mL); 4 mg/mL (1 mL); 5 mg/mL (1 mL); 8 mg/mL (1 mL);

10 mg/mL (1 mL); 15 mg/mL (1 mL)

Solution, Injection, as sulfate [preservative free]:

Generic: 0.5 mg/mL (10 mL); 1 mg/mL (10 mL)

Solution, Intravenous, as sulfate:

Generic: 1 mg/mL (30 mL); 25 mg/mL (4 mL, 10 mL); 50 mg/mL (20 mL,

50 mL)

Solution, Intravenous, as sulfate [preservative free]:

Generic: 1 mg/mL (30 mL); 2 mg/mL (1 mL); 4 mg/mL (1 mL); 150 mg/30 mL

(30 mL); 8 mg/mL (1 mL); 10 mg/mL (1 mL); 15 mg/mL (1 mL); 25 mg/mL

(10 mL)

Solution, Oral, as sulfate:

Generic: 10 mg/5 mL (5 mL, 15 mL, 100 mL, 500 mL); 20 mg/5 mL (5 mL, 100

mL, 500 mL); 100 mg/5 mL (15 mL, 30 mL, 120 mL, 240 mL)

Suppository, Rectal, as sulfate:

Generic: 5 mg (12 ea); 10 mg (12 ea); 20 mg (12 ea); 30 mg (12 ea)

Tablet, Oral, as sulfate:

Generic: 15 mg, 30 mg

NONFORMULARY

Tablet ER 12 Hour Abuse-Deterrent, Oral, as sulfate:

MorphaBond ER: 15 mg, 30 mg, 60 mg, 100 mg

Tablet Extended Release Abuse-Deterrent, Oral, as sulfate:

Arymo ER: 15 mg (100 ea); 30 mg (100 ea); 60 mg (100 ea)

Mouthwash

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Mouth/Throat:

Crest Scope: Cetylpyridinium [contains alcohol 15%, tartrazine]

Crest Scope Outlast: Cetylpyridinium [contains alcohol 13%, tartrazine]

Listerine Antiseptic: Eucalyptol 0.092%, menthol 0.042%, methyl salicylate

0.06%, thymol 0.064% [contains alcohol 26.9%; original flavor, soft mint

flavor, cool mint flavor, freshburst flavor]

Listerine Naturals Antiseptic: Eucalyptol 0.092%, menthol 0.042%, methyl

salicylate 0.06%, thymol 0.064% [contains alcohol 26.9%; herbal mint flavor]

Listerine Ultraclean Antiseptic: Eucalyptol 0.092%, menthol 0.042%, methyl

salicylate 0.06%, thymol 0.064% [contains alcohol 26.9%; arctic mint flavor,

cool mint flavor, fresh citrus flavor]

Mouthwash, Magic

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Extemporaneously prepared by Pharmacy

Moxetumomab Pasudotox

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution Reconstituted, Intravenous [preservative free]:

Lumoxiti: 1 mg (1 ea) [contains polysorbate 80]

Moxifloxacin (Ophthalmic)

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Ophthalmic:

Moxeza: 0.5% (3 mL)

Vigamox: 0.5% (3 mL)

Moxifloxacin (Systemic)

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Intravenous:

Generic: 400 mg/250 mL (250 mL)

Tablet, Oral:

Generic: 400 mg

Mucosal Coating Agent

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Gel, Mouth/Throat:

Gelclair: 15 mL/packet (15 mL)

Liquid, Mouth/Throat:

Episil: (10 mL)

MuGard: (5 mL, 240 mL) [contains benzyl alcohol]
 Paste, Mouth/Throat:
 Orafate: 10% (30 mL) [contains methylparaben, propylparaben, saccharin sodium; strawberry flavor]
 Wafer, Mouth/Throat:
 Mucotrol: (21 ea, 45 ea) [sugar free; mild licorice flavor]

NONFORMULARY

Paste, Mouth/Throat:
 ProThelial: 10% (125 mL, 250 mL, 500 mL) [contains methylparaben, propylparaben, saccharin sodium]

Mupirocin**DoD Uniform Formulary Outpatient Dosage Forms****BASIC CORE FORMULARY**

Ointment, External:
 Centany: 2% (30 g)
 Generic: 2% (22 g)

UNIFORM FORMULARY

Cream, External, as calcium [strength expressed as base]:
 Generic: 2% (15 g, 30 g)
 Kit, External:
 Centany AT: 2% [contains propylene glycol monostearate]
 Ointment, Nasal, as calcium [strength expressed as base]:
 Bactroban Nasal: 2% (1 g)

Mycophenolate**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Capsule, Oral, as mofetil:
 Generic: 250 mg
 Solution Reconstituted, Intravenous, as mofetil hydrochloride:
 Generic: 500 mg (1 ea)
 Suspension Reconstituted, Oral, as mofetil:
 Generic: 200 mg/mL (160 mL)
 Tablet, Oral, as mofetil:
 Generic: 500 mg
 Tablet Delayed Release, Oral, as mycophenolic acid:
 Generic: 180 mg, 360 mg

Nabilone**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Capsule, Oral:
 Cesamet: 1 mg

Nabumetone**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Tablet, Oral:
 Generic: 500 mg, 750 mg

Nadolol**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Tablet, Oral:
 Generic: 20 mg, 40 mg, 80 mg

Nadolol and Bendroflumethiazide**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Tablet, Oral:
 Generic: Nadolol 40 mg and bendroflumethiazide 5 mg
 Generic: Nadolol 80 mg and bendroflumethiazide 5 mg

Nafarelin**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution, Nasal:
 Synarel: 2 mg/mL (8 mL)

Nafcillin**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution, Intravenous:
 Generic: 1 g/50 mL (50 mL); 2 g/100 mL (100 mL)
 Solution Reconstituted, Injection:
 Generic: 1 g (1 ea); 2 g (1 ea); 10 g (1 ea)
 Solution Reconstituted, Injection [preservative free]:
 Generic: 1 g (1 ea); 2 g (1 ea); 10 g (1 ea)
 Solution Reconstituted, Intravenous:
 Generic: 1 g (1 ea); 2 g (1 ea)

Naftifine**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Cream, External, as hydrochloride:
 Generic: 1% (60 g, 90 g); 2% (45 g, 60 g)

Gel, External, as hydrochloride:

Naftin: 1% (40 g, 60 g, 90 g); 2% (45 g, 60 g) [contains alcohol, usp, edetate disodium]

Nalbuphine**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution, Injection, as hydrochloride:
 Generic: 10 mg/mL (1 mL, 10 mL); 20 mg/mL (1 mL, 10 mL)

Naldemedine**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Tablet, Oral:
 Symproic: 0.2 mg

Naloxegol**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Tablet, Oral:
 Movantik: 12.5 mg, 25 mg

Naloxone**DoD Uniform Formulary Outpatient Dosage Forms****BASIC CORE FORMULARY**

Liquid, Nasal [spray]:
 Narcan: 4 mg/0.1 mL (1 ea) [contains benzalkonium chloride, edetate disodium]

UNIFORM FORMULARY

Solution, Injection, as hydrochloride:
 Generic: 0.4 mg/mL (1 mL); 4 mg/10 mL (10 mL)
 Solution Cartridge, Injection, as hydrochloride:
 Generic: 0.4 mg/mL (1 mL)
 Solution Prefilled Syringe, Injection, as hydrochloride [preservative free]:
 Generic: 2 mg/2 mL (2 mL)

NONFORMULARY

Solution Auto-injector, Injection, as hydrochloride:
 Evzio: 0.4 mg/0.4 mL (0.4 mL); 2 mg/0.4 mL (0.4 mL)

Naltrexone**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Suspension Reconstituted, Intramuscular:
 Vivitrol: 380 mg (1 ea)
 Tablet, Oral, as hydrochloride:
 Generic: 50 mg

Naphazoline and Pheniramine**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution, Ophthalmic:
 Naphcon-A: Naphazoline hydrochloride 0.025% and pheniramine maleate 0.3% (5 mL) [contains benzalkonium chloride; 2 bottles/box], (15 mL) [contains benzalkonium chloride]
 Opcon-A: Naphazoline hydrochloride 0.027% and pheniramine maleate 0.3% (15 mL) [contains benzalkonium chloride]
 Visine-A: Naphazoline hydrochloride 0.025% and pheniramine maleate 0.3% (15 mL) [contains benzalkonium chloride]
 Generic: Naphazoline hydrochloride 0.027% and pheniramine maleate 0.315% (15 mL)

Naphazoline (Ophthalmic)**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution, Ophthalmic, as hydrochloride:
 Clear Eyes Redness Relief: Naphazoline 0.0125% and glycerin 0.2% (6 mL) [contains benzalkonium chloride]

Naproxen**DoD Uniform Formulary Outpatient Dosage Forms****BASIC CORE FORMULARY**

Tablet, Oral:
 Generic: 250 mg, 500 mg

UNIFORM FORMULARY

Capsule, Oral, as sodium:
 Aleve: 220 mg
 Kit, Combination:
 Flanax Pain Relief: 500 mg [contains cetaryl alcohol, cremophor el, propylparaben]
 Naproxen Comfort Pac: 500 mg [contains methylparaben, troamine (triethanolamine)]
 Suspension, Oral:
 Generic: 125 mg/5 mL (500 mL)
 Tablet, Oral:
 Generic: 375 mg
 Tablet, Oral, as sodium:
 Generic: 220 mg, 275 mg, 550 mg

NAPROXEN

Tablet Delayed Release, Oral:
EC-Naprosyn: 375 mg
EC-Naproxen: 375 mg, 500 mg
Naproxen DR: 375 mg, 500 mg

NONFORMULARY

Tablet Extended Release 24 Hour, Oral, as sodium [strength expressed as base]:
Naprelan: 375 mg, 500 mg, 750 mg
Generic: 375 mg, 500 mg

Naproxen and Diphenhydramine

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Caplet, Oral:
Aleve PM: Naproxen sodium 220 mg and diphenhydramine hydrochloride 25 mg

Naproxen and Esomeprazole

DoD Uniform Formulary Outpatient Dosage Forms

Tier 4 - NOT COVERED

Tablet Delayed Release, Oral:
Naproxen [delayed release] 375 mg and esomeprazole [immediate release] 20 mg [contains methylparaben, propylparaben]
Naproxen [delayed release] 500 mg and esomeprazole [immediate release] 20 mg [contains methylparaben, propylparaben]

Naproxen and Pseudoephedrine

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Caplet, extended release:
Aleve-D Sinus & Cold: Naproxen sodium 220 mg [equivalent to naproxen 200 mg and sodium 20 mg] and pseudoephedrine hydrochloride 120 mg
Aleve-D Sinus & Headache: Naproxen sodium 220 mg [equivalent to naproxen 200 mg and sodium 20 mg] and pseudoephedrine hydrochloride 120 mg
Sudafed 12 Hour Pressure + Pain: Naproxen sodium 220 mg [equivalent to naproxen 200 mg and sodium 20 mg] and pseudoephedrine hydrochloride 120 mg

Naratriptan

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Tablet, Oral:
Generic: 1 mg, 2.5 mg

Natalizumab

DoD Uniform Formulary Outpatient Dosage Forms NOT COVERED

Concentrate, Intravenous [preservative free]:
Tysabri: 300 mg/15 mL (15 mL) [contains polysorbate 80]

Natamycin

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Suspension, Ophthalmic:
Natacyl: 5% (15 mL)

Nateglinide

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Tablet, Oral:
Generic: 60 mg, 120 mg

Naxitamab

DoD Uniform Formulary Outpatient Dosage Forms NOT COVERED

Solution, Intravenous [preservative free]:
Danyelza: Naxitamab-gqgk 4 mg/mL (10 mL)

Necitumumab

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Solution, Intravenous [preservative free]:
Portrazza: 800 mg/50 mL (50 mL) [contains polysorbate 80]

Nedocromil (Ophthalmic)

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Solution, Ophthalmic, as sodium:
Alocril: 2% (5 mL) [contains benzalkonium chloride]

Nefazodone

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Tablet, Oral, as hydrochloride:
Generic: 50 mg, 100 mg, 150 mg, 200 mg, 250 mg

Nelarabine

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Solution, Intravenous:
Arranon: 5 mg/mL (50 mL)

Nelfinavir

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Tablet, Oral:
Viracept: 250 mg, 625 mg

Neomycin

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Tablet, Oral, as sulfate:
Generic: 500 mg

Neomycin and Polymyxin B

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Solution, Irrigation:
Generic: Neomycin 40 mg and polymyxin sulfate B 200,000 units per 1 mL (1 mL, 20 mL)

Neomycin, Colistin, Hydrocortisone, and Thonzonium

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Suspension, otic [drops]:
Coly-Mycin S: Neomycin 0.33%, colistin 0.3%, hydrocortisone acetate 1%, and thonzonium bromide 0.05% (10 mL) [contains thimerosal]

Neomycin, Polymyxin B, and Dexamethasone

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Ointment, Ophthalmic:
Generic: Neomycin 3.5 mg, polymyxin B sulfate 10,000 units, and dexamethasone 0.1% per g (3.5 g)
Suspension, Ophthalmic [drops]:
Generic: Neomycin 3.5 mg, polymyxin B sulfate 10,000 units, and dexamethasone 0.1% per 1 mL (5 mL)

Neomycin, Polymyxin B, and Gramicidin

DoD Uniform Formulary Outpatient Dosage Forms BASIC CORE FORMULARY

Solution, Ophthalmic [drops]:
Generic: Neomycin 1.75 mg, polymyxin B 10,000 units, and gramicidin 0.025 mg per 1 mL (10 mL)

Neomycin, Polymyxin B, and Hydrocortisone (Ophthalmic)

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Suspension, Ophthalmic:
Generic: Neomycin 3.5 mg, polymyxin B 10,000 units, and hydrocortisone 1% (7.5 mL)

Neomycin, Polymyxin B, and Hydrocortisone (Otic)

DoD Uniform Formulary Outpatient Dosage Forms BASIC CORE FORMULARY

Solution, Otic:
Generic: Neomycin 3.5 mg, polymyxin B 10,000 units, and hydrocortisone 10 mg per 1 mL (10 mL)
Suspension, Otic:
Generic: Neomycin 3.5 mg, polymyxin B 10,000 units, and hydrocortisone 10 mg per 1 mL (10 mL)

Neomycin, Polymyxin B, and Hydrocortisone (Topical)

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Cream, External:
Cortisporin: Neomycin 3.5 mg, polymyxin B 10,000 units, and hydrocortisone 0.5% per g (7.5 g) [contains methylparaben, propylene glycol]

Neostigmine

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Solution, Injection, as methylsulfate:
Generic: 0.5 mg/mL (10 mL); 1 mg/mL (10 mL)
Solution, Intravenous, as methylsulfate:
Generic: 5 mg/10 mL (10 mL); 10 mg/10 mL (10 mL)
Solution Prefilled Syringe, Intravenous, as methylsulfate:
Generic: 4 mg/4 mL (4 mL); 5 mg/5 mL (5 mL)

Nepafenac

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Suspension, Ophthalmic:
Ilevro: 0.3% (1.7 mL, 3 mL) [contains benzalkonium chloride, edetate disodium, propylene glycol]
Nevanac: 0.1% (3 mL) [contains edetate disodium benzalkonium chloride]

Neratinib**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Tablet, Oral:
Nerlynx: 40 mg

Netarsudil**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution, Ophthalmic:
Rhopressa: 0.02% (2.5 mL) [contains benzalkonium chloride]

Netarsudil and Latanoprost**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution, Ophthalmic:
Rocklatan: Netarsudil dimesylate 0.02% and latanoprost 0.005% (2.5 mL)
[contains benzalkonium chloride]

Netupitant and Palonosetron**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Capsule, Oral:
Akyzео: Netupitant 300 mg and palonosetron 0.5 mg

Nevirapine**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Suspension, Oral:
Generic: 50 mg/5 mL (240 mL)
Tablet, Oral:
Generic: 200 mg
Tablet Extended Release 24 Hour, Oral:
Generic: 100 mg, 400 mg

Niacin**DoD Uniform Formulary Outpatient Dosage Forms****BASIC CORE FORMULARY**

Tablet Extended Release, Oral:
Niaspan: 500 mg, 750 mg, 1000 mg

UNIFORM FORMULARY

Capsule Extended Release, Oral:
Generic: 250 mg, 500 mg
Capsule Extended Release, Oral [preservative free]:
Generic: 250 mg, 500 mg
Powder, Oral:
Generic: (100 g, 1000 g)
Tablet, Oral:
Generic: 50 mg, 100 mg, 250 mg, 500 mg
Tablet, Oral [preservative free]:
Generic: 100 mg, 500 mg
Tablet Extended Release, Oral:
Generic: 500 mg, 750 mg, 1000 mg

Niacinamide**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Tablet, Oral:
Generic: 100 mg, 500 mg
Tablet, Oral [preservative free]:
Generic: 100 mg, 500 mg

NiCARdipine**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution, Intravenous, as hydrochloride:
Cardene IV: 20 mg (200 mL); 40 mg (200 mL)

NONFORMULARY

Capsule, Oral, as hydrochloride:
Generic: 20 mg, 30 mg
Solution, Intravenous, as hydrochloride:
Generic: 2.5 mg/mL (10 mL); 25 mg/250 mL in Dextrose 5% (250 mL)

Nicotine**DoD Uniform Formulary Outpatient Dosage Forms****BASIC CORE FORMULARY**

Gum, Mouth/Throat, as polacrilex:
Generic: 2 mg (20 ea, 40 ea, 50 ea, 100 ea, 110 ea); 4 mg (20 ea, 40 ea, 50 ea, 100 ea, 110 ea)
Patch 24 Hour, Transdermal:
Generic: 7 mg/24 hr (7 ea, 14 ea); 14 mg/24 hr (7 ea, 14 ea); 21 mg/24 hr (7 ea, 14 ea, 28 ea)

UNIFORM FORMULARY

Inhaler, Inhalation:
Nicotrol: 10 mg (168 ea) [contains menthol]
Kit, Transdermal:
Generic: 7 mg/24 hr (14s) & 14 mg/24 hr (14s) & 21 mg/24 hr (28s)

Lozenge, Mouth/Throat, as polacrilex:

Generic: 2 mg (24 ea, 27 ea); 4 mg (24 ea, 27 ea)
Solution, Nasal:
Nicotrol NS: 10 mg/mL (10 mL)

NIFedipine**DoD Uniform Formulary Outpatient Dosage Forms****BASIC CORE FORMULARY**

Tablet Extended Release 24 Hour, Oral:
Generic: 30 mg, 60 mg, 90 mg

UNIFORM FORMULARY

Capsule, Oral:
Generic: 10 mg, 20 mg

Nifurtimox**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Tablet, Oral:
Lampit: 30 mg, 120 mg [contains corn starch]

Nilotinib**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Capsule, Oral:
Tasigna: 150 mg, 200 mg

Nilutamide**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Tablet, Oral:
Generic: 150 mg

NiMODipine**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Capsule, Oral:
Generic: 30 mg
Solution, Oral:
Nymalize: 60 mg/20 mL (20 mL, 473 mL) [contains alcohol, usp, methylparaben, polyethylene glycol]

Nintedanib**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Capsule, Oral:
Ofev: 100 mg, 150 mg

Niraparib**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Capsule, Oral, as tosylate:
Zejula: 100 mg

Nitazoxanide**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Suspension Reconstituted, Oral:
Alinia: 100 mg/5 mL (60 mL) [contains sodium benzoate; strawberry flavor]
Tablet, Oral:
Alinia: 500 mg [contains corn starch, soybean lecithin]

Nitisinone**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Capsule, Oral:
Orfadin: 2 mg, 5 mg, 10 mg, 20 mg
Suspension, Oral:
Orfadin: 4 mg/mL (90 mL) [contains polysorbate 80, sodium benzoate]
Tablet, Oral:
Nityr: 2 mg, 5 mg, 10 mg

Nitrofurantoin**DoD Uniform Formulary Outpatient Dosage Forms****BASIC CORE FORMULARY**

Capsule, Oral [macrocrystal]:
Generic: 50 mg
Capsule, Oral [macrocrystal/monohydrate]:
Generic: 100 mg

UNIFORM FORMULARY

Capsule, Oral [macrocrystal]:
Generic: 25 mg, 100 mg
Suspension, Oral:
Generic: 25 mg/5 mL (230 mL, 240 mL)

NITROGLYCERIN

Nitroglycerin

DoD Uniform Formulary Outpatient Dosage Forms

BASIC CORE FORMULARY

Patch 24 Hour, Transdermal:

Generic: 0.1 mg/hour (30s); 0.2 mg/hour (30s); 0.4 mg/hour (30s); 0.6 mg/hour (30s)

Solution, Translingual:

Generic: 0.4 mg/spray (4.9 g, 12 g)

Tablet, Sublingual:

Generic: 0.4 mg

UNIFORM FORMULARY

Aerosol Solution, Translingual:

Generic: 400 mcg/spray (4.1 g, 8.5 g)

Capsule Extended Release, Oral:

Generic: 2.5 mg, 6.5 mg, 9 mg

Ointment, Rectal:

Rectiv: 0.4% (30 g) [contains propylene glycol]

Ointment, Transdermal:

Nitro-Bid: 2% (1 g, 30 g, 60 g)

Solution, Intravenous:

Generic: 25 mg (250 mL); 50 mg (250 mL, 500 mL); 100 mg (250 mL); 200 mg (500 mL); 5 mg/mL (10 mL)

Tablet, Sublingual:

Generic: 0.3 mg, 0.6 mg

NONFORMULARY

Packet, Sublingual:

GoNitro: 400 mcg (1 ea, 36 ea)

Nitroprusside

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Intravenous, as sodium:

Nitropress: 25 mg/mL (2 mL)

Solution, Intravenous, as sodium [preservative free]:

Nipride RTU: 50 mg/100 mL in NaCl 0.9% (100 mL)

Generic: 25 mg/mL (2 mL)

Nivolumab

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Intravenous [preservative free]:

Opdivo: 40 mg/4 mL (4 mL); 100 mg/10 mL (10 mL) [contains polysorbate 80]

Nizatidine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule, Oral:

Generic: 150 mg, 300 mg

Solution, Oral:

Generic: 15 mg/mL (480 mL)

Nonoxonyl 9

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Film, Vaginal:

VCF Vaginal Contraceptive: 28% (3 ea, 6 ea, 9 ea) [contains glycerin, polyvinyl alcohol]

Foam, Vaginal:

VCF Vaginal Contraceptive: 12.5% (17 g) [hormone free; contains benzoic acid, cetyl alcohol, methylparaben, propylene glycol]

Gel, Vaginal:

Options Conceptrol: 4% (2.55 g) [hormone free; contains methylparaben, propylene glycol]

Options Gynol II Contraceptive: 3% (81 g) [hormone free; contains methylparaben, propylene glycol]

Shur-Seal Contraceptive: 2% (24 ea)

VCF Vaginal Contraceptive: 4% (2.55 g) [hormone free; contains edetate trisodium, methylparaben, propylene glycol, sodium benzoate]

Miscellaneous, Vaginal:

Today Sponge: 1000 mg (3 ea) [contains benzoic acid, sodium metabisulfite]

Norepinephrine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Intravenous [strength expressed as base]:

Generic: 1 mg/mL (4 mL)

Solution, Intravenous [strength expressed as base, preservative free]:

Generic: 1 mg/mL (4 mL)

Norethindrone

DoD Uniform Formulary Outpatient Dosage Forms

BASIC CORE FORMULARY

Tablet, Oral:

Generic: 0.35 mg

UNIFORM FORMULARY

Tablet, Oral, as acetate:

Generic: 5 mg

Norethindrone and Mestranol

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, monophasic formulations:

Necon 1/50: Norethindrone 1 mg and mestranol 0.05 mg [21 light blue tablets and 7 white inactive tablets] (28s)

Nortriptyline

DoD Uniform Formulary Outpatient Dosage Forms

BASIC CORE FORMULARY

Capsule, Oral:

Generic: 10 mg, 25 mg, 50 mg

Solution, Oral:

Generic: 10 mg/5 mL (473 mL)

Nusinersen

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Intrathecal [preservative free]:

Spinraza: 12 mg/5 mL (5 mL)

Nutritional Formula, Enteral/Oral

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Liquid: Calcium and sodium caseinate, maltodextrin, sucrose, partially hydrogenated soy oil, soy lecithin

Powder: Amino acids, predigested carbohydrates, safflower oil

Nystatin and Triamcinolone

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Cream, External:

Generic: Nystatin 100,000 units and triamcinolone acetonide 0.1% (15 g, 30 g, 60 g)

Ointment, External:

Generic: Nystatin 100,000 units and triamcinolone acetonide 0.1% (15 g, 30 g, 60 g)

Nystatin (Oral)

DoD Uniform Formulary Outpatient Dosage Forms

BASIC CORE FORMULARY

Suspension, Mouth/Throat:

Generic: 100,000 units/mL (5 mL, 60 mL, 473 mL)

UNIFORM FORMULARY

Capsule, Oral [preservative free]:

Bio-Statin: 500,000 units, 1,000,000 units [dye free]

Powder, Oral:

Bio-Statin: (1 ea)

Tablet, Oral:

Generic: 500,000 units

Nystatin (Topical)

DoD Uniform Formulary Outpatient Dosage Forms

BASIC CORE FORMULARY

Cream, External:

Generic: 100,000 units/g (15 g, 30 g)

Ointment, External:

Generic: 100,000 units/g (15 g, 30 g)

UNIFORM FORMULARY

Powder, External:

Generic: 100,000 units/g (15 g, 30 g, 60 g)

Oatmeal (Colloidal)

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Cream, External:

Gold Bond Ultra Eczema: 2% (226 g)

Packet, External

Aveeno Soothing Bath: 8 ea

Obeticholic Acid

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:

Ocaliva: 5 mg, 10 mg

Obinutuzumab

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Intravenous [preservative free]:

Gazyva: 1000 mg/40 mL (40 mL)

Ocrelizumab

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Intravenous [preservative free]:

Ocrevus: 300 mg/10 mL (10 mL)

Ocriplasmin

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Intracocular [preservative free]:

Jetrea: 0.5 mg/0.2 mL (0.2 mL)

Octreotide

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Kit, Intramuscular:

SandoSTATIN LAR Depot: 10 mg, 20 mg, 30 mg

Solution, Injection:

Generic: 50 mcg/mL (1 mL); 100 mcg/mL (1 mL); 200 mcg/mL (5 mL); 1000 mcg/5 mL (5 mL); 500 mcg/mL (1 mL); 1000 mcg/mL (5 mL)

Solution, Injection [preservative free]:

Generic: 100 mcg/mL (1 mL); 500 mcg/mL (1 mL)

NONFORMULARY

Capsule Delayed Release, Oral, as acetate:

Mycapssa: 20 mg

Ofatumumab

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution Auto-injector, Subcutaneous [preservative free]:

Kesimpta: 20 mg/0.4 mL (0.4 mL) [contains disodium edta, polysorbate 80]

NOT COVERED

Concentrate, Intravenous [preservative free]:

Arzerra: 100 mg/5 mL (5 mL); 1000 mg/50 mL (50 mL) [contains edetate disodium, mouse (murine) and/or hamster protein, polysorbate 80]

Ofloxacin (Ophthalmic)

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Ophthalmic:

Generic: 0.3% (5 mL, 10 mL)

Ofloxacin (Otic)

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Otic:

Generic: 0.3% (5 mL, 10 mL)

Ofloxacin (Systemic)

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:

Generic: 300 mg, 400 mg

OLANzapine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution Reconstituted, Intramuscular:

Generic: 10 mg (1 ea)

Suspension Reconstituted, Intramuscular:

ZyPREXA Relprevv: 210 mg (1 ea); 300 mg (1 ea); 405 mg (1 ea) [contains polysorbate 80]

Tablet, Oral:

Generic: 2.5 mg, 5 mg, 7.5 mg, 10 mg, 15 mg, 20 mg

Tablet Dispersible, Oral:

Generic: 5 mg, 10 mg, 15 mg, 20 mg

Olanzapine and Fluoxetine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule, Oral:

Generic 3/25: Olanzapine 3 mg and fluoxetine 25 mg
 Generic 6/25: Olanzapine 6 mg and fluoxetine 25 mg
 Generic 6/50: Olanzapine 6 mg and fluoxetine 50 mg
 Generic 12/25: Olanzapine 12 mg and fluoxetine 25 mg
 Generic 12/50: Olanzapine 12 mg and fluoxetine 50 mg

Olanzapine and Samidorphan

Olaparib

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule, Oral:

Lynparza: 50 mg

Olaratumab

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Intravenous [preservative free]:

Lartruvo: 190 mg/19 mL (19 mL); 500 mg/50 mL (50 mL)

Olmesartan

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral, as medoxomil:

Generic: 5 mg, 20 mg, 40 mg

Olmesartan and Hydrochlorothiazide

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:

20/12.5: Olmesartan 20 mg and hydrochlorothiazide 12.5 mg

40/12.5: Olmesartan medoxomil 40 mg and hydrochlorothiazide 12.5 mg

40/25: Olmesartan medoxomil 40 mg and hydrochlorothiazide 25 mg

Olodaterol

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Aerosol Solution, Inhalation:

Striverdi Respimat: 2.5 mcg/actuation (4 g) [contains benzalkonium chloride, edetate disodium]

Olopatadine (Ophthalmic)

DoD Uniform Formulary Outpatient Dosage Forms

BASIC CORE FORMULARY

Solution, Ophthalmic:

Patanol: 0.1% (5 mL) [contains benzalkonium chloride]

Generic: 0.1% (5 mL)

UNIFORM FORMULARY

Solution, Ophthalmic:

Pazeo: 0.7% (2.5 mL) [contains benzalkonium chloride]

NOT COVERED

Solution, Ophthalmic:

Pataday: 0.2% (2.5 mL) [contains benzalkonium chloride, edetate disodium]

Generic: 0.2% (2.5 mL)

Oisalazine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Aerosol Solution, Inhalation:

Striverdi Respimat: 2.5 mcg/actuation (4 g) [contains benzalkonium chloride, edetate disodium]

Omacetaxine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution Reconstituted, Subcutaneous, as mepesuccinate [preservative free]:

Synribo: 3.5 mg (1 ea)

Omalizumab

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution Reconstituted, Subcutaneous [preservative free]:

Xolair: 150 mg (1 ea)

Ombitasvir, Paritaprevir, and Ritonavir

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:

Technivie: Ombitasvir 12.5 mg, paritaprevir 75 mg, and ritonavir 50 mg

Ombitasvir, Paritaprevir, Ritonavir, and Dasabuvir

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Combination package:

Viekira Pak [28 day supply]:

Tablet, oral: Ombitasvir 12.5 mg, paritaprevir 75 mg, and ritonavir 50 mg (56s)

Tablet, oral: Dasabuvir 250 mg (56s)

Tablet Extended Release, Oral:

Viekira XR: Ombitasvir 8.33 mg, paritaprevir 50 mg, ritonavir 33.33 mg, and dasabuvir 200 mg

Omega-3 Fatty Acids

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule, Oral:

Generic: 300 mg, 500 mg, 1000 mg, 1 g

Capsule, Oral [preservative free]:

Generic: 200 mg, 1000 mg, 1200 mg

Capsule Delayed Release, Oral:

Pro Nutrients Omega 3: 332.5 mg

Generic: 1000 mg

Tablet Chewable, Oral:

Omega-3 IQ: 240 mg [fruit flavor]

Omeprazole

DoD Uniform Formulary Outpatient Dosage Forms

BASIC CORE FORMULARY

Capsule Delayed Release, Oral:

Generic: 10 mg, 20 mg, 40 mg

OMEPRAZOLE

UNIFORM FORMULARY

Capsule Delayed Release, Oral, as magnesium [strength expressed as base]:
Generic: 20 mg
Packet, Oral, as magnesium [strength expressed as base]:
PriLOSEC: 2.5 mg (30 ea); 10 mg (30 ea)
Suspension, Oral:
First-Omeprazole: 2 mg/mL (90 mL, 150 mL, 300 mL) [contains benzyl alcohol, fd&c red #40, saccharin sodium; strawberry flavor]
Omeprazole+Syrspend SF Alka: 2 mg/mL (120 mL, 240 mL)
Omeprazole+Syrspend SF Alka: 2 mg/mL (100 mL) [cherry flavor]
Tablet Delayed Release, Oral:
Generic: 20 mg
Tablet Delayed Release, Oral, as magnesium [strength expressed as base]:
PriLOSEC OTC: 20 mg

Omeprazole, Clarithromycin, and Amoxicillin

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Combination package, oral [each administration card contains]:
Omeclamox-Pak:
Capsule, delayed release: Omeprazole: 20 mg (2s)
Tablet: Clarithromycin: 500 mg (2s)
Capsule: Amoxicillin: 500 mg (4s) [contains sodium \leq 0.0052 mEq (0.119 mg)/capsule]

OnabotulinumtoxinA

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution Reconstituted, Injection:
Botox: 100 units (1 ea)
Solution Reconstituted, Injection [preservative free]:
Botox: 200 units (1 ea)
Solution Reconstituted, Intramuscular:
Botox Cosmetic: 100 units (1 ea) [contains albumin human]
Solution Reconstituted, Intramuscular [preservative free]:
Botox Cosmetic: 50 units (1 ea) [contains albumin human]

Ondansetron

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Injection, as hydrochloride [strength expressed as base]:
Generic: 4 mg/2 mL (2 mL); 40 mg/20 mL (20 mL)
Solution, Injection, as hydrochloride [strength expressed as base, preservative free]:
Generic: 4 mg/2 mL (2 mL)
Solution, Intravenous, as hydrochloride [strength expressed as base]:
Generic: 12 mg/50 mL in NaCl 0.9% (50 mL); 16 mg/50 mL in NaCl 0.9% (50 mL); 8 mg/50 mL in NaCl 0.9% (50 mL)
Solution, Oral, as hydrochloride [strength expressed as base]:
Generic: 4 mg/5 mL (50 mL)
Tablet, Oral:
Generic: 24 mg
Tablet, Oral, as hydrochloride [strength expressed as base]:
Generic: 4 mg, 8 mg
Tablet Dispersible, Oral:
Generic: 4 mg, 8 mg
NONFORMULARY
Film, Oral:
Zuplenz: 4 mg (1 ea, 10 ea, 30 ea); 8 mg (1 ea, 10 ea, 30 ea)

Ophthalmic Irrigant Mixture

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Ophthalmic:
Generic: 15 mL, 30 mL, 120 mL

Opicapone

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule, Oral:
Ongentys: 50 mg

Opium Tincture

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tincture, Oral:
Generic: 10 mg/mL (1%) (118 mL, 473 mL)

Oral Rehydration Therapy

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Packet, Oral [preservative free]:
DripDrop: (4 ea) [no artificial color(s), no artificial flavor(s); berry flavor]
DripDrop: (4 ea) [no artificial color(s), no artificial flavor(s); lemon flavor]

Oritavancin

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution Reconstituted, Intravenous:
Orbactiv: 400 mg (1 ea, 3 ea)

Orlistat

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule, Oral:
Alli: 60 mg

NONFORMULARY

Capsule, Oral:
Xenical: 120 mg

Orphenadrine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Injection, as citrate:
Generic: 30 mg/mL (2 mL)
Solution, Injection, as citrate [preservative free]:
Generic: 30 mg/mL (2 mL)
Tablet Extended Release 12 Hour, Oral, as citrate:
Generic: 100 mg

Orphenadrine, Aspirin, and Caffeine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:
Norgesic Forte: Orphenadrine citrate 50 mg, aspirin 770 mg, and caffeine 60 mg
Orphenesic Forte: Orphenadrine citrate 50 mg, aspirin 770 mg, and caffeine 60 mg
Generic: Orphenadrine citrate 50 mg, aspirin 770 mg, and caffeine 60 mg

Oseltamivir

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule, Oral, as phosphate:
Generic: 30 mg, 45 mg, 75 mg
Suspension Reconstituted, Oral, as base:
Tamiflu: 6 mg/mL (60 mL) [contains saccharin sodium, sodium benzoate, sorbitol; tutti-frutti flavor]

Osilodrostat

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:
Isturisa: 1 mg, 5 mg, 10 mg

Osimertinib

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:
Tagrisso: 40 mg, 80 mg

Ospemifene

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:
Osphena: 60 mg

Oxacillin

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Intravenous:
Bactocill in Dextrose: 1 g/50 mL (50 mL); 2 g/50 mL (50 mL)
Solution Reconstituted, Injection:
Generic: 1 g (1 ea); 2 g (1 ea); 10 g (1 ea)
Solution Reconstituted, Injection [preservative free]:
Generic: 1 g (1 ea); 2 g (1 ea); 10 g (1 ea)

Oxaliplatin

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Intravenous [preservative free]:
Generic: 50 mg/10 mL (10 mL); 100 mg/20 mL (20 mL)
Solution Reconstituted, Intravenous [preservative free]:
Generic: 50 mg (1 ea); 100 mg (1 ea)

Oxandrolone

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:
Generic: 2.5 mg, 10 mg
NONFORMULARY
Tablet, Oral:
Oxandrin: 2.5 mg, 10 mg

Oxaprozin

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:
Generic: 600 mg

Oxazepam**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Capsule, Oral:

Generic: 10 mg, 15 mg, 30 mg

Oxcarbazepine**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Suspension, Oral:

Generic: 300 mg/5 mL (250 mL)

Tablet, Oral:

Generic: 150 mg, 300 mg, 600 mg

Tablet Extended Release 24 Hour, Oral:

Oxtellar XR: 150 mg, 300 mg, 600 mg

Oxybate Salts (Calcium, Magnesium, Potassium, and Sodium)**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution, Oral:

Xywav: 500 mg/mL (180 mL) [barley free, gluten free, rye free, wheat free]

Oxybutynin**DoD Uniform Formulary Outpatient Dosage Forms****BASIC CORE FORMULARY**

Tablet Extended Release 24 Hour, Oral, as chloride:

Generic: 5 mg, 10 mg, 15 mg

UNIFORM FORMULARY

Syrup, Oral, as chloride:

Generic: 5 mg/5 mL (473 mL)

Tablet, Oral, as chloride:

Generic: 5 mg

NONFORMULARY

Gel, Transdermal, as chloride:

Gelnique: 10% (1 g) [contains alcohol, usp]

Patch Twice Weekly, Transdermal:

Oxytrol: 3.9 mg/24 hr (1 ea, 2 ea, 4 ea, 8 ea)

Oxytrol For Women: 3.9 mg/24 hr (4 ea, 8 ea)

Oxychlorosene**DoD Uniform Formulary Outpatient Dosage Forms****NOT COVERED**

Powder for solution, topical, as sodium:

Clorpactin WCS-90: 2 g/bottle

OxyCODONE**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Capsule, Oral, as hydrochloride:

Generic: 5 mg

Concentrate, Oral, as hydrochloride:

Generic: 100 mg/5 mL (15 mL, 30 mL)

Solution, Oral, as hydrochloride:

Generic: 5 mg/5 mL (5 mL, 15 mL, 473 mL, 500 mL)

Tablet, Oral, as hydrochloride:

Generic: 5 mg, 10 mg, 15 mg, 20 mg, 30 mg

Tablet Abuse-Deterrent, Oral, as hydrochloride:

Oxaydo: 5 mg, 7.5 mg

Tablet ER 12 Hour Abuse-Deterrent, Oral, as hydrochloride:

Generic: 10 mg, 15 mg, 20 mg, 30 mg, 40 mg, 60 mg, 80 mg

NONFORMULARY

Capsule ER 12 Hour Abuse-Deterrent, Oral:

Xtampza ER: 9 mg (100 ea); 13.5 mg (100 ea); 18 mg (100 ea); 27 mg (100 ea); 36 mg (100 ea)

Tablet Abuse-Deterrent, Oral:

RoxyBond: 15 mg, 30 mg

Oxycodone and Acetaminophen**DoD Uniform Formulary Outpatient Dosage Forms****BASIC CORE FORMULARY**

Tablet, Oral:

Generic: 5/325: Oxycodone hydrochloride 5 mg and acetaminophen 325 mg

UNIFORM FORMULARY

Solution, Oral:

Oxycodone hydrochloride 5 mg and acetaminophen 325 mg per 5 mL (500 mL)

Tablet, Oral:

2.5/325: Oxycodone hydrochloride 2.5 mg and acetaminophen 325 mg;

7.5/325: Oxycodone hydrochloride 7.5 mg and acetaminophen 325 mg

10/325: Oxycodone hydrochloride 10 mg and acetaminophen 325 mg

Tablet, Extended Release, Oral:

Xartemis XR: Oxycodone hydrochloride 7.5 mg and acetaminophen 325 mg

Oxycodone and Aspirin**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Tablet, Oral:

Generic: Oxycodone hydrochloride 4.8355 mg and aspirin 325 mg

Oxycodone and Ibuprofen**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Tablet, Oral:

Oxycodone hydrochloride 5 mg and ibuprofen 400 mg

Oxymetazoline (Nasal)**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution, Nasal, as hydrochloride:

12 Hour Nasal Spray: 0.05% (15 mL, 30 mL)

Afrin Nasal Spray: 0.05% (15 mL, 20 mL, 30 mL)

Dristan Spray: 0.05% (15 mL) [contains benzalkonium chloride, disodium edta]

Long Lasting Nasal Spray: 0.05% (30 mL) [contains benzalkonium chloride]

Mucinex Nasal Spray: 0.05% (22 mL)

Nasal Decongestant Spray: 0.05% (15 mL, 30 mL) [contains benzalkonium chloride]

Nasal Spray 12 Hour: 0.05% (30 mL)

Neo-Syneprine 12 Hour Spray: 0.05% (15 mL)

QlearQuil: 0.05% (15 mL) [contains benzalkonium chloride, disodium edta]

Sinus Nasal Spray: 0.05% (30 mL)

Vicks: 0.05% (15 mL)

Generic: 0.05% (30 mL)

Oxymetazoline (Ophthalmic)**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution, Ophthalmic, as hydrochloride [preservative free]:

Upneeq: 0.1% (30 ea)

Oxymetholone**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Tablet, Oral:

Anadrol-50: 50 mg [scored]

OxyMORphone**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution, Injection, as hydrochloride:

Opana: 1 mg/mL (1 mL)

Tablet, Oral, as hydrochloride:

Generic: 5 mg, 10 mg

Tablet ER 12 Hour Abuse-Deterrent, Oral, as hydrochloride:

Opana ER: 5 mg, 7.5 mg, 10 mg, 15 mg, 20 mg, 30 mg, 40 mg

Tablet Extended Release 12 Hour, Oral, as hydrochloride:

Generic: 5 mg, 7.5 mg, 10 mg, 15 mg, 20 mg, 30 mg, 40 mg

Oxytocin**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution, Injection:

Generic: 10 units/mL (1 mL, 10 mL, 30 mL)

Ozanimod**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Capsule Therapy Pack, Oral:

Zeposia 7-Day Starter Pack: Ozanimod 0.23 mg (4 capsules) and ozanimod 0.46 (3 capsules) (7 ea)

Zeposia Starter Kit: Ozanimod 0.23 mg (4 capsules), ozanimod 0.46 mg (3 capsules), and ozanimod 0.92 mg (30 capsules) (37 ea)

PACLitaxel (Conventional)**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Concentrate, Intravenous:

Generic: 100 mg/16.7 mL (16.7 mL); 30 mg/5 mL (5 mL); 150 mg/25 mL (25 mL); 300 mg/50 mL (50 mL)

Concentrate, Intravenous [preservative free]:

Generic: 100 mg/16.7 mL (16.7 mL); 30 mg/5 mL (5 mL); 300 mg/50 mL (50 mL)

PACLitaxel (Protein Bound)**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Suspension Reconstituted, Intravenous:

Abraxane: 100 mg (1 ea)

Palbociclib**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Capsule, Oral:

Ibrance: 75 mg, 100 mg, 125 mg

PALIPERIDONE

Paliperidone

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Suspension, Intramuscular, as palmitate:

Invega Sustenna: 39 mg/0.25 mL (0.25 mL); 78 mg/0.5 mL (0.5 mL); 117 mg/0.75 mL (0.75 mL); 156 mg/mL (1 mL); 234 mg/1.5 mL (1.5 mL) [contains polyethylene glycol]

Invega Trinza: 410 mg/1.315 mL (1.315 mL); 273 mg/0.875 mL (0.875 mL); 546 mg/1.75 mL (1.75 mL); 819 mg/2.625 mL (2.625 mL) [contains polyethylene glycol]

Tablet Extended Release 24 Hour, Oral:

Generic: 1.5 mg, 3 mg, 6 mg, 9 mg

Palivizumab

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Intramuscular [preservative free]:

Synagis: 50 mg/0.5 mL (0.5 mL); 100 mg/mL (1 mL) [contains glycine, histidine]

Palonosetron

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Intravenous:

Aloxi: 0.25 mg/5 mL (5 mL) [contains edetate disodium]

Pamidronate

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Intravenous, as disodium:

Generic: 30 mg/10 mL (10 mL); 90 mg/10 mL (10 mL)

Solution, Intravenous, as disodium [preservative free]:

Generic: 6 mg/mL (10 mL)

Solution Reconstituted, Intravenous, as disodium:

Generic: 30 mg (1 ea); 90 mg (1 ea)

Pancrelipase

DoD Uniform Formulary Outpatient Dosage Forms

BASIC CORE FORMULARY

Capsule, Delayed Release, Enteric Coated Microspheres, Oral [porcine derived]:

Creon: Lipase 3000 USP units, protease 9500 USP units, and amylase 15,000 USP units

Creon: Lipase 6000 USP units, protease 19,000 USP units, and amylase 30,000 USP units

Creon: Lipase 12,000 USP units, protease 38,000 USP units, and amylase 60,000 USP units

Creon: Lipase 36,000 USP units, protease 114,000 USP units, and amylase 180,000 USP units

UNIFORM FORMULARY

Tablet, Oral [porcine derived]:

Viokace: Lipase 10,440 USP units, protease 39,150 USP units, and amylase 39,150 USP units

Viokace: Lipase 20,880 USP units, protease 78,300 USP units, and amylase 78,300 USP units

NONFORMULARY

Capsule, delayed release:

Pancreaze; Pertzye; Ultresa; Zenpep

Pancuronium

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Intravenous, as bromide:

Generic: 1 mg/mL (10 mL); 2 mg/mL (2 mL, 5 mL)

Panimumab

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Intravenous [preservative free]:

Vectibix: 100 mg/5 mL (5 mL); 400 mg/20 mL (20 mL)

Panobinostat

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule, Oral:

Farydak: 10 mg, 15 mg, 20 mg

Pantoprazole

DoD Uniform Formulary Outpatient Dosage Forms

BASIC CORE FORMULARY

Packet, Oral:

Generic: 40 mg (1 ea, 30 ea)

Tablet Delayed Release, Oral:

Generic: 20 mg, 40 mg

UNIFORM FORMULARY

Packet, Oral:

Protonix: 40 mg (1 ea, 30 ea) [contains polysorbate 80]

Tablet Delayed Release, Oral:

Protonix: 20 mg, 40 mg

Papaverine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Injection, as hydrochloride:

Generic: 30 mg/mL (2 mL, 10 mL)

Papillomavirus (9-Valent) Vaccine (Human, Recombinant)

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Suspension, Intramuscular [preservative free]:

Gardasil 9: (0.5 mL) [contains polysorbate 80, yeast extract]

Suspension Prefilled Syringe, Intramuscular [preservative free]:

Gardasil 9: (0.5 mL) [contains polysorbate 80, yeast extract]

Papillomavirus (Types 6, 11, 16, 18) Vaccine (Human, Recombinant)

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Injection, suspension [preservative free]:

Gardasil: HPV 6 L1 protein 20 mcg, HPV 11 L1 protein 40 mcg, HPV 16 L1 protein 40 mcg, and HPV 18 L1 protein 20 mcg per 0.5 mL (0.5 mL) [contains aluminum, polysorbate 80; manufactured using *S. cerevisiae* (baker's yeast)]

Parathyroid Hormone

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Cartridge, Subcutaneous:

Natpara: 25 mcg (1 ea); 50 mcg (1 ea); 75 mcg (1 ea); 100 mcg (1 ea) [contains metacresol]

Paregoric

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tincture, Oral:

Generic: 2 mg/5 mL (473 mL)

Paricalcitol

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule, Oral:

Generic: 1 mcg, 2 mcg, 4 mcg

Solution, Intravenous:

Generic: 2 mcg/mL (1 mL); 5 mcg/mL (1 mL, 2 mL)

Paromomycin

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule, Oral:

Generic: 250 mg

PARoxetine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule, Oral, as mesylate [strength expressed as base]:

Brisdelle: 7.5 mg

Suspension, Oral, as hydrochloride [strength expressed as base]:

Paxil: 10 mg/5 mL (250 mL) [contains methylparaben, propylene glycol, propylparaben, saccharin sodium; orange flavor]

Tablet, Oral, as hydrochloride [strength expressed as base]:

Generic: 10 mg, 20 mg, 30 mg, 40 mg

Tablet, Oral, as mesylate [strength expressed as base]:

Pexeva: 10 mg, 20 mg, 30 mg, 40 mg

Tablet Extended Release 24 Hour, Oral, as hydrochloride [strength expressed as base]:

Generic: 12.5 mg, 25 mg, 37.5 mg

Pasireotide

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Subcutaneous:

Signifor: 0.3 mg/mL (1 mL); 0.6 mg/mL (1 mL); 0.9 mg/mL (1 mL)

Suspension Reconstituted ER, Intramuscular, as pamoate [strength expressed as base]:

Signifor LAR: 20 mg (1 ea); 40 mg (1 ea); 60 mg (1 ea)

Patiromer

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Packet, Oral:

Veltassa: 8.4 g (1 ea, 4 ea, 30 ea); 16.8 g (1 ea, 30 ea); 25.2 g (1 ea, 30 ea)

Patisiran

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Intravenous [preservative free]:

Onpattro: 10 mg/5 mL (5 mL)

PAZOPanib**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Tablet, Oral:
Votrient: 200 mg

Pegademase Bovine**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Solution, Intramuscular:
Adagen: 250 units/mL (1.5 mL)

Pegaptanib**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Solution, Intraocular [preservative free]:
Macugen: 0.3 mg (0.09 mL)

Pegaspargase**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Solution, Injection [preservative free]:
Oncaspar: 750 units/mL (5 mL)

Pegfilgrastim**DoD Uniform Formulary Outpatient Dosage Forms
BASIC CORE FORMULARY**

Solution Prefilled Syringe, Subcutaneous [preservative free]:
Udenyca: pegfilgrastim-cbqv 6 mg/0.6 mL (0.6 mL)

UNIFORM FORMULARY

Prefilled Syringe Kit, Subcutaneous [preservative free]:
Neulasta Onpro: 6 mg/0.6 mL (0.6 mL)

Solution Prefilled Syringe, Subcutaneous [preservative free]:
Fulphila: 6 mg/0.6 mL (0.6 mL)

Ziextenzo: pegfilgrastim-bmez 6 mg/0.6 mL (0.6 mL)

Solution, Subcutaneous [preservative free]:
Neulasta: 6 mg/0.6 mL (0.6 mL)

NONFORMULARY

Solution Prefilled Syringe, Subcutaneous, as pegfilgrastim-jmdb [preservative free]:
Nyvepria: pegfilgrastim-apgf 6 mg/0.6 mL (0.6 mL)

Peginterferon Alfa-2a**DoD Uniform Formulary Outpatient Dosage Forms
Extended Core Formulary**

Solution, Subcutaneous [preservative free]:

Pegasys: 180 mcg/0.5 mL [contains benzyl alcohol]

Pegasys: 180 mcg/mL (0.5 mg, 1 mL) [contains benzyl alcohol, polysorbate 80]

UNIFORM FORMULARY

Solution, Subcutaneous [preservative free]:

Pegasys ProClick: 135 mcg/0.5 mL (0.5 mL); 180 mcg/0.5 mL (0.5 mL) [contains benzyl alcohol, polysorbate 80]

Peginterferon Alfa-2b**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Kit, Subcutaneous [preservative free]:

Peg-Intron Redipen: 50 mcg/0.5 mL, 80 mcg/0.5 mL, 120 mcg/0.5 mL, 150 mcg/0.5 mL

Peg-Intron Redipen Pak 4: 120 mcg/0.5 mL

PegIntron: 50 mcg/0.5 mL, 80 mcg/0.5 mL, 120 mcg/0.5 mL, 150 mcg/0.5 mL [contains polysorbate 80]

Sylatron: 200 mcg, 300 mcg, 600 mcg [contains polysorbate 80]

Pegloticase**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Solution, Intravenous [preservative free]:
Krystexxa: 8 mg/mL (1 mL)

Pegvaliase**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Solution Prefilled Syringe, Subcutaneous [preservative free]:

Palynziq: 2.5 mg/0.5 mL (0.5 mL); 10 mg/0.5 mL (0.5 mL); 20 mg/mL (1 mL)

Pegvisomant**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Solution Reconstituted, Subcutaneous:

Somavert: 10 mg (1 ea); 15 mg (1 ea); 20 mg (1 ea); 25 mg (1 ea); 30 mg (1 ea)

Pembrolizumab**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Solution, Intravenous [preservative free]:
Keytruda: 100 mg/4 mL (4 mL) [contains polysorbate 80]

Solution Reconstituted, Intravenous [preservative free]:
Keytruda: 50 mg (1 ea) [contains polysorbate 80]

PEMEtrexed**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Solution Reconstituted, Intravenous:

Alimta: 100 mg (1 ea); 500 mg (1 ea)

Pemigatinib**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Tablet, Oral:

Pemazyre: 4.5 mg, 9 mg, 13.5 mg

Penciclovir**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Cream, External:

Denavir: 1% (5 g) [contains cetostearyl alcohol, propylene glycol]

PenicillAMINE**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Capsule, Oral:

Cuprimine: 250 mg

Tablet, Oral:

Depen Titratabs: 250 mg [scored]

Penicillin V Potassium**DoD Uniform Formulary Outpatient Dosage Forms
BASIC CORE FORMULARY**

Solution Reconstituted, Oral:

Generic: 125 mg/5 mL (100 mL, 200 mL); 250 mg/5 mL (100 mL, 200 mL)

Tablet, Oral:

Generic: 250 mg, 500 mg

Penicillin G Benzathine**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Suspension, Intramuscular:

Bicillin L-A: 600,000 units/mL (1 mL); 1,200,000 units/2 mL (2 mL); 2,400,000 units/4 mL (4 mL) [contains methylparaben, propylparaben]

Penicillin G Benzathine and Penicillin G Procaine**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Injection, suspension [prefilled syringe]:

Bicillin C-R:

1,200,000 units: Penicillin G benzathine 600,000 units and penicillin G procaine 600,000 units per 2 mL (2 mL)

Bicillin C-R 900/300: 1,200,000 units: Penicillin G benzathine 900,000 units and penicillin G procaine 300,000 units per 2 mL (2 mL)

Penicillin G (Parenteral/Aqueous)**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Solution, Intravenous, as potassium:

Generic: 20,000 units/mL (50 mL); 40,000 units/mL (50 mL); 60,000 units/mL (50 mL)

Solution Reconstituted, Injection, as potassium:

Generic: 5,000,000 units (1 ea); 20,000,000 units (1 ea)

Solution Reconstituted, Injection, as potassium [preservative free]:

Generic: 20,000,000 units (1 ea)

Solution Reconstituted, Injection, as sodium:

Generic: 5,000,000 units (1 ea)

Penicillin G Procaine**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Suspension, Intramuscular:

Generic: 600,000 units/mL (1 mL, 2 mL)

Pentafluoropropane and Tetrafluoroethane**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Aerosol, spray, topical:

Gebauer's Spray and Stretch: Pentafluoropropane 95% and tetrafluoroethane 5% (103.5 mL) [available in fine stream spray]

Gebauer's Pain Ease: Pentafluoropropane 95% and tetrafluoroethane 5% (30 mL, 103.5 mL) [available in mist spray or medium stream spray]

Gebauer's Instant Ice [OTC]: Pentafluoropropane 95% and tetrafluoroethane 5% (103.5 mL) [available in mist spray or stream spray]

Pentamidine (Oral Inhalation)**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Solution Reconstituted, Inhalation, as isethionate:

Nebupent: 300 mg (1 ea)

PENTAMIDINE (SYSTEMIC)

Pentamidine (Systemic)

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Solution Reconstituted, Injection, as isethionate:
Pentam: 300 mg (1 ea)

Pentazocine

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Solution, Injection:
Talwin: 30 mg/mL (1 mL)
Talwin: 30 mg/mL (10 mL) [contains methylparaben, sodium bisulfite]

Pentazocine and Naloxone

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Tablet, Oral:
Generic: Pentazocine 50 mg and naloxone 0.5 mg

Pentetate Indium Disodium In 111

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Solution, Intrathecal:
Generic: (1.5 mL)

PENTobarbital

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Solution, Injection, as sodium:
Nembutal: 50 mg/mL (20 mL, 50 mL) [latex free; contains alcohol, usp, propylene glycol]

Pentosan Polysulfate Sodium

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Capsule, Oral:
Elmiron: 100 mg

Pentostatin

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Solution Reconstituted, Intravenous:
Nipent: 10 mg (1 ea)

Pentoxifylline

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Tablet Extended Release, Oral:
Generic: 400 mg

Peramivir

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Solution, Intravenous [preservative free]:
Rapivab: 200 mg/20 mL (20 mL)

Perampanel

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Suspension, Oral:
Fycompa: 0.5 mg/mL (340 mL) [contains sodium benzoate]
Tablet, Oral:
Fycompa: 2 mg, 4 mg, 6 mg, 8 mg, 10 mg, 12 mg

Perflutren Lipid Microspheres

DoD Uniform Formulary Outpatient Dosage Forms

Solution, Injection [preservative free]:
OFP 6.52 mg/mL and lipid blend 0.75 mg/mL (2 mL) [following activation, forms a suspension containing perflutren lipid microspheres 1.2×10^{10} /mL and OFP 1.1 mg/mL]

Perflutren Protein Type A

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Injection, suspension [preservative free]:
Optison: Perflutren 0.11-0.33 mg and protein-type A microspheres $5-8 \times 10^8$ per mL (3 mL) [contains human albumin 10 mg/mL]

Perindopril

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Tablet, Oral, as erbumine:
Generic: 2 mg, 4 mg, 8 mg

Perindopril and Amlodipine

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Tablet, Oral:
Prestalia: Perindopril arginine 3.5 mg and amlodipine 2.5 mg
Prestalia: Perindopril arginine 7 mg and amlodipine 5 mg

Prestalia: Perindopril arginine 14 mg and amlodipine 10 mg

Peritoneal Dialysis Solution

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Solution, Intraperitoneal:
Delflex-LC/1.5% Dextrose: 346 mOsm/L (2000 mL, 3000 mL, 5000 mL)
Delflex-LC/4.25% Dextrose: 483 mOsm/L (2000 mL, 3000 mL, 5000 mL)
Dianeal Low Calcium/1.5% Dex: 344 mOsm/L (2000 mL, 3000 mL, 5000 mL, 6000 mL)
Dianeal Low Calcium/2.5% Dex: 395 mOsm/L (2000 mL, 3000 mL, 5000 mL, 6000 mL)
Dianeal Low Calcium/4.25% Dex: 483 mOsm/L (2000 mL, 3000 mL, 5000 mL, 6000 mL)
Dianeal PD-2/1.5% Dextrose: 346 mOsm/L (1000 mL, 2000 mL, 3000 mL, 5000 mL, 6000 mL)
Dianeal PD-2/2.5% Dextrose: 396 mOsm/L (1000 mL, 2000 mL, 3000 mL, 5000 mL, 6000 mL)
Dianeal PD-2/4.25% Dextrose: 485 mOsm/L (1000 mL, 2000 mL, 3000 mL, 5000 mL, 6000 mL)
UltraBag/Dianeal PD-2/1.5% Dex: 346 mOsm/L (2000 mL, 2500 mL, 3000 mL)
UltraBag/Dianeal PD-2/2.5% Dex: 396 mOsm/L (2000 mL, 2500 mL, 3000 mL)
UltraBag/Dianeal PD-2/4.25% Dex: 485 mOsm/L (2000 mL, 2500 mL, 3000 mL)
UltraBag/Dianeal/1.5% Dextrose: 344 mOsm/L (1500 mL, 2000 mL, 2500 mL, 3000 mL)
UltraBag/Dianeal/2.5% Dextrose: 395 mOsm/L (1500 mL, 2000 mL, 2500 mL, 3000 mL)
UltraBag/Dianeal/4.25% Dex: 483 mOsm/L (1500 mL, 2000 mL, 2500 mL, 3000 mL)

Permethrin

DoD Uniform Formulary Outpatient Dosage Forms BASIC CORE FORMULARY

Cream, External:
Generic: 5% (60 g)

Perphenazine

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Tablet, Oral:
Generic: 2 mg, 4 mg, 8 mg, 16 mg

Pertuzumab

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Solution, Intravenous [preservative free]:
Perjeta: 420 mg/14 mL (14 mL) [contains mouse (murine) and/or hamster protein]

Phenazopyridine

DoD Uniform Formulary Outpatient Dosage Forms BASIC CORE FORMULARY

Tablet, Oral, as hydrochloride:
Generic: 100 mg, 200 mg

UNIFORM FORMULARY

Tablet, Oral, as hydrochloride:
Baridium: 97.2 mg
Urinary Pain Relief: 95 mg
Generic: 95 mg

Phendimetrazine

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Capsule Extended Release 24 Hour, Oral, as tartrate:
Generic: 105 mg
Tablet, Oral, as tartrate:
Generic: 35 mg

Phenelzine

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Tablet, Oral:
Generic: 15 mg

PHENobarbital

DoD Uniform Formulary Outpatient Dosage Forms BASIC CORE FORMULARY

Elixir, Oral:
Generic: 20 mg/5 mL (473 mL)
Solution, Oral:
Generic: 20 mg/5 mL (473 mL)
Tablet, Oral:
Generic: 15 mg, 16.2 mg, 30 mg, 32.4 mg, 60 mg, 64.8 mg, 97.2 mg, 100 mg

UNIFORM FORMULARY

Solution, Injection, as sodium:
Generic: 65 mg/mL (1 mL); 130 mg/mL (1 mL)

Phenol**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Liquid, External:

Generic: 1.5% (29.57 mL); Castellani Paint Modified 1.5% (29.57 mL)

Liquid, Mouth/Throat:

Chloraseptic: 1.4% (20 mL) [contains fd&c red #40, saccharin sodium; cherry flavor]

Oralseptic: 1.4% (177 mL) [alcohol free, aspirin free, sugar free]

Phenaseptic: 1.4% (177 mL) [sugar free; contains alcohol, usp, fd&c red #40, saccharin sodium; cherry eucalyptus flavor]

Sore Throat Spray: 1.4% (177 mL)

Ulcerease: 0.6% (178 mL)

Solution, Mouth/Throat:

Triaminic Sore Throat: 0.5% (120 mL) [alcohol free, aspirin free, sugar free; contains saccharin sodium; grape flavor]

Ulcerease: 0.6% (30 mL, 178 mL)

Swab, External:

Phenol EZ Swabs: 89% (30 ea)

Phenoxybenzamine**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Capsule, Oral, as hydrochloride:

Generic: 10 mg

Phentermine**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Capsule, Oral, as hydrochloride:

Generic: 15 mg, 30 mg, 37.5 mg

Tablet, Oral, as hydrochloride:

Generic: 37.5 mg

NONFORMULARY

Tablet, Oral, as hydrochloride:

Lomaira: 8 mg

Phentolamine**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution, Injection, as mesylate [preservative free]:

OraVerse: 0.4 mg/1.7 mL (1.7 mL) [contains edetate disodium; dental cartridge]

Solution Reconstituted, Injection, as mesylate:

Generic: 5 mg (1 ea)

Phenylephrine and Ketorolac**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution, Intraocular:

Omidria: Phenylephrine 1% and Ketorolac 0.3 % (4 mL)

Phenylephrine and Pramoxine**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Cream, Rectal:

Preparation H Totables: Phenylephrine hydrochloride 0.25%, pramoxine hydrochloride 1%, glycerin 14.4%, and white petrolatum 15% (5.7 g) [contains cetyl alcohol, edetate disodium, methylparaben, propylene glycol, propylparaben, sodium benzoate]

Phenylephrine and Pylamine**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Liquid, Oral:

Glen PE: Phenylephrine hydrochloride 5 mg and pylamine maleate 16 mg per 5 mL (480 mL) [alcohol free, sugar free; contains propylene glycol, saccharin sodium, sodium benzoate, sorbitol; cotton candy flavor]

Tablet, Oral:

Generic: Phenylephrine hydrochloride 10 mg and pylamine maleate 25mg

Phenylephrine and Thonzylamine**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Liquid:

Nasopen PE: Phenylephrine 10 mg and thonzylamine 50 mg per 15 mL

Phenylephrine (Nasal)**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution, Nasal, as hydrochloride:

4-Way Fast Acting: 1% (14.8 mL, 29.6 mL) [contains benzalkonium chloride]

4-Way Menthol: 1% (14.8 mL, 29.6 mL) [contains benzalkonium chloride, menthol, polysorbate 80]

Afrin Childrens: 0.25% (15 mL)

Nasal Four: 1% (29.6 mL) [contains benzalkonium chloride]

Neo-Synephrine Cold & Sinus: 0.25% (15 mL); 0.5% (15 mL); 1% (15 mL) [contains benzalkonium chloride]

Rhinal: 0.25% (30 mL, 40 mL)

Phenylephrine (Ophthalmic)**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution, Ophthalmic, as hydrochloride:

Generic: 2.5% (2 mL, 3 mL, 5 mL, 15 mL); 10% (5 mL)

Solution, Ophthalmic, as hydrochloride [preservative free]:

Generic: 2.5% (1 ea)

Phenylephrine (Systemic)**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Liquid, Oral, as hydrochloride:

Little Colds Decongestant: 2.5 mg/mL (30 mL) [alcohol free, dye free, saccharin free; contains sodium benzoate; grape flavor]

Solution, Injection, as hydrochloride:

Generic: 10 mg/mL (1 mL, 5 mL, 10 mL)

Solution, Intravenous, as hydrochloride:

Vazculep: 10 mg/mL (1 mL, 5 mL, 10 mL) [contains sodium metabisulfite]

Solution, Oral, as hydrochloride:

Sudafed PE Childrens: 2.5 mg/5 mL (118 mL) [alcohol free, sugar free; contains edetate disodium, sodium benzoate; berry flavor]

Tablet, Oral, as hydrochloride:

Nasal Decongestant: 10 mg

Nasal Decongestant PE Max St: 10 mg [pseudoephedrine free]

Non-Pseudo Sinus Decongestant: 10 mg

Sudogest PE: 10 mg

Phenylephrine (Topical)**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Ointment, Rectal, as hydrochloride:

GRX Hemorrhoidal: 0.25% (43 g) [contains benzoic acid, methylparaben, propylparaben]

Hemorrhoidal: 0.25% (57 g) [contains benzoic acid, methylparaben, propylparaben]

Major-Prep Hemorrhoidal: 0.25% (57 g) [contains methylparaben, propylparaben]

Preparation H: 0.25% (28 g, 57 g) [contains benzoic acid, methylparaben, propylparaben]

Suppository, Rectal, as hydrochloride:

Anu-Med: 0.25% (12 ea)

Hemorrhoidal: 0.25% (12 ea, 24 ea) [contains methylparaben, propylparaben]

Preparation H: 0.25% (12 ea, 24 ea, 48 ea) [contains corn starch, methylparaben, propylparaben]

Rectacaine: 0.25% (12 ea)

Phenytoin**DoD Uniform Formulary Outpatient Dosage Forms****BASIC CORE FORMULARY**

Capsule, Oral, as sodium:

Generic: 100 mg

Capsule Extended Release, Oral, as sodium:

Generic: 100 mg

Suspension, Oral:

Generic: 100 mg/4 mL (4 mL); 125 mg/5 mL (237 mL)

Tablet Chewable, Oral:

Generic: 50 mg

UNIFORM FORMULARY

Solution, Injection, as sodium:

Generic: 50 mg/mL (2 mL, 5 mL)

Phosphatidylserine, DHA, and EPA**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Capsule, Oral:

Vayarin: Phosphatidylserine 75 mg, DHA 8.5 mg, and EPA 21.5 mg [contains fd&c blue #2 (indigotine), fish oil, soybeans (glycine max)]

Physostigmine**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution, Injection, as salicylate:

Generic: 1 mg/mL (2 mL)

Phytonadione**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Injection, aqueous colloidal:

Generic: 1 mg/0.5 mL (0.5 mL); 10 mg/mL (1 mL)

Injection, aqueous colloidal [preservative free]:

Generic: 1 mg/0.5 mL (0.5 mL)

Tablet, oral: 100 mcg

Mephyton: 5 mg [scored]

Pilocarpine (Ophthalmic)**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution, Ophthalmic, as hydrochloride:

Generic: 1% (15 mL); 2% (15 mL); 4% (15 mL)

PILOCARPINE (SYSTEMIC)

Pilocarpine (Systemic)

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral, as hydrochloride:

Generic: 5 mg, 7.5 mg

Pimecrolimus

DoD Uniform Formulary Outpatient Dosage Forms

BASIC CORE FORMULARY

Cream, External:

Generic: 1% (30 g, 60 g, 100 g)

Pimozide

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:

Generic: 1 mg, 2 mg

Pindolol

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:

Generic: 5 mg, 10 mg

Pioglitazone

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:

Generic: 15 mg, 30 mg, 45 mg

Pioglitazone and Glimepiride

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:

Generic: 30/2: Pioglitazone 30 mg and glimepiride 2 mg

Generic: 30/4: Pioglitazone 30 mg and glimepiride 4 mg

Pioglitazone and Metformin

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:

15/500: Pioglitazone 15 mg and metformin hydrochloride 500 mg

15/850: Pioglitazone 15 mg and metformin hydrochloride 850 mg

Tablet, variable release, oral:

Actoplus Met XR: 15/1000: Pioglitazone 15 mg [immediate release] and metformin hydrochloride 1000 mg [extended release]

Actoplus Met XR: 30/1000: Pioglitazone 30 mg [immediate release] and metformin hydrochloride 1000 mg [extended release]

Piperacillin and Tazobactam

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Note: 8:1 ratio of piperacillin sodium/tazobactam sodium

Infusion [premixed iso-osmotic solution]:

Zosyn: 2.25 g: Piperacillin 2 g and tazobactam 0.25 g (50 mL) [contains edetate disodium, sodium 128 mg (5.58 mEq)]

Zosyn: 3.375 g: Piperacillin 3 g and tazobactam 0.375 g (50 mL) [contains edetate disodium, sodium 192 mg (8.38 mEq)]

Zosyn: 4.5 g: Piperacillin 4 g and tazobactam 0.5 g (100 mL) [contains edetate disodium, sodium 256 mg (11.17 mEq)]

Injection, Powder for Reconstitution:

2.25 g: Piperacillin 2 g and tazobactam 0.25 g [contains edetate disodium, sodium 130 mg (5.68 mEq)]

3.375 g: Piperacillin 3 g and tazobactam 0.375 g [contains edetate disodium, sodium 195 mg (8.52 mEq)]

4.5 g: Piperacillin 4 g and tazobactam 0.5 g [contains edetate disodium, sodium 260 mg (11.36 mEq)]

40.5 g: Piperacillin 36 g and tazobactam 4.5 g [contains edetate disodium, sodium 2304 mg (100.4 mEq)]

Pirfenidone

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule, Oral:

Esbriet: 267 mg

Tablet, Oral:

Esbriet: 267 mg, 801 mg

Piroxicam (Systemic)

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule, Oral:

Generic: 10 mg, 20 mg

Plasma Protein Fraction

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Intravenous:

Plasmanate: 5% (50 mL, 250 mL)

Plasminogen (Human)

Plazomicin

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Intravenous, as sulfate [preservative free]:

Zemdri: 500 mg/10 mL (10 mL)

Plecanatide

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:

Trulance: 3 mg

Plerixafor

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Subcutaneous [preservative free]:

Mozobil: 24 mg/1.2 mL (1.2 mL)

Pneumococcal Conjugate Vaccine (13-Valent)

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Injection, suspension:

Prevnar 13: 2 mcg of each capsular saccharide for serotypes 1, 3, 4, 5, 6A, 7F, 9V, 14, 18C, 19A, 19F, and 23F, and 4 mcg of serotype 6B [bound to diphtheria CRM₁₉₇ protein ~34 mcg] per 0.5 mL (0.5 mL) [contains aluminum, polysorbate 80, and yeast]

Pneumococcal Conjugate Vaccine (20-Valent)

Pneumococcal Polysaccharide Vaccine (Polyvalent)

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Injection, solution:

Pneumovax 23: 25 mcg each of 23 capsular polysaccharide isolates/0.5 mL (0.5 mL, 2.5 mL)

Podofilox

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Gel, External:

Condylox: 0.5% (3.5 g)

Solution, External:

Generic: 0.5% (3.5 mL)

Podophyllum Resin

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, External:

Podocon: 25% (15 mL)

Polatuzumab Vedotin

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution Reconstituted, Intravenous [preservative free]:

Polivy: Polatuzumab vedotin-piiq 140 mg (1 ea)

Polidocanol

DoD Uniform Formulary Outpatient Dosage Forms

NOT COVERED

Foam, Intravenous:

Varithena: 180 mg/18 mL (45 mL) [contains alcohol, usp]

Solution, Intravenous [preservative free]:

Asclera: 0.5% (2 mL); 1% (2 mL) [contains alcohol, usp]

Poliovirus Vaccine (Inactivated)

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Injection, suspension:

IPOL: Type 1 poliovirus 40 D-antigen units, type 2 poliovirus 8 D-antigen units, and type 3 poliovirus 32 D-antigen units per 0.5 mL (0.5 mL, 5 mL) [contains 2-phenoxyethanol, formaldehyde, calf serum protein, neomycin (may have trace amounts), streptomycin (may have trace amounts), and polymyxin B (may have trace amounts)]

Poly-L-Lactic Acid

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Injection, powder for suspension:

Sculptra, Sculptra Aesthetic: Poly-L-lactic acid USP

Polycarbophil

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:

Generic: 625 mg

Tablet, Oral [preservative free]:

Fiber-Lax: 625 mg [scored; starch free]

Polyethylene Glycol 3350

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Packet, Oral:

Generic: (1 ea, 14 ea, 30 ea, 100 ea)

Powder, Oral:

Generic: 17 g/dose (119 g, 238 g, 255 g, 510 g, 527 g, 850 g)

Polyethylene Glycol-Electrolyte Solution

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Powder, for Solution, Oral:

PEG 3350 240 g, sodium sulfate 22.72 g, sodium bicarbonate 6.72 g, sodium chloride 5.84 g, and potassium chloride 2.98 g (4000 mL)

PEG 3350 236 g, sodium sulfate 22.74 g, sodium bicarbonate 6.74 g, sodium chloride 5.86 g, and potassium chloride 2.97 g (4000 mL)

PEG 3350 240 g, sodium bicarbonate 5.72 g, sodium chloride 11.2 g, and potassium chloride 1.48 g (4000 mL)

PEG 3350 420 g, sodium bicarbonate 5.72 g, sodium chloride 11.2 g, and potassium chloride 1.48 g (4000 mL)

Colyte: PEG 3350 227.1 g, sodium sulfate 21.5 g, sodium bicarbonate 6.36 g, sodium chloride 5.53 g, and potassium chloride 2.82 g (3785 mL) [supplied with cherry, lemon lime, and orange flavor packs]

Colyte: PEG 3350 240 g, sodium sulfate 22.72 g, sodium bicarbonate 6.72 g, sodium chloride 5.84 g, and potassium chloride 2.98 g (4000 mL) [supplied with cherry, citrus berry, lemon lime, orange, and pineapple flavor packs]

Gavilyte-C: PEG 3350 240 g, sodium sulfate 22.72 g, sodium bicarbonate 6.72 g, sodium chloride 5.84 g, and potassium chloride 2.98 g (4000 mL) [supplied with lemon flavor packet]

Gavilyte-G: PEG 3350 236 g, sodium sulfate 22.74 g, sodium bicarbonate 6.74 g, sodium chloride 5.86 g, and potassium chloride 2.97 g (4000 mL) [supplied with lemon flavor packet]

Gavilyte-N: PEG 3350 420 g, sodium bicarbonate 5.72 g, sodium chloride 11.2 g, and potassium chloride 1.48 g (4000 mL) [supplied with lemon flavor packet]

GoLYTELY: PEG 3350 227.1 g, sodium sulfate 21.5 g, sodium bicarbonate 6.36 g, sodium chloride 5.53 g, and potassium chloride 2.82 g per packet (1s) [regular flavor; makes 1 gallon of solution after mixing]

GoLYTELY: PEG 3350 236 g, sodium sulfate 22.74 g, sodium bicarbonate 6.74 g, sodium chloride 5.86 g, and potassium chloride 2.97 g (4000 mL) [regular and pineapple flavor]

MoviPrep: Pouch A: PEG 3350 100g, sodium sulfate 7.5 g, sodium chloride 2.69 g, potassium chloride 1.02 g; Pouch B: Ascorbic acid 4.7 g, sodium ascorbate 5.9 g (1000 mL) [contains phenylalanine 131 mg/treatment; lemon flavor; packaged with 2 of Pouch A and 2 of Pouch B in carton and a disposable reconstitution container]

NuLYTELY: PEG 3350 420 g, sodium bicarbonate 5.72 g, sodium chloride 11.2 g, and potassium chloride 1.48 g (4000 mL) [supplied with cherry, lemon-lime, orange, and pineapple flavor packs]

Plenvu: Dose 1: PEG 3350 100 g, sodium sulfate 9 g, sodium chloride 2 g, potassium chloride 1 g [mango flavor; makes 473 mL of solution after mixing]; Dose 2, Pouch A: PEG 3350 40 g, sodium chloride 3.2 g, potassium chloride 1.2 g; Dose 2, Pouch B: sodium ascorbate 48.11 g, ascorbic acid 7.54 g [fruit punch flavor; makes 473 mL of solution after mixing]

TriLyte: PEG 3350 420 g, sodium bicarbonate 5.72 g, sodium chloride 11.2 g, and potassium chloride 1.48 g (4000 mL) [supplied with cherry, citrus berry, lemon lime, orange, and pineapple flavor packs]

Polyethylene Glycol-Electrolyte Solution and Bisacodyl

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Kit [each kit contains]:

Gavilyte-H and Bisacodyl:

Powder for solution, oral (Gavilyte-H): PEG 3350 210 g, sodium bicarbonate 2.86 g, sodium chloride 5.6 g, potassium chloride 0.74 g (2000 mL) [contains 3 flavor packs: cherry, lemon, orange]

Tablet, delayed release, oral (Bisacodyl): 5 mg (1s)

PEG-Prep and Bisacodyl:

Powder for solution, oral (PEG-Prep): PEG 3350 210 g, sodium bicarbonate 2.86 g, sodium chloride 5.6 g, potassium chloride 0.74 g (2000 mL) [contains 3 flavor packs: cherry, lemon, orange]

Tablet, delayed release, oral (Bisacodyl): 5 mg (1s)

Polymyxin B

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution Reconstituted, Injection:

Generic: 500,000 units (1 ea)

Solution Reconstituted, Injection [preservative free]:

Generic: 500,000 units (1 ea)

Polysaccharide-Iron Complex

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule, Oral:

EZFE 200: 200 mg [non-toxic]

Ferrex 150: 150 mg

Ferric x-150: 150 mg

iFerex 150: 150 mg

Myferon 150: 150 mg

NovaFerrum 50: 50 mg

Nu-Iron: 150 mg

PIC 200: 200 mg

Poly-Iron 150: 150 mg

Liquid, Oral:

NovaFerrum 125: Polysaccharide-iron complex 125 mg and cholecalciferol

100 units per 5 mL (180 mL) [alcohol free, dye free, gluten free, lactose free, sodium free, sugar free; contains sodium benzoate; raspberry-grape flavor]

NovaFerrum Pediatric Drops: 15 mg/mL (120 mL) [alcohol free, dye free,

gluten free, lactose free, sodium free, sugar free; contains sodium benzoate; raspberry-grape flavor]

Polysaccharide-Iron Complex, Vitamin B12, and Folic Acid

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule, Oral:

iFerex 150 Forte: Elemental iron 150 mg, cyanocobalamin 25 mcg, and folic acid 1 mg

Myferon 150 Forte: Elemental iron 150 mg, cyanocobalamin 25 mcg, and folic acid 1 mg

Poly-Iron 150 Forte: Elemental iron 150 mg, cyanocobalamin 25 mcg, and folic acid 1 mg

Tablet, Oral:

BiferaRx: Iron as polysaccharide iron complex 22 mg, iron as heme iron polypeptide 6 mg, cyanocobalamin 25 mcg, and folic acid 1 mg [scored]

Irofol: Elemental iron 150 mg, cyanocobalamin 25 mcg, and folic acid 1 mg

Poly-Ureaurethane

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, topical:

Nuvail: 16% (15 mL)

Pomalidomide

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule, Oral:

Pomalyst: 1 mg, 2 mg, 3 mg, 4 mg

PONATinib

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:

Iclusig: 15 mg, 45 mg

Poractant Alfa

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Suspension, Intratracheal [preservative free]:

Curosurf: 120 mg/1.5 mL (1.5 mL); 240 mg/3 mL (3 mL) [contains sodium chloride]

Porfimer

DoD Uniform Formulary Outpatient Dosage Forms

NOT COVERED

Solution Reconstituted, Intravenous, as sodium [preservative free]:

Photofrin: 75 mg (1 ea)

Posaconazole

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Intravenous:

Noxafil: 300 mg/16.7 mL (16.7 mL) [contains edetate disodium]

Suspension, Oral:

Noxafil: 40 mg/mL (105 mL) [contains polysorbate 80, sodium benzoate; cherry flavor]

Tablet Delayed Release, Oral:

Noxafil: 100 mg

Potassium Acetate

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Intravenous:

Generic: 2 mEq/mL (20 mL, 50 mL, 100 mL); 4 mEq/mL (50 mL)

Potassium Acid Phosphate

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Injection:

Potassium 4.4 mEq and phosphorus 3 mmol per mL (5 mL, 15 mL, 50 mL) [equivalent to potassium 170 mg and elemental phosphorus 93 mg per mL]

Tablet, Oral:

K-Phos: 500 mg [scored]

POTASSIUM BICARBONATE AND POTASSIUM CHLORIDE

Potassium Bicarbonate and Potassium Chloride

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet for Solution, Oral [effervescent]:

Generic: Potassium chloride 25 mEq [potassium bicarbonate 0.5 g and potassium chloride 1.5 g]

Potassium Bicarbonate and Potassium Citrate

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet Effervescent, Oral:

Effer-K: 10 mEq, 20 mEq, 25 mEq

Generic: 25 mEq

Potassium Chloride

DoD Uniform Formulary Outpatient Dosage Forms

BASIC CORE FORMULARY

Capsule Extended Release, Oral:

Generic: 10 mEq

Liquid, Oral:

Generic: 20 mEq/15 mL (10%) (473 mL)

Solution, Oral:

Generic: 20 mEq/15 mL (15 mL, 30 mL, 473 mL)

Tablet Extended Release, Oral:

Generic: 10 mEq, 20 mEq

UNIFORM FORMULARY

Capsule Extended Release, Oral:

Generic: 8 mEq

Packet, Oral:

Generic: 20 mEq (30 ea, 100 ea)

Solution, Intravenous:

Generic: 20 mEq (1000 mL); 40 mEq (1000 mL); 0.4 mEq/mL (50 mL); 10 mEq/100 mL (100 mL); 10 mEq/50 mL (50 mL); 20 mEq/100 mL (100 mL); 20 mEq/50 mL (50 mL); 40 mEq/100 mL (100 mL); 2 mEq/mL (5 mL, 10 mL, 20 mL, 30 mL, 250 mL); 20 mEq/L (1000 mL); 40 mEq/L (1000 mL)

Solution, Intravenous [with Dextrose]:

Potassium 10 mEq/L, dextrose 5%, and sodium chloride 0.45% (1000 mL)

Potassium 20 mEq/L, dextrose 5%, and sodium chloride 0.2% (250 mL, 500 mL, 1000 mL)

Potassium 20 mEq/L, dextrose 5%, and sodium chloride 0.33% (500 mL, 1000 mL)

Potassium 20 mEq/L, dextrose 5%, and sodium chloride 0.45% (500mL, 1000 mL)

Potassium 20 mEq/L, dextrose 5%, and sodium chloride 0.9% (500 mL, 1000 mL)

Potassium 30 mEq/L, dextrose 5%, and sodium chloride 0.45% (1000 mL)

Potassium 40 mEq/L, dextrose 5%, and sodium chloride 0.45% (1000 mL)

Potassium 40 mEq/L, dextrose 5%, and sodium chloride 0.9% (1000 mL)

Solution, Oral:

Generic: 40 mEq/15 mL (20%) (473 mL)

Tablet Extended Release, Oral:

Generic: 8 mEq

Potassium Citrate

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet Extended Release, Oral:

Generic: 5 mEq (540 mg), 10 mEq (1080 mg), 15 mEq (1620 mg)

Potassium Citrate and Citric Acid

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Powder for Solution, Oral:

Cytra-K: Potassium citrate monohydrate 3300 mg and citric acid monohydrate 1002 mg per packet (100s) [sugar free; fruit-punch flavor; each packet contains potassium 30 mEq equivalent to bicarbonate 30 mEq]

Solution, Oral:

Generic: Potassium citrate monohydrate 1100 mg and citric acid monohydrate 334 mg per 5 mL (473 mL)

Potassium Gluconate

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule, Oral [preservative free]:

K-99: 595 mg [dye free, sugar free, yeast free]

Tablet, Oral:

Generic: 2 mEq, 2.5 mEq

Tablet, Oral [strength expressed as base]:

Generic: 80 mg

Potassium Iodide

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Oral:

SSK: 1 g/mL (30 mL, 237 mL)

Tablet, Oral:

iOSAT: 130 mg [scored]

ThyroSafe: 65 mg [scored]

Potassium Iodide and Iodine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, External:

Generic: Potassium iodide 10% and iodine 5% (8 mL)

Solution, Oral:

Generic: Potassium iodide 10% and iodine 5% (14 mL, 473 mL)

Tincture, External:

Generic: Potassium iodide 5% and iodine 7% (30 mL, 480 mL)

Potassium P-Aminobenzoate

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule, Oral:

Potaba: 500 mg

Packet, Oral:

Generic: 2 g (50 ea)

Potassium Phosphate

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Injection:

Potassium 4.4 mEq and phosphorus 3 mmol per mL (5 mL, 15 mL, 50 mL)

[equivalent to potassium 170 mg and elemental phosphorus 93 mg per mL]

Tablet, Oral:

K-Phos: 500 mg [scored]

Potassium Phosphate and Sodium Phosphate

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Powder for solution, oral:

Phos-NaK: Dibasic potassium phosphate, monobasic potassium phosphate, dibasic sodium phosphate, and monobasic sodium phosphate per packet (100s) [sugar free; equivalent to elemental phosphorus 250 mg (8 mmol), sodium 160 mg (6.9 mEq), and potassium 280 mg (7.1 mEq) per packet; fruit flavor]

Tablet, oral:

Av-Phos 250 Neutral: Monobasic potassium phosphate 155 mg, dibasic sodium phosphate 852 mg, and monobasic sodium phosphate 130 mg [equivalent to elemental phosphorus 250 mg (8 mmol), sodium 298 mg (13 mEq), and potassium 45 mg (1.1 mEq)]

K-Phos Neutral: Monobasic potassium phosphate 155 mg, dibasic sodium phosphate 852 mg, and monobasic sodium phosphate 130 mg [equivalent to elemental phosphorus 250 mg (8 mmol), sodium 298 mg (13 mEq), and potassium 45 mg (1.1 mEq)]

K-Phos No. 2: Potassium acid phosphate 305 mg and sodium acid phosphate 700 mg [equivalent to elemental phosphorus 250 mg (8 mmol), sodium 134 mg (5.8 mEq), and potassium 88 mg (2.3 mEq)]

Phospha 250 Neutral: Monobasic potassium phosphate 155 mg, dibasic sodium phosphate 852 mg, and monobasic sodium phosphate 130 mg [equivalent to elemental phosphorus 250 mg (8 mmol), sodium 298 mg (13 mEq), and potassium 45 mg (1.1 mEq)]

Phospho-Trin 250 Neutral: Monobasic potassium phosphate 155 mg, dibasic sodium phosphate 852 mg, and monobasic sodium phosphate 130 mg [equivalent to elemental phosphorus 250 mg (8 mmol), sodium 298 mg (13 mEq), and potassium 45 mg (1.1 mEq)]

Virt-Phos 250 Neutral: Monobasic potassium phosphate 155 mg, dibasic sodium phosphate 852 mg, and monobasic sodium phosphate 130 mg [equivalent to elemental phosphorus 250 mg (8 mmol), sodium 298 mg (13 mEq), and potassium 45 mg (1.1 mEq)]

Povidone-Iodine (Ophthalmic)

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Ophthalmic:

Betadine Ophthalmic Prep: 5% (30 mL)

Povidone-Iodine (Topical)

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Gel, External:

Operand Povidone-Iodine: 10% (118 mL)

Ointment, External:

Generic: 10% (1 g, 28.35 g)

Pad, External:

Generic: 10% (1 ea, 200 ea)

Solution, External:

Betadine: 5% (88.7 mL); 10% (15 mL, 118 mL, 237 mL, 473 mL, 946 mL, 3780 mL)

Betadine Skin Cleanser: 7.5% (118 mL)

Betadine Surgical Scrub: 7.5% (118 mL, 473 mL, 946 mL, 3780 mL)

NuPrep 5% Povidone-Iodine: 5% (5 mL)

Operand Povidone-Iodine: 10% (59 mL, 118 mL, 237 mL, 473 mL, 946 mL, 3800 mL) [latex free]

Operand Scrub: 7.5% (59 mL, 118 mL, 237 mL, 473 mL, 946 mL, 3800 mL)

Generic: 10% (30 mL, 237 mL, 240 mL, 473 mL)

Solution, Vaginal:

Operand Povidone-Iodine: 10% (237 mL)

Summers Eve Disp Medicated: 0.3% (133 mL)
 Swab, External:
 Generic: 7.5% (50 ea); 10% (1 ea, 2 ea, 3 ea, 50 ea, 100 ea)

PRALAtrexate

**DoD Uniform Formulary Outpatient Dosage Forms
 UNIFORM FORMULARY**

Solution, Intravenous [preservative free]:
 Folutyn: 20 mg/mL (1 mL); 40 mg/2 mL (2 mL)

Pralidoxime

**DoD Uniform Formulary Outpatient Dosage Forms
 NOT COVERED**

Solution Auto-injector, Intramuscular, as chloride:
 Generic: 600 mg/2 mL (2 mL)
 Solution Reconstituted, Intravenous, as chloride:
 Protopam Chloride: 1 g (1 ea)

Pralsetinib

**DoD Uniform Formulary Outpatient Dosage Forms
 UNIFORM FORMULARY**

Capsule, Oral:
 Gavreto: 100 mg

Pramipexole

**DoD Uniform Formulary Outpatient Dosage Forms
 UNIFORM FORMULARY**

Tablet, Oral, as dihydrochloride monohydrate:
 Generic: 0.125 mg, 0.25 mg, 0.5 mg, 0.75 mg, 1 mg, 1.5 mg
 Tablet Extended Release 24 Hour, Oral, as dihydrochloride monohydrate:
 Generic: 0.375 mg, 0.75 mg, 1.5 mg, 2.25 mg, 3 mg, 3.75 mg, 4.5 mg

Pramlintide

**DoD Uniform Formulary Outpatient Dosage Forms
 UNIFORM FORMULARY**

Solution Pen-injector, Subcutaneous, as acetate:
 SymlinPen 60: 1500 mcg/1.5 mL (1.5 mL) [contains metacresol]
 SymlinPen 120: 2700 mcg/2.7 mL (2.7 mL) [contains metacresol]

Pramoxine

**DoD Uniform Formulary Outpatient Dosage Forms
 UNIFORM FORMULARY**

Cream, External, as hydrochloride:
 CeraVe Itch Relief: 1% (340 g) [contains cetyl alcohol, disodium edta]
 Foam, Rectal, as hydrochloride:
 Generic: 1% (15 g)
 Gel, External, as hydrochloride:
 Itch-X: 1% (35.4 g)
 PrameGel: 1% (118 mL)
 Pramox: 1% (113 g) [contains methylparaben, propylene glycol, propylparaben]
 Lotion, External, as hydrochloride:
 Calaclear: 1% (177 mL) [contains alcohol, usp, methylparaben, polysorbate 80, propylene glycol, propylparaben]
 Callergy Clear: 1% (177 mL) [contains alcohol, usp, methylparaben, propylene glycol, propylparaben]
 Ivy Wash Poison Ivy Cleanser: 1% (177 mL) [contains disodium edta, methylparaben, propylene glycol, propylparaben]
 Prax: 1% (118 mL, 237 mL) [contains cetyl alcohol, trolamine (triethanolamine)]
 Sarna Sensitive: 1% (222 mL) [fragrance free, steroid free]
 Miscellaneous, External, as hydrochloride:
 Prax: 1% (1 ea, 12 ea)

Pramoxine and Hydrocortisone

**DoD Uniform Formulary Outpatient Dosage Forms
 UNIFORM FORMULARY**

Aerosol, foam, rectal:
 ProctoFoam HC: Pramoxine hydrochloride 1% and hydrocortisone acetate 1% (10 g)
 Aerosol, foam, topical:
 Epifoam: Pramoxine hydrochloride 1% and hydrocortisone acetate 1% (10 g)
 Cream, topical: Pramoxine hydrochloride 1% and hydrocortisone acetate 1% (30 g); pramoxine hydrochloride 1% and hydrocortisone acetate 2.5% (30 g, 60 g)
 Analpram Advanced Kit: Pramoxine hydrochloride 1% and hydrocortisone acetate 2.5% [kit includes Analpram HC cream, diosmiplex (Vasculera) tablets, AloeClean wipes, and applicators]
 Analpram HC: Pramoxine hydrochloride 1% and hydrocortisone acetate 1% (4 g, 30 g); pramoxine hydrochloride 1% and hydrocortisone acetate 2.5% (4 g, 30 g)
 PramCort: Pramoxine hydrochloride 1% and hydrocortisone acetate 1% (30 g) [contains propylene glycol]
 Pramosome: Pramoxine hydrochloride 1% and hydrocortisone acetate 1% (30 g, 60 g); pramoxine hydrochloride 1% and hydrocortisone acetate 2.5% (30 g, 60 g)
 Pramosome E: Pramoxine hydrochloride 1% and hydrocortisone acetate 2.5% (30 g, 60 g)
 ProCort: Pramoxine hydrochloride 1.15% and hydrocortisone acetate 1.85% (60 g)

Gel, topical:
 Novacort: Pramoxine hydrochloride 1% and hydrocortisone acetate 2% (29 g) [contains aloe, benzyl alcohol, propylene glycol]
 Lotion, topical:
 Analpram-HC: Pramoxine hydrochloride 1% and hydrocortisone acetate 2.5% (60 mL)
 Pramosome: Pramoxine hydrochloride 1% and hydrocortisone acetate 1% (60 mL, 120 mL, 240 mL); pramoxine hydrochloride 1% and hydrocortisone acetate 2.5% (60 mL, 120 mL)
 Ointment, topical:
 Pramosome: Pramoxine hydrochloride 1% and hydrocortisone acetate 1% (30 g); pramoxine hydrochloride 1% and hydrocortisone acetate 2.5% (30 g)

Prasugrel

**DoD Uniform Formulary Outpatient Dosage Forms
 UNIFORM FORMULARY**

Tablet, Oral:
 Effient: 5 mg, 10 mg

Pravastatin

**DoD Uniform Formulary Outpatient Dosage Forms
 BASIC CORE FORMULARY**

Tablet, Oral, as sodium:
 Generic: 10 mg, 20 mg, 40 mg, 80 mg

Praziquantel

**DoD Uniform Formulary Outpatient Dosage Forms
 UNIFORM FORMULARY**

Tablet, Oral:
 Biltricide: 600 mg [scored]

Prazosin

**DoD Uniform Formulary Outpatient Dosage Forms
 UNIFORM FORMULARY**

Capsule, Oral:
 Generic: 1 mg, 2 mg, 5 mg

Prednicarbate

**DoD Uniform Formulary Outpatient Dosage Forms
 UNIFORM FORMULARY**

Cream, External:
 Generic: 0.1% (60 g)
 Ointment, External:
 Generic: 0.1% (15 g, 60 g)

Prednisolone and Gentamicin

**DoD Uniform Formulary Outpatient Dosage Forms
 UNIFORM FORMULARY**

Ointment, ophthalmic:
 Pred-G: Prednisolone acetate 0.6% and gentamicin sulfate 0.3% (3.5 g)
 Suspension, ophthalmic:
 Pred-G: Prednisolone acetate 1% and gentamicin sulfate 0.3% (5 mL) [contains benzalkonium chloride]

PrednisolONE (Ophthalmic)

**DoD Uniform Formulary Outpatient Dosage Forms
 BASIC CORE FORMULARY**

Suspension, Ophthalmic, as acetate:
 Pred Mild: 0.12% (5 mL, 10 mL) [contains benzalkonium chloride, sodium bisulfite]
 Generic: 1% (5 mL, 10 mL, 15 mL)

UNIFORM FORMULARY

Solution, Ophthalmic, as sodium phosphate:
 Generic: 1% (10 mL)

PrednisolONE (Systemic)

**DoD Uniform Formulary Outpatient Dosage Forms
 BASIC CORE FORMULARY**

Solution, Oral, as sodium phosphate [strength expressed as base]:
 Generic: 15 mg/5 mL (237 mL)

UNIFORM FORMULARY

Solution, Oral, as base:
 Generic: 15 mg/5 mL (240 mL, 480 mL)
 Solution, Oral, as sodium phosphate [strength expressed as base]:
 Generic: 10 mg/5 mL (237 mL); 15 mg/5 mL (237 mL); 20 mg/5 mL (237 mL); 25 mg/5 mL (237 mL); 5 mg/5 mL (120 mL)
 Syrup, Oral, as base:
 Generic: 15 mg/5 mL (240 mL, 480 mL)
 Tablet, Oral, as base:
 Millipred: 5 mg [scored; contains sodium benzoate]
 Millipred DP: 5 mg [scored; contains sodium benzoate]
 Millipred DP 12-Day: 5 mg [scored; contains sodium benzoate]
 Tablet Dispersible, Oral, as sodium phosphate [strength expressed as base]:
 Generic: 10 mg, 15 mg, 30 mg

PREDNISONE

PredniSONE

DoD Uniform Formulary Outpatient Dosage Forms

BASIC CORE FORMULARY

Tablet, Oral:

Generic: 1 mg, 5 mg, 10 mg, 20 mg

UNIFORM FORMULARY

Concentrate, Oral:

PredniSONE Intensol: 5 mg/mL (30 mL) [contains alcohol, usp; unflavored flavor]

Solution, Oral:

Generic: 5 mg/5 mL (120 mL, 500 mL)

Tablet, Oral:

Generic: 2.5 mg, 50 mg

Tablet Delayed Release, Oral:

Rayos: 1 mg, 2 mg, 5 mg

Tablet Therapy Pack, Oral:

Generic: 10 mg (21 ea, 48 ea); 5 mg (21 ea, 48 ea)

Pregabalin

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule, Oral:

Lyricea: 25 mg, 50 mg, 75 mg, 100 mg, 150 mg, 200 mg, 225 mg, 300 mg

Solution, Oral:

Lyricea: 20 mg/mL (473 mL)

NONFORMULARY

Tablet Extended Release 24 Hour, Oral:

Lyricea CR: 82.5 mg, 165 mg, 330 mg

Pretomanid

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:

Generic: 200 mg

Prilocaine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Injection, as hydrochloride:

Citanest Plain Dental: 4% (1.8 mL)

Prilocaine and Epinephrine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Injection, solution [for dental use]:

Citanest Forte Dental: Prilocaine hydrochloride 4% and epinephrine 1:200,000 (1.7 mL) [contains sodium metabisulfite]

Primaquine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral, as phosphate:

Generic: 26.3 mg

Primidone

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:

Generic: 50 mg, 250 mg

Probenecid

DoD Uniform Formulary Outpatient Dosage Forms

BASIC CORE FORMULARY

Tablet, Oral:

Generic: 500 mg

Probiotic Product

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule, Oral:

Align

Procainamide

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Injection, as hydrochloride:

Generic: 100 mg/mL (10 mL); 500 mg/mL (2 mL)

Procarbazine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule, Oral, as hydrochloride:

Matulane: 50 mg

Prochlorperazine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Injection, as edisylate [strength expressed as base]:

Generic: 5 mg/mL (2 mL)

Suppository, Rectal:

Generic: 25 mg (1 ea, 12 ea, 1000 ea)

Tablet, Oral, as maleate [strength expressed as base]:

Generic: 5 mg, 10 mg

Progesterone

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule, Oral:

Generic: 100 mg, 200 mg

Cream, Transdermal:

EC-RX Progesterone: 10% (30 g, 60 g); 20% (30 g, 60 g) [contains cetearyl alcohol]

Generic: 10% (60 g)

Gel, Vaginal:

Crinone: 4% (1.125 g); 8% (1.125 g)

Insert, Vaginal:

Endometrin: 100 mg (21 ea)

Oil, Intramuscular:

Generic: 50 mg/mL (10 mL)

Suppository, Vaginal:

First-Progesterone VGS 100: 100 mg (30 ea)

First-Progesterone VGS 200: 200 mg (30 ea)

Promethazine

DoD Uniform Formulary Outpatient Dosage Forms

BASIC CORE FORMULARY

Suppository, Rectal, as hydrochloride:

Generic: 12.5 mg (12s); 25 mg (12s)

Solution, Oral, as hydrochloride:

Generic: 6.25 mg/5 mL (118 mL, 473 mL)

Syrup, Oral, as hydrochloride:

Generic: 6.25 mg/5 mL (118 mL, 473 mL)

Tablet, Oral, as hydrochloride:

Generic: 25 mg

UNIFORM FORMULARY

Solution, Injection, as hydrochloride:

Generic: 25 mg/mL (1 mL); 50 mg/mL (1 mL)

Suppository, Rectal, as hydrochloride:

Generic: 50 mg (12 ea)

Tablet, Oral, as hydrochloride:

Generic: 12.5 mg, 50 mg

Promethazine and Codeine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Syrup, Oral:

Generic: Promethazine hydrochloride 6.25 mg and codeine phosphate 10 mg per 5 mL (5 mL, 118 mL, 473 mL)

Promethazine and Dextromethorphan

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Syrup, Oral:

Generic: Promethazine hydrochloride 6.25 mg and dextromethorphan hydrobromide 15 mg per 5 mL (120 mL, 480 mL)

Promethazine and Phenylephrine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Syrup, Oral:

Generic: Promethazine hydrochloride 6.25 mg and phenylephrine hydrochloride 5 mg per 5 mL (473 mL)

Promethazine, Phenylephrine, and Codeine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Syrup, Oral:

Generic: Promethazine hydrochloride 6.25 mg, phenylephrine hydrochloride 5 mg, and codeine phosphate 10 mg per 5 mL (120 mL, 480 mL)

Propafenone

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule Extended Release 12 Hour, Oral, as hydrochloride:

Generic: 225 mg, 325 mg, 425 mg

Tablet, Oral, as hydrochloride:

Generic: 150 mg, 225 mg, 300 mg

Proprantheline

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral, as bromide:

Generic: 15 mg

Proparacaine**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution, Ophthalmic, as hydrochloride:

Generic: 0.5% (15 mL)

Proparacaine and Fluorescein**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution, ophthalmic:

Generic: Proparacaine hydrochloride 0.5% and fluorescein sodium 0.25% (5 mL)

Propofol**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Emulsion, Intravenous:

Generic: 1000 mg/100 mL (100 mL); 200 mg/20 mL (20 mL); 500 mg/50 mL (50 mL)

Emulsion, Intravenous [preservative free]:

Generic: 200 mg/20 mL (20 mL); 500 mg/50 mL (50 mL); 1000 mg/100 mL (100 mL)

Propranolol**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Emulsion, Intravenous:

Generic: 200 mg/20 mL (20 mL); 500 mg/50 mL (50 mL); 1000 mg/100 mL (100 mL)

Emulsion, Intravenous [preservative free]:

Generic: 200 mg/20 mL (20 mL); 500 mg/50 mL (50 mL); 1000 mg/100 mL (100 mL)

Propranolol and Hydrochlorothiazide**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Tablet, Oral:

Generic: Propranolol hydrochloride 40 mg and hydrochlorothiazide 25 mg;

Generic: Propranolol hydrochloride 80 mg and hydrochlorothiazide 25 mg

Propylhexedrine**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Inhaler, Nasal: 0.4-0.5 mg/inhalation (1s) [total content 250 mg]

Propylthiouracil**DoD Uniform Formulary Outpatient Dosage Forms****BASIC CORE FORMULARY**

Tablet, Oral:

Generic: 50 mg

Protamine**DoD Uniform Formulary Outpatient Dosage Forms****NOT COVERED**

Solution, Intravenous, as sulfate:

Generic: 10 mg/mL (5 mL, 25 mL)

Solution, Intravenous, as sulfate [preservative free]:

Generic: 10 mg/mL (5 mL, 25 mL)

Protein C Concentrate (Human)**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution Reconstituted, Intravenous [preservative free]:

Ceprotin: 500 units (1 ea); 1000 units (1 ea) [contains albumin human, heparin, mouse (murine) and/or hamster protein]

Prothrombin Complex Concentrate (Human) [(Factors II, VII, IX, X), Protein C, and Protein S]**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Kit, Intravenous [preservative free]:

Kcentra: ~500 units, ~1000 units [pyrogen free; contains albumin human, antithrombin iii (human), heparin]

Protriptyline**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Tablet, Oral, as hydrochloride:

Generic: 5 mg, 10 mg

Pseudoephedrine**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Liquid, Oral, as hydrochloride:

Childrens Silfedrine: 15 mg/5 mL (118 mL, 237 mL) [grape flavor]

Nasal Decongestant: 30 mg/5 mL (118 mL) [contains methylparaben, saccharin sodium, sodium benzoate; raspberry flavor]

Sudafed Childrens: 15 mg/5 mL (118 mL) [alcohol free, sugar free; contains edetate disodium, menthol, polyethylene glycol, saccharin sodium, sodium benzoate; grape flavor]

Syrup, Oral, as hydrochloride:

Nasal Decongestant: 30 mg/5 mL (473 mL) [contains methylparaben, saccharin sodium, sodium benzoate; raspberry flavor]

Tablet, Oral, as hydrochloride:

Generic: 30 mg, 60 mg

Tablet Abuse-Deterrent, Oral, as hydrochloride:

Nexafed: 30 mg

Zephrex-D: 30 mg

Tablet Extended Release 12 Hour, Oral, as hydrochloride:

SudoGest 12 Hour: 120 mg

Generic: 120 mg

Tablet Extended Release 24 Hour, Oral, as hydrochloride:

Sudafed 24 Hour: 240 mg

Pseudoephedrine and Dextromethorphan**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Liquid, Oral:

Sudafed Children's Cold & Cough: Pseudoephedrine hydrochloride 15 mg and dextromethorphan hydrobromide 5 mg per 5 mL (120 mL) [alcohol free, sugar free; contains sodium benzoate; cherry berry flavor]

Syrup, Oral:

Pedia Relief Cough and Cold: Pseudoephedrine hydrochloride 15 mg and dextromethorphan hydrobromide 7.5 mg per 5 mL (120 mL) [cherry flavor]

Pseudoephedrine and Ibuprofen**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Capsule, liquid filled, Oral:

Advil Cold & Sinus: Pseudoephedrine hydrochloride 30 mg and ibuprofen 200 mg [solubilized ibuprofen as free acid and potassium salt; contains potassium 20 mg/capsule and coconut oil]

Tablet, Oral:

Generic: Pseudoephedrine hydrochloride 30 mg and ibuprofen 200 mg

Psyllium**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Capsule, Oral:

Konsyl: 520 mg [gluten free, sugar free]

Reguloid: 0.52 g

Generic: 400 mg

Packet, Oral:

Konsyl: 28.3% (1 ea) [gluten free, kosher certified]

Konsyl: 28.3% (30 ea) [gluten free, kosher certified; orange flavor]

Konsyl: 60.3% (1 ea, 30 ea) [gluten free, kosher certified, sugar free; contains aspartame; orange flavor]

Konsyl: 100% (1 ea, 30 ea, 100 ea) [gluten free, kosher certified, sugar free; bland flavor]

Metamucil MultiHealth Fiber: 58.12% (1 ea, 30 ea) [gluten free, sugar free; contains aspartame; orange flavor]

Powder, Oral:

Geri-Mucil: 68% (368 g)

Geri-Mucil: 68% (368 g)

Geri-Mucil: 68% (284 g) [sugar free]

Konsyl: 30.9% (397 g) [gluten free, kosher certified; orange flavor]

Konsyl: 28.3% (538 g) [gluten free, kosher certified; orange flavor]

Konsyl: 60.3% (450 g) [gluten free, kosher certified, sugar free; contains aspartame; orange flavor]

Konsyl: 71.67% (300 g); 100% (300 g, 450 g) [gluten free, kosher certified, sugar free; bland flavor]

Konsyl: 60.3% (283 g) [sugar free; contains aspartame; orange flavor]

Konsyl-D: 52.3% (397 g) [flavor free; sweet flavor]

Metamucil MultiHealth Fiber: 63% (660 g) [gluten free, sugar free]

Natural Fiber Therapy: 30.9% (368 g, 539 g); 48.57% (368 g, 538 g)

Natural Psyllium Seed: 100% (480 g) [animal products free, gelatin free, gluten free, kosher certified, lactose free, no artificial color(s), no artificial flavor(s), starch free, sugar free, yeast free]

Natural Vegetable Fiber: 48.57% (368 g)

Reguloid: 48.57% (369 g, 540 g)

Reguloid: 28.3% (369 g, 540 g) [orange flavor]

Reguloid: 58.6% (284 g, 426 g) [sugar free; natural flavor]

Reguloid: 58.6% (284 g, 426 g) [sugar free]

Sorbulax: 100% (420 g)

Powder, Oral [preservative free]:

Evac: (480 g) [dye free]

Pyranterel Pamoate**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Suspension, Oral [strength expressed as base]:

Reeses Pinworm Medicine: 50 mg/mL (30 mL) [contains saccharin sodium, sodium benzoate]

Tablet, Oral [strength expressed as base]:

Reeses Pinworm Medicine: 62.5 mg [scored]

PYRAZINAMIDE

Pyrazinamide

DoD Uniform Formulary Outpatient Dosage Forms BASIC CORE FORMULARY

Tablet, Oral:
Generic: 500 mg

Pyrethrins and Piperonyl Butoxide

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Kit:

A-200 Lice Treatment Kit:

Shampoo: Pyrethrins 0.33% and piperonyl butoxide 4% (120 mL)
[packaged with nit removal comb and household permethrin spray]

LiceMD Complete:

Gel: Pyrethrins 0.33% and piperonyl butoxide 4% (118 mL)
[packaged with non-medicated shampoo, nit removal comb, and gloves]

LiceMD Treatment:

Gel: Pyrethrins 0.33% and piperonyl butoxide 4% (118 mL)
[packaged with nit removal comb and gloves]

Pronto Plus Complete Lice Removal System:

Shampoo: Pyrethrins 0.33% and piperonyl butoxide 4% (60 mL)
[packaged with lice egg removal gel, nit removal comb, and household permethrin spray]

RID Lice Elimination Essentials:

Shampoo: Pyrethrins 0.33% and piperonyl butoxide 4% (118 mL)
[packaged with hair comb out spray (detangler) and nit removal comb]

RID Lice Treatment Complete:

Shampoo: Pyrethrins 0.33% and piperonyl butoxide 4% (118 mL)
[packaged with hair comb out spray (detangler), nit removal comb and household permethrin spray]

Shampoo:

A-200 Maximum Strength: Pyrethrins 0.33% and piperonyl butoxide 4% (60 mL, 120 mL) [contains benzyl alcohol; packaged with nit removal comb]

Licide: Pyrethrins 0.33% and piperonyl butoxide 4% (120 mL) [packaged with nit removal comb; also available in a kit containing shampoo, household spray, and nit removal comb]

RID Lice Killing: Pyrethrins 0.33% and piperonyl butoxide 4% (59 mL, 118 mL, 236 mL) [packaged with nit removal combs]

Pyridostigmine

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Solution, Intravenous, as bromide:

Regonol: 10 mg/2 mL (2 mL) [contains benzyl alcohol]

Syrup, Oral, as bromide:

Mestinon: 60 mg/5 mL (473 mL) [contains alcohol, usp, sodium benzoate; raspberry flavor]

Tablet, Oral, as bromide:

Generic: 60 mg

Tablet Extended Release, Oral, as bromide:

Generic: 180 mg

Pyridoxine

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Capsule, Oral, as hydrochloride:

Neuro-K-250 T.D.: 250 mg [corn free, rye free, starch free, sugar free, wheat free]

Solution, Injection, as hydrochloride:

Generic: 100 mg/mL (1 mL)

Tablet, Oral, as hydrochloride:

Neuro-K-500: 500 mg

Generic: 25 mg, 50 mg, 100 mg, 250 mg

Tablet, Oral, as hydrochloride [preservative free]:

Generic: 25 mg, 50 mg, 100 mg

Tablet Extended Release, Oral, as hydrochloride:

Generic: 200 mg

Pyrimethamine

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Tablet, Oral:

Daraprim: 25 mg [scored]

Pyriithione Zinc

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Liquid, External:

DHS Body Wash: 0.5% (480 mL) [color free, fragrance free]

Shampoo, External:

Beta Med: 2% (480 mL)

DHS Zinc: 2% (240 mL, 480 mL) [contains fd&c yellow #6 (sunset yellow)]

Theraplex Z: 2% (240 mL)

Quazepam

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Tablet, Oral:

Generic: 15 mg

QUetiapine

DoD Uniform Formulary Outpatient Dosage Forms BASIC CORE FORMULARY

Tablet, Oral:

Generic: 25 mg, 50 mg, 100 mg, 200 mg, 300 mg, 400 mg

Tablet Extended Release 24 Hour, Oral:

Generic: 50 mg, 150 mg, 200 mg, 300 mg, 400 mg

Quinapril

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Tablet, Oral:

Generic: 5 mg, 10 mg, 20 mg, 40 mg

Quinapril and Hydrochlorothiazide

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Tablet, Oral:

Generic: 10/12.5: Quinapril 10 mg and hydrochlorothiazide 12.5 mg

Generic: 20/12.5: Quinapril 20 mg and hydrochlorothiazide 12.5 mg

Generic: 20/25: Quinapril 20 mg and hydrochlorothiazide 25 mg

QuiNIDine

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Solution, Injection, as gluconate:

Generic: 80 mg/mL (10 mL)

Tablet, Oral, as sulfate:

Generic: 200 mg, 300 mg

Tablet Extended Release, Oral, as gluconate:

Generic: 324 mg

QuiNINE

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Capsule, Oral, as sulfate:

Generic: 324 mg

Quinupristin and Dalfopristin

DoD Uniform Formulary Outpatient Dosage Forms NOT COVERED

Injection, powder for reconstitution:

Synercid: 500 mg: Quinupristin 150 mg and dalfopristin 350 mg

RABEprazole

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Capsule Sprinkle, Oral, as sodium:

AcipHex Sprinkle: 5 mg, 10 mg

Tablet Delayed Release, Oral, as sodium:

Generic: 20 mg

Rabies Immune Globulin (Human)

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Injectable, Intramuscular:

Imogam Rabies-HT: 300 units/2 mL (2 mL); 1500 units/10 mL (10 mL)

Injectable, Intramuscular [preservative free]:

HyperRAB: 300 units/mL (1 mL); 1500 units/5 mL (5 mL)

HyperRAB S/D: 300 units/2 mL (2 mL); 1500 units/10 mL (10 mL)

Kedrab: 300 units/2 mL (2 mL); 1500 units/10 mL (10 mL) [latex free, pyrogen free]

Rabies Vaccine

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Injectable, Intramuscular [preservative free]:

Imovax Rabies: 2.5 units/mL (1 ea) [contains albumin human, neomycin sulfate]

Suspension Reconstituted, Intramuscular:

RabAvert: 2.5 units (1 ea) [contains albumin human, chicken protein, edetate disodium, gelatin (bovine), neomycin]

Radium Ra 223 Dichloride

DoD Uniform Formulary Outpatient Dosage Forms NOT COVERED

Solution, Intravenous:

Xofigo: 1100 kBq/mL (30 microcurie/mL) (6 mL)

Ragweed Pollen Allergen Extract

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Tablet, Sublingual:

Ragwitek: 12 AMB A 1-U [contains gelatin (fish)]

Raloxifene

DoD Uniform Formulary Outpatient Dosage Forms BASIC CORE FORMULARY

Tablet, Oral, as hydrochloride:

Generic: 60 mg

Raltegravir**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Packet, Oral:
Isentress: 100 mg (1 ea, 60 ea) [contains polyethylene glycol; banana flavor]
Tablet, Oral:
Isentress: 400 mg [contains polyethylene glycol]
Tablet Chewable, Oral:
Isentress: 25 mg [contains aspartame, saccharin sodium; orange banana flavor]
Isentress: 100 mg [scored; contains aspartame, saccharin sodium; orange banana flavor]

Ramipril**DoD Uniform Formulary Outpatient Dosage Forms
BASIC CORE FORMULARY**

Capsule, Oral:
Altace: 1.25 mg, 2.5 mg, 5 mg, 10 mg
Generic: 1.25 mg, 2.5 mg, 5 mg, 10 mg

Ramucirumab**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Solution, Intravenous [preservative free]:
Cyramza: 100 mg/10 mL (10 mL); 500 mg/50 mL (50 mL) [contains polysorbate 80]

Ranibizumab**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Solution, Intravitreal [preservative free]:
Lucentis: 0.3 mg/0.05 mL (0.05 mL); 0.5 mg/0.05 mL (0.05 mL)
Solution Prefilled Syringe, Intravitreal [preservative free]:
Lucentis: 0.5 mg/0.05 mL (0.05 mL)

Ranolazine**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Tablet Extended Release 12 Hour, Oral:
Ranexa: 500 mg, 1000 mg

Rasagiline**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Tablet, Oral:
Generic: 0.5 mg, 1 mg

Rasburicase**DoD Uniform Formulary Outpatient Dosage Forms
NOT COVERED**

Solution Reconstituted, Intravenous:
Elitek: 1.5 mg (1 ea); 7.5 mg (1 ea)

Ravulizumab**DoD Uniform Formulary Outpatient Dosage Forms
NOT COVERED**

Solution, Intravenous [preservative free]:
Ultomiris: 300 mg/30 mL (30 mL) [contains polysorbate 80]

Regadenoson**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Solution, Intravenous:
Lexiscan: 0.4 mg/5 mL (5 mL) [contains edetate disodium dihydrate, propylene glycol]

Regorafenib**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Tablet, Oral:
Stivarga: 40 mg [contains soybean lecithin]

Relugolix, Estradiol, and Norethindrone**Remifentanyl****DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Solution Reconstituted, Intravenous [preservative free]:
Ultiva: 1 mg (1 ea); 2 mg (1 ea); 5 mg (1 ea)

Repaglinide**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Tablet, Oral:
Generic: 0.5 mg, 1 mg, 2 mg

Repaglinide and Metformin**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Tablet, Oral:

Generic: 1/500: Repaglinide 1 mg and metformin hydrochloride 500 mg
Generic: 2/500: Repaglinide 2 mg and metformin hydrochloride 500 mg

Reserpine**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Tablet, Oral:
Generic: 0.1 mg [DSC], 0.25 mg [DSC]

Reslizumab**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Solution, Intravenous [preservative free]:
Cinqair: 100 mg/10 mL (10 mL) [contains mouse (murine) and/or hamster protein]

Retapamulin**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Ointment, External:
Altabax: 1% (15 g, 30 g)

Rh₀(D) Immune Globulin**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Solution, Injection:
WinRho SDF: 2500 units/2.2 mL (2.2 mL); 5000 units/4.4 mL (4.4 mL); 1500 units/1.3 mL (1.3 mL); 15,000 units/13 mL (13 mL)
Solution, Injection [preservative free]:
WinRho SDF: 2500 units/2.2 mL (2.2 mL); 5000 units/4.4 mL (4.4 mL); 1500 units/1.3 mL (1.3 mL); 15,000 units/13 mL (13 mL) [contains polysorbate 80]
Solution Prefilled Syringe, Injection [preservative free]:
Rhophylac: 1500 units/2 mL (2 mL)
Solution Prefilled Syringe, Intramuscular [preservative free]:
HyperRHO S/D: 250 units (1 ea); 1500 units (1 ea) [latex free]
MICRhoGAM Ultra-Filtered Plus: 250 units (1 ea) [latex free, thimerosal free; contains polysorbate 80]
RhoGAM Ultra-Filtered Plus: 1500 units (1 ea) [latex free, thimerosal free; contains polysorbate 80]

Ribavirin (Oral Inhalation)**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Solution Reconstituted, Inhalation:
Generic: 6 g (1 ea)
Solution Reconstituted, Inhalation [preservative free]:
Virazole: 6 g (1 ea)

Ribavirin (Systemic)**DoD Uniform Formulary Outpatient Dosage Forms
Extended Core Formulary**

Capsule, Oral:
Ribasphere: 200 mg
Generic: 200 mg
UNIFORM FORMULARY
Solution, Oral:
Rebetol: 40 mg/mL (100 mL) [contains propylene glycol, sodium benzoate; bubble-gum flavor]
Tablet, Oral:
Moderiba: 200 mg
Moderiba 1200 Dose Pack: 600 mg
NONFORMULARY
Tablet Therapy Pack, Oral:
Ribasphere RibaPak: 600, 800, 1000, 1200

Ribociclib**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Tablet, Oral:
Kisqali 200 Dose: 200 mg (21s) [contains soybean lecithin]
Kisqali 400 Dose: 200 mg (42s) [contains soybean lecithin]
Kisqali 600 Dose: 200 mg (63s) [contains soybean lecithin]

Ribociclib and Letrozole**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Therapy Pack, Tablet, Oral:
Kisqali Femara Co-Pack:
200 mg daily dose: Kisqali (ribociclib) 200 mg (21s), and Femara (letrozole) 2.5 mg (28s)
400 mg daily dose: Kisqali (ribociclib) 200 mg (42s), and Femara (letrozole) 2.5 mg (28s)
600 mg daily dose: Kisqali (ribociclib) 200 mg (63s), and Femara (letrozole) 2.5 mg (28s)

RIBOFLAVIN

Riboflavin

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule, Oral:

B-2-400: 400 mg

Generic: 50 mg

Tablet, Oral:

Generic: 25 mg, 50 mg, 100 mg

Riboflavin 5'-Phosphate

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Ophthalmic:

Photrexa: 0.146% (3 mL)

Photrexa Viscous: 0.146% in Dextran 20% (3 mL)

Rifabutin

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule, Oral:

Generic: 150 mg

RifAMPin

DoD Uniform Formulary Outpatient Dosage Forms

BASIC CORE FORMULARY

Capsule, Oral:

Generic: 300 mg

UNIFORM FORMULARY

Solution Reconstituted, Intravenous:

Generic: 600 mg (1 ea)

Rifampin and Isoniazid

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule, oral:

Rifamate: Rifampin 300 mg and isoniazid 150 mg

Rifampin, Isoniazid, and Pyrazinamide

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, oral:

Rifater: Rifampin 120 mg, isoniazid 50 mg, and pyrazinamide 300 mg

Rifamycin

DoD Uniform Formulary Outpatient Dosage Forms

NONFORMULARY

Tablet Delayed Release, Oral:

Aemcolo: 194 mg

Rifapentine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:

Priftin: 150 mg [contains disodium edta]

RifAXIMin

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:

Xifaxan: 200 mg, 550 mg [contains edetate disodium]

Rilonacept

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution Reconstituted, Subcutaneous [preservative free]:

Arcalyst: 220 mg (1 ea) [contains polyethylene glycol]

Rilpivirine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:

Edurant: 25 mg

Riluzole

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Suspension, Oral:

Tiglutik: 50 mg/10 mL (300 mL)

Tablet, Oral:

Generic: 50 mg

RimabotulinumtoxinB

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Intramuscular [preservative free]:

Myobloc: 2500 units/0.5 mL (0.5 mL); 5000 units/mL (1 mL); 10,000 units/2 mL (2 mL) [contains albumin human]

RIMANTAdine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral, as hydrochloride:

Generic: 100 mg

Rimegepant

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet Disintegrating, Oral, as sulfate:

Nurtec: 75 mg [contains menthol]

Ringer's Injection

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Intravenous:

Generic: Sodium Chloride 0.86 g, Potassium Chloride 0.03 g, Calcium Chloride Dihydrate 0.033 g (500 mL; 1,000 mL)

Ringer's Injection (Lactated)

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Intravenous:

Generic: (250 mL, 500 mL, 1000 mL)

Solution, Irrigation:

Generic: (1000 mL, 2000 mL, 3000 mL, 4000 mL)

Riociguat

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:

Adempas: 0.5 mg, 1 mg, 1.5 mg, 2 mg, 2.5 mg

Ripretinib

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:

Qinlock: 50 mg

Risdiplam

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution Reconstituted, Oral:

Evrysdi: 0.75 mg/mL (80 mL) [contains edetate (edta) disodium dihydrate, polyethylene glycol, sodium benzoate]

RisperidONE

DoD Uniform Formulary Outpatient Dosage Forms

BASIC CORE FORMULARY

Tablet, Oral:

Generic: 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg

Tablet Dispersible, Oral:

Generic: 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg

UNIFORM FORMULARY

Solution, Oral:

Generic: 1 mg/mL (30 mL)

Suspension Reconstituted, Intramuscular:

RisperDAL Consta: 12.5 mg (1 ea); 25 mg (1 ea); 37.5 mg (1 ea); 50 mg (1 ea)

Ritonavir

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule, Oral:

Norvir: 100 mg [contains alcohol, usp]

Solution, Oral:

Norvir: 80 mg/mL (240 mL) [contains alcohol, usp, fd&c yellow #6 (sunset yellow), propylene glycol, saccharin sodium; peppermint-caramel flavor]

Tablet, Oral:

Norvir: 100 mg

RiTUXimab

DoD Uniform Formulary Outpatient Dosage Forms

NOT COVERED

Solution, Intravenous [preservative free]:

Riabni: rituximab-arxx 100 mg/10 mL (10 mL); rituximab-arxx 500 mg/50 mL (50 mL) [contains polysorbate 80]

Rituxan: 100 mg/10 mL (10 mL); 10 mg/mL (10 mL, 50 mL) [contains polysorbate 80]

Ruxience: rituximab-pvvr 100 mg/10 mL (10 mL); rituximab-pvvr 500 mg/50 mL (50 mL) [contains edetate (edta) disodium dihydrate, polysorbate 80]

Truxima: rituximab-abbs 100 mg/10 mL (10 mL); rituximab-abbs 500 mg/50 mL (50 mL) [contains polysorbate 80]

Rivaroxaban

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:

Xarelto: 10 mg, 15 mg, 20 mg

Tablet Therapy Pack, Oral:
Xarelto Starter Pack: 15 mg (42s) and 20 mg (9s) (51 ea)

Rivastigmine**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Capsule, Oral:
Generic: 1.5 mg, 3 mg, 4.5 mg, 6 mg
Patch 24 Hour, Transdermal:
Generic: 4.6 mg/24 hr (30 ea); 9.5 mg/24 hr (1 ea, 30 ea); 13.3 mg/24 hr (30 ea)

Rizatriptan**DoD Uniform Formulary Outpatient Dosage Forms
BASIC CORE FORMULARY**

Tablet, Oral:
Generic: 5 mg, 10 mg
Tablet Dispersible, Oral:
Generic: 5 mg, 10 mg

Rocuronium**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Solution, Intravenous, as bromide:
Generic: 50 mg/5 mL (5 mL); 100 mg/10 mL (10 mL)
Solution, Intravenous, as bromide [preservative free]:
Generic: 50 mg/5 mL (5 mL); 100 mg/10 mL (10 mL)

Roflumilast**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Tablet, Oral:
Daliresp: 500 mcg

RomiDEPsin**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Solution Reconstituted, Intravenous:
Istodax: 10 mg (1 ea) [contains alcohol, usp, propylene glycol]
Istodax (Overfill): 10 mg (1 ea) [contains alcohol, usp, propylene glycol]

RomiPLOstim**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Solution Reconstituted, Subcutaneous [preservative free]:
Nplate: 250 mcg (1 ea); 500 mcg (1 ea)

Romosozumab**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Solution Prefilled Syringe, Subcutaneous [preservative free]:
Evenity: Romosozumab-aqqg 105 mg per 1.17 mL (1.17 mL)

ROPINIRole**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Tablet, Oral:
Generic: 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg, 5 mg
Tablet Extended Release 24 Hour, Oral:
Generic: 2 mg, 4 mg, 6 mg, 8 mg, 12 mg

Ropivacaine**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Solution, Injection, as hydrochloride [preservative free]:
Generic: 2 mg/mL (10 mL, 20 mL, 100 mL); 5 mg/mL (20 mL, 30 mL); 7.5 mg/mL (20 mL); 10 mg/mL (10 mL, 20 mL)

Rosuvastatin**DoD Uniform Formulary Outpatient Dosage Forms
BASIC CORE FORMULARY**

Tablet, Oral:
Generic: 5 mg, 10 mg, 20 mg, 40 mg
UNIFORM FORMULARY
Tablet, Oral:
Crestor: 5 mg, 10 mg, 20 mg, 40 mg

Rotavirus Vaccine**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Powder, for suspension, oral [preservative free; human derived]:
Rotarix: G1P[8] $\geq 10^6$ CCID₅₀ per 1 mL [contains sorbitol, sucrose; supplied with diluent which may contain natural rubber/natural latex in packaging]
Solution, oral [preservative free; bovine and human derived]:
RotaTeq: G1 $\geq 2.2 \times 10^6$ infectious units, G2 $\geq 2.8 \times 10^6$ infectious units, G3 $\geq 2.2 \times 10^6$ infectious units, G4 $\geq 2 \times 10^6$ infectious units, and P1A [8] $\geq 2.3 \times 10^6$ infectious units per 2 mL (2 mL) [contains sucrose]

Rotigotine**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Patch 24 Hour, Transdermal:
Neupro: 1 mg/24 hr (30 ea); 2 mg/24 hr (30 ea); 3 mg/24 hr (30 ea); 4 mg/24 hr (30 ea); 6 mg/24 hr (30 ea); 8 mg/24 hr (30 ea) [contains sodium metabisulfite]

Rufinamide**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Suspension, Oral:
Banzel: 40 mg/mL (460 mL) [contains methylparaben, propylene glycol, propylparaben; orange flavor]
Tablet, Oral:
Banzel: 200 mg, 400 mg [scored]

Ruxolitinib**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Tablet, Oral:
Jakafi: 5 mg, 10 mg, 15 mg, 20 mg, 25 mg

Saccharomyces boulardii**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Capsule, oral:
Florastor: 250 mg [contains lactose 32.5 mg/capsule, magnesium 2.85 mg/capsule; provides 5 billion live cells]
Powder, oral:
Florastor Kids: 250 mg/packet (10s) [contains lactose 32.5 mg/packet, magnesium 2.85 mg/packet; tutti frutti flavor; provides 5 billion live cells]

Sacrosidase**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Solution, Oral:
Sucraid: 8500 units/mL (118 mL) [contains papain]

Sacubitril and Valsartan**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Tablet, Oral:
Entresto: Sacubitril 24 mg and valsartan 26 mg
Entresto: Sacubitril 49 mg and valsartan 51 mg
Entresto: Sacubitril 97 mg and valsartan 103 mg

Salicylic Acid**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Cream, External:
Generic: 6% (400 g, 454 g)
Foam, External:
SalAc: 2% (100 g) [contains alcohol, usp]
Generic: 6% (70 g, 200 g)
Gel, External:
Exuviance Blemish Treatment: 2% (15 g) [contains denatured alcohol, peanut oil, propylene glycol]
Keralyt: 3% (28.4 g) [contains alcohol, usp]
Keralyt: 6% (40 g, 100 g) [contains hydroxypropyl cellulose, propylene glycol, sd alcohol 40]
Sal-Plant: 17% (14 g)
Generic: 6% (40 g, 240 g)
Kit, External:
Generic: 6%
Liquid, External:
Neutrogena Oil-Free Acne Wash: 2% (124 mL) [contains benzalkonium chloride, disodium edta, propylene glycol]
Psoriasisin: 3% (177 mL) [dye free, fragrance free]
Salicylic Acid Wart Remover: 27.5% (10 mL) [contains isopropyl alcohol]
Scalpicin 2 in 1: 3% (44 mL) [fragrance free; contains menthol, propylene glycol]
Virasal: 27.5% (10 mL) [contains isopropyl alcohol, isopropyl-metacresol] (isopropyl-m-cresol)
Generic: 26% (10 mL); 27.5% (10 mL)
Lotion, External:
Salitech: 5% (177 mL) [contains cetearyl alcohol, cetyl alcohol, methylparaben, propylparaben]
Generic: 6% (400 g, 414 mL, 473 mL)
Ointment, External:
Bensal HP: 3% (30 g)
Pad, External:
Clear Away 1-Step Wart Remover: 40% (14 ea)
Corn Remover One Step: 40% (6 ea)
Corn Remover Ultra Thin: 40% (9 ea)
Mediplast: 40% (1 ea, 25 ea)
One Step Callus Remover: 40% (4 ea)
Stri-Dex Maximum Strength: 2% (55 ea, 90 ea) [alcohol free]
Stri-Dex Sensitive Skin: 0.5% (55 ea, 90 ea) [alcohol free]

SALICYLIC ACID

Stridex Essential: 1% (55 ea) [alcohol free; contains menthol, tetrasodium etidronate]

Shampoo, External:

Betasal: 3% (480 mL)

Ionil: 2% (120 mL)

P & S: 2% (236 mL) [contains edetate sodium (tetrasodium), methylparaben, propylparaben, trolamine (triethanolamine)]

Salex: 6% (177 mL) [contains methylparaben, propylparaben, trolamine (triethanolamine)]

Generic: 6% (177 mL)

Solution, External:

Gordofilm: 16.7% (15 mL)

Salactic Film: 17% (15 mL)

Salisol: 23% (10 mL) [contains isopropyl alcohol]

Salisol Forte: 26% (10 mL) [contains isopropyl alcohol]

UltraSal-ER: 28.5% (10 mL) [contains isopropyl alcohol, phenol, polysorbate 80]

Generic: 28.5% (10 mL)

NONFORMULARY

Solution, External:

Xalix: 28% (10 g) [contains isopropyl alcohol]

Saliva Substitute

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Liquid, oral:

Biotene Oral Balance: Water, starch, sunflower oil, propylene glycol, xylitol, glycerine, purified milk extract (45 mL) [sugar-free]

Numoisyn: Water, sorbitol, linseed extract, *Chondrus crispus*, methylparaben, sodium benzoate, potassium sorbate, dipotassium phosphate, propylparaben (300 mL)

Lozenge, oral:

Numoisyn: Sorbitol 0.3 g/lozenge, polyethylene glycol, malic acid, sodium citrate, calcium phosphate dibasic, hydrogenated cottonseed oil, citric acid, magnesium stearate, silicon dioxide (100s)

SalivaSure: Xylitol, citric acid, apple acid, sodium citrate dihydrate, sodium carboxymethylcellulose, dibasic calcium phosphate, silica colloidal, magnesium stearate, stearic acid (90s)

Powder, for reconstitution, oral:

NeutraSal: Calcium chloride, sodium bicarbonate, sodium chloride, and sodium phosphates (30s, 120s)

SalivaMAX: Calcium chloride, sodium bicarbonate, sodium chloride, and sodium phosphates (30s, 120s)

Salivate Rx: Calcium chloride, sodium bicarbonate, sodium chloride, and sodium phosphates (30s)

Solution, oral:

Caphosol: Dibasic sodium phosphate 0.032%, monobasic sodium phosphate 0.009%, calcium chloride 0.052%, sodium chloride 0.569%, purified water (30 mL) [packaged in two 15 mL ampuls when mixed together provide one 30 mL dose]

Entertainer's Secret: Sodium carboxymethylcellulose, aloe vera gel, glycerin (60 mL) [ethanol free; honey-apple flavor]

Solution, oral [mouthwash/gargle]:

Oasis: Water, glycerin, sorbitol, poloxamer 338, PEG-60, hydrogenated castor oil, copovidone, sodium benzoate, carboxymethylcellulose (473 mL) [ethanol free, sugar free; mild mint flavor]

Solution, oral [spray]:

Aquoral: Oxidized glycerol triesters and silicon dioxide (5.6 mL) [contains aspartame; citrus flavor]

Biotene Moisturizing Mouth Spray: Water, polyglycol, propylene glycol, sunflower oil, xylitol, milk protein extract, potassium sorbate, acesulfame K, potassium thiocyanate, lysozyme, lactoferrin, lactoperoxidase (45 mL)

Moi-Stir: Water, sorbitol, sodium carboxymethylcellulose, methylparaben, propylparaben, potassium chloride, dibasic sodium phosphate, calcium chloride, magnesium chloride, sodium chloride (120 mL)

Mouth Kote: Water, xylitol, sorbitol, yerba santa, citric acid, ascorbic acid, sodium saccharin, sodium benzoate (5 mL, 60 mL, 240 mL) [ethanol free, sugar free; lemon-lime flavor]

Oasis: Glycerin, cetylpyridinium, copovidone (30 mL) [ethanol free, sugar free; contains sodium benzoate; delivers ~150 sprays, mild mint flavor]

Salmeterol

DoD Uniform Formulary Outpatient Dosage Forms

BASIC CORE FORMULARY

Aerosol Powder Breath Activated, Inhalation:

Serevent Diskus: 50 mcg (28s, 60s) [contains lactose]

Salsalate

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:

Generic: 500 mg, 750 mg

Samarium Sm 153 Lexidronam

DoD Uniform Formulary Outpatient Dosage Forms

NOT COVERED

Solution, Intravenous:

Quadramet: 1850 MBq/mL (1 ea)

Sapropterin

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Packet, Oral, as dihydrochloride:

Kuvan: 100 mg (1 ea, 30 ea); 500 mg (1 ea, 30 ea)

Tablet Soluble, Oral, as dihydrochloride:

Kuvan: 100 mg

Saquinavir

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule, Oral:

Invirase: 200 mg

Tablet, Oral:

Invirase: 500 mg

Sargramostim

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution Reconstituted, Intravenous [preservative free]:

Leukine: 250 mcg (1 ea) [contains benzyl alcohol]

Satralizumab

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution Prefilled Syringe, Subcutaneous [preservative free]:

Ensprng: Satralizumab-mwge 120 mg/mL (1 mL)

Scopolamine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Patch 72 Hour, Transdermal:

Transderm-Scop (1.5 mg): 1 mg/3 days(1 ea, 4 ea, 10 ea, 24 ea)

Solution, Injection, as hydrobromide:

Generic: 0.4 mg/mL (1 mL)

Sebelipase Alfa

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Intravenous [preservative free]:

Kanuma: 20 mg/10 mL (10 mL) [contains albumin human, egg white (egg protein)]

Secnidazole

DoD Uniform Formulary Outpatient Dosage Forms

NONFORMULARY

Packet, Oral:

Solosec: 2 g (1 ea) [contains polyethylene glycol]

Secretin

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution Reconstituted, Intravenous:

ChiRhoStim: 16 mcg (1 ea)

SecreFlo: 16 mcg (1 ea)

Secukinumab

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution Auto-injector, Subcutaneous [preservative free]:

Cosentyx Sensoready 300 Dose: 150 mg/mL (1 mL) [contains mouse (murine) and/or hamster protein, polysorbate 80]

Cosentyx Sensoready Pen: 150 mg/mL (1 mL) [contains mouse (murine) and/or hamster protein, polysorbate 80]

Solution Prefilled Syringe, Subcutaneous [preservative free]:

Cosentyx: 150 mg/mL (1 mL) [contains mouse (murine) and/or hamster protein, polysorbate 80]

Cosentyx 300 Dose: 150 mg/mL (1 mL) [contains mouse (murine) and/or hamster protein, polysorbate 80]

Selegiline

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule, Oral, as hydrochloride:

Generic: 5 mg

Tablet, Oral, as hydrochloride:

Generic: 5 mg

Tablet Dispersible, Oral, as hydrochloride:

Zelapar: 1.25 mg [contains aspartame; grapefruit flavor]

NONFORMULARY

Patch 24 Hour, Transdermal:

Emsam: 6 mg/24 hr (30 ea); 9 mg/24 hr (30 ea); 12 mg/24 hr (30 ea)

Selenium

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule, Oral:

Selenicaps-200: 200 mcg [corn free, no artificial color(s), rye free, sugar free, wheat free, yeast free]

Capsule, Oral [preservative free]:

Se-100: 100 mcg [dye free, yeast free]

Liquid, Oral:

Aqueous Selenium: 95 mcg/drop (15 mL) [contains sodium benzoate]

Solution, Intravenous:

Generic: 40 mcg/mL (10 mL)

Tablet, Oral:

Selenimin: 125 mcg [corn free, rye free, starch free, sugar free, wheat free]

Generic: 50 mcg, 200 mcg

Tablet, Oral [preservative free]:

Generic: 50 mcg, 200 mcg

Tablet Extended Release, Oral [preservative free]:

Generic: 200 mcg

Selenium Sulfide

DoD Uniform Formulary Outpatient Dosage Forms

BASIC CORE FORMULARY

Lotion, External:

Generic: 2.5% (120 mL)

UNIFORM FORMULARY

Shampoo, External:

Anti-Dandruff: 1% (207 mL) [contains menthol]

]Dandrex: 1% (240 mL)

Selexipag

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:

Upravi: 200 mcg, 400 mcg, 600 mcg, 800 mcg, 1000 mcg, 1200 mcg, 1400 mcg, 1600 mcg

Tablet Therapy Pack, Oral:

Upravi: 200 mcg (140s) and 800 mcg (60s) (200 ea)

Selpercatinib

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule, Oral:

Retevmo: 40 mg, 80 mg

Selumetinib

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule, Oral, as sulfate:

Koselugo: 10 mg, 25 mg

Senna

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Leaves, Oral:

Generic: (454 g)

Liquid, Oral:

Senexon: 8.8 mg/5 mL (237 mL) [contains methylparaben, propylene glycol, propylparaben]

Syrup, Oral:

Generic: 8.8 mg/5 mL (5 mL, 236 mL, 237 mL); 176 mg/5 mL (15 mL, 237 mL)

Tablet, Oral:

Ex-Lax Maximum Strength: 25 mg [sodium free]

Senna Maximum Strength: 25 mg

Senokot Extra Strength: 17.2 mg

Generic: 8.6 mg, 15 mg

Tablet Chewable, Oral:

Ex-Lax: 15 mg

Ex-Lax: 15 mg [chocolate flavor]

Sertraline

DoD Uniform Formulary Outpatient Dosage Forms

BASIC CORE FORMULARY

Concentrate, Oral:

Generic: 20 mg/mL (60 mL)

Tablet, Oral:

Generic: 25 mg, 50 mg, 100 mg

Sevelamer

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Packet, Oral, as carbonate:

Renvela: 0.8 g (1 ea, 90 ea); 2.4 g (1 ea, 90 ea) [citrus flavor]

Tablet, Oral, as carbonate:

Renvela: 800 mg

Tablet, Oral, as hydrochloride:

Renagel: 400 mg, 800 mg

Sevoflurane

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Inhalation:

Generic: (100 mL, 250 mL)

Sildenafil

DoD Uniform Formulary Outpatient Dosage Forms

BASIC CORE FORMULARY

Tablet, Oral:

Generic: 25 mg, 50 mg, 100 mg

Extended Core Formulary

Tablet, Oral

Generic: 20 mg

UNIFORM FORMULARY

Solution, Intravenous:

Generic: 10 mg/12.5 mL (12.5 mL)

Suspension Reconstituted, Oral:

Generic: 10 mg/mL (112 mL) [contains sodium benzoate]

Tablet, Oral:

Generic: 20 mg

NOT COVERED

Tablet, Oral:

Viagra: 25 mg, 50 mg, 100 mg

Siltuximab

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution Reconstituted, Intravenous [preservative free]:

Sylvant: 100 mg (1 ea); 400 mg (1 ea) [contains mouse (murine) and/or hamster protein, polysorbate 80]

Silver

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Gel, External:

Arida: (25 g, 45 g, 100 g, 500 g, 1000 g, 5000 g, 25000 g)

Pad, External:

Silverseal Hydrogel Dressing: 2"X3" (1 ea, 10 ea); 4"X5" (1 ea, 10 ea) [contains methylparaben, propylparaben]

Silver Nitrate

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Applicator sticks, topical: Silver nitrate 75% and potassium nitrate 25%

Solution, topical: 0.5% (960 mL); 10% (30 mL); 25% (30 mL); 50% (30 mL)

Silver Sulfadiazine

DoD Uniform Formulary Outpatient Dosage Forms

BASIC CORE FORMULARY

Cream, External:

Generic: 1% (20 g, 25 g, 50 g, 85 g, 400 g)

Simethicone

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule, Oral:

Phazyme Maximum Strength: 250 mg

Generic: 125 mg, 180 mg

Liquid, Oral:

Gas-X Infant Drops: 20 mg/0.3 mL (30 mL) [alcohol free, no artificial color(s), no artificial flavor(s), saccharin free; contains polyethylene glycol, sodium benzoate]

Strip, Oral:

Gas-X Childrens: 40 mg (16 ea) [contains alcohol, usp; sweet cinnamon flavor]

Gas-X Extra Strength: 62.5 mg (18 ea, 30 ea) [contains alcohol, usp; peppermint flavor]

Gas-X Extra Strength: 62.5 mg (18 ea) [contains alcohol, usp]

Suspension, Oral:

Gas Relief: 20 mg/0.3 mL (30 mL) [dye free; contains sodium benzoate; fruit flavor]

Infants Gas Relief: 20 mg/0.3 mL (30 mL) [contains sodium benzoate]

Infants Simethicone: 20 mg/0.3 mL (30 mL) [alcohol free, no artificial color(s), no artificial flavor(s), saccharin free; contains polyethylene glycol, sodium benzoate]

Generic: 40 mg/0.6 mL (30 mL)

Tablet Chewable, Oral:

Generic: 80 mg, 125 mg

Simvastatin

DoD Uniform Formulary Outpatient Dosage Forms

BASIC CORE FORMULARY

Tablet, Oral:

Generic: 5 mg, 10 mg, 20 mg, 40 mg

NONFORMULARY

Suspension, Oral:

FloLipid: 20 mg/5 mL (150 mL); 40 mg/5 mL (150 mL)

SINECATECHINS

Sinecatechins

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Ointment, External:

Veregen: 15% (30 g) [contains propylene glycol]

Siponimod

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral, as fumarate:

Mayzent: 0.25 mg, 2 mg [contains soybean lecithin]

Tablet Therapy Pack, Oral, as fumarate:

Mayzent Starter Pack: 0.25 mg (12 ea) [contains soybean lecithin]

Sipuleucel-T

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Suspension, Intravenous [preservative free]:

Provenge: (250 mL)

Sirolimus

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Oral:

Rapamune: 1 mg/mL (60 mL) [contains alcohol, usp]

Tablet, Oral:

Rapamune: 0.5 mg, 1 mg, 2 mg

Generic: 0.5 mg, 1 mg, 2 mg

Sitagliptin

DoD Uniform Formulary Outpatient Dosage Forms

BASIC CORE FORMULARY

Tablet, Oral:

Januvia: 25 mg, 50 mg, 100 mg

Sitagliptin and Metformin

DoD Uniform Formulary Outpatient Dosage Forms

BASIC CORE FORMULARY

Tablet, Oral:

Janumet 50/500: Sitagliptin 50 mg and metformin hydrochloride 500 mg

Janumet 50/1000: Sitagliptin 50 mg and metformin hydrochloride 1000 mg

Tablet, Extended Release, Oral:

Janumet XR: 50/500: Sitagliptin 50 mg and metformin hydrochloride 500 mg

Janumet XR: 50/1000: Sitagliptin 50 mg and metformin hydrochloride 1000 mg

Janumet XR: 100/1000: Sitagliptin 100 mg and metformin hydrochloride 1000 mg

Sodium Acetate

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Intravenous, as anhydrous:

Generic: 2 mEq/mL (20 mL, 50 mL, 100 mL); 4 mEq/mL (50 mL, 100 mL)

Sodium Bicarbonate

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Powder, Oral:

Generic: (1 g, 120 g, 454 g, 500 g, 1000 g, 2500 g, 10000 g, 12000 g, 25000 g, 45000 g)

Solution, Intravenous:

Neut: 4% (5 mL)

Generic: 4.2% (5 mL, 10 mL); 7.5% (50 mL); 8.4% (10 mL, 50 mL)

Tablet, Oral:

Generic: 325 mg, 650 mg

Sodium Chloride

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Aerosol Solution, Inhalation:

Broncho Saline: 0.9% (90 mL, 240 mL)

Aerosol Solution, Nasal [preservative free]:

Ocean Complete Sinus Rinse: (177 mL) [drug free]

Gel, Nasal:

Ayr Saline Nasal: (14.1 g) [contains aloe barbadensis, methylparaben, propylparaben, soybean oil]

Ayr Saline Nasal No-Drip: (22 mL) [contains aloe barbadensis, benzalkonium chloride, benzyl alcohol, soybean oil]

Entsol Nasal: (20 g)

Ocean Nasal Moisturizer: (14 g) [drug free; contains methylparaben, propylparaben, trolamine (triethanolamine)]

Rhinase: (30 g) [odor free; contains benzalkonium chloride]

Liquid, External:

Atrapro Dermal Spray: (236 mL)

DiaB Klenz: (240 mL)

Elta Dermal Wound Cleanser: (240 mL)

MicroKlenz Wound Cleanser: (240 mL)

RadiaKlenz: (240 mL)

Remedy 4-in-1 Body Cleanser: 0.5% (236 mL)

Sea-Clens Wound Cleanser: (178 mL, 355 mL)

Ultra-Klenz: (240 mL, 360 mL)

Nebulization Solution, Inhalation:

Generic: 0.9% (3 mL)

Nebulization Solution, Inhalation [preservative free]:

HyperSal: 3.5% (4 mL) [latex free]

Generic: 0.9% (3 mL, 5 mL, 15 mL); 3% (4 mL, 15 mL); 7% (4 mL); 10% (4 mL, 15 mL)

Ointment, Ophthalmic:

Generic: 5% (3.5 g)

Packet, Nasal [preservative free]:

Ayr Saline Nasal Neti Rinse: 1.57 g (40 ea) [iodine free]

Ayr Saline Nasal Rinse: 1.57 g (50 ea, 51 ea, 100 ea) [iodine free]

Solution, External:

Saljet: 0.9% (30 mL)

Wound Wash Saline: 0.9% (210 mL)

Solution, External [preservative free]:

Safe Wash: 0.9% (210 mL) [drug free, latex free]

Saljet Rinse: 0.9% (30 mL)

Solution, Injection:

Generic: 0.9% (2 mL, 10 mL, 20 mL, 30 mL, 100 mL); 14.6% (20 mL, 40 mL)

Solution, Injection [preservative free]:

Generic: 0.9% (2 mL, 3 mL, 5 mL, 10 mL, 20 mL, 50 mL)

Solution, Intravenous:

Generic: 0.45% (25 mL, 50 mL, 100 mL, 250 mL, 500 mL, 1000 mL); 0.9% (2.5 mL, 3 mL, 10 mL, 25 mL, 50 mL, 100 mL, 150 mL, 250 mL, 500 mL, 1000 mL); 3% (500 mL); 5% (500 mL); 23.4% (30 mL, 100 mL, 200 mL, 250 mL [DSC])

Solution, Intravenous [preservative free]:

Generic: 0.9% (1 mL, 2 mL, 2.5 mL, 3 mL, 5 mL, 10 mL, 50 mL, 100 mL, 125 mL, 500 mL, 1000 mL)

Solution, Irrigation:

Generic: 0.9% (250 mL, 500 mL, 1000 mL, 1500 mL, 2000 mL, 3000 mL, 4000 mL, 5000 mL)

Solution, Nasal:

4-Way Saline: (29.6 mL)

Afrin Saline Nasal Mist: 0.65% (30 mL, 45 mL)

Altamist Spray: 0.65% (45 mL, 60 mL)

Ayr: 0.65% (50 mL)

Ayr Nasal Mist Allergy/Sinus: 2.65% (50 mL) [contains benzalkonium chloride]

Baby Ayr Saline: 0.65% (30 mL)

Nasal Moist: 0.65% (15 mL, 45 mL)

Ocean for Kids: 0.65% (37.5 mL) [alcohol free, drug free; contains benzalkonium chloride]

Generic: 0.65% (44 mL, 45 mL)

Solution, Nasal [preservative free]:

Entsol Nasal: 3% (100 mL) [drug free]

Entsol Nasal Wash: (237 mL)

Ocean Ultra Saline Mist: (90 mL) [drug free]

Solution, Ophthalmic:

Muro 128: 2% (15 mL); 5% (15 mL, 30 mL)

Generic: 5% (15 mL)

Solution, Oral:

Generic: 4 mEq/mL (23.4%) (473 mL)

Swab, Nasal:

Ayr Saline Nasal Gel: (20 ea) [contains methylparaben, propylparaben, soybean oil, trolamine (triethanolamine)]

Tablet, Oral:

Generic: 1 g

Sodium Chloride and Sodium Citrate

Sodium Chondroitin Sulfate and Sodium Hyaluronate

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Injection, solution, intraocular:

DisCoVisc: Sodium chondroitin sulfate \leq 4% and sodium hyaluronate \leq 1.7% (1 mL) [provided in a kit which also contains 27-gauge cannula and cannula locking ring]

Viscoat: Sodium chondroitin sulfate \leq 4% and sodium hyaluronate \leq 3% (0.5 mL, 0.75 mL) [packaged with 27-gauge cannula and cannula locking ring]

Sodium Citrate

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, oral: 450 mg (30 mL)

Sodium Citrate and Citric Acid

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Oral:

Oracit: Sodium citrate 490 mg and citric acid 640 mg per 5 mL (15 mL, 30 mL, 500 mL, 3840 mL)

Shohl's Solution (Modified): Sodium citrate 500 mg and citric acid 300 mg per 5 mL (480 mL) [contains alcohol]

Generic: Sodium citrate 500 mg and citric acid 334 mg per 5 mL (480 mL)

Sodium Glycerophosphate Pentahydrate**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution, Intravenous:

Glycophos: 1 mmol/mL (20 mL)

Sodium Hypochlorite**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Gel, External:

Anasept Antimicrobial: 0.057% (86 g) [latex free]

Liquid, External:

Anasept: 0.057% (237 mL)

Anasept: 0.057% (443 mL) [latex free]

Solution, External:

H-Chlor 6: 0.062% (473 mL)

Generic: 0.125% (473 mL); 0.25% (473 mL); 0.5% (473 mL)

Sodium Iodide**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution, Injection:

Iodopen: 100 mcg/mL (10 mL)

Sodium Lactate**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution, Intravenous:

Generic: 5 mEq/mL (10 mL)

Sodium Nitrite**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution, Intravenous:

Generic: 30 mg/mL (10 mL)

Sodium Nitrite and Sodium Thiosulfate**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution, Injection [combination package]:

Nithiodote: Sodium nitrite 300 mg/10 mL (10 mL) and sodium thiosulfate 12.5 g/50 mL (50 mL)

Sodium Oxybate**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution, Oral:

Xyrem: 500 mg/mL (180 mL)

Sodium Phenylacetate and Sodium Benzoate**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution, Injection [concentrate]:

Generic: Sodium phenylacetate 100 mg and sodium benzoate 100 mg per 1 mL (50 mL)

Sodium Phenylbutyrate**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Powder, Oral:

Generic: (250 g)

Tablet, Oral:

Buphenyl: 500 mg [contains sodium 62 mg/tablet]

Sodium Phosphates**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution, Injection [concentrate; preservative free]:

Generic: Phosphorus 3 mmol and sodium 4 mEq per 1 mL (5 mL, 15 mL, 50 mL) [equivalent to phosphorus 93 mg and sodium 92 mg per 1 mL; source of electrolytes: monobasic and dibasic sodium phosphate]

Solution, Oral:

Generic: Monobasic sodium phosphate monohydrate 2.4 g and dibasic sodium phosphate heptahydrate 0.9 g per 5 mL (45 mL) [sugar free; contains sodium 556 mg/5 mL, sodium benzoate; ginger-lemon flavor]

Solution, Rectal [enema]:

Fleet Enema: Monobasic sodium phosphate monohydrate 19 g and dibasic sodium phosphate heptahydrate 7 g per 118 mL delivered dose (133 mL) [contains sodium 4.4 g/118 mL]

Fleet Enema Extra: Monobasic sodium phosphate monohydrate 19 g and dibasic sodium phosphate heptahydrate 7 g per 197 mL delivered dose (230 mL) [contains sodium 4.4 g/197 mL]

Fleet Pedia-Lax™ Enema: Monobasic sodium phosphate monohydrate 9.5 g and dibasic sodium phosphate heptahydrate 3.5 g per 59 mL delivered dose (66 mL) [contains sodium 2.2 g/59 mL]

LaCrosse Complete: Monobasic sodium phosphate monohydrate 19 g and dibasic sodium phosphate heptahydrate 7 g per 118 mL delivered dose (133 mL) [contains sodium 4.4 g/118 mL]

Generic: Monobasic sodium phosphate monohydrate 19 g and dibasic sodium phosphate heptahydrate 7 g per 118 mL delivered dose (133 mL)

Tablet, Oral [scored]:

OsmoPrep: Monobasic sodium phosphate monohydrate 1.102 g and dibasic sodium phosphate anhydrous 0.398 g [sodium phosphate 1.5 g per tablet; gluten free]

Sodium Picosulfate, Magnesium Oxide, and Citric Acid**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Powder for solution, oral [kit]:

Prepopik: Sodium picosulfate 10 mg, magnesium oxide 3.5 g, and citric acid 12 g per packet (2s) [orange flavor]

NONFORMULARY

Solution, Oral:

Clenpiq: Sodium picosulfate 10 mg, magnesium oxide 3.5 g, and citric acid 12 g per 160 mL (2 x 160 mL)

Sodium Polystyrene Sulfonate**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Powder, Oral:

Generic: (15 g, 453.6 g, 454 g)

Suspension, Oral:

Generic: 15 g/60 mL (60 mL, 480 mL, 500 mL)

Suspension, Rectal:

Generic: 30 g/120 mL (120 mL); 50 g/200 mL (200 mL)

Sodium Sulfate, Potassium Sulfate, and Magnesium Sulfate**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution, Oral:

Suprep Bowel Prep Kit: Sodium sulfate 17.5 g, potassium sulfate 3.13 g, and magnesium sulfate 1.6 g per 180 mL (2 x 180 mL) [contains sodium benzoate]

Sodium Tetradecyl Sulfate**DoD Uniform Formulary Outpatient Dosage Forms****NOT COVERED**

Solution, Intravenous, as sulfate:

Sotradecol: 1% (2 mL); 3% (2 mL) [contains benzyl alcohol]

Sodium Thiosulfate**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution, Intravenous:

Generic: 25% [250 mg/mL] (50 mL)

Sodium Zirconium Cyclosilicate**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Packet, Oral:

Lokelma: 5 g (1 ea, 30 ea); 10 g (1 ea, 30 ea)

Sofosbuvir and Velpatasvir**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Tablet, Oral:

Generic: Sofosbuvir 400 mg and velpatasvir 100 mg

Sofosbuvir, Velpatasvir, and Voxilaprevir**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Tablet, Oral:

Vosevi: Sofosbuvir 400 mg, velpatasvir 100 mg, and voxilaprevir 100 mg

Solifenacin**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Tablet, Oral, as succinate:

VESicare: 5 mg, 10 mg

Somatropin**DoD Uniform Formulary Outpatient Dosage Forms****Extended Core Formulary**

Solution, Subcutaneous:

Norditropin NordiFlex Pen; Norditropin FlexPro: 5 mg/1.5 mL (1.5 mL); 10 mg/1.5 mL (1.5 mL); 15 mg/1.5 mL (1.5 mL); 30 mg/3 mL (3 mL) [contains phenol]

UNIFORM FORMULARY

Solution Reconstituted, Subcutaneous:

Serostim: 4 mg (1 ea); 5 mg (1 ea); 6 mg (1 ea)

Zomacton: 5 mg (1 ea) [contains benzyl alcohol]

Zomacton: 10 mg (1 ea) [contains metacresol]

Zorbtive: 8.8 mg (1 ea) [contains benzyl alcohol]

NONFORMULARY

Solution, Subcutaneous:

Nutropin AQ NuSpin 5: 5 mg/2 mL (2 mL) [contains phenol]

Nutropin AQ NuSpin 10: 10 mg/2 mL (2 mL) [contains phenol]

Nutropin AQ NuSpin 20: 20 mg/2 mL (2 mL) [contains phenol]

SOMATROPIN

Solution Reconstituted, Injection:
Humatrope: 5 mg (1 ea); 6 mg (1 ea); 12 mg (1 ea); 24 mg (1 ea)
Saizen: 5 mg (1 ea); 8.8 mg (1 ea)
Saizen Click.Easy: 8.8 mg (1 ea)
Solution Reconstituted, Subcutaneous:
Genotropin: 5 mg (1 ea); 12 mg (1 ea) [contains metacresol]
Omnitrope: 5.8 mg (1 ea)
Serostim: 4 mg (1 ea); 5 mg (1 ea); 6 mg (1 ea)
Zorbtive: 8.8 mg (1 ea) [contains benzyl alcohol]
Solution Reconstituted, Subcutaneous [preservative free]:
Genotropin MiniQuick: 0.2 mg (1 ea); 0.4 mg (1 ea); 0.6 mg (1 ea); 0.8 mg (1 ea); 1 mg (1 ea); 1.2 mg (1 ea); 1.4 mg (1 ea); 1.6 mg (1 ea); 1.8 mg (1 ea); 2 mg (1 ea)
Solution, Subcutaneous:
Omnitrope: 5 mg/1.5 mL (1.5 mL) [contains benzyl alcohol]
Omnitrope: 10 mg/1.5 mL (1.5 mL) [contains phenol]

Sonidegib

**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**
Capsule, Oral:
Odomzo: 200 mg

SORafenib

**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**
Tablet, Oral:
NexAVAR: 200 mg

Sorbitol

**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**
Solution, Irrigation:
Generic: 3% (3000 mL); 3.3% (2000 mL, 4000 mL)
Solution, Oral:
Generic: 70% (30 mL, 473 mL, 474 mL, 480 mL, 3840 mL)
Solution, Rectal:
Generic: 70% (473 mL)

Sotalol

**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**
Solution, Intravenous, as hydrochloride:
Generic: 150 mg/10 mL (10 mL)
Solution, Oral, as hydrochloride:
Sotylize: 5 mg/mL (250 mL, 480 mL) [contains sodium benzoate; grape flavor]
Tablet, Oral, as hydrochloride:
Generic: 80 mg, 120 mg, 160 mg, 240 mg

Sotorasib

Sotrovimab

Spinosad

**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**
Suspension, External:
Generic: 0.9% (120 mL)

Spironolactone

**DoD Uniform Formulary Outpatient Dosage Forms
BASIC CORE FORMULARY**
Tablet, Oral:
Generic: 25 mg
UNIFORM FORMULARY
Tablet, Oral:
Generic: 50 mg, 100 mg
NONFORMULARY
Suspension, Oral:
CaroSpir: 25 mg/5 mL (118 mL, 473 mL) [contains saccharin sodium; banana flavor]

Stavudine

**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**
Capsule, Oral:
Generic: 15 mg, 20 mg, 30 mg, 40 mg
Solution Reconstituted, Oral:
Zerit: 1 mg/mL (200 mL) [dye free; fruit flavor]

St Johns Wort

**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**
Capsule, Oral:
Generic: 300 mg

Streptomycin

**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Solution Reconstituted, Intramuscular:
Generic: 1 g (1 ea)

Streptozocin

**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**
Solution Reconstituted, Intravenous:
Zanosar: 1 g (1 ea)

Strontium-89

**DoD Uniform Formulary Outpatient Dosage Forms
NOT COVERED**
Solution, Intravenous, as chloride:
Generic: 1 mCi/mL (4 mL)

Succimer

**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**
Capsule, Oral:
Chemet: 100 mg

Succinylcholine

**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**
Solution, Injection, as chloride:
Anectine: 20 mg/mL (10 mL) [contains methylparaben]
Quelicin: 20 mg/mL (10 mL) [contains methylparaben, propylparaben]

Sucrafate

**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**
Tablet, Oral:
Generic: 1 g
NONFORMULARY
Suspension, Oral:
Carafate: 1 g/10 mL (420 mL) [contains methylparaben; cherry flavor]

Sucroferric Oxyhydroxide

**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**
Tablet Chewable, Oral:
Velphoro: 500 mg [berry flavor]

Sucrose

**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**
Solution, Oral:
Sweet-Ease Preserved: 24% (15 mL)
TootSweet: 24% (0.5 mL, 1 mL, 2 mL, 12 mL)
Solution, oral [preservative free]:
Sweet-Ease Natural: 24% (15 mL)

SUFentanil

**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**
Solution, Intravenous [preservative free]:
Generic: 50 mcg/mL (1 mL); 100 mcg/2 mL (2 mL); 250 mcg/5 mL (5 mL)

Sugammadex

**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**
Solution, Intravenous:
Bridion: 200 mg/2 mL (2 mL); 500 mg/5 mL (5 mL)

Sulfacetamide and Prednisolone

**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**
Ointment, Ophthalmic:
Blephamide: Sulfacetamide sodium 10% and prednisolone acetate 0.2% (3.5 g)
Solution, Ophthalmic [drops]:
Sulfacetamide sodium 10% and prednisolone sodium phosphate 0.25% (5 mL, 10 mL)
Suspension, Ophthalmic [drops]:
Blephamide: Sulfacetamide sodium 10% and prednisolone acetate 0.2% (5 mL, 10 mL) [contains benzalkonium chloride]

Sulfacetamide (Ophthalmic)

**DoD Uniform Formulary Outpatient Dosage Forms
BASIC CORE FORMULARY**
Solution, Ophthalmic, as sodium:
Generic: 10% (15 mL)
UNIFORM FORMULARY
Ointment, Ophthalmic, as sodium:
Generic: 10% (3.5 g)

Sulfacetamide (Topical)**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Cream, External, as sodium:

Ovace Plus: 10% (57 g) [contains benzyl alcohol, butylparaben, cetyl alcohol, disodium edta, ethylparaben, methylparaben, propylparaben]

Foam, External:

Ovace Plus: 9.8% (100 g) [contains benzyl alcohol, cetyl alcohol, propylene glycol]

Gel, External, as sodium:

Generic: 10% (355 mL)

Liquid, External, as sodium:

Generic: 10% (177 mL, 180 mL, 354.8 mL, 355 mL, 480 mL)

Lotion, External, as sodium:

Ovace Plus: 9.8% (57 g, 113 g) [contains benzyl alcohol, cetyl alcohol, disodium edta]

Generic: 10% (118 mL)

Shampoo, External, as sodium:

Generic: 10% (237 mL)

Suspension, External, as sodium:

Generic: 10% (118 mL)

SulfADIAZINE**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Tablet, Oral:

Generic: 500 mg

Sulfamethoxazole and Trimethoprim**DoD Uniform Formulary Outpatient Dosage Forms****BASIC CORE FORMULARY**

Suspension, Oral:

Generic: Sulfamethoxazole 200 mg and trimethoprim 40 mg per 5 mL (20 mL, 473 mL)

Tablet, Oral:

Generic: Sulfamethoxazole 400 mg and trimethoprim 80 mg

Generic: Sulfamethoxazole 800 mg and trimethoprim 160 mg

UNIFORM FORMULARY

Solution, Intravenous:

Generic: Sulfamethoxazole 80 mg and trimethoprim 16 mg per mL (5 mL, 10 mL, 30 mL)

Sulfanilamide**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Cream, Vaginal:

AVC Vaginal: 15% (120 g) [contains methylparaben, propylene glycol, propylparaben, trolamine (triethanolamine)]

SulfaSALazine**DoD Uniform Formulary Outpatient Dosage Forms****BASIC CORE FORMULARY**

Tablet, Oral:

Generic: 500 mg

Tablet Delayed Release, Oral:

Generic: 500 mg

Sulfonated Phenolics and Sulfuric Acid**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution, External [for oral mucosa]:

Debacterol: Sulfonated phenolics 50% and sulfuric acid 30% (1.5 mL) [for professional use only]

Swab, External [for oral mucosa]:

Debacterol: Sulfonated phenolics 50% and sulfuric acid 30% (12s) (0.2 mL) [for professional use only]

Sulfur and Salicylic Acid**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Cleanser, External [scrub]:

Pernox Lemon: Sulfur 2% and salicylic acid 1.5% (56 g, 113 g)

Pernox Regular: Sulfur 2% and salicylic acid 1.5% (113 g)

Shampoo, topical:

ala seb: Sulfur 2% and salicylic acid 2% (118 mL, 355 mL) [contains soya lecithin]

Sebex: Sulfur 2% and salicylic acid 2% (118 mL)

Sebulex: Sulfur 2% and salicylic acid 2% (200 g)

Sulfur and Sulfacetamide**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Cleanser, External:

AVAR LS: Sulfur 2% and sulfacetamide sodium 10% (100 g) [contains benzyl alcohol]

Generic: Sulfur 2% and sulfacetamide sodium 10% (227 g)

Generic: Sulfur 4.8% and sulfacetamide sodium 9.8% (285 g)

Generic: Sulfur 5% and sulfacetamide sodium 10% (170 g, 340 g)

Cream, External:

Generic: Sulfur 2% and sulfacetamide sodium 10% (57 g)

Generic: Sulfur 4.8% and sulfacetamide sodium 9.8% (57 g)

Generic: Sulfur 5% and sulfacetamide sodium 10% (28 g)

Foam, topical:

AVAR: Sulfur 5% and sulfacetamide sodium 9.5% (100 g) [contains benzyl alcohol]

Generic: Sulfur 5% and sulfacetamide sodium 10% (60 g)

Gel, topical: Sulfur 5% and sulfacetamide sodium 10% (45 g)

Lotion, topical:

Generic: Sulfur 4.8% and sulfacetamide sodium 9.8% (57 g)

Generic: Sulfur 5% and sulfacetamide sodium 10% (25 g, 30 g, 60 g)

Pad, External [cleansing cloth]:

Avar: Sulfur 5% and sulfacetamide sodium 9.5% (30s, 60s)

Plexion: Sulfur 4.8% and sulfacetamide sodium 9.8% (60s) [contains benzyl alcohol]

Rosula: Sulfur 5% and sulfacetamide sodium 10% (30s, 60s)

Generic: Sulfur 4% and sulfacetamide sodium 10% (60s)

Suspension, External:

Generic: Sulfur 4% and sulfacetamide sodium 8% (473 mL)

Generic: Sulfur 5% and sulfacetamide sodium 10% (30 g)

Wash, topical:

BP 10-1: Sulfur 1% and sulfacetamide sodium 10% (170 g)

BP Cleansing Wash: Sulfur 5% and sulfacetamide sodium 10% (480 mL) [contains urea]

Rosula Wash: Sulfur 4.5% and sulfacetamide sodium 10% (340.2 g)

Generic: Sulfur 4% and sulfacetamide sodium 9% (480 mL)

Wash, topical [emulsion-based]:

BP Cleansing Wash: Sulfur 4% and sulfacetamide sodium 10% (473 mL) [contains urea]

Generic: Sulfur 4.5% and sulfacetamide sodium 9% (454 g)

Sulfur Hexafluoride Lipid-Type A Microspheres**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Suspension Reconstituted, Intravenous:

Lumason: Lipid-type A 25 mg and sulfur hexafluoride 60.7 mg (1 ea) [contains polyethylene glycol]

Sulindac**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Tablet, Oral:

Generic: 150 mg, 200 mg

SUMAtriptan**DoD Uniform Formulary Outpatient Dosage Forms****BASIC CORE FORMULARY**

Solution Auto-injector, Subcutaneous, as succinate [strength expressed as base]:

Generic: 6 mg/0.5 mL (0.5 mL)

Solution Cartridge, Subcutaneous, as succinate [strength expressed as base]:

Imitrex STATdose Refill: 6 mg/0.5 mL (0.5 mL)

Tablet, Oral, as succinate [strength expressed as base]:

Generic: 25 mg, 50 mg, 100 mg

UNIFORM FORMULARY

Solution, Nasal:

Generic: 5 mg/actuation (1 ea); 20 mg/actuation (1 ea)

Solution Prefilled Syringe, Subcutaneous, as succinate [strength expressed as base, preservative free]:

Generic: 6 mg/0.5 mL (0.5 mL)

Solution, Subcutaneous, as succinate [strength expressed as base]:

Generic: 6 mg/0.5 mL (0.5 mL)

Solution, Subcutaneous, as succinate [strength expressed as base, preservative free]:

Generic: 6 mg/0.5 mL (0.5 mL)

NONFORMULARY

Exhaler Powder, Nasal, as succinate [strength expressed as base]:

Onzetra Xsail: 11 mg per nosepiece (2 ea)

Solution Auto-injector, Subcutaneous, as succinate [strength expressed as base]:

Zembrace SymTouch: 3 mg/0.5 mL (0.5 mL)

Generic: 4 mg/0.5 mL (0.5 mL)

Solution Jet-injector, Subcutaneous, as succinate [strength expressed as base]:

Sumavel DosePro: 6 mg/0.5 mL (0.5 mL)

Solution, Nasal:

NOT COVERED

Tosymra: 10 mg/actuation (1 ea)

SUNITinib**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Capsule, Oral:

Sutent: 12.5 mg, 25 mg, 37.5 mg, 50 mg

SURGICAL LUBRICANT

Surgical Lubricant

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Gel, External:

Surgilube: (3 g, 5 g, 56.7 g, 120.49 g) [contains propylene glycol]

Syrup, Simple

DoD Uniform Formulary Outpatient Dosage Forms

NOT COVERED

Syrup, Oral:

Generic: (480 mL, 500 mL, 3800 mL)

Tacrolimus (Systemic)

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule, Oral:

Generic: 0.5 mg, 1 mg, 5 mg

Capsule Extended Release 24 Hour, Oral:

Astagraf XL: 0.5 mg, 1 mg, 5 mg

Packet, Oral:

Prograf: 0.2 mg (50 ea); 1 mg (50 ea)

Solution, Intravenous:

Prograf: 5 mg/mL (1 mL) [contains alcohol, usp, cremophor eI]

Tablet Extended Release 24 Hour, Oral:

Envarsus XR: 0.75 mg, 1 mg, 4 mg

Tacrolimus (Topical)

DoD Uniform Formulary Outpatient Dosage Forms

BASIC CORE FORMULARY

Ointment, External:

Generic: 0.03% (30 g, 60 g, 100 g); 0.1% (30 g, 60 g, 100 g)

UNIFORM FORMULARY

Ointment, External:

Protopic: 0.03% (30 g, 60 g, 100 g); 0.1% (30 g, 60 g, 100 g)

Tadalafil

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:

Adcirca: 20 mg

Alyq: 20 mg

NONFORMULARY

Tablet, Oral:

Generic: 2.5 mg, 5 mg, 10 mg, 20 mg

NOT COVERED

Tablet, Oral:

Cialis: 2.5 mg, 5 mg, 10 mg, 20 mg

Tafamidis

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule, Oral:

Vyndamax: 61 mg

Tafenoquine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral, as succinate:

Krintafel: 150 mg

Tablet, Oral, as succinate [strength expressed as base]:

Arakoda: 100 mg

Tagraxofusp

DoD Uniform Formulary Outpatient Dosage Forms

NOT COVERED

Solution, Intravenous:

Elzonris: 1000 mcg/mL (1 mL)

Talazoparib

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule, Oral, as tosylate:

Talzenna: 0.25 mg, 1 mg

Talc (Sterile)

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Aerosol Powder, Intrapleural:

Sclerosol Intrapleural: 4 g (30 g) [contains dichlorodifluoromethane]

Suspension Reconstituted, Intrapleural:

Sterile Talc Powder: 5 g (1 ea)

Taliglucerase Alfa

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution Reconstituted, Intravenous [preservative free]:

Elelyso: 200 units (1 ea) [contains polysorbate 80]

Talimogene Laherparepvec

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Suspension, Intravesical [preservative free]:

Imlygic: 10⁶ (1 million) PFU/mL (1 mL); 10⁸ (100 million) PFU/mL (1 mL) [contains bovine serum]

Tamoxifen

DoD Uniform Formulary Outpatient Dosage Forms

BASIC CORE FORMULARY

Tablet, Oral:

Generic: 10 mg, 20 mg

UNIFORM FORMULARY

Solution, Oral:

Soltamox: 10 mg/5 mL (150 mL) [sugar free; contains alcohol, usp, propylene glycol; licorice-aniseed flavor]

Tamsulosin

DoD Uniform Formulary Outpatient Dosage Forms

BASIC CORE FORMULARY

Capsule, Oral, as hydrochloride:

Generic: 0.4 mg

Tapentadol

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet Extended Release 12 Hour, Oral:

Nucynta ER: 50 mg, 100 mg, 150 mg, 200 mg, 250 mg

NONFORMULARY

Tablet, Oral:

Nucynta: 50 mg, 75 mg, 100 mg

Tazarotene

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tazorac: 0.05% (30 g, 60 g); 0.1% (30 g, 60 g) [contains benzyl alcohol]

Generic: 0.1% (30 g, 60 g)

Gel, External:

Tazorac: 0.05% (30 g, 100 g); 0.1% (30 g, 100 g) [contains benzyl alcohol]

NONFORMULARY

Foam, External:

Fabior: 0.1% (50 g, 100 g)

Tazemetostat

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:

Tazverik: 200 mg

Technetium Tc 99m Albumin Aggregated

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Injection, powder for reconstitution [kit]:

Draximage MAA: Aggregated albumin 2.5 mg per vial (30s) [contains human albumin; vial contents to be combined with sodium pertechnetate Tc 99m injection solution (not included)]

Technetium Tc 99m Bicisate

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Kit, for Injection:

NeuroLite: Bicisate dihydrochloride 0.9 mg per vial (2s, 5s) [to be combined with sodium pertechnetate Tc99m injection solution (not included)]

Technetium Tc 99m Diethylene Triamine Penta-Acetic Acid

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Kit, Intravenous:

Drax Image DTPA:

Technetium Tc 99m Disofenin

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Injection, mixture for reconstitution:

Hepatolite: Disofenin 20 mcg (5s, 30s) [vial contents to be combined with Technetium Tc 99m pertechnetate sodium (not included)]

Technetium Tc 99m Exametazime

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Kit, Intravenous:

Ceretec: [contains methylene blue]

Technetium Tc 99m-Labeled Red Blood Cells

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Kit, Intravenous:

UltraTag RBC: Contents to be combined with patient blood sample and sodium pertechnetate Tc99m injection solution (not included)

Technetium Tc 99m Mebrofenin**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Kit, Intravenous:
Choletec: [contains methylparaben, propylparaben]

Technetium Tc 99m Medronate**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Kit, Intravenous:
Generic: Medronic acid 20 mg (5s, 30s) [vial contents to be combined with Technetium Tc 99m pertechnetate sodium (not included)]

Technetium Tc 99m Mertiatide**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Injection, Powder for Reconstitution [kit]:
TechneScan MAG3: Betiatide 1 mg (5s) (to be combined with sodium pertechnetate Tc99m injection solution [not included])

Technetium Tc 99m Oxidronate**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Kit, Intravenous:
TechneScan HDP: Contents to be combined with sodium pertechnetate Tc99m injection solution (not included)

Technetium Tc 99m Pentetate**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Kit, Intravenous:
Drax Image DTPA: Lyophilized pentetic acid mixture to be combined with sodium pertechnetate Tc99m injection solution (5s, 30s)

Technetium Tc 99m Pyrophosphate**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Kit, Intravenous:
TechneScan PYP: Sodium pyrophosphate 11.9 mg [pyrogen free; vial contents to be combined with Technetium Tc 99m pertechnetate sodium (not included)]

Technetium Tc 99m Sestamibi**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Kit, Intravenous:
Cardiolite: 2-methoxyisobutyl isonitrile (MIBI) copper tetrafluoroborate 1 mg (5s, 20s) [pyrogen free; vial contents to be combined with Technetium Tc 99m pertechnetate sodium (not included)]
Generic: 2-methoxyisobutyl isonitrile (MIBI) copper tetrafluoroborate 1 mg (5s, 20s, 30s) [vial contents to be combined with Technetium Tc 99m pertechnetate sodium (not included)]

Technetium Tc 99m Sodium Pertechnetate**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Generator Column, for elution in producing technetium 99m sodium pertechnetate solution for injection:
Technelite: Molybdenum Mo99 1-20 Ci per generator system [available in high or low enriched uranium]

Technetium Tc 99m Sulfur Colloid**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Kit, Injection:
Generic: Contents to be combined with Technetium Tc 99m pertechnetate sodium (not included)]

Technetium Tc 99m Tetrofosmin**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Kit, Injection:
Generic: Contents to be combined with Technetium Tc 99m pertechnetate sodium (not included)]

Technetium Tc 99m Tilmanocept**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Injection, powder for reconstitution [kit]:
Lymphoseek: Tilmanocept 250 mcg (5s) [vial contents to be combined with Technetium Tc 99m pertechnetate sodium (not included)]

Tedizolid**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Solution Reconstituted, Intravenous, as phosphate [preservative free]:
Sivextro: 200 mg (1 ea)
Tablet, Oral, as phosphate:
Sivextro: 200 mg

Teduglutide**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Kit, Subcutaneous [preservative free]:
Gattex: 5 mg

Tegaserod**DoD Uniform Formulary Outpatient Dosage Forms
NOT COVERED**

Tablet, oral:
Zelnorm: 2 mg, 6 mg

Telavancin**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Solution Reconstituted, Intravenous [preservative free]:
Vibativ: 750 mg (1 ea)

Telmisartan**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Tablet, Oral:
Generic: 20 mg, 40 mg, 80 mg

Telmisartan and Amlodipine**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Tablet, Oral:
Generic: Telmisartan 40 mg and amlodipine 5 mg
Generic: Telmisartan 40 mg and amlodipine 10 mg
Generic: Telmisartan 80 mg and amlodipine 5 mg
Generic: Telmisartan 80 mg and amlodipine 10 mg

Telmisartan and Hydrochlorothiazide**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Tablet, Oral:
40/12.5: Telmisartan 40 mg and hydrochlorothiazide 12.5 mg
80/12.5: Telmisartan 80 mg and hydrochlorothiazide 12.5 mg
80/25: Telmisartan 80 mg and hydrochlorothiazide 25 mg

Telotristat Ethyl**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Tablet, Oral:
Xermelo: 250 mg

Temazepam**DoD Uniform Formulary Outpatient Dosage Forms
BASIC CORE FORMULARY**

Capsule, Oral:
Generic: 15 mg, 30 mg

UNIFORM FORMULARY

Capsule, Oral:
Generic: 7.5 mg, 22.5 mg

Temozolomide**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Capsule, Oral:
Generic: 5 mg, 20 mg, 100 mg, 140 mg, 180 mg, 250 mg
Solution Reconstituted, Intravenous:
Temodar: 100 mg (1 ea) [pyrogen free; contains polysorbate 80]

Temsirolimus**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Solution, Intravenous:
Torisel: 25 mg/mL (1 mL) [contains alcohol, usp, polyethylene glycol, polysorbate 80, propylene glycol]

Tenecteplase**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Kit, Intravenous:
TNKase: 50 mg

Teniposide**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Solution, Intravenous:
Generic: 10 mg/mL (5 mL)

Tenofovir Disoproxil Fumarate**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Powder, Oral, as disoproxil fumarate:
Viread: 40 mg/g (60 g)

TENOFOVIR DISOPROXIL FUMARATE

Tablet, Oral, as disoproxil fumarate:
Viread: 150 mg, 200 mg, 250 mg, 300 mg

Terazosin

DoD Uniform Formulary Outpatient Dosage Forms

BASIC CORE FORMULARY

Capsule, Oral:

Generic: 1 mg, 2 mg, 5 mg, 10 mg

Terbinafine (Systemic)

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:

Generic: 250 mg

Terbinafine (Topical)

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Cream, External, as hydrochloride:

Lamisil AT: 1% (12 g, 24 g, 30 g, 36 g, 42 g) [contains benzyl alcohol, cetyl alcohol]

Lamisil AT Jock Itch: 1% (12 g) [contains benzyl alcohol, cetyl alcohol]

Generic: 1% (15 g, 30 g)

Gel, External:

Lamisil Advanced: 1% (12 g) [contains alcohol, usp]

Solution, External, as hydrochloride:

Lamisil AT Spray: 1% (125 mL) [contains alcohol, usp, propylene glycol]

Terbutaline

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Injection, as sulfate:

Generic: 1 mg/mL (1 mL)

Tablet, Oral, as sulfate:

Generic: 2.5 mg, 5 mg

Terconazole

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Cream, Vaginal:

Generic: 0.4% (45 g); 0.8% (20 g)

Suppository, Vaginal:

Generic: 80 mg (3 ea)

Teriflunomide

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:

Aubagio: 7 mg, 14 mg

Teriparatide

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Subcutaneous:

Forteo: 600 mcg/2.4 mL (2.4 mL) [contains metacresol]

Tesamorelin

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution Reconstituted, Subcutaneous [preservative free]:

Egrifta: 1 mg (1 ea); 2 mg (1 ea)

Testosterone

DoD Uniform Formulary Outpatient Dosage Forms

BASIC CORE FORMULARY

Gel, Transdermal:

Fortesta: 10 mg/actuation (2%) (60 g)

Generic: 10 mg/actuation (2%) (60 g)

UNIFORM FORMULARY

Cream, Transdermal:

EC-RX Testosterone: 0.2% (30 g, 60 g); 0.4% (30 g, 60 g); 10% (30 g, 60 g); 20% (30 g, 60 g) [contains cetearyl alcohol]

First-Testosterone MC: 2% (60 g) [contains benzyl alcohol, sesame oil]

Gel, Nasal:

Natesto: 5.5 mg/actuation (7.32 g)

Gel, Transdermal:

Generic: 25 mg/2.5 g (1%) (2.5 g); 10 mg/actuation (2%) (60 g); 50 mg/5 g (1%) (5 g)

Miscellaneous, Buccal:

Striant: 30 mg (60 ea)

Ointment, Transdermal:

First-Testosterone: 2% (60 g) [contains benzyl alcohol, butylated hydroxytoluene (bht), petrolatum, sesame oil]

Patch 24 Hour, Transdermal:

Androderm: 2 mg/24 hr (1 ea, 60 ea); 4 mg/24 hr (1 ea, 30 ea)

Pellet, Implant:

Testopel: 75 mg (10 ea, 100 ea)

Pellet, Implant [preservative free]:

Generic: 2.5 mg (1 ea); 25 mg (1 ea); 37.5 mg (1 ea); 50 mg (1 ea)

Solution, Intramuscular, as cypionate:

Generic: 100 mg/mL (10 mL); 200 mg/mL (1 mL, 10 mL)

Solution, Intramuscular, as enanthate:

Generic: 200 mg/mL (5 mL)

Solution, Intramuscular, as undecanoate:

Aveed: 750 mg/3 mL (3 mL) [contains benzyl benzoate, castor oil (ricine oil)]

NONFORMULARY

Capsule, Oral, as undecanoate:

Jatenzo: 158 mg, 198 mg, 237 mg

Gel, Transdermal:

AndroGel: 25 mg/2.5 g (1%) (2.5 g); 20.25 mg/1.25 g (1.62%) (1.25 g);

40.5 mg/2.5 g (1.62%) (2.5 g); 50 mg/5 g (1%) (5 g) [contains alcohol, usp]

AndroGel Pump: 20.25 mg/actuation (1.62%) (75 g) [contains alcohol, usp]

Generic: 12.5 mg/actuation (1%) (75 g)

Solution, Transdermal:

Axiron: 30 mg/actuation (90 mL) [contains isopropyl alcohol]

Generic: 30 mg/actuation (90 mL)

Solution Auto-injector, Subcutaneous [preservative free]:

Xyosted: 50 mg/0.5 mL (0.5 mL); 75 mg/0.5 mL (0.5 mL); 100 mg/0.5 mL (0.5 mL) [contains sesame oil]

Tetanus Immune Globulin (Human)

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Injectable, Intramuscular:

HyperTET S/D: 250 units/mL (1 ea)

Tetrabenazine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:

Generic: 12.5 mg, 25 mg

Tetracaine (Ophthalmic)

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Ophthalmic, as hydrochloride:

Generic: 0.5% (1 mL, 4 mL, 15 mL)

Tetracaine (Spinal)

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Injection, as hydrochloride [preservative free]:

Generic: 1% (2 mL)

Tetracaine (Topical)

Tetracycline, Bismuth Subsalicylate, and Metronidazole

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule, Oral:

Helidac: 240 mg

Tetracycline (Systemic)

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule, Oral, as hydrochloride:

Generic: 250 mg, 500 mg

Tetrahydrozoline (Nasal)

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Nasal, as hydrochloride:

Tyzine: 0.05% (15 mL) [contains benzalkonium chloride, edetate disodium]

Tetrahydrozoline (Ophthalmic)

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Ophthalmic, as hydrochloride:

Eye Drops: 0.05% (15 mL) [contains benzalkonium chloride, edetate disodium]

Opti-Clear: 0.05% (15 mL) [contains benzalkonium chloride, edetate disodium]

Generic: 0.05% (15 mL)

Tetrastarch

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Intravenous:

Voluven: 6% (500 mL) [dehp free, latex free, pvc free]

Tezacaftor and Ivacaftor

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet Therapy Pack, Oral:

Symdeko: Tezacaftor 50 mg and ivacaftor 75 mg (28s); Ivacaftor 75 mg (28s) (56 ea)

Symdeko: Tezacaftor 100 mg and ivacaftor 150 mg (28s); Ivacaftor 150 mg (28s) (56 ea)

Thalidomide**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Capsule, Oral:

Thalomid: 50 mg, 100 mg, 150 mg, 200 mg

Thalious Chloride TI 201**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Solution, Intravenous:

Generic: 37 MBq (1 mCi)/mL (1 ea); 74 MBq (2 mCi)/mL (1 ea)

Theophylline**DoD Uniform Formulary Outpatient Dosage Forms
BASIC CORE FORMULARY**

Capsule Extended Release 24 Hour, Oral:

Theo-24: 300 mg, 400 mg

Elixir, Oral:

Elixophyllin: 80 mg/15 mL (473 mL) [mixed fruit flavor]

Solution, Oral:

Generic: 80 mg/15 mL (15 mL, 473 mL)

Tablet Extended Release 12 Hour, Oral:

Generic: 200 mg, 300 mg

Tablet Extended Release 24 Hour, Oral:

Generic: 400 mg

UNIFORM FORMULARY

Capsule Extended Release 24 Hour, Oral:

Theo-24: 100 mg, 200 mg

Solution, Intravenous:

Generic: 400 mg (250 mL, 500 mL)

Tablet Extended Release 12 Hour, Oral:

Generic: 100 mg, 450 mg

Tablet Extended Release 24 Hour, Oral:

Generic: 600 mg

Thiamine**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Capsule, Oral, as hydrochloride:

Generic: 50 mg

Solution, Injection, as hydrochloride:

Generic: 100 mg/mL (2 mL)

Tablet, Oral, as hydrochloride:

Generic: 50 mg, 100 mg, 250 mg

Tablet, Oral, as hydrochloride [preservative free]:

Generic: 100 mg

Thioguanine**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Tablet, Oral:

Tabloid: 40 mg

Thioridazine**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Tablet, Oral, as hydrochloride:

Generic: 10 mg, 25 mg, 50 mg, 100 mg

Thiotepa**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Solution Reconstituted, Injection:

Generic: 15 mg (1 ea)

Thiothixene**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Capsule, Oral:

Generic: 1 mg, 2 mg, 5 mg, 10 mg

Thrombin (Topical)**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Pad, topical [preservative free; bovine derived]:

Thrombi-Pad 3x3: ≥200 units (10s)

Powder for reconstitution, topical [bovine derived]:

Thrombin-JMI: 5000 units, 20,000 units [supplied with diluent]

Thrombin-JMI Epistaxis kit: 5000 units [supplied with diluent]

Thrombin-JMI Pump Spray Kit: 20,000 units [supplied with diluents]

Thrombin-JMI Syringe Spray Kit: 5000 units; 20,000 units [supplied with diluent]

Powder for reconstitution, topical [preservative free; recombinant]:

Recothrom: 5000 units; 20,000 units [production involves products derived from hamster and snake sources; supplied with diluent]

Recothrom Spray Kit: 20,000 units [production involves products derived from hamster and snake sources; supplied with diluent]

Solution, topical [human derived]:

Evithrom: 800-1200 units/mL (2 mL, 5 mL, 20 mL)

Sponge, topical [preservative free; bovine derived]:

Thrombi-Gel 10: ≥1000 units (10s)

Thrombi-Gel 40: ≥1000 units (5s)

Thrombi-Gel 100: ≥2000 units (5s)

Thyroid, Desiccated**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Tablet, Oral:

Armour Thyroid: 15 mg, 30 mg, 60 mg, 90 mg, 120 mg, 180 mg, 240 mg, 300 mg

Nature-Throid: 16.25 mg, 32.5 mg, 48.75 mg, 65 mg, 81.25 mg, 97.5 mg, 113.75 mg, 130 mg, 146.25 mg, 162.5 mg, 195 mg, 260 mg, 325 mg [scored]

NP Thyroid: 15 mg, 30 mg, 60 mg, 90 mg

Westhroid: 32.5 mg, 65 mg, 97.5 mg, 130 mg, 195 mg

WP Thyroid: 16.25 mg, 32.5 mg, 48.75 mg, 65 mg, 81.25 mg, 97.5 mg, 113.75 mg, 130 mg

Thyrotropin Alfa**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Solution Reconstituted, Intramuscular:

Thyrogen: 1.1 mg (1 ea)

TiaGABine**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Tablet, Oral, as hydrochloride:

Gabitril: 2 mg, 4 mg, 12 mg, 16 mg

Generic: 2 mg, 4 mg

Ticagrelor**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Tablet, Oral:

Brilinta: 60 mg, 90 mg

Ticarcillin and Clavulanate Potassium**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Infusion [premixed, frozen]:

Timentin: Ticarcillin 3 g and clavulanic acid 0.1 g (100 mL [DSC]) [contains sodium 4.51 mEq and potassium 0.15 mEq per g]

Injection, powder for reconstitution:

Timentin: Ticarcillin 3 g and clavulanic acid 0.1 g (3.1 g [DSC], 31 g [DSC]) [contains sodium 4.51 mEq and potassium 0.15 mEq per g]

Tigecycline**DoD Uniform Formulary Outpatient Dosage Forms
NOT COVERED**

Solution Reconstituted, Intravenous [preservative free]:

Generic: 50 mg (1 ea)

Timolol (Ophthalmic)**DoD Uniform Formulary Outpatient Dosage Forms
BASIC CORE FORMULARY**

Solution, Ophthalmic, as maleate [strength expressed as base]:

Generic: 0.25% (5 mL, 10 mL, 15 mL); 0.5% (5 mL, 10 mL, 15 mL)

UNIFORM FORMULARY

Gel Forming Solution, Ophthalmic, as maleate [strength expressed as base]:

Generic: 0.25% (5 mL); 0.5% (5 mL)

Solution, Ophthalmic, as maleate [strength expressed as base, preservative free]:

Timoptic in OcuDose: 0.25% (0.2 mL); 0.5% (0.2 mL)

NONFORMULARY

Solution, Ophthalmic, as hemihydrate [strength expressed as base]:

Betimol: 0.25% (5 mL); 0.5% (5 mL, 10 mL, 15 mL) [contains benzalkonium chloride]

Solution, Ophthalmic, as maleate [strength expressed as base]:

Istalol: 0.5% (2.5 mL, 5 mL) [contains benzalkonium chloride]

Timolol (Systemic)**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Tablet, Oral, as maleate:

Generic: 5 mg, 10 mg, 20 mg

Tinidazole**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Tablet, Oral:

Generic: 250 mg, 500 mg

Tioconazole**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Ointment, Vaginal:

Vagistat-1: 6.5% (4.6 g)

TIOPRONIN

Tiopronin

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Tablet, Oral:
Thiola: 100 mg

Tiotropium

DoD Uniform Formulary Outpatient Dosage Forms BASIC CORE FORMULARY

Aerosol Solution, Inhalation:
Spiriva Respimat: 1.25 mcg/actuation (4 g); 2.5 mcg/actuation (4 g) [contains benzalkonium chloride, disodium edta]
Capsule, Inhalation:
Spiriva HandiHaler: 18 mcg [contains milk protein]

Tiotropium and Olodaterol

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Aerosol Solution, Inhalation:
Stiolto Respimat: Tiotropium 2.5 mcg and olodaterol 2.5 mcg per actuation (4 g) [contains benzalkonium chloride, edetate disodium]

Tipranavir

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Capsule, Oral:
Aptivus: 250 mg
Solution, Oral:
Aptivus: 100 mg/mL (95 mL) [contains polyethylene glycol, propylene glycol, tocophersolan; buttermint-butter toffee flavor]

Tirofiban

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Concentrate, Intravenous:
Aggrastat: 3.75 mg/15 mL (15 mL)
Solution, Intravenous:
Aggrastat: 50 mcg/mL (100 mL, 250 mL)

Tisagenlecleucel

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Suspension, Intravenous:
Kymriah: (1 ea) [contains albumin human, dextran 40, dimethyl sulfoxide]

TiZANidine

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Capsule, Oral:
Generic: 2 mg, 4 mg, 6 mg
Tablet, Oral:
Generic: 2 mg, 4 mg

Tobramycin and Dexamethasone

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Ointment, ophthalmic:
TobraDex: Tobramycin 0.3% and dexamethasone 0.1% (3.5 g) [contains chlorobutanol]
Suspension, ophthalmic:
TobraDex ST: Tobramycin 0.3% and dexamethasone 0.05% (5 mL) [contains benzalkonium chloride]
Generic: Tobramycin 0.3% and dexamethasone 0.1% (2.5 mL, 5 mL, 10 mL)

Tobramycin (Ophthalmic)

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Ointment, Ophthalmic:
Tobrex: 0.3% (3.5 g)
Solution, Ophthalmic:
Generic: 0.3% (5 mL)

Tobramycin (Oral Inhalation)

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Capsule, Inhalation:
Tobi Podhaler: 28 mg
Nebulization Solution, Inhalation:
Generic: 300 mg/5 mL (5 mL)
Nebulization Solution, Inhalation [preservative free]:
Bethkis: 300 mg/4 mL (4 mL)
Generic: 300 mg/5 mL (5 mL)
NONFORMULARY
Nebulization Solution, Inhalation [preservative free]:
Kitabis Pak: 300 mg/5 mL (5 mL)

Tobramycin (Systemic)

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Solution, Injection:
Generic: 10 mg/mL (2 mL); 80 mg/2 mL (2 mL); 1.2 g/30 mL (30 mL); 2 g/50 mL (50 mL)
Solution, Intravenous:
Generic: 80 mg (100 mL)
Solution Reconstituted, Injection:
Generic: 1.2 g (1 ea)
Solution Reconstituted, Injection [preservative free]:
Generic: 1.2 g (1 ea)

TOLAZamide

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Tablet, Oral:
Generic: 250 mg, 500 mg

TOLBUTamide

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Tablet, Oral:
Generic: 500 mg

Tolcapone

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Tablet, Oral:
Generic: 100 mg

Tolnaftate

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Aerosol, External:
Athletes Foot Spray: 1% (150 g) [contains sd alcohol 40]
Tinactin: 1% (150 g)
Aerosol Powder, External:
Jock Itch Spray: 1% (130 g) [contains sd alcohol 40b]
LamiSIL AF Defense: 1% (133 g)
Tinactin: 1% (133 g)
Tinactin Deodorant: 1% (133 g)
Cream, External:
Generic: 1% (15 g, 20 g, 28.3 g, 30 g)
Powder, External:
Generic: 1% (45 g)
Solution, External:
Generic: 1% (10 mL)

Tolterodine

DoD Uniform Formulary Outpatient Dosage Forms BASIC CORE FORMULARY

Capsule Extended Release 24 Hour, Oral, as tartrate:
Generic: 2 mg, 4 mg

UNIFORM FORMULARY

Tablet, Oral, as tartrate:
Generic: 1 mg, 2 mg

Tolvaptan

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Tablet, Oral:
Samsca: 15 mg, 30 mg
Tablet Therapy Pack, Oral:
Jynarque: 45 & 15 mg (14 ea); 60 & 30 mg (14 ea); 90 & 30 mg (14 ea)

Topiramate

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Capsule ER 24 Hour Sprinkle, Oral:
Generic: 25 mg (30 ea); 50 mg (30 ea); 100 mg (30 ea); 150 mg (30 ea); 200 mg (30 ea)
Capsule Extended Release 24 Hour, Oral:
Trokendi XR: 25 mg, 50 mg, 100 mg, 200 mg [contains sodium benzoate]
Capsule Sprinkle, Oral:
Generic: 15 mg, 25 mg
Tablet, Oral:
Generic: 25 mg, 50 mg, 100 mg, 200 mg

Topotecan

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Capsule, Oral:
Hycamtin: 0.25 mg, 1 mg
Solution, Intravenous:
Generic: 4 mg/4 mL (4 mL)
Solution, Intravenous [preservative free]:
Generic: 4 mg/4 mL (4 mL)
Solution Reconstituted, Intravenous:
Generic: 4 mg (1 ea)
Solution Reconstituted, Intravenous [preservative free]:
Generic: 4 mg (1 ea)

Toremifene**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Tablet, Oral:
Fareston: 60 mg

Torsemide**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Tablet, Oral:
Generic: 5 mg, 10 mg, 20 mg, 100 mg

Total Parenteral Nutrition**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Emulsion, Intravenous:
Kabiven: (1026 mL, 1540 mL, 2053 mL, 2566 mL) [sulfite free; lipid chamber contains egg phospholipids (egg lecithin), soybean oil]
Perikabiven: (1440 mL, 1920 mL, 2400 mL) [sulfite free; lipid chamber contains egg phospholipids (egg lecithin), soybean oil]

Trabectedin**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Solution Reconstituted, Intravenous:
Yondelis: 1 mg (1 ea)

Trace Elements**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Solution, Injection:
Multitrace-4: Chromium 4 mcg, copper 0.4 mg, manganese 0.1 mg, and zinc 1 mg per 1 mL (10 mL) [contains aluminum, benzyl alcohol]
Multitrace-4 Concentrate: Chromium 10 mcg, copper 1 mg, manganese 0.5 mg, and zinc 5 mg per 1 mL (1 mL) [contains aluminum]; chromium 10 mcg, copper 1 mg, manganese 0.5 mg, and zinc 5 mg per 1 mL (10 mL) [contains benzyl alcohol]
Multitrace-4 Neonatal: Chromium 0.85 mcg, copper 0.1 mg, manganese 0.025 mg, and zinc 1.5 mg per 1 mL (2 mL) [contains aluminum]
Multitrace-5: Chromium 4 mcg, copper 0.4 mg, manganese 0.1 mg, selenium 20 mcg, and zinc 1 mg per 1 mL (10 mL) [contains aluminum, benzyl alcohol]
Multitrace-5 Concentrate: Chromium 10 mcg, copper 1 mg, manganese 0.5 mg, selenium 60 mcg, and zinc 5 mg per 1 mL (1 mL) [contains aluminum]; chromium 10 mcg, copper 1 mg, manganese 0.5 mg, selenium 60 mcg, and zinc 5 mg per 1 mL (10 mL) [contains benzyl alcohol]
Trace Elements 4 Pediatric: Chromium 1 mcg, copper 0.1 mg, manganese 0.03 mg, and zinc 0.5 mg per 1 mL (10 mL) [contains aluminum, benzyl alcohol]
Solution, Injection [preservative free]:
Multitrace-4 Pediatric: Chromium 1 mcg, copper 0.1 mg, manganese 0.025 mg, and zinc 1 mg per 1 mL (3 mL) [contains aluminum]

TraMADol**DoD Uniform Formulary Outpatient Dosage Forms
BASIC CORE FORMULARY**

Tablet, Oral, as hydrochloride:
Generic: 50 mg

UNIFORM FORMULARY

Capsule Extended Release 24 Hour, Oral, as hydrochloride:
Generic: 100 mg, 150 mg, 200 mg, 300 mg
Cream, External, as hydrochloride:
Active-Tramadol: 8% (120 g) [contains chlorocresol (chloro-m-cresol)]
EnovaRX-Tramadol: 5% (60 g, 120 g) [contains cetyl alcohol]
Suspension Reconstituted, Oral, as hydrochloride:
Synapryn FusePaq: 10 mg/mL (500 mL) [contains saccharin sodium, sodium benzoate]

NONFORMULARY

Tablet Extended Release 24 Hour, Oral, as hydrochloride:
Generic: 100 mg, 200 mg, 300 mg

Trametinib**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Tablet, Oral:
Mekinist: 0.5 mg, 2 mg

Trandolapril**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Tablet, Oral:
Generic: 1 mg, 2 mg, 4 mg

Trandolapril and Verapamil**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Tablet, variable release:
Tarka: 1/240: Trandolapril 1 mg [immediate release] and verapamil hydrochloride 240 mg [sustained release]

Trandolapril 2 mg [immediate release] and verapamil hydrochloride 180 mg [sustained release]
Trandolapril 2 mg [immediate release] and verapamil hydrochloride 240 mg [sustained release]
Trandolapril 4 mg [immediate release] and verapamil hydrochloride 240 mg [sustained release]

Tranexamic Acid**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Solution, Intravenous:
Generic: 1000 mg/10 mL (10 mL)
Solution, Intravenous [preservative free]:
Generic: 1000 mg/10 mL (10 mL)
Tablet, Oral:
Generic: 650 mg

Tranlycypromine**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Tablet, Oral:
Generic: 10 mg

Trastuzumab**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Solution Reconstituted, Intravenous:
Herceptin: 440 mg (1 ea) [contains benzyl alcohol, mouse (murine) and/or hamster protein]

Trastuzumab and Hyaluronidase**DoD Uniform Formulary Outpatient Dosage Forms
NOT COVERED**

Solution, Subcutaneous [preservative free]:
Herceptin Hylecta: Trastuzumab 600 mg and hyaluronidase-oysk 10,000 units per 5 mL (5 mL)

TraZODone**DoD Uniform Formulary Outpatient Dosage Forms
BASIC CORE FORMULARY**

Tablet, Oral, as hydrochloride:
Generic: 50 mg, 100 mg, 150 mg, 300 mg

Treprostinil**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Solution, Inhalation:
Tyvaso: 0.6 mg/mL (2.9 mL)
Tyvaso Refill: 0.6 mg/mL (2.9 mL)
Tyvaso Starter: 0.6 mg/mL (2.9 mL)
Solution, Injection:
Remodulin: 1 mg/mL (20 mL); 2.5 mg/mL (20 mL); 5 mg/mL (20 mL); 10 mg/mL (20 mL) [contains metacresol]
Tablet Extended Release, Oral:
Orenitram: 0.125 mg, 0.25 mg, 1 mg, 2.5 mg

Tretinoin (Systemic)**DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY**

Capsule, Oral:
Generic: 10 mg

Tretinoin (Topical)**DoD Uniform Formulary Outpatient Dosage Forms
BASIC CORE FORMULARY**

Cream, External:
Generic: 0.025% (20 g, 45 g); 0.05% (20 g, 45 g)

UNIFORM FORMULARY

Cream, External:
Renova: 0.02% (40 g, 60 g) [contains benzyl alcohol, cetyl alcohol, edetate disodium, methylparaben, propylparaben]
Renova Pump: 0.02% (44 g) [contains benzyl alcohol, cetyl alcohol, edetate disodium, methylparaben, propylparaben]
Retin-A: 0.1% (20 g, 45 g)
Tretin-X: 0.0375% (0.075%) (35 g)
Gel, External:
Generic: 0.01% (15 g, 45 g)

NONFORMULARY

Gel, External [microsphere]:
Retin-A Micro: 0.04% (20 g, 45 g); 0.1% (20 g, 45 g) [contains benzyl alcohol, disodium edta, propylene glycol, trolamine (triethanolamine)]
Retin-A Micro Pump: 0.04% (50 g); 0.08% (50 g); 0.1% (50 g) [contains benzyl alcohol, disodium edta, propylene glycol, trolamine (triethanolamine)]
Generic: 0.04% (20 g, 45 g, 50 g); 0.1% (20 g, 45 g, 50 g)
Lotion, External:
Altreno: 0.05% (45 g)

TRIAMCINOLONE (NASAL)

Triamcinolone (Nasal)

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Aerosol, Nasal, as acetoneide:
Generic: 55 mcg/actuation (16.5 g, 16.9 mL)

Triamcinolone (Ophthalmic)

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Suspension, Intraocular, as acetoneide:
Triesence: 40 mg/mL (1 mL) [contains polysorbate 80]

Triamcinolone (Systemic)

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Kit, Injection, as acetoneide:
Arze-Ject-A: 40 mg/mL (3 x 1 mL) [contains benzyl alcohol, polysorbate 80]
Pro-C-Dure 5: 40 mg/mL (2 x 1 mL) [contains benzyl alcohol, polysorbate 80]
Pro-C-Dure 6: 40 mg/mL (3 x 1 mL) [contains benzyl alcohol, polysorbate 80]
ReadySharp Triamcinolone: 40 mg/mL (1 x 1 mL) [contains benzyl alcohol, polysorbate 80]
Suspension, Injection, as acetoneide:
Kenalog: 10 mg/mL (5 mL); 40 mg/mL (1 mL, 5 mL, 10 mL) [contains benzyl alcohol, polysorbate 80]

Triamcinolone (Topical)

DoD Uniform Formulary Outpatient Dosage Forms BASIC CORE FORMULARY

Cream, External, as acetoneide:
Generic: 0.1% (15 g, 30 g, 80 g, 454 g)
Ointment, External, as acetoneide:
Generic: 0.1% (15 g, 80 g, 453.6 g, 454 g)

Uniform Formulary

Aerosol Solution, External, as acetoneide:
Generic: 0.147 mg/g (63 g, 100 g)
Cream, External, as acetoneide:
Generic: 0.025% (15 g, 80 g, 453.6 g, 454 g); 0.5% (15 g)
Kit, External, as acetoneide:
Dermasorb TA: 0.1% [contains cetyl alcohol, milk protein, propylene glycol]
Lotion, External, as acetoneide:
Generic: 0.025% (60 mL); 0.1% (60 mL)
Ointment, External, as acetoneide:
Generic: 0.025% (15 g, 80 g, 454 g); 0.5% (15 g)
Paste, Mouth/Throat, as acetoneide:
Generic: 0.1% (5 g)
Therapy Pack, External, as acetoneide:
Dermazone: 0.1% (1 ea) [contains propylene glycol]

NONFORMULARY

Kit, External, as acetoneide:
Pediaderm TA: 0.1% [DSC] [contains cetyl alcohol, methylparaben, polysorbate 80, propylene glycol, propylparaben]
Therapy Pack, External, as acetoneide:
SilaLite Pak: 0.1% (1 ea [DSC])

Triamterene

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Capsule, Oral:
Dyrenium: 50 mg, 100 mg

Triazolam

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Tablet, Oral:
Generic: 0.125 mg, 0.25 mg

Trichloroacetic Acid

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Liquid, External:
Tri-Chlor: 80% (15 mL)

Trichophyton Skin Test

DoD Uniform Formulary Outpatient Dosage Forms NOT COVERED

Injectable, Intradermal:
Generic: 1000 pn unit/mL (2 mL) [DSC]
Solution, Subcutaneous:
Generic: 1:20 (5 mL, 10 mL, 50 mL)

Triclosan and Fluoride

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Gel, oral [toothpaste]: Triclosan 0.30% and sodium fluoride 0.24% (119 g, 170 g, 221 g)
Paste, oral [toothpaste]: Triclosan 0.30% and sodium fluoride 0.24% (119 g, 170 g, 221 g)

Trientine

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Capsule, Oral, as hydrochloride:
Syprine: 250 mg

Trifluoperazine

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Tablet, Oral:
Generic: 1 mg, 2 mg, 5 mg, 10 mg

Trifluridine

DoD Uniform Formulary Outpatient Dosage Forms

Solution, Ophthalmic:
Generic: 1% (7.5 mL)

Trifluridine and Tipiracil

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Tablet, Oral:
Lonsurf: Trifluridine 15 mg and tipiracil 6.14 mg, Trifluridine 20 mg and tipiracil 8.19 mg

Triheptanoin

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Liquid, Oral:
Dojolvi: 100% (500 mL)

Trihexyphenidyl

DoD Uniform Formulary Outpatient Dosage Forms BASIC CORE FORMULARY

Elixir, Oral, as hydrochloride:
Generic: 0.4 mg/mL (473 mL)
Tablet, Oral, as hydrochloride:
Generic: 2 mg

Trilaciclib

DoD Uniform Formulary Outpatient Dosage Forms NOT COVERED

Solution Reconstituted, Intravenous:
Cosela: 300 mg (1 ea)

Trimethobenzamide

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Capsule, Oral, as hydrochloride:
Generic: 300 mg
Solution, Intramuscular, as hydrochloride:
Tigan: 100 mg/mL (2 mL, 20 mL) [contains phenol]

Trimethoprim

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Solution, Oral [strength expressed as base]:
Primsol: 50 mg/5 mL (473 mL) [alcohol free, dye free; contains methylparaben, propylene glycol, propylparaben, saccharin sodium, sodium benzoate]
Tablet, Oral:
Generic: 100 mg

Trimethoprim and Polymyxin B

DoD Uniform Formulary Outpatient Dosage Forms BASIC CORE FORMULARY

Solution, Ophthalmic:
Polytrim: Trimethoprim 1 mg and polymyxin B sulfate 10,000 units per 1 mL (10 mL) [contains benzalkonium chloride]
Generic: Trimethoprim 1 mg and polymyxin B sulfate 10,000 units per 1 mL (10 mL)

Trimipramine

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Capsule, Oral:
Surmontil: 25 mg, 50 mg, 100 mg

Tripolidine

DoD Uniform Formulary Outpatient Dosage Forms UNIFORM FORMULARY

Liquid, Oral, as hydrochloride:
Histex PD: 0.938 mg/mL (30 mL)
M-Hist PD: 0.625 mg/mL (30 mL)
Generic: 0.625 mg/mL (30 mL)
Syrup, Oral, as hydrochloride:
Histex: 2.5 mg/5 mL (237 mL) [alcohol free, dye free, sugar free; contains propylene glycol, saccharin sodium; bubble-gum flavor]

NOT COVERED

Tablet Chewable, Oral, as hydrochloride:
Histex: 1.25 mg

Tripolidine and Pseudoephedrine**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Liquid, Oral:

Entre-Hist PSE: Tripolidine hydrochloride 0.938 mg and pseudoephedrine hydrochloride 10 mg per 1 mL (30 mL) [cotton candy flavor]

Syrup, Oral:

Aprodine: Tripolidine hydrochloride 1.25 mg and pseudoephedrine hydrochloride 30 mg per 5 mL (120 mL)

Tablet, oral:

Aprodine: Tripolidine hydrochloride 2.5 mg and pseudoephedrine hydrochloride 60 mg

Ed A-Hist PSE: Tripolidine hydrochloride 2.5 mg and pseudoephedrine hydrochloride 60 mg

Triptorelin**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Suspension Reconstituted, Intramuscular:

Trelstar: 3.75 mg (1 ea); 11.25 mg (1 ea) [contains polysorbate 80]

Trelstar Mixject: 3.75 mg (1 ea); 11.25 mg (1 ea); 22.5 mg (1 ea) [contains polysorbate 80]

Trolamine**DoD Uniform Formulary Outpatient Dosage Forms****NOT COVERED**

Cream, External, as salicylate:

Generic: 10% (85 g)

Lotion, External, as salicylate:

Tru-micin: 10% (100 mL) [odorless; contains cetyl alcohol]

Ultracin T: 10% (120 mL) [paraben free; contains benzoic acid, cetearyl alcohol, propylene glycol]

Tromethamine**DoD Uniform Formulary Outpatient Dosage Forms****NOT COVERED**

Solution, Intravenous:

Tham: 30 mEq/100 mL (500 mL)

Tropicamide**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution, Ophthalmic:

Generic: 0.5% (15 mL); 1% (2 mL, 3 mL, 15 mL)

Tropium**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Capsule Extended Release 24 Hour, Oral, as chloride:

Generic: 60 mg

Tablet, Oral, as chloride:

Generic: 20 mg

Trypan Blue**DoD Uniform Formulary Outpatient Dosage Forms****NOT COVERED**

Solution, Ophthalmic:

MembraneBlue: 0.15% (0.5 mL)

VisionBlue: 0.06% (0.5 mL)

Tuberculin Tests**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution, Intradermal:

Aplisol: 5 units/0.1 mL (1 mL, 5 mL) [latex free; contains phenol, polysorbate 80]

Tubersol: 5 units/0.1 mL (1 mL, 5 mL) [contains phenol]

Tucatinib**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Tablet, Oral:

Tukysa: 50 mg, 150 mg

Typhoid Vaccine**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Capsule, enteric coated [live]:

Vivotif: Viable *S. typhi* Ty21a 2-6.8 x 10⁹ colony-forming units and nonviable *S. typhi* Ty21a 5-50 x 10⁹ bacterial cells [contains lactose 100-180 mg/capsule and sucrose 26-130 mg/capsule]

Injection, solution [inactivated]:

Typhim Vi: Purified Vi capsular polysaccharide 25 mcg/0.5 mL (0.5 mL, 10 mL) [derived from *S. typhi* Ty2 strain]**Ulipristal****DoD Uniform Formulary Outpatient Dosage Forms****BASIC CORE FORMULARY**

Tablet, Oral, as acetate:

Ella: 30 mg

Umbrisib**DoD Uniform Formulary Outpatient Dosage Forms****NONFORMULARY**

Tablet, Oral, as tosylate:

Ukoniq: 200 mg

Umeclidinium**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Aerosol Powder Breath Activated, Inhalation:

Incruse Ellipta: 62.5 mcg/inhalation (7 ea, 30 ea) [contains lactose monohydrate]

Umeclidinium and Vilanterol**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Aerosol Powder Breath Activated, Inhalation:

Anoro Ellipta: Umeclidinium 62.5 mcg and vilanterol 25 mcg per inhalation (7 dose, 30 dose) [contains milk protein]

Undecylenic Acid and Derivatives**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution, External:

Fungi-Nail: Undecylenic acid 25% (29.57 mL)

Unoprostone**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution, Ophthalmic, as isopropyl ester:

Rescula: 0.15% (5 mL) [contains benzalkonium chloride, edetate disodium, polysorbate 80]

Urea (Systemic)**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Powder for Solution, Oral:

Ure-Na: 15 g (8s) [lemon-lime flavor]

Urea (Topical)**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Cream, External:

Generic: 10% (85 g); 20% (85 g); 40% (28 g, 28.35 g, 85 g, 198 g, 198.4 g); 45% (255 g); 47% (142 g); 50% (142 g, 255 g); 39% (226.8 g, 227 g)

Emulsion, External:

Latrix XM: 45% (240 mL) [contains cetyl alcohol, disodium edta, propylene glycol, trolamine (triethanolamine)]

Umecta: 40% (120 g, 227 g) [contains trolamine (triethanolamine)]

Generic: 50% (284 g, 300 g)

Foam, External:

Hydro 35: 35% (150 g) [contains ethylparaben, methylparaben, propylene glycol, propylparaben, trolamine (triethanolamine)]

Hydro 40: 40% (150 g) [contains ethylparaben, methylparaben, propylene glycol, propylparaben, trolamine (triethanolamine)]

Umecta Mousse: 40% (113.4 g) [contains soya sterol, trolamine (triethanolamine)]

Uramaxin: 20% (100 g) [contains cetyl alcohol, propylene glycol]

Urea Hydrating: 35% (150 g) [contains ethylparaben, methylparaben, propylene glycol, propylparaben, trolamine (triethanolamine)]

Gel, External:

Uramaxin: 45% (28 mL) [contains edetate disodium, menthol, propylene glycol]

Uramaxin GT: 45% (20 mL) [contains edetate disodium, menthol, propylene glycol]

Urea Nail: 45% (28 mL) [contains edetate disodium, menthol, propylene glycol]

Generic: 40% (15 mL)

Kit, External:

Dermasorb XM: 39% [contains cetareth-20, cetyl alcohol, chlorocresol (chloro-m-cresol)]

Uramaxin GT: 45% [contains edetate disodium, menthol, propylene glycol]

Urea Nail: 40 & 0.2 % [contains disodium edta, methylparaben, propylparaben, trolamine (triethanolamine)]

Lotion, External:

Generic: 10% (180 mL, 236 mL, 480 mL); 40% (226.8 g, 236.6 mL); 45% (480 g)

Ointment, External:

Aquaphilic/Carbamide: 10% (180 g, 454 g); 20% (454 g)

Gordons Urea: 22% (30 g); 40% (30 g)

Lanaphilic/Urea: 10% (454 g); 20% (454 g)

Shampoo, External:

Carmol: 10% (240 mL)

Solution, External:

CEM-Urea: 45% (20 mL) [contains edetate disodium, menthol, methylparaben, propylene glycol]

Stick, External:

Urea Nail: 50% (2.4 mL) [contains cetyl alcohol, disodium edta]

UREA (TOPICAL)

Suspension, External:
Generic: 40% (283.4 g, 18 mL); 50% (284 g)

NONFORMULARY

Cream, External:
Xurea: 39% (227 g)

Uridine Triacetate

DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY

Packet, Oral:
Vistogard: 10 g (4 ea, 20 ea) [orange flavor]
Xuriden: 2 g (1 ea, 30 ea) [orange flavor]

Urofollitropin

DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY

Solution Reconstituted, Injection:
Bravelle: 75 units (1 ea)

Ursodiol

DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY

Capsule, Oral:
Generic: 300 mg
Tablet, Oral:
Generic: 250 mg, 500 mg

Ustekinumab

DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY

Solution, Intravenous:
Stelara: 130 mg/26 mL (26 mL) [contains edetate disodium dihydrate, polysorbate 80]
Solution, Subcutaneous [preservative free]:
Stelara: 45 mg/0.5 mL (0.5 mL) [contains polysorbate 80]
Solution Prefilled Syringe, Subcutaneous [preservative free]:
Stelara: 45 mg/0.5 mL (0.5 mL); 90 mg/mL (1 mL) [contains polysorbate 80]

ValACYclovir

DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY

Tablet, Oral:
Generic: 500 mg, 1 g

Valbenazine

DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY

Capsule, Oral:
Ingrezza: 40 mg, 80 mg

ValGANciclovir

DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY

Solution Reconstituted, Oral:
Generic: 50 mg/mL (88 mL)
Tablet, Oral:
Generic: 450 mg

Valproic Acid and Derivatives

DoD Uniform Formulary Outpatient Dosage Forms
BASIC CORE FORMULARY

Capsule Sprinkle, Oral, as divalproex sodium:
Generic: 125 mg
Tablet Extended Release 24 Hour, Oral, as divalproex sodium:
Generic: 250 mg, 500 mg

UNIFORM FORMULARY

Capsule, Oral, as valproic acid:
Generic: 250 mg
Solution, Intravenous, as valproate sodium:
Depacon: 100 mg/mL (5 mL)
Solution, Intravenous, as valproate sodium [preservative free]:
Generic: 100 mg/mL (5 mL)
Solution, Oral, as valproate sodium:
Generic: 250 mg/5 mL (473 mL)
Syrup, Oral, as valproate sodium:
Generic: 250 mg/5 mL (5 mL, 10 mL, 473 mL)
Tablet Delayed Release, Oral, as divalproex sodium:
Generic: 125 mg, 250 mg, 500 mg

Valrubicin

DoD Uniform Formulary Outpatient Dosage Forms
UNIFORM FORMULARY

Solution, Intravesical [preservative free]:
Valstar: 40 mg/mL (5 mL) [contains alcohol, usp, cremophor el]

Valsartan

DoD Uniform Formulary Outpatient Dosage Forms
BASIC CORE FORMULARY

Tablet, Oral:
Generic: 40 mg, 80 mg, 160 mg, 320 mg

Valsartan and Hydrochlorothiazide

DoD Uniform Formulary Outpatient Dosage Forms

BASIC CORE FORMULARY

Tablet, Oral:
Generic: 80 mg/12.5 mg: Valsartan 80 mg and hydrochlorothiazide 12.5 mg
Generic: 160 mg/12.5 mg: Valsartan 160 mg and hydrochlorothiazide 12.5 mg
Generic: 160 mg/25 mg: Valsartan 160 mg and hydrochlorothiazide 25 mg
Generic: 320 mg/12.5 mg: Valsartan 320 mg and hydrochlorothiazide 12.5 mg
Generic: 320 mg/25 mg: Valsartan 320 mg and hydrochlorothiazide 25 mg

Vancomycin

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule, Oral:
Generic: 125 mg, 250 mg
Solution, Intravenous:
Generic: 1 g/200 mL (200 mL); 500-5 MG/100ML-% (100 mL); 750-5 MG/150ML-% (150 mL)
Solution Reconstituted, Intravenous:
Generic: 500 mg (1 ea); 750 mg (1 ea); 1000 mg (1 ea); 5000 mg (1 ea); 10 g (1 ea)
Solution Reconstituted, Intravenous [preservative free]:
Generic: 500 mg (1 ea); 1000 mg (1 ea); 5000 mg (1 ea); 10 g (1 ea)
Solution Reconstituted, Oral, as hydrochloride:
Firvanq: 25 mg/mL (150 mL, 300 mL); 50 mg/mL (150 mL, 300 mL)

Vandetanib

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:
Caprelsa: 100 mg, 300 mg

Vardenafil

DoD Uniform Formulary Outpatient Dosage Forms
NOT COVERED

Tablet, Oral:
Levitra: 5 mg, 10 mg, 20 mg
Generic: 2.5 mg, 5 mg, 10 mg, 20 mg
Tablet Dispersible, Oral:
Staxyn: 10 mg
Generic: 10 mg

Varenicline

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:
Chantix: 0.5 mg, 1 mg
Chantix Continuing Month Pak: 1 mg
Chantix Starting Month Pak: 0.5 mg x 11 & 1 mg x 42

Varicella Virus Vaccine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Injectable, Subcutaneous [preservative free]:
Varivax: 1350 PFU/0.5 mL (1 ea)

Varicella-Zoster Immune Globulin (Human)

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Intramuscular [preservative free]:
VariZIG: 125 units/1.2 mL (1.2 mL) [contains polysorbate 80]

Vasopressin

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Intravenous:
Vasotrist: 20 units/mL (1 mL)
Vasotrist: 20 units/mL (10 mL) [contains chlorobutanol (chlorobutol)]

Vecuronium

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution Reconstituted, Intravenous, as bromide:
Generic: 10 mg (1 ea); 20 mg (1 ea)
Solution Reconstituted, Intravenous, as bromide [preservative free]:
Generic: 10 mg (1 ea); 20 mg (1 ea)

Vedolizumab

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution Reconstituted, Intravenous [preservative free]:
Entyvio: 300 mg (1 ea) [contains mouse (murine) and/or hamster protein, polysorbate 80]

Velaglucerase Alfa**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution Reconstituted, Intravenous [preservative free]:

Vpriv: 400 units (1 ea)

Vemurafenib**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Tablet, Oral:

Zelboraf: 240 mg

Venetoclax**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Tablet, Oral:

Venclexta: 10 mg, 50 mg, 100 mg

Tablet Therapy Pack, Oral:

Venclexta Starting Pack: Week 1: 10 mg (14); Week 2: 50 mg (7); Week 3: 100 mg (7); Week 4: 100 mg (14) (42 ea)

Venlafaxine**DoD Uniform Formulary Outpatient Dosage Forms BASIC CORE FORMULARY**

Capsule Extended Release 24 Hour, Oral:

Generic: 37.5 mg, 75 mg, 150 mg

Tablet, Oral:

Generic: 25 mg, 37.5 mg, 50 mg, 75 mg, 100 mg

Tablet Extended Release 24 Hour, Oral:

Generic: 225 mg

UNIFORM FORMULARY

Tablet Extended Release 24 Hour, Oral:

Generic: 37.5 mg, 75 mg, 150 mg, 225 mg

Verapamil**DoD Uniform Formulary Outpatient Dosage Forms****BASIC CORE FORMULARY**

Tablet Extended Release, Oral, as hydrochloride:

Generic: 120 mg, 180 mg, 240 mg

UNIFORM FORMULARY

Solution, Intravenous, as hydrochloride:

Generic: 2.5 mg/mL (2 mL, 4 mL)

Tablet, Oral, as hydrochloride:

Generic: 40 mg, 80 mg, 120 mg

NONFORMULARY

Capsule Extended Release 24 Hour, Oral, as hydrochloride:

Generic: 100 mg, 120 mg, 180 mg, 200 mg, 240 mg, 300 mg, 360 mg

Veriguat**DoD Uniform Formulary Outpatient Dosage Forms****NONFORMULARY**

Tablet, Oral:

Verquvo: 2.5 mg, 5 mg, 10 mg

Verteporfin**DoD Uniform Formulary Outpatient Dosage Forms****NOT COVERED**

Solution Reconstituted, Intravenous:

Visudyne: 15 mg (1 ea) [contains egg phosphatidylglycerol]

Vestronidase Alfa**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution, Intravenous [preservative free]:

Mepsevii: 10 mg/5 mL (5 mL)

Vigabatrin**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Packet, Oral:

Sabril: 500 mg (50 ea)

Tablet, Oral:

Sabril: 500 mg [scored]

VinBLAStine**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution, Intravenous, as sulfate:

Generic: 1 mg/mL (10 mL)

VinCRIStine**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution, Intravenous, as sulfate:

Vincasar PFS: 1 mg/mL (1 mL, 2 mL)

Solution, Intravenous, as sulfate [preservative free]:

Generic: 1 mg/mL (1 mL, 2 mL)

VinCRIStine (Liposomal)**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Suspension, Intravenous, as sulfate:

Marqibo: 5 mg/31 mL (1 ea)

Vinorelbine**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Solution, Intravenous:

Generic: 10 mg/mL (1 mL); 50 mg/5 mL (5 mL)

Solution, Intravenous [preservative free]:

Generic: 10 mg/mL (1 mL); 50 mg/5 mL (5 mL)

Vismodegib**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Capsule, Oral:

Erivedge: 150 mg

Vitamin A**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Capsule, Oral:

A-25: 25,000 units

Vitamin A Fish: 7500 units

Generic: 10,000 units

Capsule, Oral [preservative free]:

A-25: 25,000 units [dye free]

Generic: 8000 units

Cream, External:

AFirm 1X: 0.15% (30 g) [fragrance free; contains benzyl alcohol, cetyl alcohol, disodium edta, methylparaben, peg-10 soya sterol, tromamine (triethanolamine)]

AFirm 2X: 0.3% (30 g) [fragrance free; contains benzyl alcohol, cetyl alcohol, disodium edta, methylparaben, peg-10 soya sterol, tromamine (triethanolamine)]

AFirm 3X: 0.6% (30 g) [fragrance free; contains benzyl alcohol, cetyl alcohol, disodium edta, methylparaben, peg-10 soya sterol, tromamine (triethanolamine)]

Gordons-Vite A: 100,000 units/g (75 g, 120 g, 480 g, 2400 g)

Lotion, External:

Gordons-Vite A: 100,000 units (120 mL, 4000 mL)

Solution, Intramuscular:

Aquadol A: 50,000 units/mL (2 mL) [contains chlorobutanol (chlorobutol)]

Tablet, Oral:

Generic: 10,000 units, 15,000 units, Vitamin A 10000 units and beta carotene 1000 units

Vitamin A and Vitamin D (Systemic)**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Capsule, Softgel, Oral:

Generic: Vitamin A 1250 units and vitamin D 130 units, Vitamin A 1250 units and vitamin D 135 units, Vitamin A 5,000 units and vitamin D 400 units, Vitamin A 10,000 units and vitamin D 400 units, Vitamin A 25,000 units and vitamin D 1000 units

Oil, Oral:

Generic: Vitamin A 5000 units and vitamin D 500 units per 5 mL (120 mL, 473 mL)

Tablet, Oral:

Generic: Vitamin A 10,000 units and vitamin D 400 units

Vitamin A and Vitamin D (Topical)**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Cream, topical:

Sween Cream: (2 g, 85 g, 190 g, 340 g)

Ointment, topical:

A+D Original: (42.5 g); (120 g); (454 g) [in lanolin-petrolatum base]

Baza Clear: (50 g, 142 g, 227 g) [in petrolatum base]

Generic: (5 g, 60 g, 120 g, 454 g)

Vitamin B Complex, Ascorbic Acid, and Folic Acid**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**

Content may vary slightly depending on product used. For more detailed information on ingredients in these and other multivitamins, please refer to Multivitamin Products.

Vitamin B Complex Combinations**DoD Uniform Formulary Outpatient Dosage Forms****UNIFORM FORMULARY**Content varies depending on product used. For more detailed information on ingredients in these and other multivitamins, please refer to **specific product labeling**.

VITAMIN E (SYSTEMIC)

Vitamin E (Systemic)

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule, Oral:

Generic: 100 units, 200 units, 400 units, 1000 units

Capsule, Oral [preservative free]:

Generic: 100 units, 400 units

Liquid, Oral:

Nutr-E-Sol: 400 units/15 mL (473 mL) [color free, starch free, sugar free]

Solution, Oral:

Generic: 15 units/0.3 mL (12 mL)

Tablet, Oral:

Generic: 100 units, 200 units, 400 units

Tablet, Oral:

Generic: 50 mg, 200 mg

Vorinostat

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule, Oral:

Zolinza: 100 mg

Warfarin

DoD Uniform Formulary Outpatient Dosage Forms

BASIC CORE FORMULARY

Tablet, Oral, as sodium:

Generic: 1 mg, 2 mg, 2.5 mg, 3 mg, 4 mg, 5 mg, 6 mg, 7.5 mg, 10 mg

Vitamin E (Topical)

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule, Oral:

Formula E 400: 400 units

Cream, External:

Gordons-Vite E: 1500 units/30 g (15 g, 75 g, 480 g, 2400 g)

Liquid, External:

Generic: 920 units/mL (28.5 mL, 57 mL, 114 mL)

Lotion, External:

Vitec: (113 g)

Xtra-Care: (2 mL, 59 mL, 118 mL, 237 mL, 621 mL, 1000 mL, 3840 mL)

Oil, External:

Vitamin E Beauty: 24,000 units/52 mL (52 mL); 49,000 units/52 mL (52 mL)

Vitamins (Multiple/Injectable)

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Content varies depending on product used. For more detailed information on ingredients in these and other multivitamins, please refer to **specific product labeling**.

Vitamins (Multiple/Oral)

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Content varies depending on product used. For more detailed information on ingredients in these and other multivitamins, please refer to **specific product labeling**.

NONFORMULARY:

Genicin Vita-Q; Folika-V; Taliva

Vitamins (Multiple/Pediatric)

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Content varies depending on product used. For more detailed information on ingredients in these and other multivitamins, please refer to **specific product labeling**.

Vitamins (Multiple/Prenatal)

DoD Uniform Formulary Outpatient Dosage Forms

Content varies depending on product used. For more detailed information on ingredients in these and other multivitamins, please refer to **specific product labeling**.

UNIFORM FORMULARY

Tablet, Oral:

Prenatal Vitamin: 27 mg - 0.8 mg

Prenatal Vitamins PlusLow I

Prenatal Vitamin + Low Iron: 27 mg - 1 mg

Prenatal Plus: 29 mg - 1 mg

PrePlus: Ca-Fe 27 mg - Fa 1 mg

NONFORMULARY

All products other than the products listed in the UNIFORM FORMULARY

von Willebrand Factor (Recombinant)

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution Reconstituted, Intravenous [preservative free]:

Vonvendi: 650 units (1 ea); 1300 units (1 ea) [contains mouse (murine) and/or hamster protein, polysorbate 80]

Voretigene Neparvec

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Suspension, Intraocular:

Luxtorna: (0.5 mL)

Voriconazole

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution Reconstituted, Intravenous:

Generic: 200 mg (1 ea)

Solution Reconstituted, Intravenous [preservative free]:

Vfend IV: 200 mg (1 ea)

Suspension Reconstituted, Oral:

Generic: 40 mg/mL (75 mL)

Water for Injection (Bacteriostatic)

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Injection:

Generic: (30 mL)

Water for Injection (Sterile)

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Injection:

Generic: (5 mL, 10 mL, 20 mL, 50 mL, 100 mL, 1000 mL)

Solution, Intravenous:

Generic: (250 mL, 500 mL, 1000 mL, 2000 mL, 3000 mL, 5000 mL)

Water for Irrigation (Sterile)

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Irrigation:

Generic: (250 mL, 500 mL, 1000 mL, 1500 mL, 2000 mL, 3000 mL, 4000 mL)

Wheat Dextrin

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Packet, Oral:

Benefiber Drink Mix: (28 ea) [flavor free, gluten free, grit free, sugar free]

Benefiber Drink Mix: (8 ea) [sugar free; contains aspartame; raspberry tea flavor]

Benefiber Drink Mix: (8 ea, 24 ea) [sugar free; contains aspartame, fd&c red #40; cherry pomegranate flavor]

Benefiber Drink Mix: (16 ea, 24 ea) [sugar free; contains aspartame, fd&c red #40; kiwi strawberry flavor]

Benefiber Drink Mix: (16 ea) [sugar free; contains aspartame, fd&c yellow #6 (sunset yellow), soybean oil, tartrazine (fd&c yellow #5); citrus punch flavor]

Powder, Oral:

Benefiber: (80 g, 155 g, 245 g, 350 g, 477 g, 730 g) [gluten free, grit free, sugar free]

Benefiber: (267 g, 529 g) [grit free, sugar free; contains aspartame, fd&c red #40, fd&c yellow #6 (sunset yellow), lactose; orange flavor]

Benefiber For Children: (155 g) [grit free, sugar free; unflavored flavor]

Benefiber Plus Calcium: (423.8 g) [gluten free, grit free, sugar free]

Benefiber Plus Calcium: (305 g) [gluten free, grit free, sugar free; contains aspartame, fd&c red #40, fd&c yellow #6 (sunset yellow); orange flavor]

Benefiber Plus Heart Health: (182.4 g) [gluten free, grit free, sugar free; contains sodium benzoate]

Tablet, Oral:

Benefiber:

Benefiber Plus B Vits & FA: [contains sodium benzoate]

Tablet Chewable, Oral:

Benefiber: [scored; gluten free, sugar free; contains aspartame, fd&c blue #1 aluminum lake, fd&c red #40 aluminum lake, fd&c yellow #6 aluminum lake; assorted fruit flavor]

Benefiber: [scored; gluten free, sugar free; contains aspartame, fd&c yellow #6 aluminum lake; orange cream flavor]

Benefiber Plus Calcium: [scored; sugar free; contains aspartame, fd&c blue #1 aluminum lake, fd&c red #40 aluminum lake, soybeans (glycine max); wild berry flavor]

White Petrolatum

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Gel: 5 g

Witch Hazel

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Pad, External:

A.E.R. Traveler: 50% (50 ea) [contains benzalkonium chloride, methylparaben]

A.E.R. Witch Hazel: 50% (40 ea) [contains benzalkonium chloride, methylparaben]

Hemorrhoidal Hygiene: 50% (100 ea) [latex free; contains alcohol, usp]

Medi Pads: 50% (100 ea)

Pre-Moistened Witch Hazel: 50% (40 ea) [contains benzalkonium chloride, methylparaben]

Preparation H: 50% (10 ea, 48 ea) [contains glycerin, methylparaben, propylparaben]

Preparation H for Women: 20% (10 ea, 48 ea) [contains edetate disodium, methylparaben, propylene glycol, propylparaben]

Preparation H Totables Wipes: 50% (10 ea) [contains methylparaben, propylene glycol, propylparaben]

Sooze Pads: 50% (40 ea)

Solution, External:

Generic: 86% (473 mL)

Wound Dressing, Biocomposite

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY Dressing, External:

Band-Aid
CarboFlex
Carrasyn Hydrogel
Curasol
SilvaSorb

Xenon Xe 133 Gas

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Gas, for Inhalation:

Xenon Xe 133 gas: 370 MBq (3 mL); 740 MBq (3 mL) [Calidose system]

Yellow Fever Vaccine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Injection, powder for reconstitution [17D-204 strain]:

YF-VAX: $\geq 4.74 \log_{10}$ plaque-forming units (PFU) per 0.5 mL dose [single-dose or 5-dose vial; produced in chicken embryos; contains gelatin; packaged with diluent]

Zafirlukast

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Tablet, Oral:

Generic: 10 mg, 20 mg

Zaleplon

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule, Oral:

Generic: 5 mg, 10 mg

Zanamivir

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Aerosol Powder Breath Activated, Inhalation:

Relenza Diskhaler: 5 mg/blister (20 ea) [contains lactose]

Ziconotide

DoD Uniform Formulary Outpatient Dosage Forms

NOT COVERED

Solution, Intrathecal, as acetate [preservative free]:

Prialt: 500 mcg/20 mL (20 mL); 100 mcg/mL (1 mL); 500 mcg/5 mL (5 mL)

Zidovudine

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule, Oral:

Retrovir: 100 mg [contains soybean lecithin]

Solution, Intravenous [preservative free]:

Retrovir: 10 mg/mL (20 mL)

Syrup, Oral:

Generic: 50 mg/5 mL (240 mL)

Tablet, Oral:

Generic: 300 mg

Zinc Acetate

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule, Oral:

Galzin: 25 mg, 50 mg

Zinc Chloride

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Intravenous:

Generic: 1 mg/mL (10 mL)

Zinc Gelatin

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Bandage: 3" x 10 yards; 4" x 10 yards

Zinc Gluconate

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule, Oral [preservative free]:

Zn-50: 50 mg [dye free, sugar free, yeast free]

Gum, Oral:

Cold-Eeze: 13.3 mg (18 ea, 20 ea)

Lozenge, Mouth/Throat:

Cold-Eeze: 13.3 mg (6 ea)

Generic: 10 mg (100 ea)

Solution, Intravenous:

Generic: 10 mg/10 mL (10 mL)

Tablet, Oral:

Generic: 15 mg, 30 mg, 50 mg, 100 mg

Tablet, Oral [preservative free]:

Generic: 50 mg

Zinc Oxide

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Cream, topical:

Balmex: 11.3% (60 g, 120 g, 480 g) [contains aloe, benzoic acid, soybean oil, and vitamin E]

Desitin Rapid Relief: 13% (57 g, 113 g)

Elta Seal Moisture Barrier: 6% (114 g)

Cream, topical [stick]:

Balmex: 11.3% (56 g) [contains aloe, benzoic acid, soybean oil, and vitamin E]

Ointment, topical:

AmeriDerm PeriShield: 3.8% (100 g)

Dr. Smith's Diaper Rash: 10% (57 g, 85 g, 227 g)

PeriGuard: 3.8% (100 g)

Pharmabase Barrier: 9.38% (500 g)

Generic: 20% (30 g, 60 g, 454 g); 40% (120 g)

Paste, topical:

Boudreaux's Butt Paste: 16% (30 g, 60 g, 120 g, 480 g) [contains castor oil, boric acid, mineral oil, and Peruvian balsam]

Desitin Maximum Strength Original: 40% (28 g, 57 g, 85 g, 120 g, 113 g, 454 g) [contains cod liver oil and lanolin]

Critic-Aid Skin Care: 20% (71 g, 170 g)

Powder, topical:

Ammens Original Medicated: 9.1% (312 g)

Ammens Shower Fresh: 9.1% (312 g)

Zinc Sulfate

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule, Oral:

Generic: 220 mg

Solution, Intravenous:

Generic: 5 mg/mL (5 mL)

Solution, Ophthalmic:

Eye-Sed: 0.217% (15 mL) [contains benzalkonium chloride, boric acid]

Tablet, Oral:

Orazinc: 110 mg

Zinc 15: 66 mg

Generic: 220 mg

Tablet, Oral [preservative free]:

Generic: 220 mg

Ziprasidone

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule, Oral, as hydrochloride:

Generic: 20 mg, 40 mg, 60 mg, 80 mg

Solution Reconstituted, Intramuscular, as mesylate [strength expressed as base]:

Geodon: 20 mg (1 ea)

Ziv-Aflibercept (Systemic)

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Solution, Intravenous [preservative free]:

Zaltrap: 100 mg/4 mL (4 mL); 200 mg/8 mL (8 mL) [contains mouse (murine) and/or hamster protein]

Zoledronic Acid

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Concentrate, Intravenous:

Generic: 4 mg/5 mL (5 mL)

Concentrate, Intravenous [preservative free]:

Generic: 4 mg/5 mL (5 mL)

Solution, Intravenous:

Zometa: 4 mg/100 mL (100 mL)

Generic: 5 mg/100 mL (100 mL)

Solution, Intravenous [preservative free]:

Generic: 4 mg/100 mL (100 mL); 5 mg/100 mL (100 mL)

ZOLMItriptan

DoD Uniform Formulary Outpatient Dosage Forms

BASIC CORE FORMULARY

Tablet, Oral:

Generic: 2.5 mg, 5 mg

ZOLMITRIPTAN

Tablet Dispersible, Oral:
Generic: 2.5 mg, 5 mg

UNIFORM FORMULARY

Solution, Nasal:
Zomig: 2.5 mg (6 ea); 5 mg (6 ea)

Zolpidem

DoD Uniform Formulary Outpatient Dosage Forms

BASIC CORE FORMULARY

Tablet, Oral, as tartrate:
Generic: 5 mg, 10 mg
Tablet Extended Release, Oral, as tartrate:
Generic: 6.25 mg, 12.5 mg

NONFORMULARY

Solution, Oral, as tartrate:
Zolpimist: 5 mg/actuation (4.5 mL, 7.7 mL)
Tablet Sublingual, as tartrate:
Edluar: 5 mg, 10 mg [contains saccharin sodium]
Intermezzo: 1.75 mg, 3.5 mg

Generic: 1.75 mg, 3.5 mg

Zonisamide

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Capsule, Oral:
Generic: 25 mg, 50 mg, 100 mg

Zoster Vaccine (Live/Attenuated)

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Suspension Reconstituted, Subcutaneous [preservative free]:
Zostavax: 19,400 units/0.65 mL (1 ea)

Zoster Vaccine (Recombinant)

DoD Uniform Formulary Outpatient Dosage Forms

UNIFORM FORMULARY

Suspension Reconstituted, Intramuscular:
Shingrix: 50 mcg [contains polysorbate 80]

Therapeutic Category Index

ABORTIFACIENT

Abortifacient			
Carboprost Tromethamine	23	Dextromethorphan and Chlorpheniramine	35
Dinoprostone	37	Hydrocodone and Chlorpheniramine	60
MiFEPRISone	81	Ibuprofen, Phenylephrine, and Chlorpheniramine	62
		Ibuprofen, Pseudoephedrine, and Chlorpheniramine	62
		Naphazoline and Pheniramine	83
		Triprolidine	116
		Triprolidine and Pseudoephedrine	117
Acetylcholinesterase Inhibitor		Allergen-Specific Immunotherapy	
Echothiophate Iodide	40	Grass Pollen Allergen Extract (5 Grass Extract)	56
Edrophonium	40	Grass Pollen Allergen Extract (Timothy Grass)	56
Edrophonium and Atropine	41	Ragweed Pollen Allergen Extract	100
Neostigmine	84		
Physostigmine	93	Alpha₁ Agonist	
Pyridostigmine	100	Midodrine	81
		Naphazoline and Pheniramine	83
		Naphazoline (Ophthalmic)	83
Acetylcholinesterase Inhibitor (Central)		Alpha₁ Blocker	
Donepezil	39	Alfuzosin	6
Galantamine	54	Doxazosin	39
Rivastigmine	103	Phenoxybenzamine	93
		Phentolamine	93
		Prazosin	97
		Tamsulosin	110
		Terazosin	112
Acne Products		Alpha₂-Adrenergic Agonist	
Adapalene	5	CloNIDine	29
Benzoyl Peroxide	15	Clonidine and Chlorthalidone	29
Benzoyl Peroxide and Hydrocortisone	16	Dexmedetomidine	34
Clindamycin and Benzoyl Peroxide	28	GuanFACINE	58
Erythromycin and Benzoyl Peroxide	43	Methyldopa	79
Erythromycin (Topical)	44	Methyldopa and Hydrochlorothiazide	79
ISOTretinoin (Systemic)	67	TIZANidine	114
Salicylic Acid	103		
Sulfacetamide (Topical)	109	Alpha₂ Agonist, Ophthalmic	
Sulfur and Sulfacetamide	109	Apraclonidine	10
Tazarotene	110	Brimonidine (Ophthalmic)	18
Tretinoin (Topical)	115	Brinzolamide and Brimonidine	18
		Alpha-Adrenergic Agonist	
Activated Prothrombin Complex Concentrate (aPCC)		Acetaminophen, Diphenhydramine, and Phenylephrine	3
Anti-inhibitor Coagulant Complex (Human)	10	Acetaminophen, Guaifenesin, and Phenylephrine	4
		Brompheniramine and Phenylephrine	18
		Brompheniramine, Dextromethorphan, and Phenylephrine	18
		Chlorpheniramine and Phenylephrine	26
		Chlorpheniramine, Phenylephrine, and Dextromethorphan	26
		Dexbrompheniramine and Phenylephrine	34
		Diphenhydramine and Phenylephrine	37
		Ibuprofen, Phenylephrine, and Chlorpheniramine	62
		Phenylephrine and Pramoxine	93
		Phenylephrine and Pyrilamine	93
		Phenylephrine and Thonzylamine	93
		Phenylephrine (Nasal)	93
		Phenylephrine (Ophthalmic)	93
		Phenylephrine (Systemic)	93
		Phenylephrine (Topical)	93
		Promethazine and Phenylephrine	98
		Promethazine, Phenylephrine, and Codeine	98
		Alpha/Beta Agonist	
		Acetaminophen and Pseudoephedrine	3
		Acrivastine and Pseudoephedrine	4
		Brompheniramine and Pseudoephedrine	18
		Brompheniramine, Pseudoephedrine, and Dextromethorphan	18
		Cetirizine and Pseudoephedrine	25
		Chlorpheniramine and Pseudoephedrine	26
		Chlorpheniramine, Pseudoephedrine, and Codeine	26
		Chlorpheniramine, Pseudoephedrine, and Dextromethorphan	26
		Codeine, Phenylephrine, and Triprolidine	30
		Dexchlorpheniramine and Pseudoephedrine	34
		Droxidopa	40
		EPHEDrine (Systemic)	42
		EPINEPHrine (Nasal)	42
		EPINEPHrine (Oral Inhalation)	43
		Epinephrine (Racemic) and Aluminum Potassium Sulfate	43
		EPINEPHrine (Systemic)	43
		Fexofenadine and Pseudoephedrine	49
		Guaifenesin and Pseudoephedrine	57
		Hydrocodone, Chlorpheniramine, and Pseudoephedrine	60
		Ibuprofen, Pseudoephedrine, and Chlorpheniramine	62
		Loratadine and Pseudoephedrine	73
		Norepinephrine	86
		Pseudoephedrine	99
		Triprolidine and Pseudoephedrine	117
		5 Alpha-Reductase Inhibitor	
		Finasteride	50

Amebicide		Nabumetone	83
Iodoquinol	65	Naproxen	83
MetroNIDAZOLE (Systemic)	80	Naproxen and Diphenhydramine	84
Paromomycin	90	Naproxen and Esomeprazole	84
Tinidazole	113	Naproxen and Pseudoephedrine	84
Amino Acid		Oxaprozolol	88
Glutamine	56	Piroxicam (Systemic)	94
Aminolevulinatase Synthase 1-Directed Small Interfering Ribonucleic Acid (siRNA)		Pseudoephedrine and Ibuprofen	99
Givosiran	55	Sucrose	108
Aminoquinoline (Antimalarial)		Sulindac	109
Chloroquine	25	Ziconotide	121
Hydroxychloroquine	61	Analgesic, Opioid	
Primaquine	98	Acetaminophen and Codeine	2
Tafenoquine	110	Acetaminophen and Tramadol	3
5-Aminosalicylic Acid Derivative		Acetaminophen, Caffeine, and Dihydrocodeine	3
Balsalazide	14	Alfentanil	6
Mesalamine	77	Belladonna and Opium	14
Olsalazine	87	Buprenorphine	19
SulfaSALazine	109	Buprenorphine and Naloxone	19
Ammonium Detoxicant		Butalbital, Acetaminophen, Caffeine, and Codeine	19
Lactulose	69	Butalbital, Aspirin, Caffeine, and Codeine	20
Neomycin	84	Butorphanol	20
AMPA Glutamate Receptor Antagonist		Chlorpheniramine, Pseudoephedrine, and Codeine	26
Perampanel	92	Codeine	29
Amylinomimetic		Codeine and Chlorpheniramine	29
Pramlintide	97	Codeine, Phenylephrine, and Triprolidine	30
Anabolic Steroid		Dihydrocodeine, Aspirin, and Caffeine	37
Oxymetholone	89	FentaNYL	49
Analgesic Combination (Opioid)		HYDROcodone	60
Acetaminophen and Codeine	2	Hydrocodone and Acetaminophen	60
Acetaminophen and Tramadol	3	Hydrocodone and Chlorpheniramine	60
Acetaminophen, Caffeine, and Dihydrocodeine	3	Hydrocodone and Homatropine	60
Belladonna and Opium	14	Hydrocodone, Chlorpheniramine, and Pseudoephedrine	60
Butalbital, Acetaminophen, Caffeine, and Codeine	19	HYDROmorphine	61
Butalbital, Aspirin, Caffeine, and Codeine	20	Levorphanol	71
Hydrocodone and Acetaminophen	60	Meperidine	77
Hydrocodone and Ibuprofen	60	Methadone	77
Oxycodone and Acetaminophen	89	Morphine and Naltrexone	82
Oxycodone and Aspirin	89	Morphine (Systemic)	82
Oxycodone and Ibuprofen	89	Nalbuphine	83
Analgesic, Miscellaneous		Opium Tincture	88
Acetaminophen and Pseudoephedrine	3	OxyCODONE	89
Analgesic, Nonopioid		Oxycodone and Acetaminophen	89
Acetaminophen	2	Oxycodone and Aspirin	89
Acetaminophen and Caffeine	2	Oxycodone and Ibuprofen	89
Acetaminophen and Diphenhydramine	2	OxyMORphone	89
Acetaminophen and Pamabrom	2	Paregoric	90
Acetaminophen and Phenylephrine	2	Pentazocine	92
Acetaminophen and Phenyltoloxamine	3	Pentazocine and Naloxone	92
Acetaminophen, Aspirin, and Caffeine	3	Promethazine and Codeine	98
Acetaminophen, Caffeine, and Pyrilamine	3	Promethazine, Phenylephrine, and Codeine	98
Acetaminophen, Dextromethorphan, and Doxylamine	3	Remifentanil	101
Acetaminophen, Dextromethorphan, and Phenylephrine	3	SUFentanil	108
Acetaminophen, Diphenhydramine, and Phenylephrine	3	Tapentadol	110
Acetaminophen, Guaifenesin, and Phenylephrine	4	TraMADol	115
Acetaminophen, Isometheptene, and Dichloralphenazone	4	Analgesic, Opioid Partial Agonist	
Amlodipine and Celecoxib	8	Buprenorphine	19
Aspirin	12	Buprenorphine and Naloxone	19
Aspirin and Diphenhydramine	12	Butorphanol	20
Aspirin, Citric Acid, and Sodium Bicarbonate	12	Nalbuphine	83
Butalbital, Acetaminophen, and Caffeine	19	Pentazocine	92
Butalbital and Acetaminophen	20	Pentazocine and Naloxone	92
Celecoxib	24	Analgesic, Topical	
Chlorpheniramine and Acetaminophen	26	Benzocaine	15
Diclofenac and Misoprostol	36	Benzyl Alcohol	16
Diclofenac (Systemic)	36	Capsaicin	22
Diflunisal	37	Lidocaine and Menthol	71
Diphenhydramine and Ibuprofen	37	Lidocaine and Tetracaine	71
Etodolac	47	Lidocaine (Topical)	72
Fenoprofen	49	Trolamine	117
Flurbiprofen (Systemic)	52	Analgesic, Urinary	
Ibuprofen	62	Pentosan Polysulfate Sodium	92
Ibuprofen and Phenylephrine	62	Phenazopyridine	92
Ibuprofen, Phenylephrine, and Chlorpheniramine	62	Anaplerotic Agent	
Ibuprofen, Pseudoephedrine, and Chlorpheniramine	62	Triheptanoin	116
Indomethacin	63	Androgen	
Ketorolac (Systemic)	68	Danazol	32
Meloxicam	76	Fluoxymesterone	52
		MethylTESTOSTERone	79
		Oxandrolone	88
		Testosterone	112

ANESTHETIC/CORTICOSTEROID

Anesthetic/Corticosteroid		Ivermectin (Systemic)	67
Lidocaine and Hydrocortisone	71	Mebendazole	75
Pramoxine and Hydrocortisone	97	Praziquantel	97
		Pyrantel Pamoate	99
Anesthetic, Topical		Anti-Amyloid Monoclonal Antibody	
Fluorescein and Benoxinate	51	Aducanumab	5
Pentafluoropropane and Tetrafluoroethane	91		
Phenol	93	Antiandrogen	
Angiogenesis Inhibitor		Abiraterone Acetate	2
Lenalidomide	69		
Pomalidomide	95	Antianginal Agent	
Ranibizumab	101	AmLODIPine	8
Thalidomide	113	Amlodipine and Atorvastatin	8
		Amlodipine and Benazepril	8
Angiotensin II Receptor Blocker		Amlodipine and Olmesartan	8
Amlodipine and Olmesartan	8	Amlodipine and Valsartan	8
Amlodipine and Valsartan	8	Amlodipine, Valsartan, and Hydrochlorothiazide	8
Amlodipine, Valsartan, and Hydrochlorothiazide	8	Atenolol	12
Azilsartan	13	DiITIAZem	37
Azilsartan and Chlorthalidone	13	Isosorbide Dinitrate	67
Candesartan	22	Isosorbide Mononitrate	67
Candesartan and Hydrochlorothiazide	22	Metoprolol	80
Eprosartan	43	Nadolol	83
Irbesartan	66	NiCARDipine	85
Irbesartan and Hydrochlorothiazide	66	NIFEdipine	85
Losartan	73	Nitroglycerin	86
Losartan and Hydrochlorothiazide	73	Perindopril and Amlodipine	92
Olmesartan	87	Propranolol	99
Olmesartan and Hydrochlorothiazide	87	Ranolazine	101
Sacubitril and Valsartan	103	Telmisartan and Amlodipine	111
Telmisartan	111	Verapamil	119
Telmisartan and Amlodipine	111		
Telmisartan and Hydrochlorothiazide	111	Antianxiety Agent, Miscellaneous	
Valsartan	118	BusPIRone	19
Valsartan and Hydrochlorothiazide	118	Meprobamate	77
Angiotensin-Converting Enzyme (ACE) Inhibitor		Antiarrhythmic Agent, Class Ia	
Amlodipine and Benazepril	8	Disopyramide	38
Benazepril	15	Procainamide	98
Benazepril and Hydrochlorothiazide	15	QuinIDine	100
Captopril	22		
Captopril and Hydrochlorothiazide	22	Antiarrhythmic Agent, Class Ib	
Enalapril	42	Lidocaine (Systemic)	72
Enalapril and Hydrochlorothiazide	42	Mexiletine	80
Enalaprilat	42		
Fosinopril	53	Antiarrhythmic Agent, Class Ic	
Fosinopril and Hydrochlorothiazide	53	Flecainide	50
Lisinopril	72	Propafenone	98
Lisinopril and Hydrochlorothiazide	73		
Moexipril	82	Antiarrhythmic Agent, Class II	
Moexipril and Hydrochlorothiazide	82	Acebutolol	2
Perindopril	92	Esmolol	44
Perindopril and Amlodipine	92	Propranolol	99
Quinapril	100	Sotalol	108
Quinapril and Hydrochlorothiazide	100		
Ramipril	101	Antiarrhythmic Agent, Class III	
Trandolapril	115	Amiodarone	8
Trandolapril and Verapamil	115	Dofetilide	39
		Dronedarone	40
		Ibutilide	62
		Sotalol	108
Anilidopiperidine Opioid		Antiarrhythmic Agent, Class IV	
Alfentanil	6	DiITIAZem	37
FentaNYL	49	Verapamil	119
Remifentanil	101		
SUFentanil	108	Antiarrhythmic Agent, Miscellaneous	
		Adenosine	5
		Digoxin	37
Anorexiant			
Benzphetamine	16	Antibacterial, Dental	
Diethylpropion	37	Triclosan and Fluoride	116
Methamphetamine	77		
Phendimetrazine	92	Antibacterial, Topical	
Phentermine	93	Hydrogen Peroxide	61
Antacid		Antibiotic, Aminoglycoside	
Aluminum Hydroxide	7	Amikacin (Systemic)	7
Aluminum Hydroxide and Magnesium Carbonate	7	Gentamicin (Ophthalmic)	55
Aluminum Hydroxide and Magnesium Hydroxide	7	Gentamicin (Systemic)	55
Aluminum Hydroxide, Magnesium Hydroxide, and Simethicone	7	Gentamicin (Topical)	55
Aspirin, Citric Acid, and Sodium Bicarbonate	12	Neomycin	84
Calcium Carbonate	21	Plazomicin	94
Calcium Carbonate and Magnesium Hydroxide	21	Streptomycin	108
Calcium Carbonate and Simethicone	21	Tobramycin (Ophthalmic)	114
Famotidine, Calcium Carbonate, and Magnesium Hydroxide	48	Tobramycin (Oral Inhalation)	114
Magnesium Hydroxide	74	Tobramycin (Systemic)	114
Sodium Bicarbonate	106		
Sodium Citrate	106	Antibiotic, Carbapenem	
		Doripenem	39
Anthelmintic		Ertapenem	43
Albendazole	5		

Imipenem and Cilastatin	62	Antibiotic, Miscellaneous	
Meropenem	77	Bacitracin (Systemic)	13
Meropenem and Vaborbactam	77	Bismuth Subcitrate, Metronidazole, and Tetracycline	17
Antibiotic, Cephalosporin (First Generation)		Capreomycin	22
Cefadroxil	23	Chloramphenicol (Systemic)	25
CeFAZolin	23	Clofazimine	28
Cephalexin	25	Colistimethate	30
Antibiotic, Cephalosporin (Second Generation)		CycloSERINE	31
Cefaclor	23	Dapsone (Systemic)	32
CefoTEtan	24	Fosfomycin	53
CefOXitin	24	Hyoscyamine, Methenamine, Methylene Blue, and Sodium Phosphate	
Cefprozil	24	Monobasic	61
Cefuroxime	24	Methenamine	78
Antibiotic, Cephalosporin (Third Generation)		Methenamine, Phenyl Salicylate, Methylene Blue, Benzoic Acid, and	
Cefdinir	23	Hyoscyamine	78
Cefditoren	24	Methenamine, Sodium Phosphate Monobasic, Phenyl Salicylate,	
Cefixime	24	Methylene Blue, and Hyoscyamine	78
Cefotaxime	24	MetroNIDAZOLE (Systemic)	80
Cefpodoxime	24	Nitrofurantoin	85
CefTAZidime	24	Polymyxin B	95
Ceftibuten	24	Rifampin and Isoniazid	102
CefTRIAxone	24	Rifampin, Isoniazid, and Pyrazinamide	102
Antibiotic, Cephalosporin (Fourth Generation)		Secnidazole	104
Cefepime	24	Sulfamethoxazole and Trimethoprim	109
Antibiotic, Cephalosporin (Fifth Generation)		Tetracycline, Bismuth Subsalicylate, and Metronidazole	112
Ceftaroline Fosamil	24	Tinidazole	113
Antibiotic/Corticosteroid, Ophthalmic		Trimethoprim	116
Loteprednol and Tobramycin	74	Antibiotic, Monobactam	
Neomycin, Polymyxin B, and Dexamethasone	84	Aztreonam (Oral Inhalation)	13
Neomycin, Polymyxin B, and Hydrocortisone (Ophthalmic)	84	Aztreonam (Systemic)	13
Prednisolone and Gentamicin	97	Antibiotic, Ophthalmic	
Sulfacetamide and Prednisolone	108	Azithromycin (Ophthalmic)	13
Tobramycin and Dexamethasone	114	Bacitracin and Polymyxin B (Ophthalmic)	13
Antibiotic/Corticosteroid, Otic		Bacitracin, Neomycin, and Polymyxin B (Ophthalmic)	13
Ciprofloxacin and Dexamethasone	27	Bacitracin, Neomycin, Polymyxin B, and Hydrocortisone	
Ciprofloxacin and Fluocinolone	27	(Ophthalmic)	13
Ciprofloxacin and Hydrocortisone	27	Bacitracin (Ophthalmic)	13
Neomycin, Colistin, Hydrocortisone, and Thonzonium	84	Ciprofloxacin (Ophthalmic)	27
Neomycin, Polymyxin B, and Hydrocortisone (Otic)	84	Erythromycin (Ophthalmic)	43
Antibiotic/Corticosteroid, Topical		Gatifloxacin	55
Neomycin, Polymyxin B, and Hydrocortisone (Topical)	84	Gentamicin (Ophthalmic)	55
Antibiotic, Cyclic Lipopeptide		LevoFLOxacin (Ophthalmic)	70
DAPTOmycin	32	LevoFLOxacin (Systemic)	70
Antibiotic, Fluoroquinolone		Moxifloxacin (Ophthalmic)	82
Ciprofloxacin and Fluocinolone	27	Neomycin, Polymyxin B, and Gramicidin	84
Ciprofloxacin (Ophthalmic)	27	Neomycin, Polymyxin B, and Hydrocortisone (Ophthalmic)	84
Ciprofloxacin (Otic)	27	Ofloxacin (Ophthalmic)	87
Ciprofloxacin (Systemic)	27	Sulfacetamide (Ophthalmic)	108
Delafloxacin	33	Tobramycin (Ophthalmic)	114
Gatifloxacin	55	Trimethoprim and Polymyxin B	116
Gemifloxacin	55	Antibiotic, Oral Rinse	
LevoFLOxacin (Ophthalmic)	70	Chlorhexidine Gluconate (Oral)	25
LevoFLOxacin (Systemic)	70	Hydrogen Peroxide	61
Moxifloxacin (Ophthalmic)	82	Antibiotic, Otic	
Moxifloxacin (Systemic)	82	Ciprofloxacin and Dexamethasone	27
Ofloxacin (Ophthalmic)	87	Ciprofloxacin and Fluocinolone	27
Ofloxacin (Otic)	87	Ciprofloxacin and Hydrocortisone	27
Ofloxacin (Systemic)	87	Ciprofloxacin (Otic)	27
Antibiotic, Glycylcycline		Neomycin, Colistin, Hydrocortisone, and Thonzonium	84
Tigecycline	113	Neomycin, Polymyxin B, and Hydrocortisone (Otic)	84
Antibiotic, Irrigation		Ofloxacin (Otic)	87
Polymyxin B	95	Antibiotic, Oxazolidinone	
Antibiotic, Lincosamide		Linezolid	72
Clindamycin (Systemic)	28	Tedizolid	111
Clindamycin (Topical)	28	Antibiotic, Penicillin	
Lincomycin	72	Amoxicillin	8
Antibiotic, Macrolide		Amoxicillin and Clavulanate	8
Azithromycin (Ophthalmic)	13	Ampicillin	9
Azithromycin (Systemic)	13	Ampicillin and Sulbactam	9
Clarithromycin	28	Dicloxacillin	36
Erythromycin (Ophthalmic)	43	Lansoprazole, Amoxicillin, and Clarithromycin	69
Erythromycin (Systemic)	44	Nafcillin	83
Erythromycin (Topical)	44	Omeprazole, Clarithromycin, and Amoxicillin	88
Fidaxomicin	50	Oxacillin	88
Antibiotic, Macrolide Combination		Penicillin V Potassium	91
Lansoprazole, Amoxicillin, and Clarithromycin	69	Penicillin G Benzathine	91
Omeprazole, Clarithromycin, and Amoxicillin	88	Penicillin G Benzathine and Penicillin G Procaine	91
		Penicillin G (Parenteral/Aqueous)	91
		Penicillin G Procaine	91
		Piperacillin and Tazobactam	94
		Ticarcillin and Clavulanate Potassium	113
		Antibiotic, Pleuromutilin	
		Retapamulin	101

ANTIBIOTIC, RESPIRATORY FLUOROQUINOLONE

Antibiotic, Respiratory Fluoroquinolone		Umeclidinium	117
Gemifloxacin	55	Umeclidinium and Vilanterol	117
LevoFLOXacin (Systemic)	70	Anticholinergic Agent, Ophthalmic	
Moxifloxacin (Systemic)	82	Atropine (Ophthalmic)	12
Antibiotic, Streptogramin		Cyclopentolate	31
Quinupristin and Dalfopristin	100	Homatropine	59
Antibiotic, Sulfonamide Derivative		Anticoagulant	
Sulfacetamide (Topical)	109	Anticoagulant Citrate Dextrose	9
SulfADIAZINE	109	Anticoagulant Citrate Phosphate Dextrose	9
Sulfamethoxazole and Trimethoprim	109	Anticoagulant Sodium Citrate	9
Sulfur and Sulfacetamide	109	Antithrombin	10
Antibiotic, Tetracycline Derivative		Apixaban	10
Bismuth Subcitrate, Metronidazole, and Tetracycline	17	Argatroban	11
Demeclocycline	33	Bivalirudin	17
Doxycycline	40	Dabigatran Etexilate	32
Eravacycline	43	Dalteparin	32
Minocycline Hydrochloride Periodontal Microspheres	81	Desirudin	33
Minocycline (Systemic)	81	Enoxaparin	42
Tetracycline, Bismuth Subsalicylate, and Metronidazole	112	Fondaparinux	53
Tetracycline (Systemic)	112	Heparin	58
Antibiotic, Topical		Rivaroxaban	102
Bacitracin and Polymyxin B (Topical)	13	Sodium Chloride and Sodium Citrate	106
Bacitracin, Neomycin, and Polymyxin B (Topical)	13	Warfarin	120
Bacitracin, Neomycin, Polymyxin B, and Hydrocortisone (Topical)	13	Anticoagulant, Direct Thrombin Inhibitor	
Bacitracin, Neomycin, Polymyxin B, and Pramoxine	13	Argatroban	11
Bacitracin (Topical)	14	Bivalirudin	17
Chlorhexidine Gluconate (Topical)	25	Dabigatran Etexilate	32
Clioquinol and Hydrocortisone	28	Desirudin	33
Erythromycin (Topical)	44	Anticoagulant, Factor Xa Inhibitor	
Gentamicin (Topical)	55	Apixaban	10
Gentian Violet	55	Fondaparinux	53
Mafenide	74	Rivaroxaban	102
MetroNIDAZOLE (Topical)	80	Anticoagulant, Low Molecular Weight Heparin	
Mupirocin	83	Dalteparin	32
Neomycin and Polymyxin B	84	Enoxaparin	42
Neomycin, Polymyxin B, and Hydrocortisone (Topical)	84	Anticoagulant, Vitamin K Antagonist	
Oxychlorosene	89	Warfarin	120
Retapamulin	101	Anticonvulsant	
Silver	105	Cannabidiol	22
Silver Nitrate	105	Anticonvulsant, Barbiturate	
Silver Sulfadiazine	105	PENTobarbital	92
Antibiotic, Urinary Anti-infective		PHENobarbital	92
Methenamine, Phenyl Salicylate, Atropine, Hyoscyamine, Benzoic Acid, and Methylene Blue	78	Anticonvulsant, Benzodiazepine	
Anti-CD19 Monoclonal Antibody		CloBAZam	28
Inebilizumab	63	Clonazepam	29
Anti-CD20 Monoclonal Antibody		Clorazepate	29
Ocrelizumab	86	DiazePAM	36
Ofatumumab	87	LORazepam	73
Anticholinergic Agent		Midazolam	81
Acridinium	4	Anticonvulsant, Hydantoin	
Acridinium and Formoterol	4	Ethotoin	47
Atropine and Pralidoxime	12	Fosphenytoin	54
Atropine (Systemic)	12	Phenytoin	93
Benztropine	16	Anticonvulsant, Miscellaneous	
Dicyclomine	36	AcetaZOLAMIDE	4
Edrophonium and Atropine	41	CarBAMazepine	22
Glycopyrrolate (Systemic)	56	Cenobamate	24
Glycopyrronium (Topical)	56	Eslicarbazepine	44
Hyoscyamine	61	Felbamate	48
Hyoscyamine, Atropine, Scopolamine, and Phenobarbital	61	Fenfluramine	48
Ipratropium and Albuterol	66	Gabapentin	54
Ipratropium (Nasal)	66	Lacosamide	68
Ipratropium (Oral Inhalation)	66	LamoTRigine	69
Methscopolamine	78	LevETIRAcetam	70
Propantheline	98	Magnesium Sulfate	75
Scopolamine	104	OXcarbazepine	89
Solifenacin	107	Perampanel	92
Tiotropium	114	Pregabalin	98
Tiotropium and Olodaterol	114	Primidone	98
Tolterodine	114	TiaGABine	113
Trihexyphenidyl	116	Topiramate	114
Trospium	117	Valproic Acid and Derivatives	118
Umeclidinium	117	Vigabatrin	119
Umeclidinium and Vilanterol	117	Zonisamide	122
Anticholinergic Agent, Long-Acting		Anticonvulsant, Neuronal Potassium Channel Opener	
Acridinium	4	Ezogabine	48
Acridinium and Formoterol	4		
Tiotropium	114		
Tiotropium and Olodaterol	114		

Anticonvulsant, Succinimide		Antidiabetic Agent, Meglitinide Analog	
Ethosuximide	47	Nateglinide	84
Methsuximide	79	Repaglinide	101
Anticonvulsant, Triazole Derivative		Repaglinide and Metformin	101
Rufinamide	103	Antidiabetic Agent, Sodium-Glucose Cotransporter 2 (SGLT2) Inhibitor	
Anticystine Agent		Empagliflozin	41
Cysteamine (Ophthalmic)	32	Empagliflozin and Linagliptin	41
Cysteamine (Systemic)	32	Empagliflozin and Metformin	42
Antidepressant, Alpha-2 Antagonist		Empagliflozin, Linagliptin, and Metformin	42
Mirtazapine	81	Antidiabetic Agent, Sulfonylurea	
Antidepressant, Dopamine/Norepinephrine-Reuptake Inhibitor		ChlorproPAMIDE	26
BuPROPion	19	Glimepiride	55
Antidepressant, Monoamine Oxidase Inhibitor		GlipizIDE	55
Isocarboxazid	67	Glipizide and Metformin	55
Phenelzine	92	GlyBURIDE	56
Selegiline	104	Glyburide and Metformin	56
Tranylcypromine	115	Pioglitazone and Glimepiride	94
Antidepressant, Selective Serotonin Reuptake Inhibitor		TOLAZamide	114
Citalopram	27	TOLBUTamide	114
Escitalopram	44	Antidiabetic Agent, Thiazolidinedione	
FLUoxetine	52	Pioglitazone	94
Fluvoxamine	53	Pioglitazone and Glimepiride	94
Olanzapine and Fluoxetine	87	Pioglitazone and Metformin	94
PARoxetine	90	Antidiarrheal	
Sertraline	105	Bismuth Subcitrate, Metronidazole, and Tetracycline	17
Antidepressant, Serotonin/Norepinephrine Reuptake Inhibitor		Bismuth Subsalicylate	17
Desvenlafaxine	34	Crofelemer	31
DULoxetine	40	Difenoxin and Atropine	37
Venlafaxine	119	Diphenoxylate and Atropine	38
Antidepressant, Serotonin Reuptake Inhibitor/Antagonist		Loperamide	73
Nefazodone	84	Loperamide and Simethicone	73
TraZODone	115	Octreotide	87
Antidepressant, Tetracyclic		Opium Tincture	88
Maprotiline	75	Paregoric	90
Antidepressant, Tricyclic (Secondary Amine)		Polycarbophil	94
Amoxapine	8	Psyllium	99
Desipramine	33	Tetracycline, Bismuth Subsalicylate, and Metronidazole	112
Nortriptyline	86	Antidiarrheal, Miscellaneous	
Protriptyline	99	Probiotic Product	98
Antidepressant, Tricyclic (Tertiary Amine)		Antidiuretic Hormone Analog	
Amitriptyline	8	Vasopressin	118
Amitriptyline and Chlordiazepoxide	8	Antidote	
Amitriptyline and Perphenazine	8	Acetylcysteine	4
ClomipRAMINE	29	Alcohol (Ethyl)	5
Doxepin (Systemic)	39	Aluminum Hydroxide	7
Imipramine	62	Amifostine	7
Trimipramine	116	Atropine and Pralidoxime	12
Antidiabetic Agent		Atropine (Systemic)	12
Pramlintide	97	Calcitonin	20
Antidiabetic Agent, Alpha-Glucosidase Inhibitor		Calcium Acetate	21
Acarbose	2	Calcium Carbonate	21
Miglitol	81	Carglumic Acid	23
Antidiabetic Agent, Biguanide		Charcoal, Activated	25
Empagliflozin and Metformin	42	Deferoxamine	33
Empagliflozin, Linagliptin, and Metformin	42	Dexrazoxane	34
Glipizide and Metformin	55	Digoxin Immune Fab	37
Glyburide and Metformin	56	Dimercaprol	37
Linagliptin and Metformin	72	Edrophonium	40
MetFORMIN	77	Edrophonium and Atropine	41
Pioglitazone and Metformin	94	Ferric Hexacyanoferrate	49
Repaglinide and Metformin	101	Flumazenil	50
Sitagliptin and Metformin	106	Fomepizole	53
Antidiabetic Agent, Dipeptidyl Peptidase 4 (DPP-4) Inhibitor		Glucagon	55
Empagliflozin and Linagliptin	41	Glucarpidase	56
Empagliflozin, Linagliptin, and Metformin	42	Hydroxocobalamin	61
LinaGLIPTin	72	IdaruCIZUmab	62
Linagliptin and Metformin	72	Leucovorin Calcium	70
SITagliptin	106	LEVOleucovorin	70
Sitagliptin and Metformin	106	Mesna	77
Antidiabetic Agent, Dopamine Agonist		Methylene Blue	79
Bromocriptine	18	Naloxone	83
Antidiabetic Agent, Glucagon-Like Peptide-1 (GLP-1) Receptor Agonist		Naltrexone	83
Exenatide	47	Octreotide	87
		Patiromer	90
		Phenoxybenzamine	93
		Physostigmine	93
		Potassium Iodide	96
		Pralidoxime	97
		Protamine	99
		Sodium Nitrite	107
		Sodium Nitrite and Sodium Thiosulfate	107

ANTIDOTE

Sodium Phenylacetate and Sodium Benzoate	107	Ketoconazole (Systemic)	67
Sodium Polystyrene Sulfonate	107	Posaconazole	95
Sodium Thiosulfate	107	Terbinafine (Systemic)	112
Sodium Zirconium Cyclosilicate	107	Voriconazole	120
Succimer	108	Antifungal Agent, Oral Nonabsorbed	
Sugammadex	108	Clotrimazole (Oral)	29
Uridine Triacetate	118	Miconazole (Oral)	80
Antidote, Extravasation		Antifungal Agent, Oral Nonabsorbed/Partially Absorbed	
Dexrazoxane	34	Clotrimazole (Topical)	29
Dimethyl Sulfoxide	37	Miconazole (Topical)	80
Hyaluronidase	59	Nystatin (Oral)	86
Nitroglycerin	86	Antifungal Agent, Parenteral	
Phentolamine	93	Amphotericin B Deoxycholate	9
Sodium Thiosulfate	107	Amphotericin B (Lipid Complex)	9
Terbutaline	112	Amphotericin B (Liposomal)	9
Antidote, Hypoglycemia		Anidulafungin	9
Dextrose	35	Caspofungin	23
Diazoxide	36	Fluconazole	50
Glucagon	55	Isavuconazonium Sulfate	66
Antiemetic		Micafungin	80
Aprepitant	10	Voriconazole	120
DexAMETHasone (Systemic)	34	Antifungal Agent, Topical	
Dronabinol	40	Betamethasone and Clotrimazole	16
Droperidol	40	Butenafine	20
Fosaprepitant	53	Ciclopirox	27
Fosnetupitant and Palonosetron	54	Clioquinol and Hydrocortisone	28
Fructose, Dextrose, and Phosphoric Acid	54	Clotrimazole (Topical)	29
Granisetron	56	Econazole	40
HydrOXYzine	61	Gentian Violet	55
Meclizine	75	Iodoquinol and Hydrocortisone	66
Metoclopramide	79	Ketoconazole (Topical)	67
Nabilone	83	Luliconazole	74
Netupitant and Palonosetron	85	Miconazole (Topical)	80
Ondansetron	88	Naftifine	83
Palonosetron	90	Nystatin and Triamcinolone	86
Perphenazine	92	Nystatin (Topical)	86
Prochlorperazine	98	Terbinafine (Topical)	112
Promethazine	98	Tolnaftate	114
Trimethobenzamide	116	Undecylenic Acid and Derivatives	117
Anti-FGF23 Monoclonal Antibody		Antifungal Agent, Triterpenoid	
Burosumab	19	Ibrexafungerp	62
Antifibrinolytic Agent		Antifungal Agent, Vaginal	
Aminocaproic Acid	7	Butoconazole	20
Tranexamic Acid	115	Clotrimazole (Topical)	29
Antifibrotic Agent		Miconazole (Topical)	80
Pirfenidone	94	Sulfanilamide	109
Antiflatulent		Terconazole	112
Aluminum Hydroxide, Magnesium Hydroxide, and Simethicone	7	Tioconazole	113
Calcium Carbonate and Simethicone	21	Antigout Agent	
Loperamide and Simethicone	73	Allopurinol	6
Simethicone	105	Colchicine	30
Antifungal Agent		Colchicine and Probenecid	30
Pentamidine (Oral Inhalation)	91	Lesinurad and Allopurinol	69
Pentamidine (Systemic)	92	Antihemophilic Agent	
Antifungal Agent, Azole Derivative		Aminocaproic Acid	7
Isavuconazonium Sulfate	66	Antihemophilic Factor (Human)	9
Itraconazole	67	Antihemophilic Factor (Recombinant)	10
Posaconazole	95	Antihemophilic Factor/von Willebrand Factor Complex (Human)	10
Terconazole	112	Anti-inhibitor Coagulant Complex (Human)	10
Voriconazole	120	Desmopressin	33
Antifungal Agent, Imidazole Derivative		Factor IX Complex (Human) [(Factors II, IX, X)]	48
Butoconazole	20	Factor IX (Human)	48
Clotrimazole (Oral)	29	Factor IX (Recombinant [Fc Fusion Protein])	48
Clotrimazole (Topical)	29	Factor X (Human)	48
Econazole	40	Factor XIII A-Subunit (Recombinant)	48
Ketoconazole (Systemic)	67	Factor XIII Concentrate (Human)	48
Ketoconazole (Topical)	67	Factor VIIa (Recombinant)	48
Miconazole (Oral)	80	Tranexamic Acid	115
Miconazole (Topical)	80	von Willebrand Factor (Recombinant)	120
Tioconazole	113	Antihemorrhoidal Agent	
Antifungal Agent, Ophthalmic		Dibucaine	36
Natamycin	84	Glycerin and Lidocaine	56
Antifungal Agent, Oral		Hydrocortisone (Topical)	60
Fluconazole	50	Lidocaine and Hydrocortisone	71
Flucytosine	50	Phenylephrine and Pramoxine	93
Griseofulvin	56	Phenylephrine (Topical)	93
Ibrexafungerp	62	Pramoxine	97
Isavuconazonium Sulfate	66	Witch Hazel	120
Itraconazole	67	Zinc Oxide	121

Antihypertensive		Labetalol	68
Acebutolol	2	Lisinopril	72
AMLOrde	7	Lisinopril and Hydrochlorothiazide	73
Amiloride and Hydrochlorothiazide	7	Losartan	73
AmLODIPine	8	Losartan and Hydrochlorothiazide	73
Amlodipine and Atorvastatin	8	Methyclothiazide	79
Amlodipine and Benazepril	8	Methyldopa	79
Amlodipine and Celecoxib	8	Methyldopa and Hydrochlorothiazide	79
Amlodipine and Olmesartan	8	Metoprolol	80
Amlodipine and Valsartan	8	Metoprolol and Hydrochlorothiazide	80
Amlodipine, Valsartan, and Hydrochlorothiazide	8	Minoxidil (Systemic)	81
Atenolol	12	Moexipril	82
Atenolol and Chlorthalidone	12	Moexipril and Hydrochlorothiazide	82
Azilsartan	13	Nadolol	83
Azilsartan and Chlorthalidone	13	Nadolol and Bendroflumethiazide	83
Benazepril	15	NiCARdipine	85
Benazepril and Hydrochlorothiazide	15	NIFEdipine	85
Betaxolol (Systemic)	16	Nitroprusside	86
Bisoprolol	17	Olmesartan	87
Bisoprolol and Hydrochlorothiazide	17	Perindopril	92
Bumetanide	19	Perindopril and Amlodipine	92
Candesartan	22	Phentolamine	93
Candesartan and Hydrochlorothiazide	22	Pindolol	94
Captopril	22	Prazosin	97
Captopril and Hydrochlorothiazide	22	Propranolol	99
Carvedilol	23	Propranolol and Hydrochlorothiazide	99
Chlorothiazide	25	Quinapril	100
Chlorthalidone	26	Quinapril and Hydrochlorothiazide	100
Clevidipine	28	Ramipril	101
CloNIDine	29	SpiroNolactone	108
Clonidine and Chlorthalidone	29	Telmisartan	111
DiltIAZem	37	Telmisartan and Amlodipine	111
Doxazosin	39	Telmisartan and Hydrochlorothiazide	111
Enalapril	42	Terazosin	112
Enalapril and Hydrochlorothiazide	42	Timolol (Systemic)	113
Enalaprilat	42	Torsemide	115
Eplerenone	43	Trandolapril	115
Eprosartan	43	Trandolapril and Verapamil	115
Esmolol	44	Triamterene	116
Felodipine	48	Valsartan	118
Fenoldopam	49	Valsartan and Hydrochlorothiazide	118
Fosinopril	53	Verapamil	119
Fosinopril and Hydrochlorothiazide	53		
Furosemide	54	Anti-inflammatory Agent	
GuanFACINE	58	Balsalazide	14
HydrALAZINE	59	Colchicine and Probenecid	30
HydroCHLORothiazide	59	DexAMETHasone (Systemic)	34
Hydrochlorothiazide and Spironolactone	59	Pirfenidone	94
Hydrochlorothiazide and Triamterene	59		
Indapamide	63	Anti-inflammatory Agent, Ophthalmic	
Irbesartan	66	DexAMETHasone (Ophthalmic)	34
Irbesartan and Hydrochlorothiazide	66		
Isosorbide Dinitrate and Hydralazine	67	Anti-inflammatory, Locally Applied	
		Carbamide Peroxide	22
		Maltodextrin	75
		Anti-interleukin 17A Monoclonal Antibody	
		Secukinumab	104
		Antilipemic Agent, 2-Azetidinone	
		Ezetimibe	48
		Antilipemic Agent, Angiopoietin-Like Protein 3 (ANGPTL3) Inhibitor	
		Evinacumab	47
		Antilipemic Agent, Bile Acid Sequestrant	
		Cholestyramine Resin	26
		Colestipol	30
		Antilipemic Agent, Fibric Acid	
		Fenofibrate and Derivatives	49
		Gemfibrozil	55
		Antilipemic Agent, HMG-CoA Reductase Inhibitor	
		Amlodipine and Atorvastatin	8
		AtorvaSTATin	12
		Fluvastatin	53
		Lovastatin	74
		Pravastatin	97
		Rosuvastatin	103
		Simvastatin	105
		Antilipemic Agent, Microsomal Triglyceride Transfer Protein (MTP) Inhibitor	
		Lomitapide	73
		Antilipemic Agent, Miscellaneous	
		Niacin	85
Antihypertensive			
Antihepaciviral, NS3/4A Protease Inhibitor (Anti-HCV)			
Glecaprevir and Pibrentasvir	55		
Ombitasvir, Paritaprevir, and Ritonavir	87		
Ombitasvir, Paritaprevir, Ritonavir, and Dasabuvir	87		
Antihepaciviral, NS5A Inhibitor			
Glecaprevir and Pibrentasvir	55		
Ledipasvir and Sofosbuvir	69		
Ombitasvir, Paritaprevir, and Ritonavir	87		
Ombitasvir, Paritaprevir, Ritonavir, and Dasabuvir	87		
Sofosbuvir and Velpatasvir	107		
Sofosbuvir, Velpatasvir, and Voxilaprevir	107		
Antihepaciviral, Nucleoside (Anti-HCV)			
Ribavirin (Systemic)	101		
Antihepaciviral, Polymerase Inhibitor (Anti-HCV)			
Ledipasvir and Sofosbuvir	69		
Ombitasvir, Paritaprevir, Ritonavir, and Dasabuvir	87		
Sofosbuvir and Velpatasvir	107		
Sofosbuvir, Velpatasvir, and Voxilaprevir	107		
Antihepadnaviral, Reverse Transcriptase Inhibitor, Nucleoside (Anti-HBV)			
Entecavir	42		
LamiVUDine	69		
Antihepadnaviral, Reverse Transcriptase Inhibitor, Nucleotide (Anti-HBV)			
Adefovir	5		
Tenofovir Disoproxil Fumarate	111		
Antihyperlipidemic Agent, Apolipoprotein B Antisense Oligonucleotide			
Mipomersen	81		

ANTILIPEMIC AGENT, OMEGA-3 FATTY ACIDS

Antilipemic Agent, Omega-3 Fatty Acids		Antineoplastic Agent, Alkylating Agent (Nitrosourea)	
Icosapent Ethyl	62	Carmustine	23
Omega-3 Fatty Acids	87	Lomustine	73
		Streptozocin	108
Antilipemic Agent, PCSK9 Inhibitor		Antineoplastic Agent, Alkylating Agent (Triazene)	
Alirocumab	6	Dacarbazine	32
Evolocumab	47	Temozolomide	111
Antimalarial Agent		Antineoplastic Agent, Anaplastic Lymphoma Kinase Inhibitor	
Artemether and Lumefantrine	11	Alectinib	6
Artesunate	11	Brigatinib	18
Atovaquone and Proguanil	12	Ceritinib	25
Chloroquine	25	Crizotinib	31
Hydroxychloroquine	61	Lorlatinib	73
Mefloquine	76		
Primaquine	98	Antineoplastic Agent, Anthracenedione	
Pyrimethamine	100	MitoXANTRONE	81
QuiNIDine	100		
QuiNINE	100	Antineoplastic Agent, Anthracycline	
Tafenoquine	110	DAUNOrubicin (Conventional)	33
		DOXOrubicin (Conventional)	39
Antimanic Agent		DOXOrubicin (Liposomal)	40
ChlorproMAZINE	26	EpiRUBicin	43
Lithium	73	IDArubicin	62
OLANZapine	87	Valrubicin	118
Olanzapine and Samidorphan	87		
RisperiDONE	102	Antineoplastic Agent, Anti-CC Chemokine Receptor 4 Antibody	
Valproic Acid and Derivatives	118	Mogamulizumab	82
Antimicrobial Mouth Rinse		Antineoplastic Agent, Antiandrogen	
Mouthwash	82	Abiraterone Acetate	2
		Apalutamide	10
Antimigraine Agent		Bicalutamide	17
Acetaminophen, Caffeine, and Isometheptene Mucate	3	Enzalutamide	42
Dihydroergotamine	37	Flutamide	52
Eletriptan	41	Nilutamide	85
Erenumab	43		
Ergotamine	43	Antineoplastic Agent, Antibiotic	
Ergotamine and Caffeine	43	Bleomycin	17
Fremanezumab	54	DACTINomycin	32
Galcanezumab	54	MitoMYcin (Ophthalmic)	81
Naratriptan	84	MitoMYcin (Systemic)	81
Rimegepant	102		
Rizatriptan	103	Antineoplastic Agent, Antibody Drug Conjugate	
SUMATriptan	109	Ado-Trastuzumab Emtansine	5
ZOLMitriptan	121	Brentuximab Vedotin	18
		Enfortumab Vedotin	42
Antimycobacterial, Nitroimidazole		Fam-Trastuzumab Deruxtecan	48
Pretomanid	98	Gemtuzumab Ozogamicin	55
		Inotuzumab Ozogamicin	64
Antineoplastic Agent		Polatuzumab Vedotin	94
Acalabrutinib	2		
Ibrutinib	62	Antineoplastic Agent, Anti-CD19	
Lenalidomide	69	Axicabtagene Ciloleucl	13
Pomalidomide	95	Lisocabtagene Maraleucl	73
Thalidomide	113	Tisagenlecleucl	114
Venetoclax	119		
Antineoplastic Agent, Alkylating Agent		Antineoplastic Agent, Anti-CD19/CD3	
Altretamine	6	Blinatumomab	17
Bendamustine	15		
Busulfan	19	Antineoplastic Agent, Anti-CD20	
CARBOplatin	23	Ibritumomab Tiuxetan	62
Carmustine	23	Obinutuzumab	86
Chlorambucil	25	Ofatumumab	87
ClSplatin	27	RiTUXimab	102
Cyclophosphamide	31	Rituximab and Hyaluronidase	102
Estramustine	44		
Ifosfamide	62	Antineoplastic Agent, Anti-CD22	
Lomustine	73	Inotuzumab Ozogamicin	64
Mechlorethamine (Systemic)	75	Moxetumomab Pasudotox	82
Mechlorethamine (Topical)	75		
Melphalan	76	Antineoplastic Agent, Anti-CD30	
Melphalan Flufenamide	76	Brentuximab Vedotin	18
Oxaliplatin	88		
Procarbazine	98	Antineoplastic Agent, Anti-CD33	
Streptozocin	108	Gemtuzumab Ozogamicin	55
Thiotepa	113		
Antineoplastic Agent, Alkylating Agent (Nitrogen Mustard)		Antineoplastic Agent, Anti-CD38	
Bendamustine	15	Daratumumab	32
Chlorambucil	25		
Cyclophosphamide	31	Antineoplastic Agent, Anti-CD52	
Ifosfamide	62	Alemtuzumab	6
Mechlorethamine (Systemic)	75		
Mechlorethamine (Topical)	75	Antineoplastic Agent, Anti-CD79B	
Melphalan	76	Polatuzumab Vedotin	94
Melphalan Flufenamide	76		
		Antineoplastic Agent, Anti-CD123	
		Tagraxofusp	110
		Antineoplastic Agent, Anti-CTLA4 Monoclonal Antibody	
		Ipilimumab	66

Antineoplastic Agent, Anti-GD2			
Dinutuximab	37		
Naxitamab	84		
Antineoplastic Agent, Anti-HER2			
Ado-Trastuzumab Emtansine	5		
Fam-Trastuzumab Deruxtecan	48		
Lapatinib	69		
Neratinib	85		
Pertuzumab	92		
Trastuzumab	115		
Trastuzumab and Hyaluronidase	115		
Tucatinib	117		
Antineoplastic Agent, Antimetabolite			
AzaCITIDine	13		
Capecitabine	22		
Cladribine	27		
Clofarabine	28		
Cytarabine (Conventional)	32		
Cytarabine (Liposomal)	32		
Decitabine	33		
Decitabine and Cedazuridine	33		
Floxuridine	50		
Fludarabine	50		
Fluorouracil (Systemic)	51		
Fluorouracil (Topical)	52		
Gemcitabine	55		
Mercaptopurine	77		
Nelarabine	84		
PEM ^{ET} rexed	91		
Pentostatin	92		
PRAL ^{AT} rexate	97		
Thioguanine	113		
Trifluridine and Tipiracil	116		
Antineoplastic Agent, Antimetabolite (Antifolate)			
Methotrexate	78		
PEM ^{ET} rexed	91		
PRAL ^{AT} rexate	97		
Antineoplastic Agent, Antimetabolite (Purine Analog)			
Cladribine	27		
Clofarabine	28		
Fludarabine	50		
Mercaptopurine	77		
Nelarabine	84		
Pentostatin	92		
Thioguanine	113		
Antineoplastic Agent, Antimetabolite (Pyrimidine Analog)			
Capecitabine	22		
Cytarabine (Conventional)	32		
Cytarabine (Liposomal)	32		
Floxuridine	50		
Fluorouracil (Systemic)	51		
Fluorouracil (Topical)	52		
Gemcitabine	55		
Trifluridine and Tipiracil	116		
Antineoplastic Agent, Antimicrotubular			
Ado-Trastuzumab Emtansine	5		
Brentuximab Vedotin	18		
Cabazitaxel	20		
DOCEtaxel	39		
Enfortumab Vedotin	42		
Eribulin	43		
Estramustine	44		
Ixabepilone	67		
PACL ^{IT} axel (Conventional)	89		
PACL ^{IT} axel (Protein Bound)	89		
VinBLAS ^{TINE}	119		
VinCRIS ^{TINE}	119		
VinCRIS ^{TINE} (Liposomal)	119		
Vinorelbine	119		
Antineoplastic Agent, Anti-Nectin-4			
Enfortumab Vedotin	42		
Antineoplastic Agent, Anti-PD-1 Monoclonal Antibody			
Cemiplimab	24		
Dostarlimab	39		
Nivolumab	86		
Pembrolizumab	91		
Antineoplastic Agent, Anti-PD-L1 Monoclonal Antibody			
Atezolizumab	12		
Avelumab	13		
Durvalumab	40		
Antineoplastic Agent, Anti-SLAMF7			
Elotuzumab	41		
Antineoplastic Agent, Aromatase Inhibitor			
Anastrozole	9		
Exemestane	47		
Letrozole	70		
Ribociclib and Letrozole	101		
Antineoplastic Agent, BCL-2 Inhibitor			
Venetoclax	119		
Antineoplastic Agent, BCR-ABL Tyrosine Kinase Inhibitor			
Bosutinib	17		
Dasatinib	33		
Imatinib	62		
Nilotinib	85		
PONAT ^{INIB}	95		
Antineoplastic Agent, Biological Response Modulator			
Aldesleukin	6		
BCG (Intravesical)	14		
Interferon Alfa-2b	65		
Peginterferon Alfa-2b	91		
Tagraxofusp	110		
Antineoplastic Agent, BRAF Kinase Inhibitor			
Dabrafenib	32		
Encorafenib	42		
Vemurafenib	119		
Antineoplastic Agent, Bruton Tyrosine Kinase Inhibitor			
Acalabrutinib	2		
Ibrutinib	62		
Antineoplastic Agent, Camptothecin			
Irinotecan (Conventional)	66		
Irinotecan (Liposomal)	66		
Topotecan	114		
Antineoplastic Agent, CAR-T Immunotherapy			
Axicabtagene Ciloleuce ^L	13		
Lisocabtagene Maraleuce ^L	73		
Tisagenlecleuce ^L	114		
Antineoplastic Agent, Cephalotaxine			
Omacetaxine	87		
Antineoplastic Agent, Cyclin-Dependent Kinase Inhibitor			
Abemaciclib	2		
Palbociclib	89		
Ribociclib	101		
Ribociclib and Letrozole	101		
Trilaciclib	116		
Antineoplastic Agent, DNA Methylation Inhibitor			
AzaCITIDine	13		
Decitabine	33		
Decitabine and Cedazuridine	33		
Antineoplastic Agent, Enzyme			
Asparaginase (Erwinia)	12		
Calaspargase Pegol	20		
Pegaspargase	91		
Antineoplastic Agent, Epidermal Growth Factor Receptor (EGFR) Inhibitor			
Afatinib	5		
Amivantamab	8		
Cetuximab	25		
Dacomitinib	32		
Erlotinib	43		
Gefitinib	55		
Lapatinib	69		
Necitumumab	84		
Neratinib	85		
Osimertinib	88		
Panitumumab	90		
Vandetanib	118		
Antineoplastic Agent, Epothilone B Analog			
Ixabepilone	67		
Antineoplastic Agent, Estrogen Receptor Antagonist			
Fulvestrant	54		
Tamoxifen	110		
Toremifene	115		
Antineoplastic Agent, EZH2-Inhibitor			
Tazemetostat	110		

ANTINEOPLASTIC AGENT, FIBROBLAST GROWTH FACTOR RECEPTOR (FGFR) INHIBITOR

Antineoplastic Agent, Fibroblast Growth Factor Receptor (FGFR) Inhibitor		Bevacizumab	16
Infigratinib	63	Blinatumomab	17
Pemigatinib	91	Brentuximab Vedotin	18
Antineoplastic Agent, FLT3 Inhibitor		Burosumab	19
Fedratinib	48	Cemiplimab	24
Gilteritinib	55	Cetuximab	25
Midostaurin	81	Daratumumab	32
Antineoplastic Agent, Gonadotropin-Releasing Hormone Agonist		Dinutuximab	37
Goserelin	56	Dostarlimab	39
Histrelin	59	Durvalumab	40
Leuprolide	70	Elotuzumab	41
Antineoplastic Agent, Gonadotropin-Releasing Hormone Antagonist		Enfortumab Vedotin	42
Degarelix	33	Fam-Trastuzumab Deruxtecan	48
Antineoplastic Agent, Hedgehog Pathway Inhibitor		Gemtuzumab Ozogamicin	55
Glasdegib	55	Ibritumomab Tiuxetan	62
Sonidegib	108	Inotuzumab Ozogamicin	64
Vismodegib	119	Ipilimumab	66
Antineoplastic Agent, Histone Deacetylase (HDAC) Inhibitor		Mogamulizumab	82
Belinostat	14	Naxitamab	84
Panobinostat	90	Necitumumab	84
RomiDEPsin	103	Nivolumab	86
Vorinostat	120	Obinutuzumab	86
Antineoplastic Agent, Histone Methyltransferase (HMT) Inhibitor		Ofatumumab	87
Tazemetostat	110	Olaratumab	87
Antineoplastic Agent, Hormone		Panitumumab	90
Megestrol	76	Pembrolizumab	91
Antineoplastic Agent, Hormone (Estrogen/Nitrogen Mustard)		Pertuzumab	92
Estramustine	44	Polatuzumab Vedotin	94
Antineoplastic Agent, IDH1 Inhibitor		Ramucirumab	101
Ivosidenib	67	RiTUXimab	102
Antineoplastic Agent, IDH2 Inhibitor		Rituximab and Hyaluronidase	102
Enasidenib	42	Siltuximab	105
Antineoplastic Agent, Immune Checkpoint Inhibitor		Trastuzumab	115
Atezolizumab	12	Trastuzumab and Hyaluronidase	115
Avelumab	13	Antineoplastic Agent, mTOR Kinase Inhibitor	
Cemiplimab	24	Everolimus	47
Dostarlimab	39	Temsitrolimus	111
Durvalumab	40	Antineoplastic Agent, Oncolytic Virus	
Ipilimumab	66	Talimogene Laherparepvec	110
Nivolumab	86	Antineoplastic Agent, PARP Inhibitor	
Pembrolizumab	91	Niraparib	85
Antineoplastic Agent, Janus Associated Kinase Inhibitor		Olaparib	87
Fedratinib	48	Talazoparib	110
Ruxolitinib	103	Antineoplastic Agent, PDGFR-alpha Blocker	
Antineoplastic Agent, KIT Inhibitor		Avapritinib	13
Avapritinib	13	Olaratumab	87
Ripretinib	102	Ripretinib	102
Antineoplastic Agent, KRAS Inhibitor		Antineoplastic Agent, Phosphatidylinositol 3-Kinase Inhibitor	
Sotorasib	108	Copanlisib	30
Antineoplastic Agent, MEK Inhibitor		Duvelisib	40
Binimetinib	17	Idelalisib	62
Cobimetinib	29	Umbralisib	117
Selumetinib	105	Antineoplastic Agent, Platinum Analog	
Trametinib	115	CARBOplatin	23
Antineoplastic Agent, MET Inhibitor		CISplatin	27
Amivantamab	8	Oxaliplatin	88
Antineoplastic Agent, Miscellaneous		Antineoplastic Agent, Podophyllotoxin Derivative	
Aldesleukin	6	Etoposide	47
Arsenic Trioxide	11	Etoposide Phosphate	47
Asparaginase (Erwinia)	12	Teniposide	111
Calaspargase Pegol	20	Antineoplastic Agent, Proteasome Inhibitor	
Hydroxyurea	61	Bortezomib	17
Mitotane	81	Carfilzomib	23
Pegaspargase	91	Ixazomib	67
Porfimer	95	Antineoplastic Agent, Protein Synthesis Inhibitor	
Tagraxofusp	110	Omacetaxine	87
Trabectedin	115	Antineoplastic Agent, Retinoic Acid Derivative	
Antineoplastic Agent, Monoclonal Antibody		Alltretinoin (Topical)	6
Ado-Trastuzumab Emtansine	5	Bexarotene (Systemic)	17
Alemtuzumab	6	Bexarotene (Topical)	17
Amivantamab	8	ISOTretinoin (Systemic)	67
Atezolizumab	12	Tretinoin (Systemic)	115
Avelumab	13	Antineoplastic Agent, RET Kinase Inhibitor	
		Pralsetinib	97
		Selpercatinib	105
		Antineoplastic Agent, Taxane Derivative	
		Cabazitaxel	20
		DOCETaxel	39

PACLitaxel (Conventional)	89	Antiparasitic Agent	
PACLitaxel (Protein Bound)	89	Miltefosine	81
Antineoplastic Agent, Topoisomerase I Inhibitor		Antiparasitic Agent, Topical	
Fam-Trastuzumab Deruxtecan	48	Benzyl Alcohol	16
Irinotecan (Conventional)	66	Ivermectin (Topical)	67
Irinotecan (Liposomal)	66	Lindane	72
Topotecan	114	Malathion	75
Antineoplastic Agent, Topoisomerase II Inhibitor		Permethrin	92
DAUNOrubicin (Conventional)	33	Pyrethrins and Piperonyl Butoxide	100
DOXOrubicin (Conventional)	39	Spinosad	108
DOXOrubicin (Liposomal)	40	Anti-Parkinson Agent, Anticholinergic	
EpiRUBicin	43	Benzotropine	16
Etoposide	47	Trihexyphenidyl	116
Etoposide Phosphate	47	Anti-Parkinson Agent, COMT Inhibitor	
IDArubicin	62	Entacapone	42
MitoXANTRONE	81	Levodopa, Carbidopa, and Entacapone	70
Teniposide	111	Opicapone	88
Valrubicin	118	Tolcapone	114
Antineoplastic Agent, Tropomyosin Receptor Kinase (TRK) Inhibitor		Anti-Parkinson Agent, Decarboxylase Inhibitor	
Larotrectinib	69	Carbidopa	22
Antineoplastic Agent, Tyrosine Kinase Inhibitor		Carbidopa and Levodopa	22
Acalabrutinib	2	Levodopa, Carbidopa, and Entacapone	70
Afatinib	5	Anti-Parkinson Agent, Dopamine Agonist	
Alectinib	6	Amantadine	7
Avapritinib	13	Apomorphine	10
Axitinib	13	Bromocriptine	18
Bosutinib	17	Pramipexole	97
Brigatinib	18	ROPINIRole	103
Cabozantinib	20	Anti-Parkinson Agent, Dopamine Precursor	
Ceritinib	25	Carbidopa and Levodopa	22
Crizotinib	31	Levodopa, Carbidopa, and Entacapone	70
Dacomitinib	32	Levodopa (Oral Inhalation)	70
Dasatinib	33	Anti-Parkinson Agent, MAO Type B Inhibitor	
Erlotinib	43	Rasagiline	101
Fedratinib	48	Selegiline	104
Gefitinib	55	Anti-Parkinson's Agent, Dopamine Agonist	
Gilteritinib	55	Rotigotine	103
Ibrutinib	62	Antiplatelet Agent	
Imatinib	62	Mouthwash	82
Infigratinib	63	Antiplatelet Agent	
Lapatinib	69	Anagrelide	9
Larotrectinib	69	Aspirin	12
Lenvatinib	69	Aspirin and Dipyridamole	12
Lorlatinib	73	Cangrelor	22
Midostaurin	81	Cilostazol	27
Neratinib	85	Clopidogrel	29
Nilotinib	85	Defibrotide	33
Osimertinib	88	Dipyridamole	38
PAZOPanib	91	Prasugrel	97
Pemigatinib	91	Ticagrelor	113
PONATinib	95	Antiplatelet Agent, Glycoprotein IIb/IIIa Inhibitor	
Pralsetinib	97	Abciximab	2
Regorafenib	101	Eptifibatide	43
Ripretinib	102	Tirofiban	114
Ruxolitinib	103	Antiplatelet Agent, Non-thienopyridine	
Selpercatinib	105	Cangrelor	22
SORAFenib	108	Ticagrelor	113
SUNItinib	109	Antiplatelet Agent, Thienopyridine	
Tucatinib	117	Clopidogrel	29
Vandetanib	118	Prasugrel	97
Antineoplastic Agent, Vascular Endothelial Growth Factor Receptor 2 (VEGFR2) Inhibitor		Antiprogesterin	
Ramucirumab	101	MiFEPRIStone	81
Antineoplastic Agent, Vascular Endothelial Growth Factor (VEGF) Inhibitor		Antiprotozoal	
Axitinib	13	Atovaquone	12
Bevacizumab	16	Eflornithine	41
Cabozantinib	20	Nifurtimox	85
Lenvatinib	69	Nitazoxanide	85
PAZOPanib	91	Pentamidine (Oral Inhalation)	91
Ramucirumab	101	Pentamidine (Systemic)	92
Regorafenib	101	Antiprotozoal, Nitroimidazole	
SORAFenib	108	MetroNIDAZOLE (Systemic)	80
SUNItinib	109	Secnidazole	104
Vandetanib	118	Tinidazole	113
Ziv-Aflibercept (Systemic)	121	Antipsoriatic Agent	
Antineoplastic Agent, Vinca Alkaloid		Anthralin	9
VinBLAStine	119	Golimumab	56
VinCRIStine	119		
VinCRIStine (Liposomal)	119		
Vinorelbine	119		

ANTIPSORIATIC AGENT

Secukinumab	104
Ustekinumab	118
Antiretroviral Agent, gp120 Attachment Inhibitor	
Fostemsavir	54
Antiretroviral, CCR5 Antagonist (Anti-HIV)	
Maraviroc	75
Antiretroviral, Fusion Protein Inhibitor (Anti-HIV)	
Enfuvirtide	42
Antiretroviral, Integrase Inhibitor (Anti-HIV)	
Abacavir, Dolutegravir, and Lamivudine	2
Cabotegravir and Rilpivirine	20
Dolutegravir	39
Elvitegravir	41
Elvitegravir, Cobicistat, Emtricitabine, and Tenofovir Alafenamide	41
Elvitegravir, Cobicistat, Emtricitabine, and Tenofovir Disoproxil Fumarate	41
Raltegravir	101
Antiretroviral, Protease Inhibitor (Anti-HIV)	
Atazanavir	12
Atazanavir and Cobicistat	12
Darunavir	32
Darunavir and Cobicistat	33
Darunavir, Cobicistat, Emtricitabine, and Tenofovir Alafenamide	33
Fosamprenavir	53
Indinavir	63
Lopinavir and Ritonavir	73
Nelfinavir	84
Ritonavir	102
Saquinavir	104
Tipranavir	114
Antiretroviral, Reverse Transcriptase Inhibitor, Non-nucleoside (Anti-HIV)	
Cabotegravir and Rilpivirine	20
Delavirdine	33
Doravirine	39
Doravirine, Lamivudine, and Tenofovir Disoproxil Fumarate	39
Efavirenz	41
Efavirenz, Emtricitabine, and Tenofovir Disoproxil Fumarate	41
Efavirenz, Lamivudine, and Tenofovir Disoproxil Fumarate	41
Emtricitabine, Rilpivirine, and Tenofovir Alafenamide	42
Emtricitabine, Rilpivirine, and Tenofovir Disoproxil Fumarate	42
Etravirine	47
Nevirapine	85
Rilpivirine	102
Antiretroviral, Reverse Transcriptase Inhibitor, Nucleoside (Anti-HIV)	
Abacavir	2
Abacavir and Lamivudine	2
Abacavir, Dolutegravir, and Lamivudine	2
Abacavir, Lamivudine, and Zidovudine	2
Darunavir, Cobicistat, Emtricitabine, and Tenofovir Alafenamide	33
Didanosine	36
Doravirine, Lamivudine, and Tenofovir Disoproxil Fumarate	39
Efavirenz, Emtricitabine, and Tenofovir Disoproxil Fumarate	41
Efavirenz, Lamivudine, and Tenofovir Disoproxil Fumarate	41
Elvitegravir, Cobicistat, Emtricitabine, and Tenofovir Alafenamide	41
Elvitegravir, Cobicistat, Emtricitabine, and Tenofovir Disoproxil Fumarate	41
Emtricitabine	42
Emtricitabine and Tenofovir Alafenamide	42
Emtricitabine and Tenofovir Disoproxil Fumarate	42
Emtricitabine, Rilpivirine, and Tenofovir Alafenamide	42
Emtricitabine, Rilpivirine, and Tenofovir Disoproxil Fumarate	42
Lamivudine	69
Lamivudine and Zidovudine	69
Stavudine	108
Zidovudine	121
Antiretroviral, Reverse Transcriptase Inhibitor, Nucleotide (Anti-HIV)	
Darunavir, Cobicistat, Emtricitabine, and Tenofovir Alafenamide	33
Doravirine, Lamivudine, and Tenofovir Disoproxil Fumarate	39
Efavirenz, Emtricitabine, and Tenofovir Disoproxil Fumarate	41
Efavirenz, Lamivudine, and Tenofovir Disoproxil Fumarate	41
Elvitegravir, Cobicistat, Emtricitabine, and Tenofovir Alafenamide	41
Elvitegravir, Cobicistat, Emtricitabine, and Tenofovir Disoproxil Fumarate	41
Emtricitabine and Tenofovir Alafenamide	42
Emtricitabine and Tenofovir Disoproxil Fumarate	42
Emtricitabine, Rilpivirine, and Tenofovir Alafenamide	42
Emtricitabine, Rilpivirine, and Tenofovir Disoproxil Fumarate	42
Tenofovir Disoproxil Fumarate	111

Antirheumatic, Disease Modifying	
Adalimumab	4
Baricitinib	14
Golimumab	56
InFLIXimab	63
Leflunomide	69
Methotrexate	78
Antirheumatic Miscellaneous	
Baricitinib	14
Cyclophosphamide	31
Hyaluronate and Derivatives	59
RiTUXimab	102
Antiseborrheic Agent, Topical	
Selenium Sulfide	105
Sulfur and Salicylic Acid	109
Sulfur and Sulfacetamide	109
Antisense Oligonucleotide	
Casimersen	23
Eteplirsen	45
Golodirsen	56
Inotersen	64
Nusinersen	86
Antiseptic, Ophthalmic	
Povidone-Iodine (Ophthalmic)	96
Antiseptic, Topical	
Alcohol (Isopropyl)	5
Benzoin	15
Hexylresorcinol	59
Iodine	65
Potassium Iodide and Iodine	96
Povidone-Iodine (Topical)	96
Antiseptic, Vaginal	
Povidone-Iodine (Topical)	96
Antispasmodic Agent, Gastrointestinal	
Atropine (Systemic)	12
Clidinium and Chlordiazepoxide	28
Hyoscylamine, Atropine, Scopolamine, and Phenobarbital	61
Antispasmodic Agent, Urinary	
Belladonna and Opium	14
FlavoxATE	50
Oxybutynin	89
Antithyroid Agent	
MethIMAzole	78
Potassium Iodide	96
Potassium Iodide and Iodine	96
Propylthiouracil	99
Antitoxin	
Botulism Antitoxin, Heptavalent	17
Anti-Transthyretin Small Interfering Ribonucleic Acid (siRNA) Agent	
Patisiran	90
Antitrypsin Deficiency Agent	
Alpha ₁ -Proteinase Inhibitor	6
Antitubercular Agent	
Aminosalicic Acid	8
Bedaquiline	14
Capreomycin	22
CycloSERINE	31
Ethambutol	45
Ethionamide	47
Isoniazid	67
Pretomanid	98
Pyrazinamide	100
Rifabutin	102
RifAMPin	102
Rifapentine	102
Streptomycin	108
Antitussive	
Acetaminophen, Dextromethorphan, and Doxylamine	3
Acetaminophen, Dextromethorphan, and Phenylephrine	3
Benzonate	15
Brompheniramine, Dextromethorphan, and Phenylephrine	18
Brompheniramine, Pseudoephedrine, and Dextromethorphan	18
Camphor	21
Chlophedianol and Dexbrompheniramine	25
Chlorpheniramine, Phenylephrine, and Dextromethorphan	26
Chlorpheniramine, Pseudoephedrine, and Codeine	26

Chlorpheniramine, Pseudoephedrine, and Dextromethorphan	26
Codeine	29
Codeine and Chlorpheniramine	29
Codeine, Phenylephrine, and Triprolidine	30
Dexchlorpheniramine, Dextromethorphan, and Phenylephrine	34
Dextromethorphan	35
Dextromethorphan and Chlorpheniramine	35
Dextromethorphan and Menthol	35
Dextromethorphan and Phenylephrine	35
Guaifenesin and Codeine	57
Guaifenesin and Dextromethorphan	57
Guaifenesin, Dextromethorphan, and Phenylephrine	57
Hydrocodone and Chlorpheniramine	60
Hydrocodone and Homatropine	60
Hydrocodone, Chlorpheniramine, and Pseudoephedrine	60
Promethazine and Codeine	98
Promethazine and Dextromethorphan	98
Promethazine, Phenylephrine, and Codeine	98
Antitussive/Decongestant	
Hydrocodone and Pseudoephedrine	60
Pseudoephedrine and Dextromethorphan	99
Antitussive/Decongestant/Expectorant	
Guaifenesin, Pseudoephedrine, and Codeine	58
Guaifenesin, Pseudoephedrine, and Dextromethorphan	58
Hydrocodone, Pseudoephedrine, and Guaifenesin	60
Antitussive/Expectorant	
Hydrocodone and Guaifenesin	60
Antivenin	
Antivenin (<i>Latrodectus mactans</i>)	10
Antivenin (<i>Micrurus fulvius</i>)	10
Centruroides Immune F(ab') ₂ (Equine)	25
Crotalidae Polyvalent Immune FAB (Ovine)	31
Antiviral Agent	
Acyclovir (Systemic)	4
Amantadine	7
Ansuvimab	9
Brincidofovir	18
Cidofovir	27
Famciclovir	48
Foscarnet	53
Ganciclovir (Systemic)	55
Letermovir	70
Oseltamivir	88
Penciclovir	91
Peramivir	92
Ribavirin (Oral Inhalation)	101
RiMANTAdine	102
Sotrovimab	108
ValACYclovir	118
ValGANciclovir	118
Zanamivir	121
Antiviral Agent, Adamantane	
Amantadine	7
RiMANTAdine	102
Antiviral Agent, Ophthalmic	
Ganciclovir (Ophthalmic)	54
Trifluridine	116
Antiviral Agent, Oral	
Brincidofovir	18
ValACYclovir	118
Antiviral Agent, Topical	
Acyclovir and Hydrocortisone	4
Acyclovir (Topical)	4
Docosanol	39
Aphthous Ulcer Treatment Agent	
Sulfonated Phenolics and Sulfuric Acid	109
Appetite Stimulant	
Dronabinol	40
Megestrol	76
Artemisinin Derivative	
Artesunate	11
Astringent	
Aluminum Chloride	6
Epinephrine (Racemic) and Aluminum Potassium Sulfate	43
Witch Hazel	120
Bandage/Dressing	
Wound Dressing, Biocomposite	121
Barbiturate	
Amobarbital	8
Butabarbital	19
Butalbital, Acetaminophen, and Caffeine	19
Butalbital, Acetaminophen, Caffeine, and Codeine	19
Butalbital and Acetaminophen	20
Butalbital, Aspirin, and Caffeine	20
Butalbital, Aspirin, Caffeine, and Codeine	20
Methohexital	78
PENTobarbital	92
PHENobarbital	92
Primidone	98
Benzodiazepine	
ALPRAZolam	6
Amitriptyline and Chlordiazepoxide	8
Chlordiazepoxide	25
Clidinium and Chlordiazepoxide	28
CloBAZam	28
Clonazepam	29
Clorazepate	29
Diazepam	36
Estazolam	44
LORazepam	73
Midazolam	81
Oxazepam	89
Quazepam	100
Temazepam	111
Triazolam	116
Beta1/Beta2 Agonist	
Isoproterenol	67
Beta₂-Adrenergic Agonist	
Arformoterol	10
Ipratropium and Albuterol	66
Beta₂-Adrenergic Agonist, Long-Acting	
Acilidium and Formoterol	4
Arformoterol	10
Fluticasone and Salmeterol	52
Olodaterol	87
Salmeterol	104
Umeclidinium and Vilanterol	117
Beta₂ Agonist	
Acilidium and Formoterol	4
Albuterol	5
Fluticasone and Salmeterol	52
Levalbuterol	70
Metaproterenol	77
Olodaterol	87
Salmeterol	104
Terbutaline	112
Tiotropium and Olodaterol	114
Umeclidinium and Vilanterol	117
Beta₂ Agonist, Long-Acting	
Tiotropium and Olodaterol	114
Beta₃ Agonist	
Mirabegron	81
Beta-Adrenergic Blocker, Nonselective	
Dorzolamide and Timolol	39
Levobunolol	70
Propranolol	99
Sotalol	108
Beta-Blocker, Beta-1 Selective	
Atenolol	12
Atenolol and Chlorthalidone	12
Betaxolol (Systemic)	16
Bisoprolol	17
Bisoprolol and Hydrochlorothiazide	17
Esmolol	44
Metoprolol	80
Metoprolol and Hydrochlorothiazide	80
Beta-Blocker, Nonselective	
Metipranolol	79
Nadolol	83
Nadolol and Bendroflumethiazide	83
Propranolol and Hydrochlorothiazide	99
Timolol (Ophthalmic)	113
Timolol (Systemic)	113
Beta-Blocker With Alpha-Blocking Activity	
Carvedilol	23
Labetalol	68

BETA-BLOCKER WITH INTRINSIC SYMPATHOMIMETIC ACTIVITY

Beta-Blocker With Intrinsic Sympathomimetic Activity

Acebutolol	2
Pindolol	94

Beta-Lactamase Inhibitor

Meropenem and Vaborbactam	77
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Bile Acid

Chenodiol	25
Cholic Acid	27

Biological, Miscellaneous

Glatiramer Acetate	55
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Biological Response Modulator

Interferon Alfa-2b	65
Peginterferon Alfa-2b	91

Biotinidase Deficiency, Treatment Agent

Biotin	17
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Bisphosphonate Derivative

Alendronate	6
Etidronate	47
Ibandronate	62
Pamidronate	90
Zoledronic Acid	121

Blood Modifiers

Hemin	58
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Blood Product Derivative

Albumin	5
Alpha ₁ -Proteinase Inhibitor	6
Antihemophilic Factor (Human)	9
Antihemophilic Factor/von Willebrand Factor Complex (Human)	10
Anti-inhibitor Coagulant Complex (Human)	10
Antithrombin	10
Botulism Immune Globulin (Intravenous-Human)	17
C1 Inhibitor (Human)	20
Cytomegalovirus Immune Globulin (Intravenous-Human)	32
Factor IX Complex (Human) [(Factors II, IX, X)]	48
Factor IX (Human)	48
Factor X (Human)	48
Factor XIII Concentrate (Human)	48
Fibrinogen Concentrate (Human)	50
Fibrin Sealant	50
Hemin	58
Hepatitis B Immune Globulin (Human)	58
Immune Globulin	63
Plasma Protein Fraction	94
Plasminogen (Human)	94
Protein C Concentrate (Human)	99
Prothrombin Complex Concentrate (Human) [(Factors II, VII, IX, X), Protein C, and Protein S]	99
Rabies Immune Globulin (Human)	100
Rh ₀ (D) Immune Globulin	101
Tetanus Immune Globulin (Human)	112
Thrombin (Topical)	113
Varicella-Zoster Immune Globulin (Human)	118

Blood Viscosity Reducer Agent

Pentoxifylline	92
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Bone-Modifying Agent

Denosumab	33
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C1 Esterase Inhibitor

C1 Inhibitor (Human)	20
C1 Inhibitor (Recombinant)	20

Calcimimetic

Cinacalcet	27
Etelcalcetide	45

Calcineurin Inhibitor

CycloSPORINE (Ophthalmic)	31
CycloSPORINE (Systemic)	32
Pimecrolimus	94
Tacrolimus (Systemic)	110
Tacrolimus (Topical)	110

Calcitonin Gene-Related Peptide (CGRP) Receptor Antagonist

Erenumab	43
Fremanezumab	54
Galcanezumab	54
Rimegepant	102

Calcium Channel Blocker

AmlODIPine	8
Amlodipine and Atorvastatin	8
Amlodipine and Benazepril	8

Amlodipine and Celecoxib	8
Amlodipine and Olmesartan	8
Amlodipine and Valsartan	8
Amlodipine, Valsartan, and Hydrochlorothiazide	8
Clevidipine	28
DIITIAZem	37
Felodipine	48
NIcARDipine	85
NIFEdipine	85
NI MODipine	85
Perindopril and Amlodipine	92
Telmisartan and Amlodipine	111
Trandolapril and Verapamil	115
Verapamil	119

Calcium Channel Blocker, Dihydropyridine

AmLODIPine	8
Amlodipine and Atorvastatin	8
Amlodipine and Benazepril	8
Amlodipine and Celecoxib	8
Amlodipine and Olmesartan	8
Amlodipine and Valsartan	8
Amlodipine, Valsartan, and Hydrochlorothiazide	8
Clevidipine	28
Felodipine	48
NIcARDipine	85
NIFEdipine	85
NI MODipine	85
Perindopril and Amlodipine	92
Telmisartan and Amlodipine	111

Calcium Channel Blocker, Nondihydropyridine

DIITIAZem	37
Verapamil	119

Calcium Channel Blocker, N-Type

Ziconotide	121
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Calcium Salt

Calcium Acetate	21
Calcium and Vitamin D	21
Calcium Carbonate	21
Calcium Chloride	21
Calcium Citrate	21
Calcium Citrate and Vitamin D	21
Calcium Glubionate	21
Calcium Gluconate	21
Calcium Lactate	21
Magnesium Carbonate, Calcium Carbonate, and Folic Acid	74

Caloric Agent

Fat Emulsion (Fish Oil and Plant Based)	48
Fat Emulsion (Fish Oil Based)	48
Fat Emulsion (Plant Based)	48
Total Parenteral Nutrition	115

Cannabinoid

Cannabidiol	22
Dronabinol	40

Carbonic Anhydrase Inhibitor

AcetaZOLAMIDE	4
Dichlorphenamide	36
MethazolAMIDE	77

Carbonic Anhydrase Inhibitor (Ophthalmic)

Brinzolamide and Brimonidine	18
Dorzolamide	39
Dorzolamide and Timolol	39

Cardiac Glycoside

Digoxin	37
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Cardiovascular Agent, Miscellaneous

Cardioplegic Solution	23
Ivabradine	67
Ranolazine	101

CAR-T Cell Immunotherapy

Axicabtagene Ciloleucl	13
Lisocabtagene Maraleucl	73
Tisagenlecleucl	114

Cathartic

Sodium Phosphates	107
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Cauterizing Agent, Topical

Silver Nitrate	105
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Cellular Immunotherapy, Autologous

Axicabtagene Ciloleucl	13
Lisocabtagene Maraleucl	73

Sipuleucel-T	106	Ethinyl Estradiol and Levonorgestrel	46
Tisagenlecleucel	114	Ethinyl Estradiol and Norelgestromin	46
Central Monoamine-Depleting Agent		Ethinyl Estradiol and Norethindrone	46
Deutetrabenazine	34	Ethinyl Estradiol and Norgestimate	46
Reserpine	101	Ethinyl Estradiol and Norgestrel	47
Tetrabenazine	112	Etonogestrel	47
Valbenazine	118	Levonorgestrel (IUD)	70
Central Nervous System Depressant		Levonorgestrel (Systemic)	70
Oxybate Salts (Calcium, Magnesium, Potassium, and Sodium)	89	MedroxyPROGESTERone	75
Sodium Oxybate	107	Nonoxynol 9	86
Central Nervous System Stimulant		Norethindrone	86
Amphetamine	9	Norethindrone and Mestranol	86
Armodafinil	11	Ulipristal	117
Benzphetamine	16	Contrast Agent	
Caffeine	20	Diatrizoate Meglumine and Iodipamide Meglumine	36
Dexmethylphenidate	34	Hexaminolevulinate	59
Dextroamphetamine	34	Iohexol	66
Dextroamphetamine and Amphetamine	34	Iopamidol	66
Diethylpropion	37	Ioxilan	66
Ergotamine and Caffeine	43	Isosulfan Blue	67
Lisdexamfetamine	72	Corneal Collagen Cross-Linking Agent, Ophthalmic	
Methamphetamine	77	Riboflavin 5'-Phosphate	102
Methylphenidate	79	Corticosteroid, Inhalant (Oral)	
Modafinil	82	Budesonide (Oral Inhalation)	18
Phentermine	93	Fluticasone and Salmeterol	52
Cephalosporin Combination		Fluticasone (Oral Inhalation)	52
Ceftazidime and Avibactam	24	Mometasone (Oral Inhalation)	82
Ceftolozane and Tazobactam	24	Corticosteroid, Nasal	
Chelating Agent		Budesonide (Nasal)	18
Deferasirox	33	Flunisolide (Nasal)	50
Deferiprone	33	Fluticasone (Nasal)	52
Deferoxamine	33	Mometasone (Nasal)	82
PenicillAMINE	91	Triamcinolone (Nasal)	116
Trientine	116	Corticosteroid, Ophthalmic	
Chelating Agent, Oral		Bacitracin, Neomycin, Polymyxin B, and Hydrocortisone (Ophthalmic)	13
Zinc Acetate	121	DexAMETHasone (Ophthalmic)	34
Chemoprotective Agent		Difluprednate	37
Amifostine	7	Fluocinolone (Ophthalmic)	51
Dexrazoxane	34	Fluorometholone	51
Mesna	77	Loteprednol	73
Palifermin	89	Neomycin, Polymyxin B, and Hydrocortisone (Ophthalmic)	84
Chemotherapy Modulating Agent		PrednisolONE (Ophthalmic)	97
Leucovorin Calcium	70	Triamcinolone (Ophthalmic)	116
LEV/Oleucovorin	70	Corticosteroid, Otic	
Chimeric Antigen Receptor T-Cell Immunotherapy		Ciprofloxacin and Dexamethasone	27
Axicabtagene Ciloleucel	13	Ciprofloxacin and Fluocinolone	27
Lisocabtagene Maraleucel	73	Ciprofloxacin and Hydrocortisone	27
Tisagenlecleucel	114	DexAMETHasone (Ophthalmic)	34
Chloride Channel Activator		Fluocinolone (Otic)	51
Lubiprostone	74	Neomycin, Colistin, Hydrocortisone, and Thonzonium	84
Cholinergic Agonist		Neomycin, Polymyxin B, and Hydrocortisone (Otic)	84
Acetylcholine	4	Corticosteroid, Rectal	
Amifampridine	7	Budesonide (Topical)	19
Bethanechol	16	Hydrocortisone (Topical)	60
Carbachol	22	Corticosteroid, Systemic	
Cevimeline	25	Betamethasone (Systemic)	16
Guanidine	58	Budesonide (Systemic)	19
Pilocarpine (Systemic)	94	Cortisone	31
Colony Stimulating Factor		Cosyntropin	31
Avatrombopag	13	Deflazacort	33
Darbepoetin Alfa	32	DexAMETHasone (Systemic)	34
Eltrombopag	41	Fludrocortisone	50
Epoetin Alfa	43	Hydrocortisone (Systemic)	60
Filgrastim	50	MethylPREDNISolone	79
Lusutrombopag	74	PrednisolONE (Systemic)	97
Methoxy Polyethylene Glycol-Epoetin Beta	78	PredniSONE	98
Pegfilgrastim	91	Triamcinolone (Systemic)	116
RomiPLOstim	103	Corticosteroid, Topical	
Sargramostim	104	Acyclovir and Hydrocortisone	4
Complement Inhibitor		Alclometasone	5
Eculizumab	40	Bacitracin, Neomycin, Polymyxin B, and Hydrocortisone (Topical)	13
Ravulizumab	101	Betamethasone and Clotrimazole	16
Contraceptive		Betamethasone (Topical)	16
Copper IUD	31	Calcipotriene and Betamethasone	20
Ethinyl Estradiol and Desogestrel	45	Clioquinol and Hydrocortisone	28
Ethinyl Estradiol and Drospirenone	45	Clobetasol	28
Ethinyl Estradiol and Ethynodiol Diacetate	45	Clocortolone	28
Ethinyl Estradiol and Etonogestrel	45	Desonide	33
		Desoximetasone	33
		Fluocinolone, Hydroquinone, and Tretinoin	51

CORTICOSTEROID, TOPICAL

Fluocinolone (Topical)	51
Fluocinonide	51
Flurandrenolide	52
Fluticasone (Topical)	53
Halcinonide	58
Halobetasol	58
Halobetasol and Tazarotene	58
Hydrocortisone (Topical)	60
Iodoquinol and Hydrocortisone	66
Mometasone (Topical)	82
Neomycin, Polymyxin B, and Hydrocortisone (Topical)	84
Nystatin and Triamcinolone	86
Prednicarbate	97
Triamcinolone (Topical)	116
Cortisol Receptor Blocker	
MiFEPRISone	81
Cortisol Synthesis Inhibitor	
Osilodrostat	88
Cosmetic Agent, Implant	
Hyaluronate and Derivatives	59
Poly-L-Lactic Acid	94
Cystic Fibrosis Transmembrane Conductance Regulator Corrector	
Lumacaftor and Ivacaftor	74
Tezacaftor and Ivacaftor	112
Cystic Fibrosis Transmembrane Conductance Regulator Potentiator	
Ivacaftor	67
Lumacaftor and Ivacaftor	74
Tezacaftor and Ivacaftor	112
Cytidine Deaminase Inhibitor	
Decitabine and Cedazuridine	33
Cytochrome P-450 Inhibitor	
Atazanavir and Cobicistat	12
Cobicistat	29
Darunavir and Cobicistat	33
Darunavir, Cobicistat, Emtricitabine, and Tenofovir Alafenamide	33
Elvitegravir, Cobicistat, Emtricitabine, and Tenofovir Alafenamide	41
Elvitegravir, Cobicistat, Emtricitabine, and Tenofovir Disoproxil Fumarate	41
Ombitasvir, Paritaprevir, and Ritonavir	87
Ombitasvir, Paritaprevir, Ritonavir, and Dasabuvir	87
Decongestant	
Acetaminophen and Phenylephrine	2
Acetaminophen, Dextromethorphan, and Phenylephrine	3
Acetaminophen, Diphenhydramine, and Phenylephrine	3
Acetaminophen, Guaifenesin, and Phenylephrine	4
Acrivastine and Pseudoephedrine	4
Brompheniramine and Phenylephrine	18
Brompheniramine and Pseudoephedrine	18
Brompheniramine, Dextromethorphan, and Phenylephrine	18
Brompheniramine, Pseudoephedrine, and Dextromethorphan	18
Cetirizine and Pseudoephedrine	25
Chlorpheniramine and Phenylephrine	26
Chlorpheniramine and Pseudoephedrine	26
Chlorpheniramine, Phenylephrine, and Dextromethorphan	26
Chlorpheniramine, Pseudoephedrine, and Codeine	26
Chlorpheniramine, Pseudoephedrine, and Dextromethorphan	26
Codeine, Phenylephrine, and Triprolidine	30
Dexchlorpheniramine and Pseudoephedrine	34
Dexchlorpheniramine, Dextromethorphan, and Phenylephrine	34
Dextromethorphan and Phenylephrine	35
Diphenhydramine and Phenylephrine	37
Fexofenadine and Pseudoephedrine	49
Guaifenesin and Phenylephrine	57
Guaifenesin, Dextromethorphan, and Phenylephrine	57
Hydrocodone, Chlorpheniramine, and Pseudoephedrine	60
Ibuprofen and Phenylephrine	62
Ibuprofen, Pseudoephedrine, and Chlorpheniramine	62
Loratadine and Pseudoephedrine	73
Oxymetazoline (Nasal)	89
Phenylephrine and Pyrilamine	93
Phenylephrine and Thonzylamine	93
Phenylephrine (Nasal)	93
Promethazine and Phenylephrine	98
Promethazine, Phenylephrine, and Codeine	98
Pseudoephedrine	99
Tetrahydrozoline (Nasal)	112
Triprolidine and Pseudoephedrine	117
Decongestant/Analgesic	
Naproxen and Pseudoephedrine	84
Pseudoephedrine and Ibuprofen	99
Depigmenting Agent	
Fluocinolone, Hydroquinone, and Tretinoin	51
Hydroquinone	61
Diagnostic Agent	
Adenosine	5
Arginine	11
Benzylpenicilloyl Polylysine	16
Candida albicans (Monilia)	22
Coccidioides immitis Skin Test	29
Corticoreslin	31
Cosyntropin	31
Edrophonium	40
Fluorescein	51
Fluorescein and Benoxinate	51
Gadobenate Dimeglumine	54
Gadobutrol	54
Gadodiamide	54
Gadofosveset	54
Gadopentetate Dimeglumine	54
Gadoterate Meglumine	54
Gadoteridol	54
Gadoversetamide	54
Gadoxetate	54
Glucagon	55
Histoplasmin	59
Indocyanine Green	63
Methacholine	77
MetyraPONE	80
Perflutren Lipid Microspheres	92
Perflutren Protein Type A	92
Proparacaine and Fluorescein	99
Regadenoson	101
Secretin	104
Sinacalide	105
Sulfur Hexafluoride Lipid-Type A Microspheres	109
Thyrotropin Alfa	113
Trichophyton Skin Test	116
Tuberculin Tests	117
Diagnostic Agent, Diabetes	
Diagnostic Test for Glucose in Urine	36
Diagnostic Agent, Kidney Function	
Indigotindisulfonate Sodium	63
Diagnostic Agent, Ophthalmic	
Hydroxypropyl Methylcellulose	61
Diagnostic Agent, Radiologic Examination of GI Tract	
Ethiodized Oil	47
Dialysis Solution	
Continuous Renal Replacement Therapy Solutions	30
Icodextrin	62
Peritoneal Dialysis Solution	92
Dietary Supplement	
Lactobacillus	68
LevOCARNitine	70
Manganese	75
Methionine	78
Saccharomyces boulardii	103
Direct Oral Anticoagulant (DOAC)	
Apixaban	10
Dabigatran Etexilate	32
Rivaroxaban	102
Disinfectant, Antibacterial (Topical)	
Sodium Hypochlorite	107
Diuretic, Carbonic Anhydrase Inhibitor	
AcetaZOLAMIDE	4
MethazolAMIDE	77
Diuretic, Combination	
Acetaminophen and Pamabrom	2
Amiloride and Hydrochlorothiazide	7
Diuretic, Loop	
Bumetanide	19
Ethacrynic Acid	45
Furosemide	54
Torsemide	115
Diuretic, Osmotic	
Mannitol (Systemic)	75
Diuretic, Potassium-Sparing	
AMILoride	7
Eplerenone	43

Hydrochlorothiazide and Triamterene	59	Sodium Bicarbonate	106
Spirolactone	108	Sodium Chloride	106
Triamterene	116	Sodium Glycerophosphate Pentahydrate	107
		Sodium Phosphates	107
Diuretic, Thiazide		Endocrine and Metabolic Agent, Miscellaneous	
Amlodipine, Valsartan, and Hydrochlorothiazide	8	Uridine Triacetate	118
Atenolol and Chlorthalidone	12	Endothelin Receptor Antagonist	
Benazepril and Hydrochlorothiazide	15	Ambrisentan	7
Bisoprolol and Hydrochlorothiazide	17	Bosentan	17
Candesartan and Hydrochlorothiazide	22	Macitentan	74
Captopril and Hydrochlorothiazide	22	Enzyme	
Chlorothiazide	25	Agalsidase Beta	5
Enalapril and Hydrochlorothiazide	42	Alglucosidase Alfa	6
Fosinopril and Hydrochlorothiazide	53	Alpha-Galactosidase	6
HydroCHLOROthiazide	59	Asfotase Alfa	12
Hydrochlorothiazide and Spirolactone	59	Collagenase (Systemic)	30
Hydrochlorothiazide and Triamterene	59	Dornase Alfa	39
Irbesartan and Hydrochlorothiazide	66	Elapegademase	41
Lisinopril and Hydrochlorothiazide	73	Elosulfase Alfa	41
Losartan and Hydrochlorothiazide	73	Galsulfase	54
Methyclothiazide	79	Glucarpidase	56
Methyldopa and Hydrochlorothiazide	79	Hyaluronidase	59
Metoprolol and Hydrochlorothiazide	80	Idursulfase	62
Moexipril and Hydrochlorothiazide	82	Imiglucerase	62
Nadolol and Bendroflumethiazide	83	Lactase	68
Olmesartan and Hydrochlorothiazide	87	Laronidase	69
Propranolol and Hydrochlorothiazide	99	Pancrelipase	90
Quinapril and Hydrochlorothiazide	100	Pegademase Bovine	91
Telmisartan and Hydrochlorothiazide	111	Pegloticase	91
Valsartan and Hydrochlorothiazide	118	Protein C Concentrate (Human)	99
		Rasburicase	101
Diuretic, Thiazide-Related		Taliglucerase Alfa	110
Azilsartan and Chlorthalidone	13	Velaglucerase Alfa	119
Chlorthalidone	26	Vestronidase Alfa	119
Clonidine and Chlorthalidone	29	Enzyme Cofactor	
Indapamide	63	Sapropterin	104
MetOLazone	80	Enzyme, Gastrointestinal	
Docosanoid, Synthetic		Sacrosidase	103
Unoprostone	117	Enzyme Inhibitor	
Dopamine Agonist		Eliglustat	41
Fenoldopam	49	Miglustat	81
Dopamine Antagonist		Enzyme, Replacement Therapy	
Metoclopramide	79	Sebelipase Alfa	104
Echinocandin		Enzyme, Topical Debridement	
Anidulafungin	9	Collagenase (Topical)	30
Caspofungin	23	Enzyme, Urate-Oxidase (Recombinant)	
Micafungin	80	Pegloticase	91
Electrolyte Replacement, Oral		Rasburicase	101
Oral Rehydration Therapy	88	Ergot Derivative	
Electrolyte Supplement		Bromocriptine	18
Magnesium L-lactate	74	Cabergoline	20
Electrolyte Supplement, Oral		Dihydroergotamine	37
Calcium and Vitamin D	21	Ergoloid Mesylates	43
Calcium Carbonate	21	Ergotamine	43
Calcium Gluconate	21	Ergotamine and Caffeine	43
Electrolyte Replacement Solution	41	Methylergonovine	79
Magnesium L-aspartate Hydrochloride	74	Erythropoiesis-Stimulating Agent (ESA)	
Magnesium Carbonate	74	Darbepoetin Alfa	32
Magnesium Carbonate, Calcium Carbonate, and Folic Acid	74	Epoetin Alfa	43
Magnesium Chloride	74	Methoxy Polyethylene Glycol-Epoetin Beta	78
Magnesium Gluconate	74	Estrogen and Androgen Combination	
Magnesium Oxide	75	Estrogens (Esterified) and Methyltestosterone	45
Potassium Bicarbonate and Potassium Chloride	96	Estrogen and Progestin Combination	
Potassium Bicarbonate and Potassium Citrate	96	Drospirenone and Estradiol	40
Potassium Chloride	96	Estradiol and Levonorgestrel	44
Potassium Gluconate	96	Estradiol and Norethindrone	44
Potassium Phosphate and Sodium Phosphate	96	Estradiol and Norgestimate	44
Sodium Bicarbonate	106	Estrogens (Conjugated/Equine) and Medroxyprogesterone	44
Electrolyte Supplement, Parenteral		Ethinyl Estradiol and Desogestrel	45
Calcium Chloride	21	Ethinyl Estradiol and Drospirenone	45
Calcium Gluconate	21	Ethinyl Estradiol and Ethynodiol Diacetate	45
Dextrose and Ringer's Injection (Lactated)	35	Ethinyl Estradiol and Etonogestrel	45
Electrolyte Replacement Solution	41	Ethinyl Estradiol and Levonorgestrel	46
Magnesium Chloride	74	Ethinyl Estradiol and Norelgestromin	46
Magnesium Sulfate	75	Ethinyl Estradiol and Norethindrone	46
Potassium Acetate	95	Ethinyl Estradiol and Norgestimate	46
Potassium Acid Phosphate	95	Ethinyl Estradiol and Norgestrel	47
Potassium Chloride	96	Norethindrone and Mestranol	86
Potassium Phosphate	96		
Ringer's Injection	102		
Ringer's Injection (Lactated)	102		
Sodium Acetate	106		

ESTROGEN DERIVATIVE**Estrogen Derivative**

Estradiol (Systemic)	44
Estradiol (Topical)	44
Estrogens (Conjugated/Equine) and Bazedoxifene	44
Estrogens (Conjugated/Equine, Systemic)	45
Estrogens (Conjugated/Equine, Topical)	45
Estrogens (Esterified)	45
Relugolix, Estradiol, and Norethindrone	101

Ethanolamine Derivative

Acetaminophen, Dextromethorphan, and Doxylamine	3
Acetaminophen, Diphenhydramine, and Phenylephrine	3
Carbinoxamine	22
Clemastine	28
Dimenhydrinate	37
Diphenhydramine and Ibuprofen	37
Diphenhydramine and Phenylephrine	37
Diphenhydramine (Systemic)	37
Diphenhydramine (Topical)	38
Doxylamine	40

Ethylenediamine Derivative

Phenylephrine and Pyrilamine	93
Phenylephrine and Thonzylamine	93

Expectorant

Acetaminophen, Guaifenesin, and Phenylephrine	4
Guaifenesin	56
Guaifenesin and Codeine	57
Guaifenesin and Dextromethorphan	57
Guaifenesin and Phenylephrine	57
Guaifenesin and Pseudoephedrine	57
Potassium Iodide	96

Expectorant/Decongestant

Ephedrine and Guaifenesin	42
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Farnesoid X Receptor Agonist

Obeticholic Acid	86
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Fiber Supplement

Methylcellulose	79
Polycarbophil	94
Psyllium	99
Wheat Dextrin	120

First Generation (Typical) Antipsychotic

Amitriptyline and Perphenazine	8
Chlorpromazine	26
Droperidol	40
Fluphenazine	52
Haloperidol	58
Loxapine	74
Molindone	82
Perphenazine	92
Pimozide	94
Prochlorperazine	98
Thioridazine	113
Thiothixene	113
Trifluoperazine	116

Free Radical Scavenger

Edaravone	40
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Fumaric Acid Derivative

Dimethyl Fumarate	37
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GABA Agonist/Glutamate Antagonist

Acamprosate	2
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GABA Analog

Gabapentin	54
Pregabalin	98

Gadolinium-Containing Contrast Agent

Gadobenate Dimeglumine	54
Gadobutrol	54
Gadodiamide	54
Gadofosveset	54
Gadopentetate Dimeglumine	54
Gadoterate Meglumine	54
Gadoteridol	54
Gadoversetamide	54
Gadoxetate	54

Gallstone Dissolution Agent

Ursodiol	118
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Gamma-Aminobutyric Acid (GABA) A Receptor Positive Modulator

Brexanolone	18
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Ganglionic Blocking Agent

Mecamylamine	75
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Gastrointestinal Agent, Miscellaneous

Adalimumab	4
Alvimopan	7
Eluxadoline	41
Glutamine	56
Infliximab	63
Lansoprazole, Amoxicillin, and Clarithromycin	69
LinaClotide	72
Lubiprostone	74
Mucosal Coating Agent	82
Naldemedine	83
Naloxegol	83
Natalizumab	84
Omeprazole, Clarithromycin, and Amoxicillin	88
Plecanatide	94
Saliva Substitute	104
Sucralfate	108
Tetracycline, Bismuth Subsalicylate, and Metronidazole	112
Vedolizumab	118

Gastrointestinal Agent, Prokinetic

Metoclopramide	79
Tegaserod	111

General Anesthetic

Etomidate	47
Fentanyl	49
Ketamine	67
Methohexital	78
Propofol	99
SUFentanyl	108

General Anesthetic, Inhalation

Desflurane	33
Isoflurane	67
Sevoflurane	105

Gene Therapy, Adeno-Associated Virus

Voretigene Neparvovec	120
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Genitourinary Irrigant

Acetic Acid (Topical)	4
Citric Acid, Magnesium Carbonate, and Glucono-Delta-Lactone	27
Mannitol (Systemic)	75
Neomycin and Polymyxin B	84
Sodium Chloride	106
Sorbitol	108

Glucagon-Like Peptide-2 (GLP-2) Analog

Teduglutide	111
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Glucosylceramide Synthase Inhibitor

Eliglustat	41
Miglustat	81

Glutamate Inhibitor

Riluzole	102
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Glycopeptide

Dalbavancin	32
Oritavancin	88
Telavancin	111
Vancomycin	118

Gold Compound

Auranofin	12
Aurothioglucose	12

Gonadotropin

Chorionic Gonadotropin (Human)	27
Chorionic Gonadotropin (Recombinant)	27
Follitropin Alfa	53
Follitropin Beta	53
Menotropins	76
Urofollitropin	118

Gonadotropin Releasing Hormone Agonist

Goserelin	56
Histrelin	59
Leuprolide	70
Leuprolide and Norethindrone	70
Nafarelin	83
Triptorelin	117

Gonadotropin Releasing Hormone Antagonist

Cetrorelix	25
Degarelix	33
Ganirelix	55
Relugolix, Estradiol, and Norethindrone	101

Growth Factor, Platelet-Derived		Hydrocodone and Chlorpheniramine	60
Becaplermin	14	Hydrocodone, Chlorpheniramine, and Pseudoephedrine	60
Growth Hormone		HydroXYZine	61
Somatropin	107	Ibuprofen, Phenylephrine, and Chlorpheniramine	62
Growth Hormone Receptor Antagonist		Ibuprofen, Pseudoephedrine, and Chlorpheniramine	62
Pegvisomant	91	Ketotifen (Ophthalmic)	68
Growth Hormone Releasing Factor		Loratadine	73
Tesamorelin	112	Loratadine and Pseudoephedrine	73
Guanylate Cyclase-C (GC-C) Agonist		Meclizine	75
LinaCLotide	72	Naphazoline and Pheniramine	83
Plecanatide	94	Naproxen and Diphenhydramine	84
Hematopoietic Agent		Olopatadine (Ophthalmic)	87
Avatrombopag	13	Phenylephrine and Pylamine	93
Darbepoetin Alfa	32	Phenylephrine and Thonzylamine	93
Eltrombopag	41	Promethazine	98
Epoetin Alfa	43	Promethazine and Codeine	98
Filgrastim	50	Promethazine and Dextromethorphan	98
Luspatercept	74	Promethazine and Phenylephrine	98
Lusutrombopag	74	Promethazine, Phenylephrine, and Codeine	98
Methoxy Polyethylene Glycol-Epoetin Beta	78	Tripolidine	116
Pegfilgrastim	91	Tripolidine and Pseudoephedrine	117
Plerixafor	94		
RomiPLOSstim	103	Histamine H₁ Antagonist, First Generation	
Sargramostim	104	Acetaminophen, Caffeine, and Pylamine	3
Hematopoietic Stem Cell Mobilizer		Acetaminophen, Dextromethorphan, and Doxylamine	3
Plerixafor	94	Acetaminophen, Diphenhydramine, and Phenylephrine	3
Hemostatic Agent		Brompheniramine and Phenylephrine	18
Aluminum Chloride	6	Brompheniramine and Pseudoephedrine	18
Aluminum Chloride Hexahydrate	6	Brompheniramine, Dextromethorphan, and Phenylephrine	18
Aminocaproic Acid	7	Brompheniramine, Pseudoephedrine, and Dextromethorphan	18
Cellulose (Oxidized Regenerated)	24	Carbinoxamine	22
Collagen (Absorbable/Dental)	30	Chlophedianol and Dexbrompheniramine	25
Collagen Hemostat	30	Chlorpheniramine	25
Desmopressin	33	Chlorpheniramine and Acetaminophen	26
Ferric Sub sulfate	49	Chlorpheniramine and Phenylephrine	26
Fibrin Sealant	50	Chlorpheniramine and Pseudoephedrine	26
Gelatin (Absorbable)	55	Chlorpheniramine, Phenylephrine, and Dextromethorphan	26
Prothrombin Complex Concentrate (Human) [(Factors II, VII, IX, X), Protein C, and Protein S]	99	Chlorpheniramine, Pseudoephedrine, and Codeine	26
Thrombin (Topical)	113	Chlorpheniramine, Pseudoephedrine, and Dextromethorphan	26
Tranexamic Acid	115	Clemastine	28
Herb		Codeine and Chlorpheniramine	29
St Johns Wort	108	Codeine, Phenylephrine, and Tripolidine	30
Histamine H₁ Antagonist		Cyproheptadine	32
Acetaminophen, Caffeine, and Pylamine	3	Dexbrompheniramine and Phenylephrine	34
Acetaminophen, Dextromethorphan, and Doxylamine	3	Dexchlorpheniramine and Pseudoephedrine	34
Acetaminophen, Diphenhydramine, and Phenylephrine	3	Dexchlorpheniramine, Dextromethorphan, and Phenylephrine	34
Acrivastine and Pseudoephedrine	4	Dextromethorphan and Chlorpheniramine	35
Azelastine (Ophthalmic)	13	DimenhydrINATE	37
Brompheniramine and Phenylephrine	18	Diphenhydramine and Ibuprofen	37
Brompheniramine and Pseudoephedrine	18	Diphenhydramine and Phenylephrine	37
Brompheniramine, Dextromethorphan, and Phenylephrine	18	DiphenhydrAMINE (Systemic)	37
Brompheniramine, Pseudoephedrine, and Dextromethorphan	18	DiphenhydrAMINE (Topical)	38
Carbinoxamine	22	Doxylamine	40
Cetirizine and Pseudoephedrine	25	Hydrocodone and Chlorpheniramine	60
Cetirizine (Systemic)	25	Hydrocodone, Chlorpheniramine, and Pseudoephedrine	60
Chlophedianol and Dexbrompheniramine	25	HydroXYZine	61
Chlorpheniramine	25	Ibuprofen, Phenylephrine, and Chlorpheniramine	62
Chlorpheniramine and Acetaminophen	26	Ibuprofen, Pseudoephedrine, and Chlorpheniramine	62
Chlorpheniramine and Phenylephrine	26	Meclizine	75
Chlorpheniramine and Pseudoephedrine	26	Naphazoline and Pheniramine	83
Chlorpheniramine, Phenylephrine, and Dextromethorphan	26	Naproxen and Diphenhydramine	84
Chlorpheniramine, Pseudoephedrine, and Codeine	26	Phenylephrine and Pylamine	93
Chlorpheniramine, Pseudoephedrine, and Dextromethorphan	26	Promethazine	98
Clemastine	28	Promethazine and Codeine	98
Codeine and Chlorpheniramine	29	Promethazine and Dextromethorphan	98
Codeine, Phenylephrine, and Tripolidine	30	Promethazine and Phenylephrine	98
Cyproheptadine	32	Promethazine, Phenylephrine, and Codeine	98
Dexbrompheniramine and Phenylephrine	34	Tripolidine	116
Dexchlorpheniramine and Pseudoephedrine	34	Tripolidine and Pseudoephedrine	117
Dexchlorpheniramine, Dextromethorphan, and Phenylephrine	34		
Dextromethorphan and Chlorpheniramine	35	Histamine H₁ Antagonist, Second Generation	
DimenhydrINATE	37	Acrivastine and Pseudoephedrine	4
Diphenhydramine and Ibuprofen	37	Azelastine (Ophthalmic)	13
Diphenhydramine and Phenylephrine	37	Cetirizine and Pseudoephedrine	25
DiphenhydrAMINE (Systemic)	37	Cetirizine (Systemic)	25
DiphenhydrAMINE (Topical)	38	Epinastine	42
Doxylamine	40	Fexofenadine	49
Epinastine	42	Fexofenadine and Pseudoephedrine	49
Fexofenadine	49	Ketotifen (Ophthalmic)	68
Fexofenadine and Pseudoephedrine	49	Loratadine	73
		Loratadine and Pseudoephedrine	73
		Olopatadine (Ophthalmic)	87
		Histamine H₂ Antagonist	
		Cimetidine	27
		Famotidine	48
		Famotidine, Calcium Carbonate, and Magnesium Hydroxide	48
		Nizatidine	86

HISTONE DEACETYLASE INHIBITOR

Histone Deacetylase Inhibitor	
Valproic Acid and Derivatives	118
Homocystinuria, Treatment Agent	
Betaine	16
Hormone	
Calcitonin	20
Melatonin	76
Hormone, Posterior Pituitary	
Desmopressin	33
Vasopressin	118
5-HT_{1A} Receptor Partial Agonist	
Gadoterate Meglumine	54
Hydrolytic Lysosomal N-terminal Tripeptidyl Peptidase	
Cerliponase Alfa	25
Hydroxyacid Oxidase 1 (HAO1)-Directed Small Interfering Ribonucleic Acid (siRNA)	
Lumasiran	74
4-Hydroxyphenylpyruvate Dioxygenase Inhibitor	
Nitisinone	85
Hypnotic, Benzodiazepine	
Flurazepam	52
Hypnotic, Miscellaneous	
Eszopiclone	45
Lemborexant	69
Melatonin	76
Zaleplon	121
Zolpidem	122
Imidazoline Derivative	
Naphazoline and Pheniramine	83
Naphazoline (Ophthalmic)	83
Oxymetazoline (Nasal)	89
Oxymetazoline (Ophthalmic)	89
Tetrahydrozoline (Nasal)	112
Tetrahydrozoline (Ophthalmic)	112
Immune Globulin	
Aducanumab	5
Antithymocyte Globulin (Equine)	10
Antithymocyte Globulin (Rabbit)	10
Botulism Immune Globulin (Intravenous-Human)	17
Cytomegalovirus Immune Globulin (Intravenous-Human)	32
Hepatitis B Immune Globulin (Human)	58
Immune Globulin	63
Rabies Immune Globulin (Human)	100
Rh _o (D) Immune Globulin	101
Tetanus Immune Globulin (Human)	112
Varicella-Zoster Immune Globulin (Human)	118
Immunosuppressant Agent	
Antithymocyte Globulin (Equine)	10
Antithymocyte Globulin (Rabbit)	10
AzaTHIOprine	13
Basiliximab	14
Cladribine	27
Cyclophosphamide	31
CycloSPORINE (Ophthalmic)	31
CycloSPORINE (Systemic)	32
Everolimus	47
InFLIXimab	63
Mercaptopurine	77
Methotrexate	78
Mycophenolate	83
Pimecrolimus	94
RiTUXimab	102
Sirolimus	106
Tacrolimus (Systemic)	110
Tacrolimus (Topical)	110
Inhalation, Miscellaneous	
Inhalation Devices	64
Inotrope	
DOBUtamine	39
DOPamine	39
Milrinone	81
Insulin, Combination	
Insulin Aspart Protamine and Insulin Aspart	64
Insulin Lispro Protamine and Insulin Lispro	65
Insulin NPH and Insulin Regular	65
Insulin, Intermediate-Acting	
Insulin NPH	65
Insulin-Like Growth Factor-1, Recombinant	
Mecasermin	75
Insulin, Long-Acting	
Insulin Detemir	64
Insulin Glargine	64
Insulin, Rapid-Acting	
Insulin Aspart	64
Insulin Glulisine	64
Insulin Lispro	64
Insulin, Short-Acting	
Insulin Regular	65
Interferon	
Interferon Alfa-2b	65
Interferon Alfa-n3	65
Interferon Beta-1a	65
Interferon Beta-1b	65
Interferon Gamma-1b	65
Peginterferon Alfa-2a	91
Peginterferon Alfa-2b	91
Interleukin-1 Beta Inhibitor	
Canakinumab	22
Interleukin-1 Inhibitor	
Canakinumab	22
Rilonacept	102
Interleukin-2 Inhibitor	
Basiliximab	14
Interleukin-4 Receptor Antagonist	
Dupilumab	40
Interleukin-5 Antagonist	
Mepolizumab	77
Reslizumab	101
Interleukin-5 Receptor Antagonist	
Benralizumab	15
Interleukin-6 Inhibitor	
Siltuximab	105
Interleukin-12 Inhibitor	
Ustekinumab	118
Interleukin-23 Inhibitor	
Ustekinumab	118
Intravenous Nutritional Therapy	
Amino Acid Injection	7
Cysteine	32
Dextrose	35
Dextrose and Sodium Chloride	35
Total Parenteral Nutrition	115
Iodinated Contrast Media	
Diatrizoate Meglumine	36
Diatrizoate Meglumine and Diatrizoate Sodium	36
Diatrizoate Meglumine and Iodipamide Meglumine	36
Iodixanol	65
Iohexol	66
Iopamidol	66
Iopromide	66
Iothalamate Meglumine	66
Ioversol	66
Ioxilan	66
Iron Preparations	
Ferric Carboxymaltose	49
Ferric Citrate	49
Ferric Gluconate	49
Ferric Pyrophosphate Citrate	49
Ferrous Fumarate	49
Ferrous Gluconate	49
Ferrous Sulfate	49
Ferumoxtyol	49
Iron Dextran Complex	66
Iron Sucrose	66
Polysaccharide-Iron Complex	95
Polysaccharide-Iron Complex, Vitamin B12, and Folic Acid	95
Irrigant	
Sodium Chloride	106

Irrigating Solution			
Balanced Salt Solution	14	Chloroprocaine	25
Janus Associated Kinase Inhibitor		Cocaine (Topical)	29
Fedratinib	48	Dextromethorphan and Menthol	35
Ruxolitinib	103	Dibucaine	36
Janus Kinase Inhibitor		Ethyl Chloride	47
Baricitinib	14	Glycerin and Lidocaine	56
Kallikrein Inhibitor		Hexylresorcinol	59
Ecallantide	40	Lidocaine and Epinephrine	71
Lanadelumab	69	Lidocaine and Menthol	71
Keratinocyte Growth Factor		Lidocaine and Prilocaine	71
Palifermin	89	Lidocaine and Tetracaine	71
Keratolytic Agent		Lidocaine (Ophthalmic)	71
Anthralin	9	Lidocaine (Systemic)	72
Podofilox	94	Lidocaine (Topical)	72
Podophyllum Resin	94	Mepivacaine	77
Salicylic Acid	103	Mepivacaine and Levonordefrin	77
Sinecatechins	106	Phenylephrine and Pramoxine	93
Tazarotene	110	Pramoxine	97
Trichloroacetic Acid	116	Prilocaine	98
Urea (Topical)	117	Prilocaine and Epinephrine	98
Laxative		Proparacaine and Fluorescein	99
Magnesium Hydroxide	74	Ropivacaine	103
Magnesium Hydroxide and Mineral Oil	74	Tetracaine (Ophthalmic)	112
Methylcellulose	79	Tetracaine (Spinal)	112
Laxative, Bowel Evacuant		Tetracaine (Topical)	112
Polyethylene Glycol-Electrolyte Solution and Bisacodyl	95	Local Anesthetic, Ophthalmic	
Sodium Phosphates	107	Lidocaine (Ophthalmic)	71
Laxative, Bulk-Producing		Proparacaine	99
Methylcellulose	79	Proparacaine and Fluorescein	99
Polycarbophil	94	Tetracaine (Ophthalmic)	112
Psyllium	99	Local Anesthetic, Oral	
Wheat Dextrin	120	Dyclonine	40
Laxative, Lubricant		Lubricant, Ocular	
Mineral Oil	81	Hydroxypropyl Methylcellulose	61
Mineral Oil (Light)	81	Sodium Chloride	106
Laxative, Miscellaneous		Lung Surfactant	
Castor Oil	23	Beractant	16
Laxative, Osmotic		Calfactant	21
Glycerin	56	Lucinactant	74
Lactulose	69	Poractant Alfa	95
Polyethylene Glycol 3350	95	Lymphocyte Function-Associated Antigen 1 (LFA-1) Antagonist	
Polyethylene Glycol-Electrolyte Solution	95	Lifitegrast	72
Sodium Picosulfate, Magnesium Oxide, and Citric Acid	107	Lysine Analog	
Sodium Sulfate, Potassium Sulfate, and Magnesium Sulfate	107	Aminocaproic Acid	7
Sorbitol	108	Tranexamic Acid	115
Laxative, Saline		Macrocytic Gadolinium-Based Contrast Agent	
Magnesium Citrate	74	Gadobutrol	54
Laxative, Stimulant		Gadoterate Meglumine	54
Bisacodyl	17	Gadoteridol	54
Docusate and Senna	39	Magnesium Salt	
Polyethylene Glycol-Electrolyte Solution and Bisacodyl	95	Magnesium L-aspartate Hydrochloride	74
Senna	105	Magnesium L-lactate	74
Sodium Picosulfate, Magnesium Oxide, and Citric Acid	107	Magnesium Carbonate	74
Leptin Analog		Magnesium Carbonate, Calcium Carbonate, and Folic Acid	74
Metreleptin	80	Magnesium Chloride	74
Leukotriene-Receptor Antagonist		Magnesium Citrate	74
Montelukast	82	Magnesium Gluconate	74
Zafirlukast	121	Magnesium Hydroxide	74
Linear Gadolinium-Based Contrast Agent		Magnesium Oxide	75
Gadobenate Dimeglumine	54	Magnesium Sulfate	75
Gadodiamide	54	Mast Cell Stabilizer	
Gadofosveset	54	Cromolyn (Nasal)	31
Gadopentetate Dimeglumine	54	Cromolyn (Ophthalmic)	31
Gadoversetamide	54	Cromolyn (Oral Inhalation)	31
Gadoxetate	54	Cromolyn (Systemic)	31
Lipase Inhibitor		Ketotifen (Ophthalmic)	68
Orlistat	88	Lodoxamide	73
Local Anesthetic		Nedocromil (Ophthalmic)	84
Articaine and Epinephrine	11	Medical Food	
Benzocaine	15	Methylfolate	79
Benzocaine, Butamben, and Tetracaine	15	Methylfolate, Methylcobalamin, and Acetylcysteine	79
Bupivacaine	19	Phosphatidylserine, DHA, and EPA	93
Bupivacaine and Epinephrine	19	Urea (Systemic)	117
Bupivacaine (Liposomal)	19	Melatonin Receptor Agonist	
		Melatonin	76
		Metabolic Alkalosis Agent	
		Carglumic Acid	23

MINERALOCORTICOID (ALDOSTERONE) RECEPTOR ANTAGONISTS

Mineralocorticoid (Aldosterone) Receptor Antagonists

Eplerenone	43
Hydrochlorothiazide and Spironolactone	59
Spironolactone	108

Mineral, Oral (Topical)

Triclosan and Fluoride	116
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Miscellaneous Product

Coenzyme Q-10	30
Diabetic Supplies	35

Mixed 5-HT_{1A} Agonist/5-HT_{2A} Antagonist

Flibanserin	50
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Molybdenum Cofactor

Fosdenopterin	53
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Monoclonal Antibody

Adalimumab	4
Aducanumab	5
Alemtuzumab	6
Alirocumab	6
Ansuvimab	9
Basiliximab	14
Belimumab	14
Bezlotoxumab	17
Burosumab	19
Canakinumab	22
Denosumab	33
Dupilumab	40
Eculizumab	40
Emapalumab	41
Evinacumab	47
Evolocumab	47
Golimumab	56
Ibritumomab Tiuxetan	62
IdaruCIZUmab	62
Inebilizumab	63
InFLIXimab	63
Lanadelumab	69
Ocrelizumab	86
Ofatumumab	87
Palivizumab	90
Ranibizumab	101
Ravulizumab	101
RiTUXimab	102
Romosozumab	103
Satralizumab	104
Secukinumab	104
Sotrovimab	108
Ustekinumab	118
Vedolizumab	118

Monoclonal Antibody, Anti-Asthmatic

Benralizumab	15
Dupilumab	40
Mepolizumab	77
Omalizumab	87
Reslizumab	101

Monoclonal Antibody, CGRP Antagonist

Erenumab	43
Fremanezumab	54
Galcanezumab	54

Monoclonal Antibody, Complement Inhibitor

Eculizumab	40
Ravulizumab	101

Monoclonal Antibody, Selective Adhesion-Molecule Inhibitor

Natalizumab	84
Vedolizumab	118

Mouthwash

Diphenhydramine, Aluminum Hydroxide, and Magnesium Hydroxide	37
Mouthwash	82
Mouthwash, Magic	82

mTOR Kinase Inhibitor

Everolimus	47
Sirolimus	106

Mucolytic Agent

Acetylcysteine	4
Dornase Alfa	39

Neprilysin Inhibitor

Sacubitril and Valsartan	103
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Neuraminidase Inhibitor

Oseltamivir	88
Peramivir	92
Zanamivir	121

Neuromuscular Blocker Agent, Depolarizing

Succinylcholine	108
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Neuromuscular Blocker Agent, Nondepolarizing

Atracurium	12
Cisatracurium	27
Mivacurium	82
Pancuronium	90
Rocuronium	103
Vecuronium	118

Neuromuscular Blocker Agent, Toxin

AbobotulinumtoxinA	2
IncobotulinumtoxinA	63
OnabotulinumtoxinA	88
RimabotulinumtoxinB	102

N-Methyl-D-Aspartate (NMDA) Receptor Antagonist

Dextromethorphan	35
Dextromethorphan and Quinidine	35
Esketamine	44
Memantine	76

Nonsteroidal Anti-inflammatory Drug (NSAID)

Diclofenac (Ophthalmic)	36
Diclofenac (Systemic)	36
Diclofenac (Topical)	36

Nonsteroidal Anti-inflammatory Drug (NSAID), COX-2 Selective

Amlodipine and Celecoxib	8
Celecoxib	24

Nonsteroidal Anti-inflammatory Drug (NSAID), Ophthalmic

Bromfenac	18
Diclofenac (Ophthalmic)	36
Flurbiprofen (Ophthalmic)	52
Ketorolac (Ophthalmic)	68
Nepafenac	84
Phenylephrine and Ketorolac	93

Nonsteroidal Anti-inflammatory Drug (NSAID), Oral

Aspirin	12
Diclofenac and Misoprostol	36
Diclofenac (Systemic)	36
Diflunisal	37
Diphenhydramine and Ibuprofen	37
Etodolac	47
Fenoprofen	49
Flurbiprofen (Systemic)	52
Hydrocodone and Ibuprofen	60
Ibuprofen	62
Ibuprofen, Phenylephrine, and Chlorpheniramine	62
Ibuprofen, Pseudoephedrine, and Chlorpheniramine	62
Indomethacin	63
Ketorolac (Systemic)	68
Meloxicam	76
Nabumetone	83
Naproxen	83
Naproxen and Diphenhydramine	84
Naproxen and Esomeprazole	84
Oxaprozin	88
Oxycodone and Ibuprofen	89
Piroxicam (Systemic)	94
Sulindac	109

Nonsteroidal Anti-inflammatory Drug (NSAID), Parenteral

Ibuprofen	62
Indomethacin	63
Ketorolac (Systemic)	68
Meloxicam	76

Nonsteroidal Anti-inflammatory Drug (NSAID), Topical

Diclofenac (Topical)	36
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Norepinephrine Reuptake Inhibitor, Selective

AtoMOXetine	12
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NS3/4A Inhibitor

Glecaprevir and Pibrentasvir	55
Ombitasvir, Paritaprevir, and Ritonavir	87
Ombitasvir, Paritaprevir, Ritonavir, and Dasabuvir	87
Sofosbuvir, Velpatasvir, and Voxilaprevir	107

NS5A Inhibitor

Glecaprevir and Pibrentasvir	55
Ledipasvir and Sofosbuvir	69

Ombitasvir, Paritaprevir, and Ritonavir	87	Opioid Antagonist	
Ombitasvir, Paritaprevir, Ritonavir, and Dasabuvir	87	Morphine and Naltrexone	82
Sofosbuvir and Velpatasvir	107	Naloxone	83
Sofosbuvir, Velpatasvir, and Voxilaprevir	107	Naltrexone	83
NS5B RNA Polymerase Inhibitor		Olanzapine and Samidorphan	87
Ledipasvir and Sofosbuvir	69	Opioid Antagonist, Peripherally-Acting	
Ombitasvir, Paritaprevir, Ritonavir, and Dasabuvir	87	Alvimopan	7
Sofosbuvir and Velpatasvir	107	Naldemedine	83
Sofosbuvir, Velpatasvir, and Voxilaprevir	107	Naloxegol	83
Nutraceutical		Orexin Receptor Antagonist	
Glucosamine	56	Lemborexant	69
Glucosamine and Chondroitin	56	Otic Agent, Anti-infective	
Nutritional Supplement		Acetic Acid (Otic)	4
Biotin	17	Acetic Acid, Propylene Glycol Diacetate, and Hydrocortisone	4
Fluoride	51	Aluminum Acetate and Acetic Acid	6
Infant Nutritional Formulas	63	Otic Agent, Cerumenolytic	
L-Lysine	73	Carbamide Peroxide	22
Medium Chain Triglycerides	75	Ovulation Stimulator	
Nutritional Formula, Enteral/Oral	86	Chorionic Gonadotropin (Human)	27
Triheptanoin	116	Chorionic Gonadotropin (Recombinant)	27
Ophthalmic Agent		ClomiPHENE	29
Aflibercept (Ophthalmic)	5	Follitropin Alfa	53
Brolucizumab	18	Follitropin Beta	53
Cysteamine (Ophthalmic)	32	Menotropins	76
Fluorescein and Benoxinate	51	Urofollitropin	118
Ocriplasmin	87	Oxytocic Agent	
Pegaptanib	91	Oxytocin	89
Ranibizumab	101	P2Y12 Antagonist	
Riboflavin 5'-Phosphate	102	Cangrelor	22
Trypan Blue	117	Clopidogrel	29
Verteporfin	119	Prasugrel	97
Ophthalmic Agent, Antiglaucoma		Ticagrelor	113
AcetaZOLAMIDE	4	Parathyroid Hormone Analog	
Betaxolol (Ophthalmic)	16	Parathyroid Hormone	90
Bimatoprost	17	Teriparatide	112
Brimonidine (Ophthalmic)	18	Partial Nicotine Agonist	
Brinzolamide and Brimonidine	18	Varenicline	118
Carteolol (Ophthalmic)	23	Pediculocide	
Dorzolamide	39	Benzyl Alcohol	16
Dorzolamide and Timolol	39	Ivermectin (Topical)	67
Echothiophate Iodide	40	Lindane	72
Latanoprost	69	Malathion	75
Levobunolol	70	Permethrin	92
MethazolAMIDE	77	Pyrethrins and Piperonyl Butoxide	100
Metipranolol	79	Spinosad	108
Netarsudil and Latanoprost	85	Pentasaccharide, Synthetic	
Pilocarpine (Ophthalmic)	93	Fondaparinux	53
Timolol (Ophthalmic)	113	Peritoneal Dialysate, Osmotic	
Unoprostone	117	Icodextrin	62
Ophthalmic Agent, Miotic		Pharmaceutical Aid	
Acetylcholine	4	Alcohol (Ethyl)	5
Carbachol	22	Ammonium Alum	8
Echothiophate Iodide	40	Collodion, Flexible	30
Pilocarpine (Ophthalmic)	93	Menthol	76
Ophthalmic Agent, Miscellaneous		Syrup, Simple	110
Artificial Tears	11	Water for Injection (Bacteriostatic)	120
Balanced Salt Solution	14	Water for Injection (Sterile)	120
Carboxymethylcellulose	23	Water for Irrigation (Sterile)	120
Hydroxypropyl Cellulose	61	White Petrolatum	120
MitoMYcin (Ophthalmic)	81	Pharmacologic Chaperone	
Ophthalmic Irrigant Mixture	88	Migalastat	81
Ophthalmic Agent, Mydriatic		Phenothiazine Derivative	
Atropine (Ophthalmic)	12	Amitriptyline and Perphenazine	8
Cyclopentolate and Phenylephrine	31	ChlorproMAZINE	26
Homatropine	59	FluPHENAZINE	52
Phenylephrine and Ketorolac	93	Methylene Blue	79
Phenylephrine (Ophthalmic)	93	Perphenazine	92
Tropicamide	117	Prochlorperazine	98
Ophthalmic Agent, Toxin		Promethazine	98
IncobotulinumtoxinA	63	Promethazine and Codeine	98
OnabotulinumtoxinA	88	Promethazine and Dextromethorphan	98
Ophthalmic Agent, Vasoconstrictor		Promethazine and Phenylephrine	98
Naphazoline and Pheniramine	83	Promethazine, Phenylephrine, and Codeine	98
Naphazoline (Ophthalmic)	83	Thioridazine	113
Tetrahydrozoline (Ophthalmic)	112	Trifluoperazine	116
Ophthalmic Agent, Viscoelastic			
Hyaluronate and Derivatives	59		
Sodium Chondroitin Sulfate and Sodium Hyaluronate	106		

PHENYLALANINE AMMONIA LYASE ENZYME

Phenylalanine Ammonia Lyase Enzyme		Selexipag	105
Pegvaliase	91	Treprostinil	115
Phenylalanine Ammonia Lyase, Recombinant		Prostacyclin IP Receptor Agonist	
Pegvaliase	91	Selexipag	105
Phosphate Binder		Prostaglandin	
Calcium Acetate	21	Alprostadiil	6
Calcium Carbonate	21	Carboprost Tromethamine	23
Ferric Citrate	49	Diclofenac and Misoprostol	36
Lanthanum	69	Dinoprostone	37
Sevelamer	105	Epoprostenol	43
Sucroferric Oxyhydroxide	108	Iloprost	62
Phosphodiesterase-3 Enzyme Inhibitor		MiSOPROStol	81
Anagrelide	9	Treprostinil	115
Cilostazol	27	Prostaglandin, Ophthalmic	
Milrinone	81	Bimatoprost	17
Phosphodiesterase-4 Enzyme Inhibitor		Latanoprost	69
Apremilast	10	Netarsudil and Latanoprost	85
Roflumilast	103	Protectant, Topical	
Phosphodiesterase-5 Enzyme Inhibitor		Aluminum Hydroxide	7
Avanafil	12	Balsam Peru and Castor Oil	14
Sildenafil	105	Menthol and Zinc Oxide (Topical)	76
Tadalafil	110	Poly-Urearethane	95
Vardenafil	118	Protein C	
Phosphodiesterase Enzyme Inhibitor, Nonselective		Protein C Concentrate (Human)	99
Aminophylline	8	Prothrombin Complex Concentrate (PCC)	
Caffeine	20	Factor IX Complex (Human) [(Factors II, IX, X)]	48
Theophylline	113	Prothrombin Complex Concentrate (Human) [(Factors II, VII, IX, X), Protein C, and Protein S]	99
Photosensitizing Agent, Topical		Proton Pump Inhibitor	
Aminolevulinic Acid (Topical)	7	Lansoprazole, Amoxicillin, and Clarithromycin	69
Piperazine Derivative		Naproxen and Esomeprazole	84
Cetirizine and Pseudoephedrine	25	Omeprazole	87
Cetirizine (Systemic)	25	Omeprazole, Clarithromycin, and Amoxicillin	88
HydrOXYzine	61	Pantoprazole	90
Meclizine	75	RABEprazole	100
Piperidine Derivative		Psoralen	
Cyproheptadine	32	Methoxsalen (Systemic)	78
Fexofenadine	49	Pyrimidine Synthesis Inhibitor	
Fexofenadine and Pseudoephedrine	49	Teriflunomide	112
Ketotifen (Ophthalmic)	68	Radiological/Contrast Media, Ionic	
Loratadine	73	Gadoterate Meglumine	54
Loratadine and Pseudoephedrine	73	Radiological/Contrast Media, Ionic (High Osmolality)	
Olopatadine (Ophthalmic)	87	Diatrizoate Meglumine	36
Plasma Volume Expander, Colloid		Diatrizoate Meglumine and Diatrizoate Sodium	36
Albumin	5	Gadopentetate Dimeglumine	54
Dextran	34	Iothalamate Meglumine	66
Hetastarch	59	Radiological/Contrast Media, Ionic (Low Osmolality)	
Tetrastarch	112	Diatrizoate Meglumine and Iodipamide Meglumine	36
Polyclonal Antibody		Gadoxetate	54
Antithymocyte Globulin (Equine)	10	Radiological/Contrast Media, Nonionic (High Osmolality)	
Antithymocyte Globulin (Rabbit)	10	Gadobenate Dimeglumine	54
Potassium Binder		Gadobutrol	54
Patiromer	90	Gadoversetamide	54
Sodium Polystyrene Sulfonate	107	Iohexol	66
Sodium Zirconium Cyclosilicate	107	Radiological/Contrast Media, Nonionic (Iso-Osmolality)	
Potassium Channel Blocker		Iodixanol	65
Amifampridine	7	Radiological/Contrast Media, Nonionic (Low Osmolality)	
Dalfampridine	32	Gadodiamide	54
Probiotic		Gadofosveset	54
Lactobacillus	68	Gadoteridol	54
Saccharomyces boulardii	103	Iohexol	66
Progestin		Iopamidol	66
Etonogestrel	47	Iopromide	66
HYDROXYprogesterone Caproate	61	Ioversol	66
Leuprolide and Norethindrone	70	Ioxilan	66
Levonorgestrel (IUD)	70	Radiological/Contrast Media, Paramagnetic Agent	
Levonorgestrel (Systemic)	70	Gadobenate Dimeglumine	54
MedroxyPROGESTERone	75	Gadobutrol	54
Megestrol	76	Gadodiamide	54
Norethindrone	86	Gadofosveset	54
Progesterone	98	Gadopentetate Dimeglumine	54
Relugolix, Estradiol, and Norethindrone	101	Gadoterate Meglumine	54
Progestin Receptor Modulator		Gadoteridol	54
Ulipristal	117	Gadoversetamide	54
Prostacyclin		Gadoxetate	54
Epoprostenol	43		
Iloprost	62		

Radiopaque Agents		Salsalate	104
Barium	14	Trolamine	117
Radiopharmaceutical		Scabidical Agent	
Florbetapir F18	50	Crotamiton	31
Fluciclovine F 18	50	Malathion	75
Fludeoxyglucose F 18	50	Permethrin	92
Flutemetamol F18	52	Sclerosing Agent	
Gallium Ga 68 Dotatate	54	Ethanolamine Oleate	45
Gallium Ga 68 PSMA-11	54	Polidocanol	94
Ibritumomab Tiuxetan	62	Sodium Tetradecyl Sulfate	107
Indium 111 Capromab Pendetide	63	Talc (Sterile)	110
Indium 111 Oxyquinoline	63	Sclerostin Inhibitor	
Indium In-111 Pentetate	63	Romosozumab	103
Iobenguane I 123	65	Second Generation (Atypical) Antipsychotic	
Iobenguane I 131	65	ARIPiprazole	11
Iodinated I 131 Albumin	65	ARIPiprazole Lauroxil	11
Iodine I-125 Human Serum Albumin	65	CloZAPine	29
Ioflupane I 123	66	Lurasidone	74
Pentetate Indium Disodium In 111	92	OLANZapine	87
Piflufolostat F18	94	Olanzapine and Fluoxetine	87
Radium Ra 223 Dichloride	100	Olanzapine and Samidorphan	87
Samarium Sm 153 Lexidronam	104	Paliperidone	90
Strontium-89	108	QUETiapine	100
Technetium Tc 99m Albumin Aggregated	110	RisperidONE	102
Technetium Tc 99m Bicisate	110	Ziprasidone	121
Technetium Tc 99m Diethylene Triamine Penta-Acetic Acid	110	Sedative	
Technetium Tc 99m Disofenin	110	Acetaminophen, Isometheptene, and Dichloralphenazone	4
Technetium Tc 99m Exametazime	110	Dexmedetomidine	34
Technetium Tc 99m-Labeled Red Blood Cells	110	Selective 5-HT₃ Receptor Antagonist	
Technetium Tc 99m Mebrofenin	111	Alosetron	6
Technetium Tc 99m Medronate	111	Fosnetupitant and Palonosetron	54
Technetium Tc 99m Mertiatide	111	Granisetron	56
Technetium Tc 99m Oxidronate	111	Netupitant and Palonosetron	85
Technetium Tc 99m Pentetate	111	Ondansetron	88
Technetium Tc 99m Pyrophosphate	111	Palonosetron	90
Technetium Tc 99m Sestamibi	111	Selective Bradykinin B2 Receptor Antagonist	
Technetium Tc 99m Sodium Pertechnetate	111	Icatibant	62
Technetium Tc 99m Sulfur Colloid	111	Selective Estrogen Receptor Modulator (SERM)	
Technetium Tc 99m Tetrofosmin	111	ClomiphENE	29
Technetium Tc 99m Tilmanocept	111	Estrogens (Conjugated/Equine) and Bazedoxifene	44
Thallous Chloride TI 201	113	Ospemifene	88
Xenon Xe 133 Gas	121	Raloxifene	100
Rauwolfia Alkaloid		Tamoxifen	110
Reserpine	101	Toremifene	115
Recombinant Human Nerve Growth Factor		Selective Relaxant Binding Agent	
Cenergermin	24	Sugammadex	108
Rehydration, Oral		Selective T-Cell Costimulation Blocker	
Oral Rehydration Therapy	88	Belatacept	14
Renal Replacement Solution		Serotonin 5-HT_{1B, 1D} Receptor Agonist	
Continuous Renal Replacement Therapy Solutions	30	Eletriptan	41
Rescue Agent (Chemotherapy)		Naratriptan	84
Leucovorin Calcium	70	Rizatriptan	103
LEVOleucovorin	70	SUMatriptan	109
Respiratory Stimulant		ZOLMitriptan	121
Ammonia Spirit (Aromatic)	8	Serotonin 5HT-2 Receptor Agonist	
Retinoic Acid Derivative		Fenfluramine	48
Adapalene	5	Serotonin 5-HT₄ Receptor Agonist	
Fluocinolone, Hydroquinone, and Tretinoin	51	Metoclopramide	79
Halobetasol and Tazarotene	58	Tegaserod	111
ISOTretinoin (Systemic)	67	Shampoo, Pediculocide	
Tazarotene	110	Pyrethrins and Piperonyl Butoxide	100
Tretinoin (Systemic)	115	Skeletal Muscle Relaxant	
Tretinoin (Topical)	115	Baclofen	14
Retinoid-Like Compound		Carisoprodol	23
Acitretin	4	Carisoprodol and Aspirin	23
Rho Kinase Inhibitor		Carisoprodol, Aspirin, and Codeine	23
Netarsudil	85	Chlorzoxazone	26
Netarsudil and Latanoprost	85	Cyclobenzaprine	31
Rifamycin		Dantrolene	32
Rifabutin	102	Metaxalone	77
RifAMPin	102	Methocarbamol	78
Rifamycin	102	Orphenadrine	88
Rifapentine	102	Orphenadrine, Aspirin, and Caffeine	88
RifAXIMin	102	Skin and Mucous Membrane Agent	
Salicylate		Imiquimod	63
Aspirin	12		
Choline Magnesium Trisalicylate	27		
Magnesium Salicylate	75		

SKIN AND MUCOUS MEMBRANE AGENT, MISCELLANEOUS

Skin and Mucous Membrane Agent, Miscellaneous

Dextranomer and Hyaluronate Derivatives	34
Emollients	41
Hyaluronate and Derivatives	59

Smoking Cessation Aid

BuPROPion	19
Nicotine	85
Varenicline	118

Sodium-Glucose Cotransporter 2 (SGLT2) Inhibitor

Empagliflozin	41
Empagliflozin and Linagliptin	41
Empagliflozin and Metformin	42
Empagliflozin, Linagliptin, and Metformin	42

Sodium Salt

Sodium Chloride	106
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Soluble Guanylate Cyclase (sGC) Stimulator

Riociguat	102
Vericiguat	119

Somatostatin Analog

Lanreotide	69
Octreotide	87
Pasireotide	90

Spermicide

Nonoxonyl 9	86
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Sphingosine 1-Phosphate (S1P) Receptor Modulator

Fingolimod	50
Ozanimod	89
Siponimod	106

Spleen Tyrosine Kinase (Syk) Inhibitor

Fostamatinib	54
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Stool Softener

Docusate	39
Docusate and Senna	39

Substance P/Neurokinin 1 Receptor Antagonist

Aprepitant	10
Fosaprepitant	53
Fosnetupitant and Palonosetron	54
Netupitant and Palonosetron	85

Substituted Benzimidazole

Lansoprazole, Amoxicillin, and Clarithromycin	69
Naproxen and Esomeprazole	84
Omeprazole	87
Omeprazole, Clarithromycin, and Amoxicillin	88
Pantoprazole	90
RABEprazole	100

Substrate Replacement Therapy

Fosdenopterin	53
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Survival of Motor Neuron 2 (SMN2)-Directed RNA Splicing Modifier

Risdiplam	102
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Sympathomimetic

Acetaminophen, Isometheptene, and Dichloralphenazone	4
Benzphetamine	16
Diethylpropion	37
Methamphetamine	77
Phendimetrazine	92
Phentermine	93

Thioamide

MethIMAzole	78
Propylthiouracil	99

Thrombolytic Agent

Alteplase	6
Defibrotide	33
Tenecteplase	111

Thrombopoietic Agent

Avatrombopag	13
Eltrombopag	41
Lusutrombopag	74
RomiPLOstim	103

Thrombopoietin Receptor Agonist

Avatrombopag	13
Eltrombopag	41
Lusutrombopag	74

Thymidine Phosphorylase Inhibitor

Trifluridine and Tipiracil	116
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Thyroid Product

Levothyroxine	71
Liothyronine	72
Liotrix	72
Thyroid, Desiccated	113

Tissue-Selective Estrogen Complex (TSEC)

Estrogens (Conjugated/Equine) and Bazedoxifene	44
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Topical Skin Product

Absorption Base	2
Aluminum Acetate	6
Aluminum Chloride Hexahydrate	6
Aminolevulinic Acid (Topical)	7
Becaplermin	14
Benzoin	15
Benzoyl Peroxide	15
Benzoyl Peroxide and Hydrocortisone	16
Benzyl Alcohol	16
Calamine	20
Calcipotriene	20
Camphor	21
Camphor and Menthol	21
Camphor and Phenol	22
Capsaicin	22
Cleansing Lotion	28
Clindamycin and Benzoyl Peroxide	28
Coal Tar	29
Coal Tar and Salicylic Acid	29
Collodion, Flexible	30
DiphenhydrAMINE (Topical)	38
Doxepin (Topical)	39
Eflornithine	41
Emollients	41
Erythromycin (Topical)	44
Fluorouracil (Topical)	52
Imiquimod	63
Ingenol Mebutate	64
Lactic Acid	68
Lactic Acid and Ammonium Hydroxide	68
Lanolin	69
Lanolin, Cetyl Alcohol, Glycerin, Petrolatum, and Mineral Oil	69
Menthol and Zinc Oxide (Topical)	76
Minoxidil (Topical)	81
Oatmeal (Colloidal)	86
Pimecrolimus	94
Podofilox	94
Povidone-Iodine (Topical)	96
Pyrrithione Zinc	100
Selenium Sulfide	105
Sinecatechins	106
Surgical Lubricant	110
Tacrolimus (Topical)	110
Trolamine	117
Urea (Topical)	117
Vitamin A and Vitamin D (Topical)	119
White Petrolatum	120
Zinc Gelatin	121
Zinc Oxide	121

Topical Skin Product, Acne

Adapalene	5
Azelaic Acid	13
Benzoyl Peroxide	15
Benzoyl Peroxide and Hydrocortisone	16
Clindamycin and Benzoyl Peroxide	28
Clindamycin (Topical)	28
Erythromycin and Benzoyl Peroxide	43
Erythromycin (Topical)	44
Salicylic Acid	103
Sulfacetamide (Topical)	109
Sulfur and Sulfacetamide	109
Tazarotene	110
Tretinoin (Topical)	115

Topical Skin Product, Antibacterial

Silver Nitrate	105
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Trace Element

Zinc Chloride	121
Zinc Gluconate	121
Zinc Sulfate	121

Trace Element, Parenteral

Copper	30
Manganese	75
Selenium	104
Sodium Iodide	107
Trace Elements	115

Transient Receptor Potential Vanilloid 1 (TRPV1) Agonist		Vaccine, Adenovirus Vector	
Capsaicin	22	COVID-19 Vaccine (Adenovirus Vector)	31
Transthyretin Stabilizer		Vaccine, Inactivated (Bacterial)	
Tafamidis	110	Anthrax Vaccine Adsorbed	9
Tryptophan Hydroxylase Inhibitor		Diphtheria and Tetanus Toxoids	38
Telotristat Ethyl	111	Diphtheria and Tetanus Toxoids, Acellular Pertussis, and Poliovirus Vaccine	38
Tumor Necrosis Factor (TNF) Blocking Agent		Diphtheria and Tetanus Toxoids, Acellular Pertussis, Poliovirus and Haemophilus b Conjugate Vaccine	38
Adalimumab	4	Diphtheria and Tetanus Toxoids, and Acellular Pertussis Vaccine	38
Golimumab	56	Diphtheria, Tetanus Toxoids, Acellular Pertussis, Hepatitis B (Recombinant), and Poliovirus (Inactivated) Vaccine	38
InFLIXimab	63	Haemophilus b Conjugate Vaccine	58
Tyrosine Hydroxylase Inhibitor		Meningococcal Group B Vaccine	76
MetyroSINE	80	Meningococcal (Groups A / C / Y and W-135) Conjugate Vaccine	76
Tyrosine Kinase Inhibitor		Meningococcal Polysaccharide (Groups C and Y) and Haemophilus b Tetanus Toxoid Conjugate Vaccine	76
Fostamatinib	54	Pneumococcal Conjugate Vaccine (13-Valent)	94
Nintedanib	85	Pneumococcal Conjugate Vaccine (20-Valent)	94
Urea Cycle Disorder (UCD) Treatment Agent		Pneumococcal Polysaccharide Vaccine (Polyvalent)	94
Carglumic Acid	23	Typhoid Vaccine	117
Glycerol Phenylbutyrate	56	Vaccine, Inactivated (Viral)	
Sodium Phenylacetate and Sodium Benzoate	107	Diphtheria and Tetanus Toxoids, Acellular Pertussis, and Poliovirus Vaccine	38
Sodium Phenylbutyrate	107	Diphtheria and Tetanus Toxoids, Acellular Pertussis, Poliovirus and Haemophilus b Conjugate Vaccine	38
Uric Acid Transporter 1 (URAT1) Inhibitor		Diphtheria, Tetanus Toxoids, Acellular Pertussis, Hepatitis B (Recombinant), and Poliovirus (Inactivated) Vaccine	38
Lesinurad and Allopurinol	69	Hepatitis A and Hepatitis B Recombinant Vaccine	58
Uricosuric Agent		Hepatitis A Vaccine	58
Colchicine and Probenecid	30	Hepatitis B Vaccine (Recombinant [Adjuvanted])	59
Probenecid	98	Influenza A Virus Vaccine (H5N1)	63
Urinary Acidifying Agent		Influenza Virus Vaccine (Inactivated)	63
Potassium Acid Phosphate	95	Japanese Encephalitis Virus Vaccine (Inactivated)	67
Potassium Phosphate	96	Papillomavirus (9-Valent) Vaccine (Human, Recombinant)	90
Urinary Tract Product		Papillomavirus (Types 6, 11, 16, 18) Vaccine (Human, Recombinant)	90
Acetohydroxamic Acid	4	Poliovirus Vaccine (Inactivated)	94
Citric Acid, Magnesium Carbonate, and Glucono-Delta-Lactone	27	Rabies Vaccine	100
Cysteamine (Systemic)	32	Vaccine, Live (Bacterial)	
Dimethyl Sulfoxide	37	BCG Vaccine (Immunization)	14
Methenamine, Phenyl Salicylate, Atropine, Hyoscyamine, Benzoic Acid, and Methylene Blue	78	Cholera Vaccine	26
Tiopronin	114	Typhoid Vaccine	117
Vaccine		Vaccine, Live (Viral)	
Adenovirus (Types 4, 7) Vaccine	5	Adenovirus (Types 4, 7) Vaccine	5
Anthrax Vaccine Adsorbed	9	Influenza Virus Vaccine (Live/Attenuated)	64
BCG Vaccine (Immunization)	14	Measles, Mumps, and Rubella Virus Vaccine	75
Cholera Vaccine	26	Measles, Mumps, Rubella, and Varicella Virus Vaccine	75
COVID-19 Vaccine (Adenovirus Vector)	31	Rotavirus Vaccine	103
COVID-19 Vaccine (mRNA)	31	Varicella Virus Vaccine	118
Diphtheria and Tetanus Toxoids	38	Yellow Fever Vaccine	121
Diphtheria and Tetanus Toxoids, Acellular Pertussis, and Poliovirus Vaccine	38	Zoster Vaccine (Live/Attenuated)	122
Diphtheria and Tetanus Toxoids, Acellular Pertussis, Poliovirus and Haemophilus b Conjugate Vaccine	38	Vaccine, mRNA	
Diphtheria and Tetanus Toxoids, and Acellular Pertussis Vaccine	38	COVID-19 Vaccine (mRNA)	31
Diphtheria, Tetanus Toxoids, Acellular Pertussis, Hepatitis B (Recombinant), and Poliovirus (Inactivated) Vaccine	38	Vaccine, Recombinant	
Haemophilus b Conjugate Vaccine	58	Hepatitis B Vaccine (Recombinant [Adjuvanted])	59
Hepatitis A and Hepatitis B Recombinant Vaccine	58	Influenza Virus Vaccine (Recombinant)	64
Hepatitis A Vaccine	58	Zoster Vaccine (Recombinant)	122
Hepatitis B Vaccine (Recombinant [Adjuvanted])	59	Vascular Endothelial Growth Factor (VEGF) Inhibitor	
Influenza A Virus Vaccine (H5N1)	63	Aflibercept (Ophthalmic)	5
Influenza Virus Vaccine (Inactivated)	63	Bevacizumab	16
Influenza Virus Vaccine (Live/Attenuated)	64	Brolicizumab	18
Influenza Virus Vaccine (Recombinant)	64	Pegaptanib	91
Japanese Encephalitis Virus Vaccine (Inactivated)	67	Ranibizumab	101
Measles, Mumps, and Rubella Virus Vaccine	75	SUNItinib	109
Measles, Mumps, Rubella, and Varicella Virus Vaccine	75	Ziv-Aflibercept (Systemic)	121
Meningococcal Group B Vaccine	76	Vasoconstrictor	
Meningococcal (Groups A / C / Y and W-135) Conjugate Vaccine	76	Epinephrine (Racemic) and Aluminum Potassium Sulfate	43
Meningococcal Polysaccharide (Groups C and Y) and Haemophilus b Tetanus Toxoid Conjugate Vaccine	76	Oxymetazoline (Ophthalmic)	89
Papillomavirus (9-Valent) Vaccine (Human, Recombinant)	90	Vasodilator	
Papillomavirus (Types 6, 11, 16, 18) Vaccine (Human, Recombinant)	90	Alprostadil	6
Pneumococcal Conjugate Vaccine (13-Valent)	94	Ambrisentan	7
Pneumococcal Conjugate Vaccine (20-Valent)	94	Amyl Nitrite	9
Pneumococcal Polysaccharide Vaccine (Polyvalent)	94	Bosentan	17
Poliovirus Vaccine (Inactivated)	94	Cilostazol	27
Rabies Vaccine	100	Dipyridamole	38
Rotavirus Vaccine	103	Epoprostenol	43
Typhoid Vaccine	117	HydRALAZINE	59
Varicella Virus Vaccine	118	Iloprost	62
Yellow Fever Vaccine	121	Isosorbide Dinitrate	67
Zoster Vaccine (Live/Attenuated)	122	Isosorbide Dinitrate and Hydralazine	67
Zoster Vaccine (Recombinant)	122		

VASODILATOR

Isosorbide Mononitrate	67
Isoxsuprine	67
Macitentan	74
Nitroglycerin	86
Nitroprusside	86
Papaverine	90
Selexipag	105
Treprostinil	115
Vasodilator, Direct-Acting	
Diazoxide	36
Minoxidil (Systemic)	81
Vasopressin Analog, Synthetic	
Desmopressin	33
Vasopressin Antagonist	
Conivaptan	30
Tolvaptan	114
Vesicular Monoamine Transporter 2 (VMAT2) Inhibitor	
Deutetrabenazine	34
Tetrabenazine	112
Valbenazine	118
Vitamin	
Folic Acid, Cyanocobalamin, and Pyridoxine	53
Magnesium Carbonate, Calcium Carbonate, and Folic Acid	74
Vitamin B Complex Combinations	119
Vitamins (Multiple/Injectable)	120
Vitamins (Multiple/Oral)	120
Vitamins (Multiple/Pediatric)	120
Vitamins (Multiple/Prenatal)	120
Vitamin D Analog	
Calcipotriene	20
Calcipotriene and Betamethasone	20
Calcitriol (Systemic)	20
Calcitriol (Topical)	20
Cholecalciferol	26
Doxercalciferol	39
Ergocalciferol	43
Paricalcitol	90
Vitamin, Fat Soluble	
Beta-Carotene	16
Calcium and Vitamin D	21
Phytonadione	93
Vitamin A	119
Vitamin A and Vitamin D (Systemic)	119
Vitamin E (Systemic)	120
Vitamin E (Topical)	120
Vitamin, Water Soluble	
Ascorbic Acid	11
Biotin	17
Cyanocobalamin	31
Folic Acid	53
Hydroxocobalamin	61
Leucovorin Calcium	70
Magnesium Carbonate, Calcium Carbonate, and Folic Acid	74
Niacin	85
Niacinamide	85
Potassium P-Aminobenzoate	96
Pyridoxine	100
Riboflavin	102
Thiamine	113
Vitamin B Complex, Ascorbic Acid, and Folic Acid	119
Vitreolytic	
Ocriplasmin	87
Xanthine Oxidase Inhibitor	
Allopurinol	6
Lesinurad and Allopurinol	69