

**CUMULATIVE  
SUPPLEMENT 3  
JAN'96-MAR'96**

ST. LOUIS COLLEGE OF PHARMACY LIBRARY

JUN 11 1996

# **APPROVED DRUG PRODUCTS**

**WITH  
THERAPEUTIC EQUIVALENCE EVALUATIONS**

**16<sup>TH</sup> EDITION**

**U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**PUBLIC HEALTH SERVICE  
FOOD AND DRUG ADMINISTRATION  
CENTER FOR DRUG EVALUATION AND RESEARCH  
OFFICE OF MANAGEMENT  
DIVISION OF DRUG INFORMATION RESOURCES**

1996

RM  
301.45  
.A66  
1996  
Mar 13  
Suppl



RM301.45 .A66 1996 Mar Suppl

Approved drug products with  
therapeutic equivalence

C:355661 M:174736 O:12937927

Prepared By  
Division of Drug Information Resources  
Office of Management  
Center for Drug Evaluation and Research, FDA

1.0  
1.1  
1.2  
1.3  
1.4  
1.5  
1.6  
1.7

2.0  
2.1  
2.2  
2.3

2.4  
2.5

2.6  
2.7

PATEN

APPROVED DRUG PRODUCTS  
with  
THERAPEUTIC EQUIVALENCE EVALUATIONS

16TH EDITION

Cumulative Supplement 3

MARCH 1996

CONTENTS

Library Use Only

	<i>PAGE</i>
1.0 INTRODUCTION . . . . .	iii
1.1 How to Use the Cumulative Supplement . . . . .	iii
1.2 Products Requiring Revised Labeling for Full Approval . . . . .	iv
1.3 Change of a Therapeutic Equivalent Code for a Drug Entity . . . . .	v
1.4 Court Order Regarding Abbott U.S. Patent No. 4112097 (terazosin HCl) . . . . .	vii
1.5 Applicant Name Changes . . . . .	vii
1.6 Availability of the Publication and Updating Procedures . . . . .	viii
1.7 Report of Counts for the Prescription Drug Product List . . . . .	ix
2.0 DRUG PRODUCT LISTS . . . . .	
2.1 Prescription Drug Product List . . . . .	1
2.2 OTC Drug Product List . . . . .	22
2.3 Drug Products with Approval under Section 505 of the Act Administered by the Center for Biologics Evaluation and Research List . . . . .	24
2.4 Orphan Drug Product Designations . . . . .	25
2.5 Drug Products Which Must Demonstrate in vivo Bioavailability Only if Product Fails to Achieve Adequate Dissolution . . . . .	27
2.6 Biopharmaceutic Guidance Availability . . . . .	28
2.7 ANDA Suitability Petitions . . . . .	29
PATENT AND EXCLUSIVITY INFORMATION ADDENDUM	
A. Exclusivity Terms . . . . .	31
B. Patent and Exclusivity Lists . . . . .	32

**APPROVED DRUG PRODUCTS  
with  
THERAPEUTIC EQUIVALENCE EVALUATIONS**

**16TH EDITION**

**CUMULATIVE SUPPLEMENT 3  
MARCH 1996**

**1.0 INTRODUCTION**

**1.1 HOW TO USE THE CUMULATIVE SUPPLEMENT**

This Cumulative Supplement is one of a series of monthly updates to the Approved Drug Products with Therapeutic Equivalence Evaluations, 16th Edition (the List). The List is composed of four parts: approved prescription drug products with therapeutic equivalence evaluations, over-the-counter (OTC) drug products that require approved applications as a condition of marketing, drug products with approval under Section 505 of the Act administered by the Center for Biologics Evaluation and Research and products that have never been marketed, have been discontinued from marketing or that have had their approvals withdrawn for other than safety or efficacy reasons.

The Cumulative Supplement provides, among other things, information on newly approved drugs and, if necessary, revised therapeutic equivalence evaluations and updated patent and exclusivity data. The Addendum contains appropriate drug patent and exclusivity information required of the Agency by the "Drug Price Competition and Patent Term Restoration Act of 1984" for the Prescription, OTC, and Drug Products with Approval under Section 505 of the Act Administered by the Center for Biologics Evaluation and Research Lists.

The Patent and Exclusivity Lists are arranged in alphabetical order by active ingredient name. For those products with multiple active ingredients, only the first active ingredient (in alphabetical sort) will appear. In addition, the trade name will be displayed to the right of the active ingredient name for each product. Also shown is the application number and product number (FDA's internal file number) for reference purposes. All patents with their expiration dates are displayed for each application number. Use patents are indicated with the symbol "U" followed by a number representing a specific use. Exclusivity information for a specific drug is indicated by an abbreviation followed by the date upon which the exclusivity expires. Refer to the Exclusivity Terms section in the Patent and Exclusivity Information Addendum for an explanation of all codes and abbreviations.

Because all parts of the publication are subject to changes, additions, or deletions, the List must be used in conjunction with the most current Cumulative Supplement. Users may wish to place an asterisk (\*) to the left of the ingredient(s) in the List to indicate that changes to that entry appear in the Cumulative Supplement.

Drug product information is provided in each Cumulative Supplement for completeness to assist in locating the proper place in the List for the revision. [Strength(s) which already exist in the List will not be repeated for context.]

The presence of any therapeutic equivalence code indicates that the drug product is multisource; the deletion of a therapeutic equivalence code indicates that the drug product has become single source. (An infrequent exception exists when a therapeutic equivalence code is revised. In that case the deletion of the therapeutic equivalence code is followed immediately by the addition of the revised one.)

Additions new to the Prescription Drug Product List, OTC Drug Product List, and the Patent and Exclusivity Data are indicated by the symbol >ADD> to the left of the line on which new information exists. The >ADD> symbol is then dropped in subsequent Cumulative Supplements for that item.

Deletions new to the Prescription Drug Product List, OTC Drug Product List, and the Patent and Exclusivity Data are indicated by the symbol >DLT> (DELETE) to the left of the line containing shaded print. The >DLT> symbol is dropped in subsequent Cumulative Supplements for that item. The shaded print remains in the Prescription Drug Product List and OTC Drug Product Lists in all Cumulative Supplements for this edition. However, the shaded print in the Patent and Exclusivity Data is dropped in subsequent Cumulative Supplements.

Products that have never been marketed, have been discontinued from marketing or that have had their approvals withdrawn for other than safety or efficacy reasons, will be flagged in this Cumulative Supplement with the "@" symbol to designate their non-marketed status. All products having a "@" symbol in the 12th Cumulative Supplement of the 16th Edition List will then be added to the "Discontinued Drug Product List" appearing in the 17th Edition.

## 1.2 PRODUCTS REQUIRING REVISED LABELING FOR FULL APPROVAL

Drug products in this category (1) initially received approval only on the basis of safety before effectiveness studies were required, or (2) were conditionally approved under the temporary exemption that allowed these products to be marketed while effectiveness studies were being conducted. Listed below are those drugs which are now required to revise their labeling and provide additional information necessary for full approval on

the basis of requirements listed in the Federal Register. As approval is granted by the Agency for a specific product, based on additional information submitted by the applicant, the product will be included in the appropriate Drug Product List.

Products	Federal Register Reference
Nitroglycerin (capsule, controlled release;oral)	SEP 07, 1984 (49 FR 35428)
Nitroglycerin (film, extended release;transdermal*)	JUL 15, 1993 (58 FR 38129)
Nitroglycerin (tablet, controlled release;oral)	SEP 07, 1984 (49 FR 35428)
Nitroglycerin (tablet, controlled release;buccal)	JUL 05, 1985 (50 FR 27688)

\*The Federal Register of July 15, 1993 (58 FR 38129) announced that the FDA was revoking the temporary exemption for nitroglycerin in a transdermal delivery system. Marketing of a drug product that is the subject of a conditionally approved ANDA may continue by meeting the requirements listed in the Federal Register. Firms wishing to submit a new ANDA before a drug product is approved (NDA or ANDA) and appears in the List should submit a 505(b)(2) application following the directions contained in the Federal Register. Nitro-Dur has been selected as the reference listed drug. The preamble to the final rule (57 FR 17958) states if there are multiple NDA's, the reference listed drug generally will be the market leader. This is the basis upon which Nitro-Dur was selected. In addition, the preamble states that, in multiple NDA situations, a product not designated as the reference listed drug and not shown to be bioequivalent to the reference listed drug may be shielded from generic competition. This is the case with Summit's Transderm-Nitro. The Office of Generic Drugs (OGD) has been requested to have a second listed drug as provided for in the Final Rule. OGD has granted this request. Therefore, at the time that Schering's and Summit's supplements are fully approved and their products are entered into the List, we will have two reference listed drugs for the nitroglycerin transdermal systems. Firms may, therefore, elect to conduct bioequivalence studies against either of these products. It is conceivable that a non-referenced listed drug may be fully approved and appear in the List; in this case, the Agency's referenced listed drug will not change and a 505(b)(2) application will be appropriate until the reference listed drugs are fully approved. Once they are fully approved, a 505(j) application will be the appropriate mechanism for an ANDA submission.

### 1.3 CHANGE OF A THERAPEUTIC EQUIVALENT CODE FOR A DRUG ENTITY

#### Proprantheline Bromide

The purpose of this notice is to advise you that the Agency is considering changing the therapeutic equivalence code for proprantheline bromide tablets (PB tablets) as shown in the Agency's publication, *Approved Drug Products with Therapeutic Equivalence Evaluations, 16th Edition*, (Orange Book) from "AA" to "BP". The Agency classified this DESI drug product as not having an actual or potential bioequivalence problem on January 7, 1977 (42 FR 1624). There are five companies that have approved Abbreviated New Drug Applications (ANDA's) for this drug product. The reason for this proposed change is that the Agency has evidence from a well-controlled, *in vivo* bioequivalence

study submitted by Roberts Pharmaceutical Corporation (Roberts), the holder of the approved New Drug Application for Pro-Banthine, that Roxane Laboratories' propantheline bromide tablets, 15mg., that meet the *in vitro* determination of bioequivalence, do not meet the Agency's *in vivo* bioequivalence approval criteria.

The Office of Generic Drugs (OGD) thoroughly examined Roberts' study. The Office of Compliance's Division of Scientific Investigations inspected Roberts' manufacturing facilities and Phoenix's (Roberts' contractor) clinical study records. These activities validated the results of the Roberts' study. OGD concluded that Roxane's PB tablets do not fall entirely within the 80-125% confidence interval for  $C_{max}$  and AUC when compared to Roberts' Pro-Banthine tablets. This failure to fall entirely within 80-125% confidence intervals does not prove that the products are not bioequivalent. It shows that the criteria for bioequivalence required by OGD were not met. To prove that they are not bioequivalent, the entire confidence interval of either  $C_{max}$  or AUC would have to be outside of the 80-125% interval.

Simply stated, the Roberts' study proved neither bioequivalence nor bioinequivalence. This study, however, did raise significant concerns regarding the Agency's original decision to classify PB tablets as "AA" (not having actual or potential bioequivalence problems), and not require an *in vivo* bioequivalence study to support the approval of generic versions. Therefore, the Agency is proposing to change the therapeutic equivalence code from a non-bioequivalence problem drug to a bioequivalence problem drug for PB tablets.

You have 60 days in which to submit written comments about this notice to the Director, Division of Bioequivalence, Office of Generic Drugs, Center for Drug Evaluation and Research, MPN2, HFD-650, 7500 Standish Place, Rockville, MD 20855. After the Agency reviews the comments, it will print its decision in their next Orange Book supplement following the close of the comment period.

If the proposal is enacted, the Agency will require a firm that holds an approved ANDA for this drug product to submit an *in vivo* bioequivalence study in a supplement [under 21 CFR Section 314.70(b)] to OGD within a specific time period. If an *in vivo* bioequivalence study is not submitted, the Agency will proceed to change the therapeutic code from "AA" to "BP". If a firm submits a bioequivalence study, the Agency will review the study and then make a determination regarding the therapeutic equivalence code for that product. An applicant with a pending ANDA will have to amend its application with an *in vivo* bioequivalence study, and a firm submitting a new ANDA must include an *in vivo* study in the application.

A firm wishing to submit written comments to the Agency on this notice, may do so within sixty days from the first of the month following the publication of the monthly supplement. A firm may request a copy of the OGD review of Roberts' *in vivo* bioequivalence study by writing to the Agency's Freedom of Information Office (HFI-35), 5600 Fishers Lane, Rockville, MD 20857.

#### 1.4 COURT ORDER REGARDING ABBOTT U.S. PATENT NO. 4112097, (TERAZOSIN HCL)

On April 9, 1996, the United States District Court for the Northern District of Illinois (Eastern Division) issued an order in the case of *Abbott Labs v. Geneva Pharmaceuticals, Inc.*, directing Abbott to remove U.S. Patent No. 4112097 from the Orange Book. To comply with that order, Abbott has requested that FDA remove patent 4112097 from the Orange Book. The FDA complied with this request in the March 1996 cumulative supplement. On April 9, 1996, Abbott appealed the district court's decision to the U.S. Court of Appeals for the Federal Circuit.

#### 1.5 APPLICANT NAME CHANGES

It is not practical to identify in the Cumulative Supplement each and every product involved when an applicant transfers its entire line of approved drug products to another applicant, or when an applicant changes its name. Therefore, the cumulation of these transfers and name changes will be identified in this section only. Where only partial lines of approved products are transferred between applicants, each approved product involved will appear as an applicant name change entry in the Cumulative Supplement.

It is also not practical to identify each and every product involved when an applicant name is changed to meet internal publication standards (e.g., MSD or Zenith [Former Abbreviated Names] are changed, respectively, to Merck Sharp Dohme or Zenith Labs [New Abbreviated Names]). When this occurs, each product involved (either currently in the Cumulative Supplement or in the following year's edition) will automatically reflect the new abbreviated name. Consequently, it will not appear as an applicant name change entry in the Cumulative Supplement nor will the cumulation of these name changes appear in this section. However, when the applicant name change is one which may not be easily recognized or located in the listing (e.g., White Towne Paulsen [Former Abbreviated Name] is changed to Whiteworth Towne [New Abbreviated Name], the name change will appear in this section and will be identified with an asterisk.

#### APPLICANT NAME CHANGES

FORMER APPLICANT NAME  
(FORMER ABBREVIATED NAME)

NEW APPLICANT NAME  
(NEW ABBREVIATED NAME)

BOEHRINGER MANNHEIM PHARMACEUTICALS CORP  
(BOEHRINGER MANNHEIM)

BOEHRINGER MANNHEIM CORPORATION  
THERAPEUTICS DIVISION  
(BOEHRINGER MANNHEIM)

## APPLICANT NAME CHANGES

FORMER APPLICANT NAME  
(FORMER ABBREVIATED NAME)

NEW APPLICANT NAME  
(NEW ABBREVIATED NAME)

DAVID BULL LABORATORIES PARTY LTD  
(BULL D)

FH FAULDING AND CO LTD  
(FAULDING)  
**THEN CHANGED TO**  
FAULDING PHARMACEUTICAL CO  
(FAULDING)

HOECHST ROUSSEL PHARMACEUTICALS INC  
(HOECHST ROUSSEL)

HOECHST MARION ROUSSEL INC  
(HOECHST MARION RSSL)

SCHWARZ PHARMA KREMERS  
URBAN CO SUB SCHWARZ PHARMA AG  
(SPKU)

SCHWARZ PHARMA INC  
(SCHWARZ PHARMA)

### 1.6 AVAILABILITY OF THE PUBLICATION AND UPDATING PROCEDURES

The *Approved Drug Products with Therapeutic Equivalence Evaluations* (Prescription Drug Products, OTC Drug Products and the Discontinued Drug Product Lists) is now available on diskette, on a quarterly basis, from the National Technical Information Service. The telephone number for the Subscription Department is (703) 487-6430. Written inquiries regarding this subscription may be forwarded to 5285 Port Royal Road Springfield, VA 22161.

The following *Approved Drug Products with Therapeutic Equivalence Evaluations* files are now available on Internet and are updated each October and April: Prescription Drug Product List; OTC Drug Products; Discontinued Drug Products; Prescription and OTC Drug Product Patent and Exclusivity Data; and Appendices. The update in October will include drug products that have been approved through August and the update in April will include drug products that have been approved through December. Additionally, the Patent and Exclusivity Data for the Prescription and OTC Drug Products are updated monthly on Internet. These files may be accessed on the Internet's World Wide Web. FDA's Internet site replaces the Agency's electronic bulletin board and offers more information, in a more user-friendly form. To access the FDA Home Page, use this Uniform Resource Locator (URL): <http://www.fda.gov>. You do not need an Internet connection to reach the FDA Home Page; you can use the free dial-up connection (800) 222-0185. For further assistance, please call (301) 443-4908.

The Prescription Drug Products and OTC Drug Product files will be available on a monthly basis in the near future.

## 1.7 REPORT OF COUNTS FOR THE PRESCRIPTION DRUG PRODUCT LIST

### DESCRIPTION OF REPORT

This report provides summary counts derived from the product information in the Prescription Drug Product List and the current Cumulative Supplement. Products included in the counts are domestically marketed drug products approved for both safety and effectiveness under sections 505 and 507 of the Federal Food, Drug, and Cosmetic Act. Excluded are approved drug products marketed by distributors; those marketed solely abroad; and those now regarded as medical devices, biologics or foods.

The baseline column (Dec 1995) refers to the products in the Prescription Drug Product List. For each three-month period, a column of quarterly data is added which incorporates counts of product activity from the previous quarter(s) with those in the baseline count.

### DEFINITIONS

#### Drug Product

For this report, a drug product is the representation in the Prescription Drug Product List of an active moiety (molecular entity and its salts, esters and derivatives) either as a single ingredient or as a combination product provided in a specific dosage form and strength for a given route of administration with approval for marketing by a firm under a particular generic or trade name.

#### New Molecular Entity

A new molecular entity is considered an active moiety that has not previously been approved (either as the parent compound or as a salt, ester or derivative of the parent compound) in the United States for use in a drug product either as a single ingredient or as part of a combination.

REPORT OF COUNTS FOR THE PRESCRIPTION DRUG PRODUCT LIST

COUNTS CUMULATIVE BY QUARTER

<u>CATEGORIES COUNTED</u>	<u>DEC 1995</u>	<u>MAR 1996</u>	<u>JUN 1996</u>	<u>SEP 1996</u>
DRUG PRODUCTS LISTED	9286			
SINGLE SOURCE	2217 (23.9%)			
MULTISOURCE	7069 (76.1%)			
THERAPEUTICALLY EQUIVALENT	6437 (69.3%)			
NOT THERAPEUTICALLY EQUIVALENT	440 ( 4.7%)			
EXCEPTIONS <sup>1</sup>	192 ( 2.1%)			
NEW MOLECULAR ENTITIES APPROVED	--			
NUMBER OF APPLICANTS	586			

<sup>1</sup>Amino acid-containing products of varying composition (see Introduction, page xvi of the List).



> <u>ADD</u> >	<u>AMITRIPTYLINE HYDROCHLORIDE</u>				
	TABLET; ORAL				
	AMITRIPTYLINE HCL	25MG			
	@ HALSEY				N85922 001
	<u>AMOXICILLIN</u>				
	TABLET, CHEWABLE; ORAL				
	<u>AMOXICILLIN</u>	<u>125MG</u>			N64139 001
	CLONMEL HLTH CARE				JAN 29, 1996
	<u>AB</u>				
	<u>AB</u>	<u>250MG</u>			N64139 002
					JAN 29, 1996
	<u>AMOXICILLIN; CLAVULANATE POTASSIUM</u>				
	TABLET; ORAL				
	AUGMENTIN '875'				
	+ SMITHKLINE BEECHAM	875MG;EQ 125MG BASE			N50720 001
					FEB 13, 1996
	<u>AMPHETAMINE ASPARTATE; AMPHETAMINE SULFATE; DEXTROAMPHETAMINE SACCHARATE; DEXTROAMPHETAMINE SULFATE</u>				
	TABLET; ORAL				
	ADDERALL 10				
	RICHWOOD PHARM	2.5MG;2.5MG;2.5MG			N11522 007
					FEB 13, 1996
	ADDERALL 20				
	+ RICHWOOD PHARM	5MG;5MG;5MG			
	<u>AMPHOTERICIN B</u>				
	SUSPENSION; ORAL				
	FUNGIZONE				
	+ BRISTOL MYERS SQUIBB	100MG/ML			
					N50341 003
> <u>ADD</u> >	<u>AMPICILLIN/AMPICILLIN TRIHYDRATE; PROBENECID</u>				
> <u>ADD</u> >	POWDER FOR RECONSTITUTION; ORAL				
> <u>ADD</u> >	<u>AMPICILLIN-FRE</u>				
> <u>ADD</u> >	@ APOTHECON				
	EQ 3.5GM BASE/BOT;1GM/BOT				N61898 001
	+ BRISTOL MYERS SQUIBB				
	<u>AMPHOTERICIN B</u>				
	SUSPENSION; ORAL				
	FUNGIZONE				
	+ BRISTOL MYERS SQUIBB	100MG/ML			
					N50341 003
	<u>AMPHOTERICIN B</u>				
	SUSPENSION; ORAL				
	FUNGIZONE				
	+ BRISTOL MYERS SQUIBB	100MG/ML			
					N50341 003
	<u>AMPHOTERICIN B</u>				
	SUSPENSION; ORAL				
	FUNGIZONE				
	+ BRISTOL MYERS SQUIBB	100MG/ML			
					N50341 003
	<u>AMPHOTERICIN B</u>				
	SUSPENSION; ORAL				
	FUNGIZONE				
	+ BRISTOL MYERS SQUIBB	100MG/ML			
					N50341 003
	<u>AMPHOTERICIN B</u>				
	SUSPENSION; ORAL				
	FUNGIZONE				
	+ BRISTOL MYERS SQUIBB	100MG/ML			
					N50341 003
	<u>AMPHOTERICIN B</u>				
	SUSPENSION; ORAL				
	FUNGIZONE				
	+ BRISTOL MYERS SQUIBB	100MG/ML			
					N50341 003
	<u>AMPHOTERICIN B</u>				
	SUSPENSION; ORAL				
	FUNGIZONE				
	+ BRISTOL MYERS SQUIBB	100MG/ML			
					N50341 003
	<u>AMPHOTERICIN B</u>				
	SUSPENSION; ORAL				
	FUNGIZONE				
	+ BRISTOL MYERS SQUIBB	100MG/ML			
					N50341 003
	<u>AMPHOTERICIN B</u>				
	SUSPENSION; ORAL				
	FUNGIZONE				
	+ BRISTOL MYERS SQUIBB	100MG/ML			
					N50341 003
	<u>AMPHOTERICIN B</u>				
	SUSPENSION; ORAL				
	FUNGIZONE				
	+ BRISTOL MYERS SQUIBB	100MG/ML			
					N50341 003
	<u>AMPHOTERICIN B</u>				
	SUSPENSION; ORAL				
	FUNGIZONE				
	+ BRISTOL MYERS SQUIBB	100MG/ML			
					N50341 003
	<u>AMPHOTERICIN B</u>				
	SUSPENSION; ORAL				
	FUNGIZONE				
	+ BRISTOL MYERS SQUIBB	100MG/ML			
					N50341 003
	<u>AMPHOTERICIN B</u>				
	SUSPENSION; ORAL				
	FUNGIZONE				
	+ BRISTOL MYERS SQUIBB	100MG/ML			
					N50341 003
	<u>AMPHOTERICIN B</u>				
	SUSPENSION; ORAL				
	FUNGIZONE				
	+ BRISTOL MYERS SQUIBB	100MG/ML			
					N50341 003
	<u>AMPHOTERICIN B</u>				
	SUSPENSION; ORAL				
	FUNGIZONE				
	+ BRISTOL MYERS SQUIBB	100MG/ML			
					N50341 003
	<u>AMPHOTERICIN B</u>				
	SUSPENSION; ORAL				
	FUNGIZONE				
	+ BRISTOL MYERS SQUIBB	100MG/ML			
					N50341 003
	<u>AMPHOTERICIN B</u>				
	SUSPENSION; ORAL				
	FUNGIZONE				
	+ BRISTOL MYERS SQUIBB	100MG/ML			
					N50341 003
	<u>AMPHOTERICIN B</u>				
	SUSPENSION; ORAL				
	FUNGIZONE				
	+ BRISTOL MYERS SQUIBB	100MG/ML			
					N50341 003
	<u>AMPHOTERICIN B</u>				
	SUSPENSION; ORAL				
	FUNGIZONE				
	+ BRISTOL MYERS SQUIBB	100MG/ML			
					N50341 003
	<u>AMPHOTERICIN B</u>				
	SUSPENSION; ORAL				
	FUNGIZONE				
	+ BRISTOL MYERS SQUIBB	100MG/ML			
					N50341 003
	<u>AMPHOTERICIN B</u>				
	SUSPENSION; ORAL				
	FUNGIZONE				
	+ BRISTOL MYERS SQUIBB	100MG/ML			
					N50341 003
	<u>AMPHOTERICIN B</u>				
	SUSPENSION; ORAL				
	FUNGIZONE				
	+ BRISTOL MYERS SQUIBB	100MG/ML			
					N50341 003
	<u>AMPHOTERICIN B</u>				
	SUSPENSION; ORAL				
	FUNGIZONE				
	+ BRISTOL MYERS SQUIBB	100MG/ML			
					N50341 003
	<u>AMPHOTERICIN B</u>				
	SUSPENSION; ORAL				
	FUNGIZONE				
	+ BRISTOL MYERS SQUIBB	100MG/ML			
					N50341 003
	<u>AMPHOTERICIN B</u>				
	SUSPENSION; ORAL				
	FUNGIZONE				
	+ BRISTOL MYERS SQUIBB	100MG/ML			
					N50341 003
	<u>AMPHOTERICIN B</u>				
	SUSPENSION; ORAL				
	FUNGIZONE				
	+ BRISTOL MYERS SQUIBB	100MG/ML			
					N50341 003
	<u>AMPHOTERICIN B</u>				
	SUSPENSION; ORAL				
	FUNGIZONE				
	+ BRISTOL MYERS SQUIBB	100MG/ML			
					N50341 003
	<u>AMPHOTERICIN B</u>				
	SUSPENSION; ORAL				
	FUNGIZONE				
	+ BRISTOL MYERS SQUIBB	100MG/ML			
					N50341 003
	<u>AMPHOTERICIN B</u>				
	SUSPENSION; ORAL				
	FUNGIZONE				
	+ BRISTOL MYERS SQUIBB	100MG/ML			
					N50341 003
	<u>AMPHOTERICIN B</u>				
	SUSPENSION; ORAL				
	FUNGIZONE				
	+ BRISTOL MYERS SQUIBB	100MG/ML			
					N50341 003
	<u>AMPHOTERICIN B</u>				
	SUSPENSION; ORAL				
	FUNGIZONE				
	+ BRISTOL MYERS SQUIBB	100MG/ML			
					N50341 003
	<u>AMPHOTERICIN B</u>				
	SUSPENSION; ORAL				
	FUNGIZONE				
	+ BRISTOL MYERS SQUIBB	100MG/ML			
					N50341 003
	<u>AMPHOTERICIN B</u>				
	SUSPENSION; ORAL				
	FUNGIZONE				
	+ BRISTOL MYERS SQUIBB	100MG/ML			
					N50341 003
	<u>AMPHOTERICIN B</u>				
	SUSPENSION; ORAL				
	FUNGIZONE				
	+ BRISTOL MYERS SQUIBB	100MG/ML			
					N50341 003
	<u>AMPHOTERICIN B</u>				
	SUSPENSION; ORAL				
	FUNGIZONE				
	+ BRISTOL MYERS SQUIBB	100MG/ML			
					N50341 003
	<u>AMPHOTERICIN B</u>				
	SUSPENSION; ORAL				
	FUNGIZONE				
	+ BRISTOL MYERS SQUIBB	100MG/ML			
					N50341 003
	<u>AMPHOTERICIN B</u>				
	SUSPENSION; ORAL				
	FUNGIZONE				
	+ BRISTOL MYERS SQUIBB	100MG/ML			
					N50341 003
	<u>AMPHOTERICIN B</u>				
	SUSPENSION; ORAL				
	FUNGIZONE				
	+ BRISTOL MYERS SQUIBB	100MG/ML			
					N50341 003
	<u>AMPHOTERICIN B</u>				
	SUSPENSION; ORAL				
	FUNGIZONE				
	+ BRISTOL MYERS SQUIBB	100MG/ML			
					N50341 003
	<u>AMPHOTERICIN B</u>				
	SUSPENSION; ORAL				
	FUNGIZONE				
	+ BRISTOL MYERS SQUIBB	100MG/ML			
					N50341 003
	<u>AMPHOTERICIN B</u>				
	SUSPENSION; ORAL				
	FUNGIZONE				
	+ BRISTOL MYERS SQUIBB	100MG/ML			
					N50341 003
	<u>AMPHOTERICIN B</u>				
	SUSPENSION; ORAL				
	FUNGIZONE				
	+ BRISTOL MYERS SQUIBB	100MG/ML			
					N50341 003
	<u>AMPHOTERICIN B</u>				
	SUSPENSION; ORAL				
	FUNGIZONE				
	+ BRISTOL MYERS SQUIBB	100MG/ML			
					N50341 003
	<u>AMPHOTERICIN B</u>				
	SUSPENSION; ORAL				
	FUNGIZONE				
	+ BRISTOL MYERS SQUIBB	100MG/ML			
					N50341 003
	<u>AMPHOTERICIN B</u>				
	SUSPENSION; ORAL				
	FUNGIZONE				
	+ BRISTOL MYERS SQUIBB	100MG/ML			

BUTABARBITAL SODIUM

ELIYIP; ORAL

SARISOL

HALSEY

@

> DLT >  
> DLT >  
> ADD >

30MG/5ML  
30MG/5ML

N84723 001  
N84723 001

TABLET; ORAL

SARISOL NO. 1

HALSEY

@

> DLT >  
> DLT >  
> ADD >

15MG  
15MG

N84719 001  
N84719 001

SARISOL NO. 2

HALSEY

@

> DLT >  
> DLT >  
> ADD >

30MG  
30MG

N84719 002  
N84719 002

CALCIUM CHLORIDE; DEXTROSE; MAGNESIUM CHLORIDE; SODIUM CHLORIDE; SODIUM LACTATE

SOLUTION; INTRAPERITONEAL

DELFLX W/ DEXTROSE 1.5% IN PLASTIC CONTAINER

FRESENIUS

25.7MG/100ML; 1.5GM/100ML;

15.2MG/100ML; 567MG/100ML;

392MG/100ML

N18379 002

AT

AT

DELFLX W/ DEXTROSE 2.5% IN PLASTIC CONTAINER

FRESENIUS

25.7MG/100ML; 2.5GM/100ML;

15.2MG/100ML; 567MG/100ML;

392MG/100ML

N18379 003

AT

AT

DELFLX W/ DEXTROSE 3.5% IN PLASTIC CONTAINER

FRESENIUS

25.7MG/100ML; 3.5GM/100ML;

15.2MG/100ML; 567MG/100ML;

392MG/100ML

N18379 007

JUN 24, 1988

AT

AT

DELFLX W/ DEXTROSE 4.25% IN PLASTIC CONTAINER

FRESENIUS

25.7MG/100ML; 4.25GM/100ML;

15.2MG/100ML; 567MG/100ML;

392MG/100ML

N18379 001

AT

AT

DELFLX-LM W/ DEXTROSE 1.5% IN PLASTIC CONTAINER

FRESENIUS

25.7MG/100ML; 1.5GM/100ML;

5.08MG/100ML; 538MG/100ML;

448MG/100ML

N18379 004

JUL 07, 1982

AT

AT

DELFLX-LM W/ DEXTROSE 2.5% IN PLASTIC CONTAINER

FRESENIUS

25.7MG/100ML; 2.5GM/100ML;

5.08MG/100ML; 538MG/100ML;

448MG/100ML

N18379 005

JUL 07, 1982

AT

AT

CALCIUM CHLORIDE; DEXTROSE; MAGNESIUM CHLORIDE; SODIUM CHLORIDE; SODIUM LACTATE

SOLUTION; INTRAPERITONEAL

DELFLX-LM W/ DEXTROSE 3.5% IN PLASTIC CONTAINER

FRESENIUS

25.7MG/100ML; 3.5GM/100ML;

5.08MG/100ML; 538MG/100ML;

448MG/100ML

N18379 008

JUN 24, 1988

AT

AT

AT

AT

DELFLX-LM W/ DEXTROSE 4.25% IN PLASTIC CONTAINER

FRESENIUS

25.7MG/100ML; 4.25GM/100ML;

5.08MG/100ML; 538MG/100ML;

448MG/100ML

N18379 006

JUL 07, 1982

AT

AT

AT

AT

IMPERSOL W/ DEXTROSE 1.5% IN PLASTIC CONTAINER

FRESENIUS

25.7MG/100ML; 1.5GM/100ML;

15.2MG/100ML; 567MG/100ML;

392MG/100ML

N18379 002

AT

AT

AT

AT

IMPERSOL W/ DEXTROSE 2.5% IN PLASTIC CONTAINER

FRESENIUS

25.7MG/100ML; 2.5GM/100ML;

15.2MG/100ML; 567MG/100ML;

392MG/100ML

N18379 003

AT

AT

AT

AT

IMPERSOL W/ DEXTROSE 3.5% IN PLASTIC CONTAINER

FRESENIUS

25.7MG/100ML; 3.5GM/100ML;

15.2MG/100ML; 567MG/100ML;

392MG/100ML

N18379 007

JUN 24, 1988

AT

AT

AT

AT

IMPERSOL W/ DEXTROSE 4.25% IN PLASTIC CONTAINER

FRESENIUS

25.7MG/100ML; 4.25GM/100ML;

15.2MG/100ML; 567MG/100ML;

392MG/100ML

N18379 001

AT

AT

AT

AT

IMPERSOL-LM W/ DEXTROSE 1.5% IN PLASTIC CONTAINER

FRESENIUS

25.7MG/100ML; 1.5GM/100ML;

5.08MG/100ML; 538MG/100ML;

448MG/100ML

N18379 004

JUL 07, 1982

AT

AT

AT

AT

IMPERSOL-LM W/ DEXTROSE 3.5% IN PLASTIC CONTAINER

FRESENIUS

25.7MG/100ML; 3.5GM/100ML;

5.08MG/100ML; 538MG/100ML;

448MG/100ML

N18379 008

JUN 24, 1988

AT

AT

AT

AT

CALCIUM CHLORIDE; DEXTROSE; MAGNESIUM CHLORIDE; SODIUM CHLORIDE;  
SODIUM LACTATE

SOLUTION; INTRAPERITONEAL

INERSOL-IM W/ DEXTROSE 4.25% IN PLASTIC CONTAINER  
25.7MG/100ML; 4.25GM/100ML;  
FRESENIUS  
5.08MG/100ML; 5.08GM/100ML;  
448MG/100ML

N18379 066  
JUL 07, 1982

CAPTOPRIL

TABLET; ORAL  
CAPTOPRIL  
BIOCRAFT

<u>AB</u>	<u>12.5MG</u>	N74433 001
<u>AB</u>	<u>25MG</u>	FEB 13, 1996
<u>AB</u>	<u>50MG</u>	N74433 002
<u>AB</u>	<u>100MG</u>	FEB 13, 1996
<u>AB</u>	<u>12.5MG</u>	N74433 003
<u>AB</u>	<u>25MG</u>	FEB 13, 1996
<u>AB</u>	<u>50MG</u>	N74462 001
<u>AB</u>	<u>100MG</u>	FEB 13, 1996
<u>AB</u>	<u>12.5MG</u>	N74462 002
<u>AB</u>	<u>25MG</u>	FEB 13, 1996
<u>AB</u>	<u>50MG</u>	N74462 003
<u>AB</u>	<u>100MG</u>	FEB 13, 1996
<u>AB</u>	<u>12.5MG</u>	N74418 001
<u>AB</u>	<u>25MG</u>	FEB 13, 1996
<u>AB</u>	<u>50MG</u>	N74418 002
<u>AB</u>	<u>100MG</u>	FEB 13, 1996
<u>AB</u>	<u>12.5MG</u>	N74418 003
<u>AB</u>	<u>25MG</u>	FEB 13, 1996
<u>AB</u>	<u>50MG</u>	N74418 004
<u>AB</u>	<u>100MG</u>	FEB 13, 1996
<u>AB</u>	<u>12.5MG</u>	N74519 001
<u>AB</u>	<u>25MG</u>	FEB 13, 1996
<u>AB</u>	<u>50MG</u>	N74519 002
<u>AB</u>	<u>100MG</u>	FEB 13, 1996
<u>AB</u>	<u>12.5MG</u>	N74519 003
<u>AB</u>	<u>25MG</u>	FEB 13, 1996
<u>AB</u>	<u>50MG</u>	N74519 004
<u>AB</u>	<u>100MG</u>	FEB 13, 1996
<u>AB</u>	<u>12.5MG</u>	N74477 001
<u>AB</u>	<u>25MG</u>	FEB 13, 1996

HALLMARK PHARMS

CAPTOPRIL

TABLET; ORAL  
CAPTOPRIL  
HALLMARK PHARMS

<u>AB</u>	<u>25MG</u>	N74477 002
<u>AB</u>	<u>50MG</u>	FEB 13, 1996
<u>AB</u>	<u>100MG</u>	N74477 003
<u>AB</u>	<u>12.5MG</u>	FEB 13, 1996
<u>AB</u>	<u>25MG</u>	N74481 001
<u>AB</u>	<u>50MG</u>	FEB 13, 1996
<u>AB</u>	<u>100MG</u>	N74481 002
<u>AB</u>	<u>12.5MG</u>	FEB 13, 1996
<u>AB</u>	<u>25MG</u>	N74481 003
<u>AB</u>	<u>50MG</u>	FEB 13, 1996
<u>AB</u>	<u>100MG</u>	N74481 004
<u>AB</u>	<u>12.5MG</u>	FEB 13, 1996
<u>AB</u>	<u>25MG</u>	N74483 001
<u>AB</u>	<u>50MG</u>	FEB 13, 1996
<u>AB</u>	<u>100MG</u>	N74483 002
<u>AB</u>	<u>12.5MG</u>	FEB 13, 1996
<u>AB</u>	<u>25MG</u>	N74483 003
<u>AB</u>	<u>50MG</u>	FEB 13, 1996
<u>AB</u>	<u>100MG</u>	N74483 004
<u>AB</u>	<u>12.5MG</u>	FEB 13, 1996
<u>AB</u>	<u>25MG</u>	N74423 001
<u>AB</u>	<u>50MG</u>	FEB 13, 1996
<u>AB</u>	<u>100MG</u>	N74423 002
<u>AB</u>	<u>12.5MG</u>	FEB 13, 1996
<u>AB</u>	<u>25MG</u>	N74423 003
<u>AB</u>	<u>50MG</u>	FEB 13, 1996
<u>AB</u>	<u>100MG</u>	N74423 004
<u>AB</u>	<u>12.5MG</u>	FEB 13, 1996
<u>AB</u>	<u>25MG</u>	N74434 001
<u>AB</u>	<u>50MG</u>	FEB 13, 1996
<u>AB</u>	<u>100MG</u>	N74434 002
<u>AB</u>	<u>12.5MG</u>	FEB 13, 1996
<u>AB</u>	<u>25MG</u>	N74434 003
<u>AB</u>	<u>50MG</u>	FEB 13, 1996
<u>AB</u>	<u>100MG</u>	N74434 004
<u>AB</u>	<u>12.5MG</u>	FEB 13, 1996
<u>AB</u>	<u>25MG</u>	N74322 001
<u>AB</u>	<u>50MG</u>	FEB 13, 1996
<u>AB</u>	<u>100MG</u>	N74322 002
<u>AB</u>	<u>12.5MG</u>	FEB 13, 1996
<u>AB</u>	<u>25MG</u>	N74322 003
<u>AB</u>	<u>50MG</u>	FEB 13, 1996

NOVOPHARM

MYLAN

MOVA

LEMMON

INVAMED

CAPTOPRIL

TABLET; ORAL  
CAPTOPRIL  
NOVOPHARM

AB 100MG  
AB 12.5MG  
AB 25MG  
AB 50MG  
AB 100MG  
AB 12.5MG  
AB 25MG  
AB 50MG  
AB 100MG  
AB 12.5MG  
AB 25MG  
AB 50MG  
AB 100MG

N74322 004  
FEB 13, 1996  
N74493 001  
FEB 13, 1996  
N74493 002  
FEB 13, 1996  
N74493 003  
FEB 13, 1996  
N74493 004  
FEB 13, 1996  
N74451 001  
FEB 13, 1996  
N74451 002  
FEB 13, 1996  
N74451 003  
FEB 13, 1996  
N74451 004  
FEB 13, 1996  
N74505 001  
FEB 13, 1996  
N74505 002  
FEB 13, 1996  
N74505 003  
FEB 13, 1996  
N74505 004  
FEB 13, 1996

ROYCE LABS

WESTWARD PHARM

CARBAMAZEPINE

TABLET, EXTENDED RELEASE; ORAL  
TEGRETOL-XR  
+ CIBA GEIGY

> ADD >  
> ADD >

N20234 001  
MAR 25, 1996  
N20234 002  
MAR 25, 1996  
N20234 003  
MAR 25, 1996

CARISOPRODOL

TABLET; ORAL  
CARISOPRODOL  
WEST WARD PHARM

AA 350MG

N40124 001  
JAN 24, 1996

CEFAZOLIN SODIUM

INJECTABLE; INJECTION  
ANCEP IN DEXTROSE 5% IN PLASTIC CONTAINER  
\* BAXTER

> DLT >  
> ADD >  
> ADD >  
> ADD >

N50566 003  
JUN 08, 1983  
N50566 004  
JUN 08, 1983  
N50566 003  
JUN 08, 1983  
N50566 004  
JUN 08, 1983

EQ 10MG BASE/ML  
EQ 20MG BASE/ML  
EQ 10MG BASE/ML  
EQ 20MG BASE/ML

CEFEPIME HYDROCHLORIDE (ARGININE FORMULATION)

INJECTABLE; INJECTION  
MAXIPIME  
+ BRISTOL MYERS SQUIBB EQ 500MG BASE/VIAL  
+ EQ 1GM BASE/VIAL  
+ EQ 2GM BASE/VIAL

N50679 001  
JAN 18, 1996  
N50679 002  
JAN 18, 1996  
N50679 003  
JAN 18, 1996

CHLORDIAZEPOXIDE HYDROCHLORIDE

CAPSULE; ORAL  
CHLORDIAZEPOXIDE HCL  
HALSEY

> DLT >  
> DLT >  
> DLT >  
> ADD >  
> ADD >  
> ADD >

N85340 001  
N85339 001  
N84685 001  
N85340 001  
N85339 001  
N84685 001

5MG  
10MG  
25MG  
5MG  
10MG  
25MG

CHLORPROPAMIDE

TABLET; ORAL  
CHLORPROPAMIDE  
BARR

> DLT >  
> DLT >  
> DLT >  
> DLT >  
> DLT >

N88812 001  
OCT 19, 1984  
N89446 001  
NOV 17, 1986  
N88813 001  
OCT 19, 1984

100MG  
100MG  
250MG

CHLORPROPAMIDE

TABLET; ORAL  
CHLORPROPAMIDE

> DLT > AB 250MG N89447 001  
> DLT > BAER 100MG NOV 17, 1986  
> ADD > @ 100MG N88812 001  
> ADD > @ 100MG OCT 19, 1984  
> ADD > @ 250MG N89446 001  
> ADD > @ 250MG NOV 17, 1986  
> ADD > @ 250MG N88813 001  
> ADD > @ 250MG OCT 19, 1984  
> ADD > @ 250MG N89447 001  
> DLT > AB 100MG N89321 001  
> DLT > AB 250MG NOV 17, 1986  
> DLT > AB 250MG JAN 16, 1986  
> DLT > AB 250MG N88662 001  
> DLT > AB 100MG JAN 09, 1986  
> ADD > @ 250MG N89321 001  
> ADD > @ 250MG JAN 16, 1986  
> ADD > @ 250MG N88662 001  
> DLT > AB 250MG N88695 001  
> DLT > AB 250MG SEP 17, 1984  
> ADD > @ 250MG N88695 001  
> ADD > @ 250MG SEP 17, 1984

CHOLESTYRAMINE

POWDER; ORAL  
QUESTRAN LIGHT

> ADD > AB EQ 4GM RESIN/PACKET N19669 001  
> ADD > AB EQ 4GM RESIN/SCOOPFUL DEC 05, 1988  
> ADD > AB EQ 4GM RESIN/SCOOPFUL N19669 003  
> ADD > AB EQ 4GM RESIN/SCOOPFUL DEC 05, 1988  
  
CHROMIC CHLORIDE  
  
INJECTABLE; INJECTION  
CHROMIC CHLORIDE  
FUJISAWA  
@  
EQ 0.004MG CHROMIUM/ML N19271 001  
EQ 0.004MG CHROMIUM/ML MAY 05, 1987  
EQ 0.004MG CHROMIUM/ML N19271 001  
EQ 0.004MG CHROMIUM/ML MAY 05, 1987  
  
CHROMIC CHLORIDE IN PLASTIC CONTAINER  
ABBOTT  
+  
EQ 0.004MG CHROMIUM/ML N18961 001  
EQ 0.004MG CHROMIUM/ML JUN 26, 1986  
EQ 0.004MG CHROMIUM/ML N18961 001  
EQ 0.004MG CHROMIUM/ML JUN 26, 1986

CHLORTHALIDONE

TABLET; ORAL  
CHLORTHALIDONE

> DLT > AB 50MG N87247 001  
> DLT > AB 50MG FEB 09, 1983  
> ADD > @ 50MG N87247 001  
> ADD > @ 50MG FEB 09, 1983

CIMETIDINE

TABLET; ORAL  
CIMETIDINE

AB 800MG DANBURY PHARMA N74316 001  
AB 200MG INVAMED FEB 28, 1996  
AB 300MG INVAMED N74506 001  
AB 400MG INVAMED JAN 24, 1996  
AB 800MG INVAMED N74506 002  
AB 800MG INVAMED JAN 24, 1996  
AB 800MG INVAMED N74506 003  
AB 800MG INVAMED JAN 24, 1996  
AB 800MG INVAMED N74506 004  
AB 800MG INVAMED JAN 24, 1996

CHOLESTYRAMINE

POWDER; ORAL  
PREVALITE

> DLT > AB EQ 4GM RESIN/PACKET N73263 001  
> DLT > AB EQ 4GM RESIN/PACKET FEB 22, 1996  
> ADD > AB EQ 4GM RESIN/PACKET N16640 001  
> ADD > AB EQ 4GM RESIN/SCOOPFUL N16640 003  
> DLT > AB EQ 4GM RESIN/PACKET N19669 001  
> DLT > AB EQ 4GM RESIN/PACKET DEC 05, 1988

CLOBETASOL PROPIONATE

OINTMENT; TOPICAL  
CLOBETASOL PROPIONATE

AB 0.05% FOUGERA N74407 001  
AB 0.05% FOUGERA FEB 23, 1996

CLOMIPRAMINE HYDROCHLORIDE

CAPSULE; ORAL

ANAFRANIL  
CIBA GEIGY

25MG  
50MG  
75MG

N19906 001  
DEC 29, 1989  
N19906 002  
DEC 29, 1989  
N19906 003  
DEC 29, 1989

> ADD >  
> ADD >  
> ADD >  
> DLT >  
> DLT >  
> DLT >

AT

OINTMENT; OPHTHALMIC  
DEXACIDIN  
CIBA

0.1% EQ 3.5MG BASE/GM;  
10,000 UNITS/GM

N62566 001  
FEB 22, 1985

AT

YOLAB

0.1% EQ 3.5MG BASE/GM;  
10,000 UNITS/GM

N62566 001  
FEB 22, 1985

CLOMIPRAMINE HCL  
GENEVA PHARMS

25MG  
50MG  
75MG

N74364 001  
MAR 29, 1996  
N74364 002  
MAR 29, 1996  
N74364 003  
MAR 29, 1996

> ADD >  
> ADD >  
> ADD >  
> DLT >  
> DLT >  
> DLT >

AT

SUSPENSION/DROPS; OPHTHALMIC  
DEXACIDIN  
CIBA

0.1% EQ 3.5MG BASE/ML;  
10,000 UNITS/ML

N62544 001  
OCT 29, 1984

AT

YOLAB

0.1% EQ 3.5MG BASE/ML;  
10,000 UNITS/ML

N62544 001  
OCT 29, 1984

CROMOLYN SODIUM

CONCENTRATE; ORAL  
GASTROCROM  
+ FISON

100MG/5ML

N20479 001  
FEB 29, 1996

> ADD >  
> ADD >

AA

TABLET; ORAL  
DEXTROAMPHETAMINE SULFATE  
HALSEY

10MG  
10MG  
5MG  
5MG  
10MG  
10MG

N83930 001  
N83930 001  
N86521 001  
N86521 001  
N86521 001  
N84051 002  
N84051 002

DALTEPARIN SODIUM

INJECTABLE; INJECTION  
FRAGMIN  
+ PHARMACIA

5,000 IU/0.2ML

N20287 003  
MAR 18, 1996

> ADD >  
> ADD >

AA

DICLOFENAC SODIUM

TABLET, DELAYED RELEASE; ORAL  
DICLOFENAC SODIUM  
PUREPAC PHARM

N74514 001  
MAR 26, 1996  
N74514 002  
MAR 26, 1996

DESIPRAMINE HYDROCHLORIDE

TABLET; ORAL  
DESIPRAMINE HCL  
EON LABS

10MG  
150MG

N74430 001  
FEB 09, 1996  
N74430 002  
FEB 09, 1996

> ADD >  
> ADD >  
> ADD >  
> ADD >

AB

TABLET, EXTENDED RELEASE; ORAL  
VOLTAREN-XR  
+ GEIGY

100MG

N20254 001  
MAR 08, 1996

DICYCLOMINE HYDROCHLORIDE

CAPSULE; ORAL  
DICYCLOMINE HCL  
 LANNETT

10MG

N84285 001

> DLT >  
 > DLT >  
 > ADD >  
 > ADD >

DOXYCYCLINE HYCLATE

TABLET; ORAL  
DOXYCYCLINE HYCLATE  
 SUPERPHARM

EQ 100MG BASE  
 EQ 100MG BASE

N62494 001  
 FEB 20, 1985  
 N62494 001  
 FEB 20, 1985

DILTIAZEM HYDROCHLORIDE

INJECTABLE; INJECTION  
 CARDIZEM

5MG/ML

N20027 001  
 OCT 24, 1991

EDROPHONIUM CHLORIDE  
 INJECTABLE; INJECTION  
 EDROPHONIUM CHLORIDE

10MG/ML

N40044 001  
 MAR 20, 1996

AP + HOECHST MARION RSSL

5MG/ML

N74617 001  
 FEB 28, 1996

EDROPHONIUM CHLORIDE PRESERVATIVE FREE

10MG/ML

N40043 001  
 MAR 20, 1996

AP

5MG/ML

N74617 001  
 FEB 28, 1996

TENSILON PRESERVATIVE FREE

10MG/ML

N07959 002

DIPHENHYDRAMINE HYDROCHLORIDE

CAPSULE; ORAL  
DIPHENHYDRAMINE HCL  
 HALSEY

50MG

N87914 001  
 JUN 04, 1984  
 N87914 001  
 JUN 04, 1984

EPINEPHRINE; LIDOCAINE HYDROCHLORIDE  
 INJECTABLE; INJECTION  
 LIDOCAINE HCL W/ EPINEPHRINE

EQ 0.01MG/ML; 1%  
 0.01MG/ML; 1%

N83154 001  
 N83154 001

> DLT >  
 > DLT >  
 > ADD >  
 > ADD >

ELIXIR; ORAL

BELIX  
 HALSEY

12.5MG/5ML

N86586 001  
 OCT 03, 1983  
 N86586 001  
 OCT 03, 1983

ERYTHROMYCIN LACTOBIONATE  
 INJECTABLE; INJECTION

EQ 500MG BASE/VIAL  
EQ 1GM BASE/VIAL  
 EQ 500MG BASE/VIAL  
 EQ 1GM BASE/VIAL

N62586 001  
 JAN 04, 1988  
 N62586 002  
 JAN 04, 1988  
 N62586 001  
 JAN 04, 1988  
 N62586 002  
 JAN 04, 1988

> DLT >  
 > DLT >  
 > ADD >  
 > ADD >

DISOPYRAMIDE PHOSPHATE

CAPSULE, EXTENDED RELEASE; ORAL  
 DISOPYRAMIDE PHOSPHATE  
 KY PHARM

EQ 100MG BASE

N71929 001  
 AUG 19, 1988  
 N71929 001  
 AUG 19, 1988

ERYTHROCIN  
 INJECTABLE; INJECTION

EQ 100MG BASE  
 EQ 100MG BASE

N18655 001

> DLT >  
 > DLT >  
 > ADD >  
 > ADD >

NORPACE CR  
 SEARLE

EQ 100MG BASE

N18655 001  
 JUL 20, 1982  
 N18655 001  
 JUL 20, 1982

ERYTHROCIN  
 INJECTABLE; INJECTION

EQ 100MG BASE  
 EQ 100MG BASE

N18655 001



FUROSEMIDE  
 TABLET; ORAL  
FUROSEMIDE  
SUPERPHARM  
 AB > ADD > N18370 002  
 > DLT > JUN 26, 1984  
 > DLT > N18370 001  
 > DLT > FEB 10, 1983  
 > ADD > N18370 002  
 > ADD > JUN 26, 1984  
 > ADD > N18370 001  
 > ADD > FEB 10, 1983  
 > ADD > N18370 002  
 > ADD > JUN 26, 1984  
 > ADD > N18370 001  
 > ADD > FEB 10, 1983  
 > ADD > N18413 001  
 > ADD > NOV 30, 1983  
 > ADD > N18413 002  
 > ADD > NOV 30, 1983  
 > DLT > N18413 001  
 > DLT > NOV 30, 1983  
 > DLT > N18413 002  
 > DLT > NOV 30, 1983

GLIPIZIDE  
 TABLET; ORAL  
GLIPIZIDE  
NOVOPHARM  
 AB > ADD > N18370 002  
 > DLT > JUN 26, 1984  
 > DLT > N18370 001  
 > DLT > FEB 10, 1983  
 > ADD > N18370 002  
 > ADD > JUN 26, 1984  
 > ADD > N18370 001  
 > ADD > FEB 10, 1983  
 > ADD > N18413 001  
 > ADD > NOV 30, 1983  
 > ADD > N18413 002  
 > ADD > NOV 30, 1983  
 > DLT > N18413 001  
 > DLT > NOV 30, 1983  
 > DLT > N18413 002  
 > DLT > NOV 30, 1983

GLYBURIDE  
 TABLET; ORAL  
GLYNASE  
BYEJOHN  
 AB > ADD > N20051 002  
 > DLT > MAR 04, 1992  
 > DLT > N20051 002  
 > DLT > MAR 04, 1992  
 > DLT > N20051 004  
 > DLT > SEP 24, 1993  
 > DLT > N20051 004  
 > DLT > SEP 24, 1993

GANCICLOVIR  
 IMPLANT; IMPLANTATION  
 VITRASERT  
 + CHIRON VISION  
 4.5-6.4MG  
 N20569 001  
 MAR 04, 1996

GENTAMICIN SULFATE  
 OINTMENT; OPHTHALMIC  
GENTACIDIN  
 CIBA  
 AT > ADD > N62501 001  
 > ADD > JUL 26, 1984  
 > DLT > N62501 001  
 > DLT > JUL 26, 1984

GENTAMICIN SULFATE  
 SOLUTION/DROPS; OPHTHALMIC  
GENTACIDIN  
 CIBA  
 AT > ADD > N62480 001  
 > ADD > MAR 30, 1984  
 > DLT > N62480 001  
 > DLT > MAR 30, 1984

GOSERELIN ACETATE  
 IMPLANT; IMPLANTATION  
 ZOLADEX  
 + ZENECA  
 EQ 10.8MG BASE  
 N20578 001  
 JAN 11, 1996

GRAMICIDIN, NEOMYCIN SULFATE, POLYMYXIN B SULFATE  
 SOLUTION/DROPS; OPHTHALMIC  
NEOMYCIN AND POLYMYXIN B SULFATES AND GRAMICIDIN  
 AT > ADD > N64047 001  
 > ADD > JUL 26, 1984  
 > DLT > N64047 001  
 > DLT > JUL 26, 1984

HALOPERIDOL DECANOATE  
 INJECTABLE; INJECTION  
 HALDOL DECANOATE 100  
 + JOHNSON RW  
 EQ 100MG BASE/ML  
 N18701 002  
 OCT 31, 1989

HYDRALAZINE HYDROCHLORIDE

TABLET; ORAL  
HYDRALAZINE HCL  
HALEXY

> DLT >  
 > DLT >  
 > ADD >  
 > ADD >

N89218 001  
 JAN 22, 1986  
N89218 001  
 JAN 22, 1986

TABLET; ORAL  
METHYLDOPA AND HYDROCHLOROTHIAZIDE  
 @ PARKE DAVIS 25MG;250MG  
 @ 30MG;500MG  
 @ 50MG;500MG

N71898 001  
 NOV 23, 1987  
 N71899 001  
 NOV 23, 1987  
 N71900 001  
 NOV 23, 1987

HYDROCHLOROTHIAZIDE

TABLET; ORAL  
HYDRO-D  
HALEXY

> DLT >  
 > DLT >  
 > DLT >  
 > ADD >  
 > ADD >

N86504 001  
N83891 002  
 N86504 001  
 N83891 002

TABLET; ORAL  
TRIAMTERENE AND HYDROCHLOROTHIAZIDE  
 @ SIDMAK LABS NJ 50MG;75MG

N73467 001  
 JAN 31, 1996

HYDROCHLOROTHIAZIDE

BARR  
 @ SUPERPHARM

> DLT >  
 > ADD >  
 > DLT >  
 > ADD >

N84771 001  
 N84771 001  
N88827 001  
 DEC 28, 1984  
N88828 001  
 DEC 28, 1984  
N88829 001  
 DEC 28, 1984  
 N88827 001  
 DEC 28, 1984  
 N88828 001  
 DEC 28, 1984  
 N88829 001  
 DEC 28, 1984

HYDROCORTISONE

CREAM; TOPICAL  
HYDROCORTISONE  
AMBIIX

@  
 @

1%  
 2.5%  
 1%  
 2.5%

N86080 001  
 N86271 001  
 N86080 001  
 N86271 001

ointment; TOPICAL  
HYDROCORTISONE  
AMBIIX

@  
 @

1%  
 2.5%  
 1%  
 2.5%

N86079 001  
 N86272 001  
 N86079 001  
 N86272 001

HYDROCHLOROTHIAZIDE; METHYLDOPA

TABLET; ORAL  
METHYLDOPA AND HYDROCHLOROTHIAZIDE  
 @ PARKE DAVIS 15MG;250MG

> DLT >  
 > DLT >

N71897 001  
 NOV 23, 1987  
N71898 001  
 NOV 23, 1987  
N71899 001  
 NOV 23, 1987  
N71900 001  
 NOV 23, 1987  
 N71897 001  
 NOV 23, 1987

HYDROCORTISONE SODIUM SUCCINATE

INJECTABLE; INJECTION  
A-HYDROCORT  
ABBOTT

@

EQ 100MG BASE/VIAL  
 EQ 100MG BASE/VIAL

N85928 001  
 N85928 001

N88217 001  
 JUN 06, 1984  
 N88217 001  
 JUN 06, 1984





LINDANE

CREAM; TOPICAL

KWELL

\* REED AND CARNRICK

1%  
1%  
1%  
1%

> DLT >  
> DLT >  
> ADD >  
> ADD >

N06309 001  
N84218 001  
N06309 001  
N84218 001

LORAZEPAM

TABLET; ORAL

LORAZEPAM

@ SUPERPHARM

1MG  
2MG

N71246 001  
FEB 09, 1987  
N71247 001  
FEB 09, 1987

LOTION; TOPICAL

KWELL

\* REED AND CARNRICK

1%  
1%  
1%  
1%

> DLT >  
> DLT >  
> ADD >  
> ADD >

N06309 003  
N84218 002  
N84218 002  
N06309 003

MANGANESE SULFATE

INJECTABLE; INJECTION

MANGANESE SULFATE

FUJISAWA

EQ 0.1MG MANGANESE/ML  
EQ 0.1MG MANGANESE/ML

N19228 001  
MAY 05, 1987  
N19228 001  
MAY 05, 1987

SHAMPOO; TOPICAL

KWELL

\* REED AND CARNRICK

1%  
1%  
1%  
1%

> DLT >  
> DLT >  
> ADD >  
> ADD >

N10718 001  
N84219 001  
N84219 001  
N10718 001

MECLOFENAMATE SODIUM

CAPSULE; ORAL

MECLOFENAMATE SODIUM

BARR

EQ 50MG BASE  
EQ 100MG BASE

N72848 001  
MAR 20, 1989  
N72809 001  
MAR 20, 1989  
N72848 001  
MAR 20, 1989  
N72809 001  
MAR 20, 1989

LORAZEPAM

TABLET; ORAL

LORAZEPAM

HALSEY

0.5MG  
1MG  
2MG  
0.5MG

> DLT >  
> DLT >  
> DLT >  
> DLT >  
> ADD >  
> ADD >  
> ADD >  
> ADD >

N71434 001  
SEP 01, 1987  
N71435 001  
SEP 01, 1987  
N71436 001  
SEP 01, 1987  
N71434 001  
SEP 01, 1987  
N71435 001  
SEP 01, 1987  
N71436 001  
SEP 01, 1987

TABLET; ORAL

MEPROBAMATE

BARR

600MG  
600MG

N84230 001  
N84230 001

CONCENTRATE; ORAL

METHADONE

MALLINCKRODT

1.0MG/ML  
1.0MG/ML

> DLT >  
> DLT >  
> DLT >  
> DLT >  
> ADD >  
> ADD >

N17116 001  
FEB 09, 1987  
N17116 002  
FEB 09, 1987

METHYLDOPA

TABLET; ORAL

METHYLDOPA

HALSEY

500MG

N71753 001

> ADD >

500MG

MAR 28, 1988

> ADD >

500MG

N71753 001

> ADD >

125MG

MAR 28, 1988

> ADD >

250MG

DEC 05, 1986

> ADD >

500MG

DEC 05, 1986

> DLT >

125MG

N71105 001

> DLT >

250MG

DEC 05, 1986

> DLT >

500MG

N71067 001

> DLT >

125MG

N71105 001

> DLT >

250MG

DEC 05, 1986

> DLT >

500MG

N71067 001

> DLT >

METOCLOPRAMIDE HYDROCHLORIDE

TABLET; ORAL

METOCLOPRAMIDE HCL

HALSEY

EQ 10MG BASE

N70906 001

> DLT >

EQ 10MG BASE

OCT 28, 1986

> DLT >

EQ 10MG BASE

FEB 02, 1987

> ADD >

EQ 10MG BASE

N70598 001

> ADD >

EQ 10MG BASE

FEB 02, 1987

> DLT >

EQ 10MG BASE

N70598 001

> DLT >

EQ 10MG BASE

FEB 02, 1987

> ADD >

EQ 10MG BASE

N70926 001

> ADD >

EQ 10MG BASE

JUN 26, 1987

> ADD >

EQ 10MG BASE

N70926 001

> ADD >

EQ 10MG BASE

JUN 26, 1987

> ADD >

METRONIDAZOLE

TABLET; ORAL

METRONIDAZOLE

HALSEY

250MG

N70021 001

> DLT >

250MG

APR 02, 1985

> DLT >

500MG

N70593 001

> DLT >

500MG

FEB 27, 1986

> DLT >

METRONIDAZOLE

TABLET; ORAL

METRONIDAZOLE

@ HALSEY

250MG

N70021 001

500MG

APR 02, 1985

250MG

N70593 001

500MG

FEB 27, 1986

250MG

N18517 001

500MG

N18517 002

250MG

MAY 05, 1982

500MG

N18517 001

500MG

N18517 002

500MG

MAY 05, 1982

MINOXIDIL

SOLUTION; TOPICAL

ROGAINE

\* UFGJOHN

2%

N19501 001

AUG 17, 1988

NADOLOL

TABLET; ORAL

NADOLOL

80MG

N74255 001

120MG

JAN 24, 1996

160MG

N74255 002

160MG

JAN 24, 1996

160MG

N74255 003

160MG

JAN 24, 1996

NAPROXEN SODIUM

TABLET, EXTENDED RELEASE; ORAL

NAPRELAN

+ ELAN PHARM

EQ 375MG BASE

N20353 001

EQ 500MG BASE

JAN 05, 1996

EQ 750MG BASE

N20353 002

EQ 750MG BASE

JAN 05, 1996

EQ 750MG BASE

N20353 003

EQ 750MG BASE

JAN 05, 1996

NICOTINE

> ADD >  
> ADD >  
> ADD >  
> ADD >

SPRAY, METERED; NASAL  
NICOTROL  
+ PHARMACIA

0.5MG/INH  
N20385 001  
MAR 22, 1996

NICOTINE POLACRILEX

GUM, CHEWING; BUCCAL  
NICORETTE  
+ SMITHKLINE BEECHAM  
NICORETTE DS  
+ SMITHKLINE BEECHAM

EQ 2MG BASE  
N18612 001  
JAN 13, 1984  
EQ 4MG BASE  
N20066 001  
JUN 08, 1992

NITROFURAZONE

OINTMENT; TOPICAL  
NITROFURAZONE  
AMBIX  
@

0.2%  
0.2%  
N86077 001  
N86077 001

NITROGLYCERIN

FILM, EXTENDED RELEASE; TRANSDERMAL  
NITRO-DUR  
BX + KEY PHARMS  
BX +  
BX +  
BX +  
BX +  
BX +

0.1MG/HR  
0.2MG/HR  
0.4MG/HR  
0.6MG/HR  
0.8MG/HR  
N20145 001  
APR 04, 1995  
N20145 002  
APR 04, 1995  
N20145 004  
APR 04, 1995  
N20145 005  
APR 04, 1995  
N20145 006  
APR 04, 1995

TRANSDERM-NITRO  
CIBA

0.1MG/HR  
0.2MG/HR  
0.4MG/HR  
N20144 001  
FEB 27, 1996  
N20144 002  
FEB 27, 1996  
N20144 003  
FEB 27, 1996

NITROGLYCERIN

FILM, EXTENDED RELEASE; TRANSDERMAL  
TRANSDERM-NITRO

BX CIBA 0.6MG/HR N20144 004  
FEB 27, 1996  
BX 0.8MG/HR N20144 005  
FEB 27, 1996

NYSTATIN; TRIAMCINOLONE ACETONIDE

CREAM; TOPICAL  
MYCOLOG-II  
AT \* APOTHECON

> DLT >  
> DLT >  
> ADD >  
> ADD >

100,000 UNITS/GM; 0.1%  
100,000 UNITS/GM; 0.1%  
N60576 002  
MAY 01, 1985  
N60576 002  
MAY 01, 1985

OXYBUTYRIN CHLORIDE

SYRUP; ORAL  
DITROFAN  
+ HOECHST MARION RSSL  
OXYBUTYRIN CHLORIDE  
SILARX

> ADD >  
> ADD >  
> ADD >  
> ADD >

5MG/5ML N18211 001  
5MG/5ML N74520 001  
MAR 29, 1996

PENTAMIDINE ISETHIONATE

POWDER FOR RECONSTITUTION; INHALATION  
NEBUPENT  
FUJISAWA

> ADD >  
> ADD >

600MG/VIAL N19887 002  
MAR 22, 1996

PENTOBARBITAL SODIUM

CAPSULE; ORAL  
SODIUM PENTOBARBITAL  
HAISEX  
@

> DLT >  
> ADD >

100MG N84677 001  
100MG N84677 001

PERINDOPRIL ERBUMINE

TABLET; ORAL  
ACEON  
AMERIC

2MG  
4MG  
8MG

N20184 001  
DEC 30, 1993  
N20184 002  
DEC 30, 1993  
N20184 003  
DEC 30, 1993  
N20184 001  
DEC 30, 1993  
N20184 002  
DEC 30, 1993  
N20184 003  
DEC 30, 1993

N20545 001  
JAN 31, 1996  
N20545 002  
JAN 31, 1996

\* RHONE POULENC RORER

2MG  
4MG  
8MG

N20184 001  
DEC 30, 1993  
N20184 002  
DEC 30, 1993  
N20184 003  
DEC 30, 1993

N10348 002  
N10348 003  
N10348 002  
N10348 003

PREDNISOLONE ACETATE

SUSPENSION; OPHTHALMIC  
PRED FORTE  
BX \* ALLERGAN

1%

N17011 001

N83538 002  
N83538 002

SUSPENSION/DROPS; OPHTHALMIC  
PRED FORTE  
AB + ALLERGAN

1%

N17011 001

PREDNISON

TABLET; ORAL  
PREDNISON  
SUPERPHARM

5MG  
10MG  
20MG

N88865 001  
OCT 25, 1984  
N88866 001  
OCT 25, 1984  
N88867 001  
OCT 25, 1984  
N88865 001  
OCT 25, 1984  
N88866 001  
OCT 25, 1984  
N88867 001  
OCT 25, 1984

N88015 001  
N80015 001

@  
@  
@

INJECTABLE; INJECTION  
TRYPINONE  
\* ABBOTT  
@  
THYREL TRH  
FERRING LABS  
+

0.5MG/ML  
0.5MG/ML  
0.5MG/ML  
0.5MG/ML

N17638 001  
N17638 001  
N18087 001  
N18087 001

PROCAINAMIDE HYDROCHLORIDE

TABLET, EXTENDED RELEASE; ORAL  
PROCAMBID  
+ PARKE DAVIS

500MG  
1GM

N20545 001  
JAN 31, 1996  
N20545 002  
JAN 31, 1996

PROMAZINE HYDROCHLORIDE

TABLET; ORAL  
SPARINE  
\* WYETH AYERST  
+  
@

50MG  
100MG  
50MG  
100MG

N10348 002  
N10348 003  
N10348 002  
N10348 003

PROPOXYPHENE HYDROCHLORIDE

CAPSULE; ORAL  
PROPHENE 65  
HALSEY  
@

65MG  
65MG

N83538 002  
N83538 002

PROPYLTHIOURACIL

TABLET; ORAL  
PROPYLTHIOURACIL  
HALSEY  
@

50MG  
50MG

N88015 001  
N80015 001

PROTIRELIN

INJECTABLE; INJECTION  
TRYPINONE  
\* ABBOTT  
@  
THYREL TRH  
FERRING LABS  
+

0.5MG/ML  
0.5MG/ML  
0.5MG/ML  
0.5MG/ML

N17638 001  
N17638 001  
N18087 001  
N18087 001

QUINIDINE GLUCONATE

TABLET, EXTENDED RELEASE; ORAL

> DLT >  
> DLT >  
> ADD >  
> ADD >  
> ADD >

AB QUINIDINE GLUCONATE  
HAISEY 324MG  
324MG  
@

N89476 001  
APR 10, 1987  
N89476 001  
APR 10, 1987

QUINIDINE SULFATE

CAPSULE; ORAL

> DLT >  
> DLT >  
> ADD >  
> ADD >  
> DLT >  
> DLT >  
> ADD >

AB QUINIDINE SULFATE  
CIN-QUIN 200MG  
SOLVAY 300MG  
200MG  
300MG  
300MG

N85296 001  
N85297 001  
N85296 001  
N85297 001

+ QUINIDINE SULFATE

> DLT >  
> DLT >  
> ADD >

AB \* LILLY 200MG  
@ 200MG

N85103 001  
N85103 001

TABLET; ORAL

> DLT >  
> DLT >  
> DLT >  
> DLT >  
> ADD >  
> ADD >  
> DLT >  
> DLT >  
> ADD >  
> DLT >  
> DLT >  
> ADD >  
> DLT >  
> DLT >  
> ADD >  
> DLT >  
> DLT >  
> ADD >

AB QUINIDINE SULFATE  
IST TX 200MG  
BARR 200MG  
@ 200MG  
HAISEY 200MG  
@ 200MG  
LILLY 200MG  
@ 200MG  
ROXANE 200MG  
+ 200MG  
+ 300MG  
SCHERRER LABS 200MG  
QUINORA 300MG  
\* KEY PHARMS 300MG  
@ SCHERRING 300MG

N85068 001  
N84177 001  
N84177 001  
N83583 001  
N83583 001  
N85038 001  
N85038 001  
N83640 001  
N83640 001  
N85632 001  
N85632 001  
N85068 001  
N85222 001  
N85222 001

RAMIPRIL

CAPSULE; ORAL

> DLT >  
> DLT >  
> ADD >

AB RAMIPRIL  
ALTACE 1.25MG  
HOECHST MARION RSSL 1.25MG  
2.5MG

N19901 001  
JAN 28, 1991  
N19901 002  
JAN 28, 1991

RAMIPRIL

CAPSULE; ORAL

> DLT >  
> DLT >  
> ADD >

AB RAMIPRIL  
ALTACE 5MG  
HOECHST MARION RSSL 5MG  
10MG

N19901 003  
JAN 28, 1991  
N19901 004  
JAN 28, 1991

+ HOECHST ROUSSEL

1.25MG

2.5MG

5MG

10MG

N19901 001  
JAN 28, 1991  
N19901 002  
JAN 28, 1991  
N19901 003  
JAN 28, 1991  
N19901 004  
JAN 28, 1991

RITONAVIR

CAPSULE; ORAL

> ADD >  
> ADD >  
> ADD >  
> ADD >

AB RITONAVIR  
NORVIR 100MG  
+ ABBOTT

N20680 001  
MAR 01, 1996

SOLUTION; ORAL

> ADD >  
> ADD >  
> ADD >

AB RITONAVIR  
NORVIR 80MG/ML  
ABBOTT

N20659 001  
MAR 01, 1996

SERTRALINE HYDROCHLORIDE

TABLET; ORAL

> ADD >  
> ADD >

AB SERTRALINE HYDROCHLORIDE  
ZOLOFT EQ 25MG BASE  
PFIZER

N19839 005  
MAR 06, 1996

SUCRALFATE

TABLET; ORAL

> ADD >  
> ADD >  
> ADD >  
> ADD >

AB SUCRALFATE  
CARAFATE 1GM  
+ BLUE RIDGE  
ABB SUCRALFATE 1GM  
ABB BIOCRAFT

N18333 001  
N70848 001  
MAR 29, 1996

SULFAMETHOXAZOLE, TRIMETHOPRIM

TABLET, ORAL

SULFATRIM-DS  
SUPERPHARM

> DLT >  
> DLT >  
> DLT >  
> ADD >  
> ADD >  
> DLT >  
> DLT >  
> ADD >  
> ADD >

N70065 001  
JUN 24, 1985  
N70066 001  
JUN 24, 1985

INJECTABLE, INJECTION  
THALLOUS CHLORIDE TL 201  
MEDI PHYSICS  
2mCi/ML  
1mCi/ML

N18110 001  
FEB 01, 1982  
N18110 002  
FEB 27, 1996

SULFATRIM-SS  
SUPERPHARM

> DLT >  
> DLT >  
> ADD >  
> ADD >

N70065 002  
JUN 24, 1985  
N70065 002  
JUN 24, 1985

THEOPHYLLINE

CAPSULE, EXTENDED RELEASE; ORAL

THEOVENT  
SCHERING

> DLT >  
> DLT >  
> DLT >  
> DLT >  
> ADD >  
> ADD >  
> ADD >  
> ADD >

N87010 001  
JAN 31, 1985  
N87910 001  
JAN 31, 1985  
N87010 001  
JAN 31, 1985  
N87910 001  
JAN 31, 1985

TAMOXIFEN CITRATE

TABLET, ORAL  
NOLVADEX  
@ ZENECA

> DLT >  
> DLT >  
> ADD >  
> ADD >

N17970 002  
MAR 21, 1994  
N17970 002  
MAR 21, 1994

TECHNETIUM Tc-99m TETROFOSMIN KIT

INJECTABLE, INJECTION  
MYOVUE

MEDI PHYSICS N/A

AP  
THEOPHYLLINE 0.04% AND DEXTROSE 5% IN PLASTIC CONTAINER  
MCGAW

N19083 001  
NOV 07, 1984  
N19083 001  
NOV 07, 1984

N20372 001  
FEB 09, 1996

AP  
THEOPHYLLINE 0.08% AND DEXTROSE 5% IN PLASTIC CONTAINER  
MCGAW

N19083 002  
NOV 07, 1984  
N19083 002  
NOV 07, 1984

TETRACYCLINE HYDROCHLORIDE

CAPSULE, ORAL

TETRACYCLINE HCL  
SUPERPHARM

> DLT >  
> DLT >  
> DLT >  
> DLT >  
> ADD >  
> ADD >  
> ADD >  
> ADD >

N62540 001  
MAR 21, 1985  
N62540 002  
MAR 21, 1985  
N62540 001  
MAR 21, 1985  
N62540 002  
MAR 21, 1985

AP  
THEOPHYLLINE 0.16% AND DEXTROSE 5% IN PLASTIC CONTAINER  
MCGAW

N19083 003  
NOV 07, 1984  
N19083 003  
NOV 07, 1984

THIORIDAZINE HYDROCHLORIDE

TABLET, ORAL

THIORIDAZINE HCL  
SUPERPHARM

> DLT >  
> DLT >  
> DLT >  
> DLT >

10MG  
25MG

N89103 001  
JUL 02, 1985  
N89104 001  
JUL 02, 1985



VERAPAMIL HYDROCHLORIDE

TABLET; ORAL

AB VERAPAMIL HCL  
SIDMAK LABS NJ

40MG

N72751 001  
FEB 23, 1996

TABLET, EXTENDED RELEASE; ORAL

COVERA-HS  
SEARLE

180MG

N20552 001  
FEB 26, 1996

BC

240MG

N20552 002  
FEB 26, 1996

BC

VERAPAMIL HCL

MYLAN

240MG

N74587 001  
MAR 23, 1996

AB

SIDMAK LABS NJ

240MG

N72922 001  
MAR 01, 1996

> ADD >  
> ADD >  
> ADD >  
> ADD >



MICONAZOLE NITRATE

> ADD >  
 > ADD >  
 > ADD >  
 CREAM; VAGINAL  
 MICONAZOLE 7  
 NMC  
 2%  
 N74164 001  
 MAR 29, 1996  
 MICONAZOLE NITRATE  
 G AND W LABS  
 2%  
 N74366 001  
 FEB 22, 1996

MINOXIDIL

SOLUTION; TOPICAL  
 ROGAIN (FOR MEN)  
 + UPJOHN  
 2%  
 N19501 002  
 FEB 09, 1996  
 ROGAIN (FOR WOMEN)  
 + UPJOHN  
 2%  
 N19501 003  
 FEB 09, 1996

NAPHAZOLINE HYDROCHLORIDE; PHENIRAMINE MALEATE

SOLUTION/DROPS; OPHTHALMIC  
 OCUHIST  
 AKORN  
 0.025%; 0.3%  
 N20485 001  
 JAN 31, 1996

NICOTINE POLACRILEX

GUM, CHEWING; BUCCAL  
 NICORETTE  
 + SMITHKLINE BEECHAM EQ 2MG BASE  
 + EQ 4MG BASE  
 N18612 002  
 FEB 09, 1996  
 N20066 002  
 FEB 09, 1996

PSEUDOEPHEDRINE HYDROCHLORIDE

> ADD >  
 > ADD >  
 > ADD >  
 > DLT >  
 > DLT >  
 > DLT >  
 TABLET, EXTENDED RELEASE; ORAL  
 EFIDAC 24 PSEUDOEPHEDRINE HCL  
 + CIBA 240MG  
 N20021 002  
 DEC 15, 1992  
 EFIDAC/24  
 \* CIBA 240MG  
 N20031 002  
 DEC 15, 1992

DRUG PRODUCTS WITH APPROVAL UNDER SECTION 505 OF THE ACT ADMINISTERED BY THE CENTER FOR BIOLOGICS EVALUATION AND RESEARCH LIST  
CUMULATIVE SUPPLEMENT NUMBER 3 / MAR '96

NO MARCH 1996 APPROVALS

**LIST OF ORPHAN PRODUCT DESIGNATIONS & APPROVALS**  
**[January 1, 1996 thru March 31, 1996]**

NAME Generic/Chemical TN=Trade Name	INDICATION DESIGNATED	SPONSOR & ADDRESS DD=Date Designated MA=Marketing Approval
Albendazole TN=	Treatment of hydatid disease (cystic echinococcosis due to <i>E. granulosus</i> larvae or alveolar echinococcosis due to <i>E. multilocularis</i> larvae).	SmithKline Beecham Pharmaceuticals One Franklin Plaza P.O. Box 7929 Philadelphia, PA 19101 DD=01/17/96 MA= / /
Albendazole TN=	Treatment of neurocysticercosis due to <i>Taenia solium</i> as: 1) chemotherapy of parenchymal, subarachnoidal and racemose (cysts in spinal fluid) neurocysticercosis in symptomatic cases and 2) prophylaxis of epilepsy and other sequelae in asymptomatic neurocysticercosis.	SmithKline Beecham Pharmaceuticals One Franklin Plaza P.O. Box 7929 Philadelphia, PA 19101 DD=01/18/96 MA= / /
Antihemophilic factor (human) TN= Alphanate	Treatment of von Willebrand's disease.	Alpha Therapeutic Corporation 5555 Valley Boulevard Los Angeles, CA 90032 DD=01/05/96 MA= / /
Collagenase (lyophilized) for injection TN= Plaquase	Treatment of Peyronie's disease.	Advance Biofactures Corporation 35 Wilbur Street Lynbrook, NY 11563 DD=03/12/96 MA= / /
Dihydrotestosterone TN=Androgel-DHT	Treatment of weight loss in AIDS patients with HIV-associated wasting.	Unimed Pharmaceuticals, Inc. 2150 East Lake Cook Road, Suite 210 Buffalo Grove, IL 60089 DD=02/05/96 MA= / /
Interferon beta-1a TN=Rebif	Treatment of patients with secondary progressive multiple sclerosis.	Serono Laboratories, Inc. 100 Longwater Circle Norwell, MA 02061 DD=03/11/96 MA= / /
Nitazoxanide TN=	Treatment of cryptosporidiosis in HIV-positive and AIDS patients.	Unimed Pharmaceuticals, Inc. 2150 East Lake Cook Road, Suite 210 Buffalo Grove, IL 60089 DD=01/05/96 MA= / /
Rifapentine TN=	Prophylactic treatment of <i>Mycobacterium avium</i> complex in patients with acquired immunodeficiency syndrome and a CD4+count less than or equal to 75/mm <sup>3</sup> .	Marion Merrell Dow Inc. P.O. Box 9627 (Park A) Kansas City, MO 64137 DD=03/12/96 MA= / /
R-VIII SQ TN= REFACTO	For long-term and/or hospital treatment of hemophilia A or for treatment of patients with hemophilia A in connection with surgical procedures.	Pharmacia Inc. P.O. Box 16529 Columbus, OH 43216 DD=02/08/96 MA= / /
Somatropin for injection TN=Serostim	Treatment of children with AIDS-associated failure-to-thrive including AIDS-associated wasting.	Serono Laboratories, Inc. 100 Longwater Circle Norwell, MA 02061 DD=03/26/96 MA= / /
SU101 TN=	Treatment of ovarian cancer.	Sugen, Inc. 515 Galveston Drive Redwood City, CA 94063 DD=03/12/96 MA= / /
Testosterone TN=Androgel	Treatment of weight loss in AIDS patients with HIV-associated wasting.	Unimed Pharmaceuticals, Inc. 2150 East Lake Cook Road, Suite 210 Buffalo Grove, IL 60089 DD=02/05/96 MA= / /

CUMULATIVE LIST OF DESIGNATIONS & APPROVALS

NAME Generic/Chemical TN=Trade Name	INDICATION DESIGNATED	SPONSOR & ADDRESS DD=Date Designated MA=Marketing Approval
---	-----------------------	--

Thalidomide TN=Synovir	Treatment of HIV-associated wasting syndrome.	Celgene Corporation P.O. Box 4914 7 Powder Horn Drive Warren, NJ 07059 DD=03/11/96 MA= / /
---------------------------	---	--

Valine, isoleucine and leucine TN=VIL	Treatment of hyperphenylalaninemia.	Leas Research Products 4 Brookview Lane Troy, NY 12180 DD=01/05/96 MA= / /
--	-------------------------------------	---

ORPHAN DRUG PRODUCT APPROVALS FOR 1996

Bleomycin sulfate TN=Blenoxane	Treatment of malignant pleural effusion.	Bristol-Myers Squibb P.O. Box 4000 Princeton, NJ 08543 DD=09/17/93 MA=02/20/96
-----------------------------------	--	---

Ganciclovir intravitreal implant TN=Vitrasert Implant	Treatment of cytomegalovirus retinitis.	Chiron Vision 500 Iolab Drive Claremont, CA 91711 DD=06/07/95 MA=03/04/96
---	---	--

Respiratory syncytial virus immune globulin (human) TN=Respigam	Prophylaxis of respiratory syncytial virus lower respiratory tract infections in infants and young children at high risk of RSV disease.	MedImmune, Inc. 35 West Watkins Mill Road Gaithersburg, MD 20878 DD=09/27/90 MA=01/18/96
---	--	---

DRUG PRODUCTS WHICH MUST DEMONSTRATE *IN VIVO* BIOAVAILABILITY ONLY  
IF PRODUCT FAILS TO ACHIEVE ADEQUATE DISSOLUTION

---

NO MARCH 1996 ADDITIONS

## BIOPHARMACEUTIC GUIDANCE AVAILABILITY

DRUG NAME (DOSAGE FORM)	DATE	REVISED DATE
-------------------------	------	--------------

THE FOLLOWING IS A LIST OF GUIDANCES AVAILABLE FOR *IN VIVO* BIOEQUIVALENCE STUDIES AND *IN VITRO* DISSOLUTION TESTING. COMMENTS AND SUGGESTIONS CONCERNING THESE GUIDANCES ARE ENCOURAGED AND SHOULD BE SENT TO THE DIVISION OF BIOEQUIVALENCE (HFD-650, MPN-2 ROOM 279) 5600 FISHERS LANE, ROCKVILLE, MD 20857.

REFER BACK TO THE APPROVED DRUG PRODUCTS WITH THERAPEUTIC EQUIVALENCE EVALUATIONS, 16TH EDITION FOR A FULL LISTING OF BIOPHARMACEUTIC GUIDANCE AVAILABILITY DATA. ONLY NEW DATA WILL BE ADDED TO THE CUMULATIVE SUPPLEMENT.

NO MARCH 1996 ADDITIONS

## ANDA SUITABILITY PETITIONS

## PETITIONS APPROVED

DRUG NAME DOSAGE FORM; ROUTE	STRENGTH (CONTAINER SIZE)	DOCKET NUMBER	PETITIONER	REASON FOR PETITION	STATUS
---------------------------------	------------------------------	---------------	------------	------------------------	--------

THE FOLLOWING ARE TWO LISTS OF PETITIONS FILED UNDER SECTION 505(j)(2)(C) OF THE ACT WHERE THE AGENCY HAS DETERMINED THAT THE REFERENCED PRODUCT: (1) IS SUITABLE FOR SUBMISSION AS AN ANDA (PETITIONS APPROVED) OR (2) IS NOT SUITABLE FOR SUBMISSION AS AN ANDA (PETITIONS DENIED). THE DETERMINATION THAT AN ANDA WILL BE APPROVED IS NOT MADE UNTIL THE ANDA ITSELF IS SUBMITTED AND REVIEWED BY THE AGENCY. A COPY OF EACH PETITION IS LISTED BY DOCKET NUMBER ON PUBLIC DISPLAY IN FDA'S DOCKETS MANAGEMENT BRANCH, HFA-305, ROOM 1-23, PARK BUILDING, 5600 FISHERS LANE, ROCKVILLE, MD 20857.

REFER BACK TO THE APPROVED DRUG PRODUCTS WITH THERAPEUTIC EQUIVALENCE EVALUATIONS, 16TH EDITION FOR A FULL LISTING OF ANDA SUITABILITY PETITIONS DATA. ONLY NEW DATA WILL BE ADDED TO THE CUMULATIVE SUPPLEMENT.

ACETAMINOPHEN; BUTALBITAL; CAFFEINE; HYDROCODONE BITARTRATE CAPSULE; ORAL	325MG 50MG 40MG 10MG	95 P-0279/ CP1	MIKART	NEW DOSAGE FORM NEW INGREDIENT NEW STRENGTH	APPROVED MAR 08, 1996
ACETAMINOPHEN; BUTALBITAL; CAFFEINE; HYDROCODONE BITARTRATE CAPSULE; ORAL	325MG 50MG 40MG 7.5MG	95 P-0279/ CP2	MIKART	NEW DOSAGE FORM NEW INGREDIENT NEW STRENGTH	APPROVED MAR 08, 1996
ACETAMINOPHEN; BUTALBITAL; CAFFEINE; HYDROCODONE BITARTRATE CAPSULE; ORAL	500MG 50MG 40MG 10MG	95 P-0279/ CP3	MIKART	NEW DOSAGE FORM NEW INGREDIENT NEW STRENGTH	APPROVED MAR 08, 1996
ACETAMINOPHEN; BUTALBITAL; CAFFEINE; HYDROCODONE BITARTRATE CAPSULE; ORAL	500MG 50MG 40MG 7.5MG	95 P-0279/ CP4	MIKART	NEW DOSAGE FORM NEW INGREDIENT NEW STRENGTH	APPROVED MAR 08, 1996
ACETAMINOPHEN; BUTALBITAL; CAFFEINE; HYDROCODONE BITARTRATE TABLET; ORAL	325MG 50MG 40MG 10MG	95 P-0279/ CP1	MIKART	NEW DOSAGE FORM NEW INGREDIENT NEW STRENGTH	APPROVED MAR 08, 1996
ACETAMINOPHEN; BUTALBITAL; CAFFEINE; HYDROCODONE BITARTRATE TABLET; ORAL	325MG 50MG 40MG 7.5MG	95 P-0279/ CP2	MIKART	NEW DOSAGE FORM NEW INGREDIENT NEW STRENGTH	APPROVED MAR 08, 1996
ACETAMINOPHEN; BUTALBITAL; CAFFEINE; HYDROCODONE BITARTRATE TABLET; ORAL	325MG 50MG 40MG 10MG	95 P-0279/ CP3	MIKART	NEW DOSAGE FORM NEW INGREDIENT NEW STRENGTH	APPROVED MAR 08 1996
ACETAMINOPHEN; BUTALBITAL; CAFFEINE; HYDROCODONE BITARTRATE TABLET; ORAL	325MG 50MG 40MG 7.5MG	95 P-0279/ CP4	MIKART	NEW DOSAGE FORM NEW INGREDIENT NEW STRENGTH	APPROVED MAR 08, 1996

## ANDA SUITABILITY PETITIONS

## PETITIONS APPROVED

DRUG NAME DOSAGE FORM; ROUTE	STRENGTH (CONTAINER SIZE)	DOCKET NUMBER	PETITIONER	REASON FOR PETITION	STATUS
ACYCLOVIR SODIUM INJECTABLE; INJECTION	EQ 5MG BASE/ML (100ML/CONTAINER) (200ML/CONTAINER)	95 P-0268/ CP1	WILMER, CUTLER, & PICKERING	NEW DOSAGE FORM NEW STRENGTH	APPROVED FEB 27, 1996
ATRACURIUM BESYLATE INJECTABLE; INJECTION	0.5MG/ML 1MG/ML (100ML CONTAINER)	95 P-0372/ CP1	ABBOTT	NEW STRENGTH	APPROVED MAR 08, 1996
CHOLESTYRAMINE TABLET, CHEWABLE; ORAL	EQ 2GM RESIN	95 P-0277/ CP1	MAYRAND	NEW DOSAGE FORM NEW STRENGTH	APPROVED FEB 27, 1996
DILTIAZEM HYDROCHLORIDE INJECTABLE, INJECTION	5MG/ML (25ML/SYRINGE) (50ML/SYRINGE)	95 P-0196/ CP1	INTL MEDICATION	NEW STRENGTH	APPROVED FEB 27, 1996
EPINEPHRINE INJECTABLE; SUBCUTANEOUS	0.3MG/DELIVERY	95 P-0190/ CP1	SENETCK PLC	NEW ROUTE OF ADMINISTRATION	APPROVED FEB 15, 1996
HYDROCORTISONE BUTYRATE LOTION; TOPICAL	0.1%	95 P-0223/ CP1	MCKENNA & CUNEO	NEW DOSAGE FORM	APPROVED FEB 21, 1996
MEPERIDINE HYDROCHLORIDE INJECTABLE; INJECTION	10MG/ML (60ML/SYRINGE)	95 P-0348/ CP1	MALLINCKRODT	NEW STRENGTH	APPROVED MAR 08, 1996
METRONIDAZOLE LOTION; TOPICAL	0.75%	95 P-0328/ CP1	RNB PHARM	NEW DOSAGE FORM	APPROVED FEB 23, 1996
NIFEDIPINE CAPSULE, EXTENDED RELEASE; ORAL	30MG 60MG 90MG	95-P-0326/ CP1	KV	NEW DOSAGE FORM	APPROVED FEB 23, 1996

## EXCLUSIVITY TERMS

DUE TO SPACE LIMITATIONS IN THE EXCLUSIVITY COLUMN, ABBREVIATIONS AND REFERENCES HAVE BEEN DEVELOPED. PLEASE REFER BACK TO THE APPROVED DRUG PRODUCTS WITH THERAPEUTIC EQUIVALENCE EVALUATIONS, 16TH EDITION FOR A FULL LISTING OF EXCLUSIVITY TERMS (ABBREVIATIONS, NEW DOSING SCHEDULE, NEW INDICATIONS AND PATENT USE CODES). ONLY NEW CODES WILL BE ADDED TO THE CUMULATIVE SUPPLEMENT.

## REFERENCES

### *NEW DOSING SCHEDULE*

D-29 INCREASE OF CUMULATIVE DOSE TO 0.3MMOL/KG FOR MRI OF THE CNS IN ADULTS

### *NEW INDICATION*

I-141 TREATMENT OF HEMODYNAMICALLY STABLE PATIENTS WITHIN 24 HOURS OF ACUTE MYOCARDIAL INFARCTION TO IMPROVE SURVIVAL  
 I-142 LOCALIZE MYOCARDIAL ISCHEMIA (REVERSIBLE DEFECT) AND INFARCTION (NON-REVERSIBLE DEFECTS) IN EVALUATING MYOCARDIAL FUNCTION  
 I-143 EPISODIC TREATMENT OF RECURRENT GENITAL HERPES IN IMMUNOCOMPETENT ADULTS  
 I-144 ENHANCEMENT OF MRI OF THE ADULT BODY INTERNAL ORGANS  
 I-145 0.1MMOL/KG AS A SINGLE INTRAVENOUS BOLUS FOR MRI OF THE CNS IN CHILDREN  
 I-146 CONTRAST ENHANCEMENT AND FACILITATION OF VISUALIZATION OF EXTRACRANIAL HEAD AND NECK LESIONS  
 I-147 PREVENTION OF GALLSTONE FORMATION IN OBESE PATIENTS EXPERIENCING RAPID WEIGHT LOSS  
 I-148 TREATMENT OF ACUTE PNEUMOCYSTIC CARINII PNEUMONIA (PCP) IN HIV-INFECTED PATIENTS WHOSE ALVEOLAR-ARTERIAL OXYGEN DIFFERENCE ( $AaDO_2$ ) IS LESS THAN OR EQUAL TO 55 TORR

### *PATENT USE CODE*

U-121 METHOD OF TREATING CONDITIONS MEDIATED THROUGH HISTAMINE H2-RECEPTORS  
 U-122 A THERAPEUTIC METHOD FOR CONTROLLING THROMBOSIS  
 U-123 METHOD FOR CONTROLLING THROMBOSIS AND DECREASING BLOOD HYPERCOAGULATION AND HEMORRHAGING RISKS  
 U-124 TREATMENT OF ACNE  
 U-125 TREATING NEUROGENERATIVE DISEASES  
 U-126 TREATMENT OF GASTRITIS  
 U-127 METHOD OF PRODUCING NEUROMUSCULAR BLOCKADE  
 U-128 METHODS FOR TREATMENT OF TUMORS  
 U-129 METHOD TO DESTROY OR IMPAIR TARGET CELLS  
 U-130 MANAGEMENT OF PATIENTS WITH MASTOCYTOSIS  
 U-131 PHOTODAMAGED SKIN  
 U-132 INHIBITING HIV PROTEASE

PRESCRIPTION AND OTC DRUG PRODUCT  
PATENT AND EXCLUSIVITY DATA

APPL/PROD NUMBER	INGREDIENT NAME; TRADE NAME	PATENT NUMBER	PATENT EXPIRES	USE CODE	EXCLUS CODE	EXCLUS EXPIRES
19806 001	ACRIVASTINE; SEMPREX-D	4650807	MAR 26, 2008	U-93		
20541 001	ANASTROZOLE; ARIMIDEX	4935437	JUN 10, 2008			
20428 001	AZELAIC ACID; AZELEX	4386104	MAY 31, 2000	U-124		
20498 001	BICALUTAMIDE; CASODEX	4636505	JAN 13, 2004		ODE	FEB 20, 2003
50443 001	BLEOMYCIN SULFATE; BLENOXANE					
20421 001	BUTOCONAZOLE NITRATE; FEMSTAT 3	4078071	JUL 28, 1997		NP	DEC 21, 1998
20313 002	CALCITONIN, SALMON; MIACALCIN	4344949	OCT 03, 2000			
18874 001	CALCITRIOL; CALCIJEX	4308264	JAN 28, 2001			
18874 002	CALCITRIOL; CALCIJEX	4308264	JAN 28, 2001			
18343 004	CAPTAPRIL; CAPOTEN				I-95	SEP 23, 1996
18343 007	CAPTAPRIL; CAPOTEN				I-101	JAN 28, 1997
					I-95	SEP 23, 1996
					I-101	JAN 28, 1997
20234 001	CARBAMAZEPINE; TEGRETOL-XR	5284662	FEB 08, 2011			
>ADD>		RE34990	JUL 29, 2007			
>ADD>		5284662	FEB 08, 2011			
20234 002	CARBAMAZEPINE; TEGRETOL-XR	RE34990	JUL 29, 2007			
>ADD>		5284662	FEB 08, 2011			
20234 003	CARBAMAZEPINE; TEGRETOL-XR	RE34990	JUL 29, 2007			
>ADD>		4525358	JUN 25, 2002			
>ADD>		4525358	JUN 25, 2002			
19835 001	CETIRIZINE HYDROCHLORIDE; ZYRTEC	4962115	OCT 09, 2007	U-79	NCE	JUL 29, 1998
19835 002	CETIRIZINE HYDROCHLORIDE; ZYRTEC	5453510	SEP 26, 2012	U-127		
20398 001	CISAPRIDE MONOHYDRATE; PROPULSID	4179507	DEC 18, 1996	U-127		
20551 001	CISATRACURIUM BESYLATE; NIMBEX	5453510	SEP 26, 2012	U-127		
20551 002	CISATRACURIUM BESYLATE; NIMBEX PRESERVATIVE FREE	4179507	DEC 18, 1996	U-127		
20551 003	CISATRACURIUM BESYLATE; NIMBEX PRESERVATIVE FREE	4179507	DEC 18, 1996	U-127		
20479 001	CROMOLYN SODIUM; GASTROCROM	5453510	SEP 26, 2012	U-127		
20287 003	DALTEPARIN SODIUM; FRAGMIN	4515805	MAY 07, 2002	U-130		
20118 001	DESFLURANE; SUPRANE	4421762	DEC 20, 2000	U-130		
19955 001	DESMOPRESSIN ACETATE; DDAVP	4303651	JAN 04, 2000		NCE	DEC 22, 1999
19955 002	DESMOPRESSIN ACETATE; DDAVP	4762856	FEB 02, 2007	U-67	NCE	SEP 18, 1997
20254 001	DICLOFENAC SODIUM; VOLTAREN-XR	5047398	SEP 10, 2008			
18723 001	DIVALPROEX SODIUM; DEPAKOTE	5047398	SEP 10, 2008			
18723 002	DIVALPROEX SODIUM; DEPAKOTE					
18723 003	DIVALPROEX SODIUM; DEPAKOTE					
>ADD>		5212326	JAN 29, 2008		NDF	MAR 08, 1999
>ADD>		5212326	JAN 29, 2008		I-41	MAR 18, 1999
>ADD>		5212326	JAN 29, 2008		I-41	MAR 18, 1999
>ADD>		5212326	JAN 29, 2008		I-41	MAR 18, 1999



PRESCRIPTION AND OTC DRUG PRODUCT  
PATENT AND EXCLUSIVITY DATA

APPL/PROD NUMBER	INGREDIENT NAME; TRADE NAME	PATENT NUMBER	PATENT EXPIRES	USE CODE	EXCLUS CODE	EXCLUS EXPIRES
19558 001	LISINAPRIL; PRINIVIL				I-141	NOV 24, 1998
19558 002	LISINAPRIL; PRINIVIL				I-141	NOV 24, 1998
19558 003	LISINAPRIL; PRINIVIL				I-141	NOV 24, 1998
19558 004	LISINAPRIL; PRINIVIL				I-141	NOV 24, 1998
19558 006	LISINAPRIL; PRINIVIL				I-141	NOV 24, 1998
19777 001	LISINAPRIL; ZESTRIL				I-141	NOV 24, 1998
19777 002	LISINAPRIL; ZESTRIL				I-141	NOV 24, 1998
19777 003	LISINAPRIL; ZESTRIL				I-141	NOV 24, 1998
19777 004	LISINAPRIL; ZESTRIL				I-141	NOV 24, 1998
19777 005	LISINAPRIL; ZESTRIL				I-141	NOV 24, 1998
19940 001	MASOPROCOL; ACTINEX	4695590	APR 17, 2008		I-141	NOV 24, 1998
>ADD>	MOEXIPRIL HYDROCHLORIDE; UNIVASC	4344949	OCT 03, 2000			
>ADD>	MOEXIPRIL HYDROCHLORIDE; UNIVASC	4344949	OCT 03, 2000			
19886 001	NAFARELIN ACETATE; SYNAREL	4234571	JUN 11, 2011			
20353 001	NAPROXEN SODIUM; NAPRELAN					
20353 002	NAPROXEN SODIUM; NAPRELAN					
20353 003	NAPROXEN SODIUM; NAPRELAN					
19810 001	OMEPRAZOLE; PRILLOSEC					
>ADD>	OMEPRAZOLE; PRILLOSEC					
>ADD>	OMEPRAZOLE; PRILLOSEC					
>ADD>	OMEPRAZOLE; PRILLOSEC					
19887 002	PENTAMIDINE ISETHIONATE; NEBUPENT					
20184 001	PERINDOPRIL ERBUMINE; ACEON	4255431	APR 05, 2001	U-108	I-23	MAR 22, 1999
20184 002	PERINDOPRIL ERBUMINE; ACEON	4853230	APR 20, 2007	U-108	I-23	MAR 22, 1999
20184 003	PERINDOPRIL ERBUMINE; ACEON					
20451 001	PORFIMER SODIUM; PHOTOFRIN					
19898 006	PRAVASTATIN SODIUM; PRAVACHOL	4508729	AUG 21, 2006			
>ADD>	PRAVASTATIN SODIUM; PRAVACHOL	4508729	AUG 21, 2006			
>ADD>	PRAVASTATIN SODIUM; PRAVACHOL	4508729	AUG 21, 2006			
>ADD>	PRAVASTATIN SODIUM; PRAVACHOL	4508729	AUG 21, 2006			
19898 007	PRAVASTATIN SODIUM; PRAVACHOL	5438071	AUG 01, 2012			
>ADD>	PRAVASTATIN SODIUM; PRAVACHOL	5145863	JUN 12, 2007	U-129	ODE	DEC 27, 2002
>ADD>	PRAVASTATIN SODIUM; PRAVACHOL	5028621	MAR 10, 2004			
>ADD>	PRAVASTATIN SODIUM; PRAVACHOL	4932934	JUN 12, 2007	U-128	NCE	DEC 27, 2000
>ADD>	PRAVASTATIN SODIUM; PRAVACHOL	4866168	MAR 10, 2004			
>ADD>	PRAVASTATIN SODIUM; PRAVACHOL	4649151	MAR 10, 2004			
19898 006	PRAVASTATIN SODIUM; PRAVACHOL	5180589	JUL 09, 2008		ODE	DEC 27, 2002
>ADD>	PRAVASTATIN SODIUM; PRAVACHOL	5030447	JUL 09, 2008			
>ADD>	PRAVASTATIN SODIUM; PRAVACHOL	4346227	OCT 20, 2005			
>ADD>	PRAVASTATIN SODIUM; PRAVACHOL	5180589	JUL 09, 2008			
>ADD>	PRAVASTATIN SODIUM; PRAVACHOL	5030447	JUL 09, 2008			
>ADD>	PRAVASTATIN SODIUM; PRAVACHOL	4346227	OCT 20, 2005			
20545 001	PROCAINAMIDE HYDROCHLORIDE; PROCANBID					
20545 002	PROCAINAMIDE HYDROCHLORIDE; PROCANBID					
>ADD>	PROCAINAMIDE HYDROCHLORIDE; PROCANBID					
>ADD>	PROCAINAMIDE HYDROCHLORIDE; PROCANBID					

PRESCRIPTION AND OTC DRUG PRODUCT  
PATENT AND EXCLUSIVITY DATA

APPLY/PROD NUMBER	INGREDIENT NAME; TRADE NAME	PATENT NUMBER	PATENT EXPIRES	USE CODE	EXCLUS CODE	EXCLUS EXPIRES
19885 001	QUINAPRIL HYDROCHLORIDE; ACCUPRIL	4344949	OCT 03, 2002			
19885 002	QUINAPRIL HYDROCHLORIDE; ACCUPRIL	4344949	OCT 03, 2002			
19885 003	QUINAPRIL HYDROCHLORIDE; ACCUPRIL	4344949	OCT 03, 2002			
19885 004	QUINAPRIL HYDROCHLORIDE; ACCUPRIL	4344949	OCT 03, 2002			
19593 001	RANITIDINE HYDROCHLORIDE; ZANTAC	4585790	MAY 11, 2004			
		4521431	JUN 04, 2002	U-121		
		4128658	JUL 25, 1997	U-121		
19593 002	RANITIDINE HYDROCHLORIDE; ZANTAC	4585790	MAY 11, 2004			
		4521431	JUN 04, 2002	U-121		
		4128658	JUL 25, 1997	U-121		
20520 001	RANITIDINE HYDROCHLORIDE; ZANTAC 75	4880636	MAY 13, 2008			
		4128658	JUL 25, 1997	U-121		
		4521431	JUN 04, 2002	U-121		
20272 001	RISPERIDONE; RISPERDAL	4128658	JUL 25, 1997	U-121		
20272 002	RISPERIDONE; RISPERDAL	4804663	DEC 29, 2007	U-90		
20272 003	RISPERIDONE; RISPERDAL	4804663	DEC 29, 2007	U-90		
20272 004	RISPERIDONE; RISPERDAL	4804663	DEC 29, 2007	U-90		
20272 005	RISPERIDONE; RISPERDAL	4804663	DEC 29, 2007	U-90		
20659 001	RITONAVIR; NORVIR	4804663	DEC 29, 2007	U-90		
20680 001	RITONAVIR; NORVIR	5484801	JAN 28, 2014		NCE	MAR 01, 2001
20628 001	SAQUINAVIR MESYLATE; INVIRASE	5196438	NOV 19, 2010		NCE	MAR 01, 2001
19334 001	SELEGILINE HYDROCHLORIDE; ELDEPRYL	5242950	APR 23, 2012		ODE	JUN 05, 1996
		5151419	SEP 29, 2009			
		4880833	NOV 14, 2006			
20280 004	SOMATROPIN, BIOSYNTHETIC; GENOTROPIN	4978655	JUN 25, 2008	U-94	NS	AUG 24, 1998
20280 006	SOMATROPIN, BIOSYNTHETIC; GENOTROPIN	4978655	JUN 25, 2008	U-94	NS	AUG 24, 1998
20412 001	STAVUDINE; ZERIT	4978655	JUN 25, 2008	U-94		
20412 002	STAVUDINE; ZERIT	4978655	JUN 25, 2008	U-94		
20412 003	STAVUDINE; ZERIT	4978655	JUN 25, 2008	U-94		
20412 004	STAVUDINE; ZERIT	4978655	JUN 25, 2008	U-94		
20412 005	STAVUDINE; ZERIT	4978655	JUN 25, 2008	U-94		
19785 001	TECHNETIUM TC-99M SESTAMIBI KIT; CARDIOLITE				I-142	DEC 14, 1998
20372 001	TECHNETIUM TC-99M TETROFOSMIN KIT; MYOVIEW	5045302	APR 10, 2007		NCE	FEB 09, 2001

>ADD>  
>ADD>  
>ADD>  
>ADD>  
>ADD>

PRESCRIPTION AND OTC DRUG PRODUCT  
PATENT AND EXCLUSIVITY DATA

APPL/PROD NUMBER	INGREDIENT NAME; TRADE NAME	PATENT NUMBER	PATENT EXPIRES	USE CODE	EXCLUS CODE	EXCLUS EXPIRES
>ADD>	19057 001 TERAZOSIN HYDROCHLORIDE; HYTRIN	5504207	APR 29, 2013	U-3		
>DLT>	19057 001 TERAZOSIN HYDROCHLORIDE; HYTRIN	4112097	JAN 21, 1997*			
>ADD>	19057 002 TERAZOSIN HYDROCHLORIDE; HYTRIN	5504207	APR 29, 2013	U-3		
>DLT>	19057 002 TERAZOSIN HYDROCHLORIDE; HYTRIN	4112097	JAN 21, 1997*			
>ADD>	19057 003 TERAZOSIN HYDROCHLORIDE; HYTRIN	5504207	APR 29, 2013	U-3		
>DLT>	19057 003 TERAZOSIN HYDROCHLORIDE; HYTRIN	4112097	JAN 21, 1997*			
>ADD>	19057 004 TERAZOSIN HYDROCHLORIDE; HYTRIN	5504207	APR 29, 2013	U-3		
>DLT>	19057 004 TERAZOSIN HYDROCHLORIDE; HYTRIN	4112097	JAN 21, 1997*			
>ADD>	20347 001 TERAZOSIN HYDROCHLORIDE; HYTRIN	5504207	APR 29, 2013			
>DLT>	20347 001 TERAZOSIN HYDROCHLORIDE; HYTRIN	4112097	JAN 21, 1997*			
>ADD>	20347 002 TERAZOSIN HYDROCHLORIDE; HYTRIN	5504207	APR 29, 2013			
>DLT>	20347 002 TERAZOSIN HYDROCHLORIDE; HYTRIN	4112097	JAN 21, 1997*			
>ADD>	20347 003 TERAZOSIN HYDROCHLORIDE; HYTRIN	5504207	APR 29, 2013			
>DLT>	20347 003 TERAZOSIN HYDROCHLORIDE; HYTRIN	4112097	JAN 21, 1997*			
>ADD>	20347 004 TERAZOSIN HYDROCHLORIDE; HYTRIN	5504207	APR 29, 2013			
>DLT>	20347 004 TERAZOSIN HYDROCHLORIDE; HYTRIN	4112097	JAN 21, 1997*			
>ADD>	20489 001 TESTOSTERONE; ANDRODERM	5164190	NOV 17, 2008			
>ADD>		5152997	OCT 06, 2009			
>ADD>		4983395	JAN 08, 2009			
>ADD>		4863970	SEP 05, 2006			
>ADD>		4855294	AUG 08, 2006			
>ADD>		4849224	JUL 18, 2006			
>ADD>		4877805	OCT 31, 2006	U-131	NS	SEP 29, 1998
>ADD>		4603146	JUL 29, 2003	U-131		
>ADD>		4423041	DEC 27, 2000			
>ADD>	19594 002 URSODIOL; ACTIGALL	5190765	AUG 14, 2007			
>ADD>	20487 001 VALACYCLOVIR HYDROCHLORIDE; VALTREX	5160744	JUN 27, 2011			
>ADD>	20487 002 VALACYCLOVIR HYDROCHLORIDE; VALTREX	4753802	MAR 19, 2006			
>ADD>	20552 001 VERAPAMIL HYDROCHLORIDE; COVERA-HS	4252338	JUN 27, 2011			
>ADD>		5190765	AUG 14, 2007			
>ADD>		5160744	JUN 27, 2011			
>ADD>		4753802	MAR 19, 2006			
>ADD>	20552 002 VERAPAMIL HYDROCHLORIDE; COVERA-HS	4252338	JUN 27, 2011			

\*SEE SECTION 1.4 OF INTRODUCTION



Library Use Only

RM301.45 .A66 1996 Mar Suppl

Approved drug products with  
therapeutic equivalence

C:355661 M:174736 O:12937927

ST. LOUIS COLLEGE OF PHARMACY



3 2201 90036 5368

Library Use Only

LIBRARY  
ST. LOUIS COLLEGE OF PHARMACY  
4588 PARKVIEW PL.  
ST. LOUIS, MO. 63110