

# Ohio Medicaid Fee-For-Service

Pharmacy Benefit Management Program

## Preferred Drug List

Effective October 1, 2011

Ohio Department of Job and Family Services

### ANALGESICS: COX-2 INHIBITORS

CELEBREX® (celecoxib) (no PA for age 60+)

### ANALGESICS: GOUT

ALLOPURINOL (generic Zyloprim®)  
PROBENECID  
PROBENECID-COLCHICINE

### ANALGESICS: OPIOIDS IR/ER

BUTORPHANOL TARTRATE nasal spray (generic Stadol NS®)  
CODEINE-ACETAMINOPHEN tablets, oral solution (generic Tylenol w/Codeine®)  
DURAGESIC® PATCH / FENTANYL PATCH  
HYDROCODONE-ACETAMINOPHEN tabs, liquid (generic Lorcet, Lortab, Norco, Vicodin)  
HYDROMORPHONE tablets (generic Dilaudid®)  
MEPERIDINE tablets, syrup (generic Demerol®)  
METHADONE tablets, oral concentrate, solution (generic Dolophine®)  
MORPHINE SULFATE ER (generic MS Contin®)  
MORPHINE SULFATE IR tablets, solution (generic MSIR®, Roxanol®)  
ORAMORPH SR® (morphine ER)  
OXYCODONE IR tablets, capsules (generic OxyIR®, Roxicodone®)  
OXYCODONE-ACETAMINOPHEN tabs, caps, solution (generic Percocet®, Tylox®)  
TRAMADOL (generic Ultram®)

### BLOOD: HEMATOPOIETICS

*Clinical PA required for all hematopoietic products*

ARANESP® (darbepoetin alfa) syringe, vial  
PROCRIT® (epoetin alfa)

### BLOOD: HEPARIN-RELATED

*Duration of therapy longer than 35 days requires PA*

ARIXTRA® (fondaparinux)  
FRAGMIN® syringe, vial (dalteparin)  
INNOHEP® (tinzaparin)  
LOVENOX® ampule, syringe, vial (enoxaparin)  
XARELTO® 10mg tablets (rivaroxaban)

### BLOOD: PLATELET INHIBITORS

AGGRENOX® (aspirin/dipyridamole)  
CILOSTAZOL (generic Pletal®)  
DIPYRIDAMOLE (generic Persantine®)  
EFFIENT® (prasugrel)  
PLAVIX® (clopidogrel)  
TICLOPIDINE (generic Ticlid®)

### CV: ACE INHIBITORS & COMBINATIONS

ALL GENERIC ACE INHIBITORS & HCTZ COMB  
LOTREL® (amlodipine/benazepril)  
TARKA® (verapamil/trandolapril)

### CV: ARB & COMBINATIONS

*Step therapy—patient must try ACE Inhibitor first*

AVAPRO® (irbesartan) / AVALIDE®  
AZOR® (amlodipine/olmesartan)  
BENICAR® (olmesartan) / BENICAR HCT®  
DIOVAN® (valsartan) / DIOVAN HCT®  
EXFORGE® (amlodipine/valsartan) / +/-HCT®  
LOSARTAN +/- HCTZ (generic Cozaar®, Hyzaar®)  
MICARDIS® (telmisartan) / MICARDIS HCT®  
TRIBENZOR® (olmesartan/amlodipine/hctz)

### CV: SYMPATHOLYTIC ANTI-HYPERTENSIVE

CATAPRES-TTS® patches (clonidine)  
CLONIDINE tablets (generic Catapres®)  
GUANFACINE (generic Tenex®)  
METHYLDOPA / METHYLDOPA-HCTZ

### CV: DIRECT RENIN INHIBITORS & COMB

*Step therapy—patient must try alternate antihypertensive*

AMTURNIDE® (aliskiren/amlodipine/HCTZ)  
TEKAMLO® (aliskiren/amlodipine)  
TEKTURNAL® +/- HCT® (aliskiren)  
VALTURNAL® (aliskiren/valsartan)

### CV: BETA-BLOCKERS & COMBINATIONS

ACEBUTOLOL (generic Sectral®)  
ATENOLOL +/- CHLORTHALIDONE (generic Tenormin®, Tenoretic®)  
BETAXOLOL (generic Kerlone®)  
BISOPROLOL +/-HCTZ (generic Zebeta®, Ziac®)  
CARVEDILOL (generic Coreg®)  
LABETALOL (generic Trandate®)  
METOPROLOL SUCC ER (generic Toprol XL®)  
METOPROLOL TART +/- HCTZ (generic Lopressor®, Lopressor HCT®)  
NADOLOL +/- BENDROFLUMETHIAZIDE (generic Corgard®, Corzide®)  
PINDOLOL (generic Visken®)  
PROPRANOLOL IR/ER / PROPRANOLOL- HCTZ (generic Inderal®, Inderal® LA, Inderide®)  
SOTALOL / SOTALOL AF (generic Betapace®)  
TIMOLOL (generic Blocadren®)

### CV: CALCIUM CHANNEL BLOCKERS

AMLODIPINE (generic Norvasc®)  
DILTIAZEM IR / SR / ER (generic Cardizem®, Dilacor®, Tiazac®)  
FELODIPINE (generic Plendil®)  
NICARDIPINE (generic Cardene®)  
NIFEDIPINE IR/ER (generic Procardia®, Adalat®)  
VERAPAMIL IR / SR / ER (Generic Calan®, Isoptin®, Verelan®)

### CV: LIPOTROPICS

ANTARA® / TRICOR® / TRILIPIX® (fenofibrate)  
CHOLESTYRAMINE reg. light (generic Questran®)  
COLESTIPOL tablets (generic Colestid®)  
FISH OIL (OTC)  
GEMFIBROZIL (generic Lopid®)  
LIPITOR® (atorvastatin)  
LOVASTATIN (generic Mevacor®)  
NIACIN / NIASPAN®  
PRAVASTATIN (generic Pravachol®)  
SIMCOR® (simvastatin/niacin)  
SIMVASTATIN (generic Zocor®)  
WELCHOL® tablets (colesevelam)  
ZETIA® / VYTORIN® (ezetimibe +/- simvastatin)

**CNS: ANTI-MIGRAINE**

IMITREX® injection, nasal spray (sumatriptan)  
 MAXALT® / MAXALT-MLT® (rizatriptam)  
 SUMATRIPTAN tablets (generic Imitrex®)  
 NARATRIPTAN (generic Amerge®)

**CNS: ALZHEIMER'S**

ARICEPT® / ARICEPT® ODT (donepezil)  
 COGNEX® (tacrine)  
 EXELON® capsule, patch (rivastigmine)  
 GALANTAMINE IR / ER (generic Razadyne™)  
 NAMENDA® tablets, solution (memantine)  
 RAZADYNE™ 4mg/ml solution (galantamine)

**CNS: ANTIDEPRESSANTS**

*PA Exception: Prescriptions for non-preferred products written by a physician registered with Medicaid with a psychiatry specialty will be automatically approved.*

BUPROPION HCL / SR / XL (generic Wellbutrin®)  
 CITALOPRAM tablets, solution (generic Celexa®)  
 CYMBALTA® (duloxetine)  
 FLUOXETINE HCL caps solution (generic Prozac®)  
 FLUVOXAMINE MALEATE (generic Luvox®)  
 LEXAPRO® tablets, solution (escitalopram)  
 MIRTAZAPINE tablets, ODT (generic Remeron®)  
 NEFAZODONE  
 PAROXETINE HCL tablets, soln (generic Paxil®)  
 SERTRALINE tablets, oral conc (generic Zoloft®)  
 TRAZODONE  
 VENLAFAXINE IR / ER (generic Effexor®)

**CNS: ANTIPSYCHOTICS, SECOND GENERATION, ORAL**

*PA Exception: Prescriptions for non-preferred products written by a physician registered with Medicaid with a psychiatry specialty will be automatically approved when the dosage form is a standard tablet/capsule/liquid. Long-acting injectable dosage forms must be billed through the medical benefit.*

ABILIFY® tablet, solution (aripiprazole)  
 GEODON® (ziprasidone)  
 RISPERIDONE tablet, ODT, solution (generic Risperdal®)  
 SAPHRIS® (asenapine)  
 SEROQUEL® / SEROQUEL XR® (quetiapine)

**CNS: ATTENTION DEFICIT HYPERACTIVITY DISORDER**

*\*\* Dextroamphetamine/methamphetamine products require clinical PA for age 18 and over*

ADDERALL XR® (amphetamine/  
 dextroamphetamine)  
 AMPHETAMINE SALTS (generic Adderall®)  
 DEXTROAMPHETAMINE IR/ER (generic  
 Dexedrine®)\*\*  
 FOCALIN® / FOCALIN® XR (dexmethylphenidate)  
 INTUNIV® (guanfacine)  
 KAPVAY® (clonidine)  
 METADATE® CD / ER (methylphenidate)  
 METHYLIN® / METHYLIN® ER tablets, solution  
 METHYLPHENIDATE IR / ER / CONCERTA®  
 (generic Ritalin®)  
 STRATTERA® (atomoxetine)  
 VYVANSE™ (lisdexamfetamine)

**CNS: FIBROMYALGIA AGENTS**

CYMBALTA® (duloxetine)  
 LYRICA® (pregabalin)  
 SAVELLA® (milnacipran)

**CNS: MULTIPLE SCLEROSIS AGENTS**

*\*\* Ampyra requires clinical PA*

AMPYRA® (dalfampridine) \*\*  
 AVONEX® (interferon beta 1a)  
 BETASERON® (interferon beta 1b)  
 COPAXONE® (glatiramer)  
 GILENYA® (fingolimod)  
 REBIF® syringe, titration pack (interferon beta 1a)

**CNS: PARKINSON'S AGENTS**

COMTAN® (entacapone)  
 PRAMIPEXOLE (generic Mirapex®)  
 ROPINIROLE (generic Requip®)  
 CARBIDOPA/LEVODOPA IR/CR (generic Sinemet)  
 SELEGILINE (generic Eldepryl®)

**CNS: SEDATIVE-HYPNOTICS**

ESTAZOLAM (generic Prosom®)  
 FLURAZEPAM (generic Dalmane®)  
 TEMAZEPAM 15mg, 30mg (generic Restoril®)  
 ZALEPLON (generic Sonata®)  
 ZOLPIDEM (generic Ambien®)

**CNS: SKELETAL MUSCLE RELAXANTS**

BACLOFEN (generic Lioresal®)  
 CHLORZOXAZONE (generic Parafon Forte®)  
 CYCLOBENZAPRINE (generic Flexeril®)  
 DANTROLENE (generic Dantrium®)  
 METHOCARBAMOL (generic Robaxin®)  
 TIZANIDINE tablets (generic Zanaflex®)

**ENDOCRINE: DIABETES ADJUNCTIVE**

*Step therapy- patient must try alternate diabetes therapy*

SYMLIN® (pramlintide)  
 BYETTA® (exenatide)  
 VICTOZA® (liraglutide)

**ENDOCRINE: DIABETES - INSULIN**

HUMALOG® / HUMALOG MIX® 50/50 / 70/30  
 HUMULIN® R / N / 50/50 / 70/30 / R500-U  
 LANTUS® (insulin glargine)  
 NOVOLIN® R / N / 70/30  
 NOVOLOG® / NOVOLOG MIX 70/30®

**ENDOCRINE: DIABETES – ORAL**

*\*\*Step therapy for DPP-4 Inhibitors and combinations – patient must try alternate diabetes therapy*

ACARBOSE (generic Precose®)  
 ACTOS® / ACTOPLUS MET® (pioglitazone +/-  
 metformin)  
 DUETACT® (glimepiride/pioglitazone)  
 GLIMEPIRIDE (generic Amaryl®)  
 GLIPIZIDE / GLIPIZIDE ER (generic Glucotrol®)  
 GLIPIZIDE/METFORMIN (generic Metaglip®)  
 GLYBURIDE / GLYBURIDE MICRO (generic  
 Diabeta®, Micronase®, GlynasePressTabs®)  
 GLYBURIDE/METFORMIN (generic Glucovance®)  
 GLYSET® (miglitol)  
 JANUVIA® / JANUMET™ (sitagliptin +/-  
 metformin) \*\*  
 KOMBIGLYZE XR® (saxagliptin/metformin) \*\*  
 METFORMIN IR / ER (generic Glucophage®)  
 ONGLYZA® (saxagliptin) \*\*  
 STARLIX® (nateglinide)  
 TRADJENTA™ (linagliptin) \*\*

**ENDOCRINE: HORMONE REPLACEMENT**

ALORA® patch (estradiol)  
 CENESTIN® / ENJUWIA® (synth conj estrogens)  
 COMBIPATCH® (estradiol/norethindrone)  
 ESTRADIOL tab, patch (generic Estrace®, climara®)  
 ESTRING® vaginal ring (estradiol)  
 ESTROPIRATE  
 FEMHRT® / ETHINYL ESTRADIOL-  
 NORETHINDRONE ACETATE  
 MENEST® (esterified estrogens)  
 PREMARIN® tabs, vaginal crm (conj estrogens)  
 PREMPRO® / PREMPHASE®  
 (medroxyprogesterone / estrogens conjugated)

**ENDOCRINE: GROWTH HORMONES**

*Clinical PA required for all growth hormones*

GENOTROPIN® cartridge, miniquick  
 NORDITROPIN® cartridge, Flexpro, Nordiflex, vial  
 OMNITROPE® cartridge, vial  
 TEV-TROPIN® vial

**ENDOCRINE: OSTEOPOROSIS**

ALENDRONATE (generic Fosamax®)  
 FORTICAL® (calcitonin salmon)  
 MIACALCIN® (calcitonin salmon)

**GI: ANTI-EMETICS**

EMEND® (aprepitant)  
 ONDANSETRON tabs, ODT, oral sol (generic  
 Zofran®)

**GI: CHRONIC CONSTIPATION**

AMITIZA® (lubiprostone)

**GI: PANCREATIC ENZYMES**

CREON® (pancrelipase)  
 PANCREAZE® (pancrelipase)  
 PANCRELIPASE 5000  
 ZENPEP® (pancrelipase)

**GI: PPIS AND H. PYLORI**

HELIDAC® (metronidazole/tetracycline/bismuth ss)  
 LANSOPRAZOLE caps / PREVACID 24H® (OTC)  
 LANSOPRAZOLE ODT (No PA for age <=6)  
 OMEPRAZOLE caps, tabs / PRILOSEC OTC® tabs /  
 ZEGERID OTC® caps  
 PANTOPRAZOLE (generic Protonix®)

**GI: ULCERATIVE COLITIS**

APRISO® (mesalamine)  
 ASACOL® / ASACOL HD® (mesalamine)  
 BALSALAZIDE DISODIUM (generic Colazal®)  
 CANASA® suppositories (mesalamine)  
 LIALDA® (mesalamine)  
 MESALAMINE enema (generic Rowasa®)  
 SULFASALAZINE / EC (generic of Azulfidine®)

**GU: BENIGN PROSTATIC HYPERPLASIA**

DOXAZOSIN (generic Cardura®)  
 FINASTERIDE (generic Proscar®)  
 PRAZOSIN (generic Minipress®)  
 TAMSULOSIN (generic Flomax®)  
 TERAZOSIN (generic Hytrin®)

**GU: ELECTROLYTE DEPLETERS**

PHOSLO® tab / ELIPHOS® tab / CA ACET cap  
 CALCIUM CARBONATE  
 FOSRENOL® (lanthanum carbonate)  
 MAGNEBIND® (Ca carbonate/Mg carbonate/FA)  
 RENAGEL® (sevelamer)

**GU: URINARY ANTISPASMODICS**

FLAVOXATE  
 OXYBUTYNIN IR tab, syr / ER (generic Ditropan®)  
 SANCTURA® / SANCTURA XR® (trospium)  
 VESICARE® (solifenacin)

**INFECTIOUS DISEASE: ANTIFUNGALS**

CICLOPIROX solution (generic Penlac®)  
 FLUCONAZOLE (generic Diflucan®)  
 GRIFULVIN®V tablets / GRISEOFULVIN susp  
 GRIS-PEG® (griseofulvin, ultramicronsize)  
 KETOCONAZOLE (generic Nizoral®)  
 TERBINAFINE (generic Lamisil®)

**INFECTIOUS DISEASE: CEPHALOSPORINS**

CEFACTOR / CEFACTOR ER (generic Ceclor®)  
 CEFADROXIL (generic Duricef®)  
 CEFDINIR (generic Omnicef®)  
 CEFPROZIL tabs, susp (generic Cefzil®) (suspension  
 no PA age <=12)  
 CEFUROXIME tabs, susp (generic Ceftin®)  
 (suspension no PA age <=12)  
 CEPHALEXIN (generic Keflex®)

**INFECTIOUS DISEASE: MACROLIDES**

AZITHROMYCIN (generic Zithromax®)  
 CLARITHROMYCIN IR / ER (generic Biaxin®)  
 ERYTHROMYCIN / ERY-TAB®  
 ERYPED® (erythromycin ethylsuccinate)  
 ERYTHROMYCIN W/SULFISOXAZOLE

**INFECTIOUS DISEASE: QUINOLONES**

AVELOX® (moxifloxacin)  
 CIPRO® susp (no PA for age <=12)  
 CIPROFLOXACIN (generic Cipro®)  
 OFLOXACIN (generic Floxin®)

**INFECTIOUS DISEASE: HEPATITIS C**

PEG-INTRON® (peginterferon alfa 2b)  
 PEGASYS® (peginterferon alfa 2A)  
 RIBAVIRIN (generic Rebetol®)

**INFECTIOUS DISEASE: ANTIVIRALS**

ACYCLOVIR (generic Zovirax®)  
 VALTREX® (valacyclovir)

**INJECTABLE ANTI-RHEUMATIC**

CIMZIA® syringe (certolizumab pegol)  
 ENBREL® (etanercept)  
 HUMIRA® (adalimumab)  
 KINERET® syringe (anakinra)

**OPHTHALMIC: ANTIHISTAMINES**

ALAWAY® OTC / ZADITOR® OTC (ketotifen)  
 BEPREVE® (bepotastine)  
 OPTIVAR® (azelastine)  
 PATADAY™ / PATANOL® (olopatadine)

**OPHTHALMIC: GLAUCOMA**

ALPHAGAN® P / COMBIGAN® (brimonidine +/-  
 timolol)  
 AZOPT® (brinzolamide)  
 BETAXOLOL  
 BETIMOL® (timolol)  
 BRIMONIDINE  
 CARTEOLOL  
 LATANAPROST (generic Xalatan®)  
 LEVOBUNOLOL (generic Betagan®)  
 METIPRANOLOL (generic Optipranolol®)  
 TIMOLOL gel solution (generic Timoptic® / XE®)  
 TRUSOPT® / COSOPT® (dorzolamide +/- timolol)

**OPHTHALMIC: ANTIBACTERIAL & COMB**

BACITRACIN  
 BACITRACIN-POLYMYXIN ointment  
 BLEPHAMIDE® (prednisolone/ sulfacetamide)  
 CILOXAN® ointment  
 CIPROFLOXACIN drops  
 ERYTHROMYCIN ointment  
 GENTAMICIN drops, ointment  
 MOXEZA® drops (moxifloxacin)  
 NEOMYCIN/POLYMYXIN/BACITRACIN ointment  
 NEOMYCIN/POLYMYXIN/BACITRACIN/  
 HYDROCORTISONE oint  
 NEOMYCIN/POLYMYXIN/DEXAMETHASONE  
 drops, ointment (Maxitrol®)  
 NEOMYCIN/POLYMYXIN/GRAMICIDIN drops  
 (Neosporin®)  
 NEOMYCIN/POLYMYXIN/HYDROCORTISONE  
 drops (generic Cortisporin®)  
 OFLOXACIN drops (generic Ocuflax®)  
 POLY-PRED® drops  
 POLYMYXIN /TRIMETHOPRIM drops (generic  
 Polytrim®)  
 PRED-G® drops, ointment (prednisolone/gentamicin)  
 TOBRADEX® drops (dexamethasone/ tobramycin)  
 TOBRAMYCIN drops  
 TOBREX® ointment  
 VIGAMOX® drops (moxifloxacin)  
 ZYLET® drops (tobramycin/loteprednol)

**OPHTHALMIC NSAIDs**

BROMDAY® (bromfenac)  
 DICLOFENAC (generic Voltaren®)  
 FLURBIPROFEN (generic Ocufer®)  
 KETOROLAC (generic Acular®, Acular LS®)

**OTIC: ANTIBACTERIAL & STERIOD COMB**

CIPRODEX® susp (ciprofloxacin /dexamethasone)  
 NEOMYCIN-POLYMYXIN B/  
 HYDROCORTISONE solution, suspension  
 (generic Cortisporin®)  
 OFLOXACIN drops (generic Floxin Otic®)

**RESPIRATORY: ANTIHISTAMINES & COMB**

CETIRIZINE chew tabs, syrup (generic Zyrtec®) (No  
 PA for age <=6)  
 CETIRIZINE tablets (generic of Zyrtec®)  
 CETIRIZINE-D (generic Zyrtec- D®)  
 LORATADINE / LORATADINE-D (generic of  
 Claritin®, Claritin-D®)

**RESPIRATORY: BETA-ADRENERGIC & COMB**

**\*\*Step therapy required for long-acting beta agonists and combinations – must try inhaled steroid first**

ACCUNEB® / ALBUTEROL 0.42mg/ml, 0.63mg/ml  
 (no PA for age <=12)  
 ADVAIR DISKUS® / HFA (salmeterol/  
 fluticasone)\*\*  
 ALBUTEROL neb (generic Proventil®, Ventolin®)  
 DULERA® (Formoterol/Mometasone) \*\*  
 FORADIL® (formoterol)  
 PROAIR® / PROVENTIL® / VENTOLIN®  
 SYMBICORT® (formoterol/budesonide) \*\*

**RESPIRATORY: COPD**

ATROVENT HFA® (ipratropium)  
 COMBIVENT MDI® (ipratropium/albuterol)  
 IPRATROPIUM nebulizer solution  
 IPRATROPIUM/ALBUTEROL (generic Duoneb®)  
 SPIRIVA® (tiotropium)

**RESPIRATORY: LEUKOTRIENE RECEPTOR**

ACCOLATE® (zafirlukast)  
 SINGULAIR® (montelukast)  
 ZAFIRLUKAST (generic Accolate®)

**RESPIRATORY: GLUCOCORTICOIDS**

ASMANEX® (mometasone)  
 FLOVENT DISKUS® and HFA (fluticasone)  
 PULMICORT® neb (no PA age <=8) (budesonide)  
 QVAR® (beclomethasone)

**RESPIRATORY: NASAL**

ASTELIN® / ASTEPRO® (azelastine)  
 FLUNISOLIDE  
 FLUTICASONE (generic Flonase®)  
 IPRATROPIUM (generic Atrovent®)  
 NASACORT®AQ (triamcinolone)  
 PATANASE® (olopatadine)

**TOPICAL: ACNE**

BENZACLIN® gel (benzoyl peroxide/clindamycin)  
 BENZOYL PEROXIDE cleanser, gel, lotion, wash  
 CLINDAMYCIN gel, lotion, sol (generic Cleocin T®)  
 ERYTHROMYCIN gel, solution (generic A/T/S®)  
 ERYTHROMYCIN-BENZOYL PEROXIDE gel  
 (generic Benzamycin®)  
 KLARON® lotion (sulfacetamide)  
 PANOXYL® 10% foam (benzoyl peroxide)  
 RETIN-A® / RETIN-A MICRO® crm, gel (tretinoin)  
 SODIUM SULF-SULFUR lotion, suspension, wash  
 TAZORAC® cream, gel (tazarotene)  
 ZODERM® cream

**TOPICAL: ANTI-FUNGALS**

CICLOPIROX cream, suspension, shampoo (generic  
 Loprox)  
 CLOTRIMAZOLE (generic Lotrimin®)  
 CLOTRIM/BETAMETHASONE (generic Lotrisone®)  
 ECONAZOLE (generic Spectazole®)  
 KETOCONAZOLE cream, shampoo (generic  
 Nizoral®)  
 LOPROX® gel (ciclopirox)  
 MICONAZOLE  
 NYSTATIN  
 NYSTATIN/TRIAMCINOLONE  
 TERBINAFINE (generic Lamisil®)  
 TOLNAFTATE (generic Tinactin®)

**TOPICAL: ANTI-PARASITICS SCABIES/LICE**

PERMETHRIN cream (generic Elimite®)  
 LICE kit [pyrethrins shampoo, comb, home spray]  
 (generic Rid® kit)  
 NATROBA® suspension (spinosad)  
 OVIDE® lotion (malathion)  
 PERMETHRIN lotion (generic Nix® cream rinse)  
 PIPERONYL BUTOXIDE-PYRETHRINS lot,  
 shampoo (generic Rid®)

**TOPICAL IMMUNOMODULATORS**

*Age 2 and older only*

ELIDEL® \* (pimecrolimus)  
 PROTOPIC® \* (tacrolimus)