

## **MEDICAL STAFF–APPROVED THERAPEUTIC INTERCHANGES**

Therapeutic Interchange is the practice of dispensing a therapeutically equivalent medication in place of the medication ordered. Only therapeutic interchanges approved by the medical executive committee are allowed. Pharmacy will automatically dispense the approved therapeutic interchange. Pharmacy will indicate that a therapeutic interchange has occurred by one or more of the following means:

- Enter a computer message that will display on forms and in the computer system (eg, labels, medication administration guide, medication administration record, electronic charting system)
- Clarify the order in the physician order section of the patient's chart

The physician may request that therapeutic interchange not be made.

Medications are listed by generic name whenever possible. Common trade name(s) are listed in parentheses after the generic name, if applicable. Common trade name(s) are listed in the table and cross-referenced to the generic name.

Therapeutic interchange with the formulary medication is made as indicated in the dose/frequency column. If the dose/frequency column is blank, interchanges are made at the same dose and interval as the original order. If only a dose is noted in the dose/frequency column, interchanges are made at the same frequency as the original order.

| MEDICATION ORDERED                                                                                                                                       | DOSE/FREQUENCY                                | THERAPEUTIC INTERCHANGE                                                                                                                                                                | DOSE/FREQUENCY                                      |
|----------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------|
| Abilify® PO                                                                                                                                              | 2 mg dose only                                | See Aripiprazole PO                                                                                                                                                                    |                                                     |
| Accolate® PO                                                                                                                                             |                                               | See Zafirlukast PO                                                                                                                                                                     |                                                     |
| Accupril® PO                                                                                                                                             |                                               | See Quinapril PO                                                                                                                                                                       |                                                     |
| Aceon® PO                                                                                                                                                |                                               | See Perindopril PO                                                                                                                                                                     |                                                     |
| Aciphex® PO/NG                                                                                                                                           |                                               | See Rabeprazole PO/NG                                                                                                                                                                  |                                                     |
| Aclometasone 0.05% Cream, Ointment (Aclovate®)                                                                                                           |                                               | Hydrocortisone 1% Cream, Ointment                                                                                                                                                      |                                                     |
| Aclovate® Cream, Ointment                                                                                                                                |                                               | See Aclometasone 0.05% Cream, Ointment                                                                                                                                                 |                                                     |
| Actigall® PO                                                                                                                                             |                                               | See Ursiodiol PO                                                                                                                                                                       |                                                     |
| Actonel® PO                                                                                                                                              |                                               | See Risedronate PO                                                                                                                                                                     |                                                     |
| Actonel + Calcium® PO                                                                                                                                    |                                               | See Risendronate + Calcium PO                                                                                                                                                          |                                                     |
| Advair® HFA Inhaler                                                                                                                                      |                                               | See Fluticasone/Salmeterol HFA                                                                                                                                                         |                                                     |
| Advicor® PO                                                                                                                                              | 500 mg/20 mg<br>750 mg/20 mg<br>1000 mg/20 mg | Niacin ER + Simvastatin (Niaspan® + Zocor®) PO                                                                                                                                         | 500 mg + 10 mg<br>750 mg + 10 mg<br>1000 mg + 10 mg |
| Alendronate PO (Fosamax®)                                                                                                                                |                                               | Discontinue during hospital admission to avoid esophageal adverse effects                                                                                                              |                                                     |
| Alendronate+D PO (Fosamax+D®)                                                                                                                            |                                               | Discontinue during hospital admission to avoid esophageal adverse effects                                                                                                              |                                                     |
| Aleve® PO                                                                                                                                                |                                               | See Naproxen Sodium PO                                                                                                                                                                 |                                                     |
| AllBee, AllBee with C® PO                                                                                                                                |                                               | See B Complex PO                                                                                                                                                                       |                                                     |
| Allegra® PO                                                                                                                                              | 180 mg Q day                                  | Fexofenadine PO (Allegra®)                                                                                                                                                             | 60 mg BID / Q12H                                    |
| Allegra-D® PO                                                                                                                                            | 60 mg/120 mg (1 tab)                          | Fexofenadine+Pseudoephedrine <b>LA</b> (Allegra® + Sudafed-12 hr®) PO<br>This is a generic substitution.<br><b>NOTE:</b> Be sure to use the <b>12-hour long acting</b> pseudoephedrine | 60 mg + 120 mg                                      |
| Alora® Patch                                                                                                                                             |                                               | See Estradiol Patch                                                                                                                                                                    |                                                     |
| Alphagan® 0.2% Ophth Soln                                                                                                                                |                                               | See Brimonidine 0.2% Ophth Soln                                                                                                                                                        |                                                     |
| Aluminum Hydroxide Liquid PO (Alternagel® Liquid)                                                                                                        | For every 1 mL                                | Aluminum Hydroxide Gel Liquid PO (Amphojel®)                                                                                                                                           | Dose is 2 mL                                        |
| Aluminum/Magnesium Antacid Susp PO (Maalox® Susp, Maalox Plus® Susp, Maalox Extra-Strength® Susp etc, Mylanta® Susp, Mylanta Double Strength® Susp etc.) |                                               | Magnesium Hydroxide/Aluminum Hydroxide/Simethicone Susp PO (MI-Acid® Susp)                                                                                                             |                                                     |
| Alternagel® Liquid PO                                                                                                                                    |                                               | See Aluminum Hydroxide Liquid PO                                                                                                                                                       |                                                     |
| Altoprev® PO                                                                                                                                             |                                               | See Lovastatin PO                                                                                                                                                                      |                                                     |
| Ambien CR® PO                                                                                                                                            |                                               | See Zolpidem CR PO                                                                                                                                                                     |                                                     |

| MEDICATION ORDERED                                                                                                                                                                 | DOSE/FREQUENCY                                                                                         | THERAPEUTIC INTERCHANGE                                                                                           | DOSE/FREQUENCY                                                                                              |
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| Amcinonide 0.1% Ointment (Cyclort®)                                                                                                                                                |                                                                                                        | Fluocinonide 0.05% Ointment                                                                                       |                                                                                                             |
| Ampicillin PO                                                                                                                                                                      | Any dose x 1 dose<br>Any dose Q day<br>Any dose BID / Q12H<br>Any dose TID / Q8H<br>Any dose QID / Q6H | Amoxicillin PO (Amoxil®)                                                                                          | Same dose x 1 dose<br>Same dose Q day<br>Same dose BID / Q12H<br>Same dose TID / Q8H<br>Same dose TID / Q8H |
| Anaprox® PO                                                                                                                                                                        |                                                                                                        | See Naproxen Sodium PO                                                                                            |                                                                                                             |
| Anexsia® PO                                                                                                                                                                        |                                                                                                        | See Hydrocodone/APAP PO                                                                                           |                                                                                                             |
| Anspor® PO                                                                                                                                                                         |                                                                                                        | See Cephadrine PO                                                                                                 |                                                                                                             |
| Anusol® Rectal Suppos                                                                                                                                                              |                                                                                                        | See Starch 51% Rectal Suppos                                                                                      |                                                                                                             |
| Aripiprazole PO (Abilify®)                                                                                                                                                         | 2 mg                                                                                                   | Aripiprazole PO (Abilify®)                                                                                        | 2.5 mg                                                                                                      |
| Aristocort A® 0.025% Cream, Ointment                                                                                                                                               |                                                                                                        | See Triamcinolone 0.025% Cream, Ointment                                                                          |                                                                                                             |
| Aristocort A® 0.5% Cream, Ointment                                                                                                                                                 |                                                                                                        | See Triamcinolone Acetate 0.5% Cream, Ointment                                                                    |                                                                                                             |
| Artificial Tear Ophth Soln (All OTC products)                                                                                                                                      |                                                                                                        | Polyvinyl Alcohol 1.4% Ophth Soln (AKWA Tears®)                                                                   |                                                                                                             |
| Aspirin/Enteric Coated Aspirin (ASA/ECASA) PO                                                                                                                                      | mg dose not specified                                                                                  | Aspirin/Enteric Coated Aspirin (ASA/ECASA) PO                                                                     | 325 mg                                                                                                      |
| Atacand® PO                                                                                                                                                                        |                                                                                                        | See Candesartan PO                                                                                                |                                                                                                             |
| Atarax® PO                                                                                                                                                                         |                                                                                                        | See Hydroxyzine Pamoate & Hydroxyzine HCl PO                                                                      |                                                                                                             |
| Avapro® PO                                                                                                                                                                         |                                                                                                        | See Irbesartan PO                                                                                                 |                                                                                                             |
| Axid® PO                                                                                                                                                                           |                                                                                                        | See Nizatidine PO                                                                                                 |                                                                                                             |
| Azulfidine® PO                                                                                                                                                                     |                                                                                                        | See Sulfasalazine PO                                                                                              |                                                                                                             |
| B Complex vitamins with or without Vitamin C, B Complex with Vitamin C-magnesium zinc Vicon-C®, B Complex-C-E-Zn PO and all similar products                                       |                                                                                                        | B-100 Super Balanced B Complex® PO<br><br>Or Epic Formulary Therapeutic Interchange product                       |                                                                                                             |
| B Complex-Vitamin C-folic acid 0.8 mg tab, B Complex-Vitamin C-folic acid 100 mg-1 mg tab (Dialyvite®), cyanocobalamine-folic acid-pyridoxime (Foltx®) PO and all similar products |                                                                                                        | B Complex-Vitamin C-folic acid 1 mg PO cap (Nephrovite®)<br><br>Or Epic Formulary Therapeutic Interchange product |                                                                                                             |
| Beclomethasone Nasal Spray (Beconase®, Beconase AQ®)                                                                                                                               | Any dose/Any frequency                                                                                 | Fluticasone Nasal Spray (Flonase®)                                                                                | 4-12 years old:<br>1 spray each nostril Q day<br>> 12 years:<br>2 sprays each nostril Q day                 |
| Beconase AQ® Nasal Spray<br>Beconase Nasal Spray                                                                                                                                   |                                                                                                        | See Beclomethasone Nasal Spray                                                                                    |                                                                                                             |
| Benazepril PO (Lotensin®)                                                                                                                                                          | 5 mg<br>10 mg<br>20 mg<br>40 mg                                                                        | Lisinopril PO (Prinivil®, Zestril®)                                                                               | 5 mg<br>10 mg<br>20 mg<br>40 mg                                                                             |

| MEDICATION ORDERED                                                                                            | DOSE/FREQUENCY                                                                                                                                                                                                | THERAPEUTIC INTERCHANGE                                        | DOSE/FREQUENCY       |
|---------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------|----------------------|
| Benicar® PO                                                                                                   |                                                                                                                                                                                                               | See Olmesartan PO                                              |                      |
| Benzocaine and Benzocaine-containing Topical Anesthetic Sprays (Cetacaine®, Exactacain®, Hurricaine®, Topex®) | PRN<br><b>This interchange applies to as needed/PRN use only.</b><br><b>This interchange does NOT apply when used on a one-time basis to facilitate intubations, endoscopic and bronchoscopic procedures.</b> | Chloraseptic® Spray                                            | PRN                  |
| Benzonatate PO (Tessalon®)                                                                                    | Dose not specified                                                                                                                                                                                            | Benzonatate PO (Tessalon®)                                     | 100 mg               |
| Benylin® Liquid PO                                                                                            |                                                                                                                                                                                                               | See Dextromethorphan Liquid PO                                 |                      |
| Berocca Plus ® PO                                                                                             |                                                                                                                                                                                                               | See B Complex Vitamin PO                                       |                      |
| Berocca PN® Vitamin Inj                                                                                       |                                                                                                                                                                                                               | Multiple Vitamin Inj (MVI-12® Inj)                             |                      |
| Betamethasone Dipropionate - <b>Augmented 0.05% Cream</b> (Diprolene AF®)                                     |                                                                                                                                                                                                               | Fluocinonide 0.05% Cream (Lidex®)                              |                      |
| Betamethasone Dipropionate - <b>Augmented 0.05% Ointment</b> (Diprolene®)                                     |                                                                                                                                                                                                               | Clobetasol Propionate 0.05% Cream (Temovate®)                  |                      |
| Betamethasone Dipropionate 0.05% Cream, Ointment (Diprosone®)                                                 |                                                                                                                                                                                                               | Triamcinolone 0.1% Cream, Ointment (Aristocort A®, Kenalog®)   |                      |
| Betamethasone Valerate 0.1% <b>Cream</b> (Valisone®)                                                          |                                                                                                                                                                                                               | Triamcinolone 0.1% <b>Cream</b> (Aristocort A®, Kenalog®)      |                      |
| Betamethasone Valerate 0.1% <b>Ointment</b> (Valisone®)                                                       |                                                                                                                                                                                                               | Fluocinonide 0.05% <b>Ointment</b> (Lidex®)                    |                      |
| Betaxolol 0.25% Ophth Susp (Betoptic-S®)                                                                      |                                                                                                                                                                                                               | Betaxolol 0.5% Ophth Solution (Betoptic®)                      |                      |
| Betapace AF® PO                                                                                               |                                                                                                                                                                                                               | See Sotalol AF®                                                |                      |
| Betoptic-S® 0.25% Ophth Susp                                                                                  |                                                                                                                                                                                                               | See Betaxolol 0.25% Ophth Susp                                 |                      |
| Biaxin® XR PO                                                                                                 |                                                                                                                                                                                                               | See Clarithromycin Extended Release PO                         |                      |
| Bidel® PO                                                                                                     | 20 mg/37.5 mg (1 tab)                                                                                                                                                                                         | Isosorbide Dinitrate + Hydralazine (Isordil®) + Apresoline® PO | 20 mg + 35 mg        |
| Bidex DM® PO                                                                                                  | 800 mg/30 mg (1 tab)                                                                                                                                                                                          | Guaifenisin/Dextromethorphan ER PO                             | 600 mg/30 mg (1 tab) |
| Bimatoprost 0.03% Ophth Soln (Lumigan®)                                                                       | 1 drop Q day                                                                                                                                                                                                  | Latanoprost 0.005% Ophth Soln (Xalatan®)                       | 1 drop Q bedtime     |
| Brimonidine 0.2% Ophth Soln (Alphagan®)                                                                       |                                                                                                                                                                                                               | Brimonidine 0.15% Ophth Soln (Alphagan-P®)                     |                      |
| Boniva® PO                                                                                                    |                                                                                                                                                                                                               | See Ibandronate PO                                             |                      |

| MEDICATION ORDERED                                                                    | DOSE/FREQUENCY                                                                                    | THERAPEUTIC INTERCHANGE                                                           | DOSE/FREQUENCY                                                                                |
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| Budesonide/Fometerol Inhaler (Symbicort®)<br>80/4.5 mcg<br>160/4.5 mcg<br>160/4.5 mcg | 1 inhalation BID / Q12H<br>1 inhalation BID / Q12H<br>2 inhalation BID / Q12H                     | Fluticasone/Salmeterol Diskus (Advair®)<br>100/50 mcg<br>250/50 mcg<br>500/50 mcg | 1 inhalation BID / Q12H<br>1 inhalation BID / Q12H<br>1 inhalation BID / Q12H                 |
| Note: There are no approved interchanges for Q day dosing regimens.                   |                                                                                                   |                                                                                   |                                                                                               |
| Budesonide Nasal Spray (Rhinocort®, Rhinocort Aqua®)                                  | Any dose/Any frequency                                                                            | Fluticasone Nasal Spray (Flonase®)                                                | 4-12 years old:<br>1 spray each nostril Q day<br>> 12 years:<br>2 sprays each nostril Q day   |
| Caladryl® Lotion                                                                      |                                                                                                   | Calamine Lotion                                                                   |                                                                                               |
| Calcium Acetate Capsules PO (PhosLo®)                                                 |                                                                                                   | Calcium Acetate Tablets PO (Eliphos®)                                             |                                                                                               |
| Calcium Carbonate PO                                                                  | 650 mg<br>1250 mg (elemental calcium 500 mg)                                                      | Calcium Carbonate PO                                                              | 500 mg<br>1500 mg (elemental calcium 600 mg)                                                  |
| Calcium/Calcium Carbonate with Vitamin D PO                                           | Any combination product                                                                           | Calcium with Vitamin D PO (Caltrate 600 + D®)                                     | 600 mg/400 I-units                                                                            |
| Candesartan PO (Atacand®)                                                             | <b>Total daily dose:</b><br>4 mg<br>8 mg<br>16 mg<br>32 mg                                        | Valsartan PO (Diovan® PO)                                                         | 20 mg BID / Q12H<br>40 mg BID / Q12H<br>80 mg BID / Q12H<br>160 mg BID / Q12H                 |
| Cardizem CD PO                                                                        |                                                                                                   | See Diltiazem Extended Release Products PO                                        |                                                                                               |
| Cardizem LA® PO                                                                       |                                                                                                   | See Diltiazem Extended Release Products PO                                        |                                                                                               |
| Cartia XT® PO                                                                         |                                                                                                   | See Diltiazem Extended Release Products PO                                        |                                                                                               |
| Carvidolol Controlled Release PO (Coreg®)                                             | 10 mg Q day / Q24H<br>20 mg Q day / Q24H<br>40 mg Q day / Q24H<br>80 mg Q day / Q24H              | Carvidolol Immediate Release PO (Coreg CR®)                                       | 3.125 mg BID / Q12H<br>6.25 mg BID / Q12H<br>12.5 mg BID / Q12H<br>25 mg BID / Q12H           |
| Ceclor® PO                                                                            |                                                                                                   | See Cefaclor PO                                                                   |                                                                                               |
| Ceclor® XR PO                                                                         |                                                                                                   | See Cefaclor Extended Release PO                                                  |                                                                                               |
| Cefaclor PO (Ceclor®)                                                                 | Adults:<br>250 mg TID / Q8H<br><br>Pediatrics:<br>20-40 mg/kg BID / Q12H<br>20-40 mg/kg TID / Q8H | Cefuroxime PO (Ceftin®)                                                           | Adults:<br>250 mg BID / Q12H<br><br>Pediatrics:<br>10 mg/kg BID / Q12H<br>15 mg/kg BID / Q12H |
| Cefaclor Extended Release PO (Ceclor® XR)                                             | 375 mg PO BID / Q12H                                                                              | Cefuroxime PO (Ceftin®)                                                           | 250 mg PO BID / Q12H                                                                          |

| MEDICATION ORDERED                            | DOSE/FREQUENCY                                                                                                                                                                                                                                                                                                                                                                  | THERAPEUTIC INTERCHANGE                                            | DOSE/FREQUENCY                                                                                                                                                                                                                                                                                                                                                                             |
|-----------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Cefadroxil PO<br>(Duricef®)                   | Adults:<br>500 mg BID / Q12H<br>1 gram BID / Q12H<br><br>Pediatrics:<br><i>Mild-Mod Infection</i><br>( <i>Strep Throat</i> , <i>UTI</i> ,<br><i>Simple Cellulitis</i> )<br>15 mg/kg BID / Q12H<br>30 mg/kg Q day / Q24H<br><br><i>Severe Infection</i><br>( <i>Erysipelsa</i> , <i>Otitis Media</i> ,<br><i>Osteomyelitis</i> )<br>15 mg/kg BID / Q12H<br>30 mg/kg Q day / Q24H | Cephalexin PO<br>(Keflex®)                                         | Adults:<br>250 mg QID / Q6H<br>500 mg QID / Q6H<br><br>Pediatrics:<br><i>Mild-Mod Infection</i><br>( <i>Strep Throat</i> , <i>UTI</i> , <i>Simple Cellulitis</i> )<br>6.25-12.5 mg/kg QID / Q6H<br>6.25-12.5 mg/kg QID / Q6H<br><br><i>Severe Infection</i><br>( <i>Erysipelsa</i> , <i>Otitis Media</i> ,<br><i>Osteomyelitis</i> )<br>12.5-25 mg/kg QID / Q6H<br>12.5-25 mg/kg QID / Q6H |
| Cefprozil PO<br>(Cefzil®)                     | Adults:<br>250 mg BID / Q12H<br>500 mg PO BID / Q12H<br><br>Pediatrics:<br>7.5 mg/kg BID / Q12H<br>15 mg/kg BID / Q12H                                                                                                                                                                                                                                                          | Cefuroxime PO<br>(Ceftin®)                                         | Adults:<br>250 mg BID / Q12H<br>500 mg PO BID / Q12H<br><br>Pediatrics:<br>10 mg/kg BID / Q12H<br>15 mg/kg BID / Q12H                                                                                                                                                                                                                                                                      |
| Cefzil® PO                                    |                                                                                                                                                                                                                                                                                                                                                                                 | See Cefprozil PO                                                   |                                                                                                                                                                                                                                                                                                                                                                                            |
| Centrum® PO                                   |                                                                                                                                                                                                                                                                                                                                                                                 | See Multiple Vitamin with Minerals PO                              |                                                                                                                                                                                                                                                                                                                                                                                            |
| Cephradine PO<br>(Anspor®, Keftab®, Velosef®) |                                                                                                                                                                                                                                                                                                                                                                                 | Cephalexin PO<br>(Keflex®)                                         |                                                                                                                                                                                                                                                                                                                                                                                            |
| Cepacol® Lozenge                              |                                                                                                                                                                                                                                                                                                                                                                                 | Sucrets® Lozenge                                                   |                                                                                                                                                                                                                                                                                                                                                                                            |
| Cepastat® Lozenge                             |                                                                                                                                                                                                                                                                                                                                                                                 | Sucrets® Lozenge                                                   |                                                                                                                                                                                                                                                                                                                                                                                            |
| Cetacaine® Spray                              | PRN<br><b>This interchange applies to as needed/PRN use only.</b><br><br><b>This interchange does NOT apply when used on a one-time basis to facilitate intubations, endoscopic and bronchoscopic procedures.</b>                                                                                                                                                               | See Benzocaine and Benzocaine-containing Topical Anesthetic Sprays |                                                                                                                                                                                                                                                                                                                                                                                            |
| Chapstick®                                    |                                                                                                                                                                                                                                                                                                                                                                                 | Blistex® Ointment                                                  |                                                                                                                                                                                                                                                                                                                                                                                            |
| Children's Chewable Vitamin                   |                                                                                                                                                                                                                                                                                                                                                                                 | See Multiple Vitamin - Children's Chewable PO                      |                                                                                                                                                                                                                                                                                                                                                                                            |
| Chloraseptic® Lozenge                         |                                                                                                                                                                                                                                                                                                                                                                                 | Sucrets® Lozenge                                                   |                                                                                                                                                                                                                                                                                                                                                                                            |
| Chlorthalidone PO<br>(Hygroton®)              |                                                                                                                                                                                                                                                                                                                                                                                 | Hydrochlorothiazide PO<br>(Esidrex®, Oretic®)                      |                                                                                                                                                                                                                                                                                                                                                                                            |
| Cholecalciferol PO<br>(Vitamin D3)            | 1000 units                                                                                                                                                                                                                                                                                                                                                                      | Cholecalciferol PO<br>(Vitamin D3)                                 | 800 units                                                                                                                                                                                                                                                                                                                                                                                  |
| Ciclesonide<br>(Omnaris®)                     | Any dose/Any frequency                                                                                                                                                                                                                                                                                                                                                          | Fluticasone Nasal Spray<br>(Flonase®)                              | <i>4-12 years old:</i><br>1 spray each nostril Q day<br><i>&gt; 12 years:</i><br>2 sprays each nostril Q day                                                                                                                                                                                                                                                                               |

| MEDICATION ORDERED                                   | DOSE/FREQUENCY                                                                                                                                   | THERAPEUTIC INTERCHANGE                                                                                                                                                                                 | DOSE/FREQUENCY                                                                                                                   |
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| Cimetidine PO<br>(Tagamet®)                          | 200 - 400 mg BID / Q12H<br>200 - 400 mg TID / Q8H<br>200 - 400 mg QID / Q6H<br>200 mg Q day or QHS<br>300 mg Q day or QHS<br>400 mg Q day or QHS | Ranitidine PO<br>(Zantac®)                                                                                                                                                                              | 150 mg BID / Q12H<br>150 mg BID / Q12H<br>150 mg BID / Q12H<br>150 mg Q day or QHS 150<br>mg Q day or QHS 150 mg<br>Q day or QHS |
| Cipro® IV                                            |                                                                                                                                                  | See Ciprofloxacin IV                                                                                                                                                                                    |                                                                                                                                  |
| Cipro® PO                                            |                                                                                                                                                  | See Ciprofloxacin PO                                                                                                                                                                                    |                                                                                                                                  |
| Cipro <b>XR</b> ® PO                                 |                                                                                                                                                  | See Ciprofloxacin <b>XR</b> PO                                                                                                                                                                          |                                                                                                                                  |
| Ciprofloxacin IV<br>(Cipro®)                         | 250 mg<br>500 mg                                                                                                                                 | Ciprofloxacin IV<br>(Cipro®)                                                                                                                                                                            | 200 mg<br>400 mg                                                                                                                 |
| Ciprofloxacin PO<br>(Cipro®)                         | 200 mg<br>400 mg                                                                                                                                 | Ciprofloxacin PO<br>(Cipro®)                                                                                                                                                                            | 250 mg<br>500 mg                                                                                                                 |
| Ciprofloxacin <b>XR</b> PO<br>(Cipro <b>XR</b> ®)    | 500 mg Q day<br>1000 mg Q day                                                                                                                    | Ciprofloxacin PO<br>(Cipro®)                                                                                                                                                                            | 250 mg BID / Q12H<br>500 mg BID / Q12H                                                                                           |
| Citrucel® Powder PO                                  |                                                                                                                                                  | See Methylcellulose Powder PO                                                                                                                                                                           |                                                                                                                                  |
| Clarithromycin extended release<br>PO<br>(Biaxin XR) | 1 gram Q day                                                                                                                                     | Clarithromycin PO<br>(Biaxin®)                                                                                                                                                                          | 500 mg PO BID / Q12H                                                                                                             |
| Clocortolone 0.1% Cream,<br>(Cloderm®)               |                                                                                                                                                  | Triamcinolone 0.1% Cream<br>(Aristocort A®, Kenalog®)                                                                                                                                                   |                                                                                                                                  |
| Cloderm® 0.1% Cream                                  |                                                                                                                                                  | See Clocortolone 0.1% Cream                                                                                                                                                                             |                                                                                                                                  |
| Citrucel® Powder PO                                  |                                                                                                                                                  | See Methylcellulose Powder PO                                                                                                                                                                           |                                                                                                                                  |
| Claritin-D® <b>12 hour</b> PO                        | 5 mg/120 mg (1 tab)                                                                                                                              | Loratadine + Pseudoephedrine <b>LA</b><br>(Claritin® + Sudafed-12 hour®) PO<br>This is a generic substitution.<br><b>NOTE:</b> Be sure to use the <b>12-hour</b><br><b>long acting</b> pseudoephedrine. | 5 mg + 120 mg                                                                                                                    |
| Claritin-D® <b>24 hour</b> PO                        | 1 tab Q day<br>(1 tab = 10 mg/240 mg)                                                                                                            | Loratadine + Pseudoephedrine <b>LA</b><br>(Claritin® + Sudafed-12 hour®) PO<br><b>NOTE:</b> Be sure to use the <b>12-hour</b><br><b>long acting</b> pseudoephedrine.                                    | 5 mg + 120 mg BID / Q12H                                                                                                         |
| Clarinex® PO                                         |                                                                                                                                                  | See Desloratadine PO                                                                                                                                                                                    |                                                                                                                                  |
| Clotrimazole Vaginal Cream<br>(Gyne-Lotrimin®)       |                                                                                                                                                  | Miconazole Nitrate 2% Vaginal<br>Cream (Monistat®)                                                                                                                                                      |                                                                                                                                  |
| Clotrimazole Vaginal Suppos<br>(Gyne-Lotrimin®)      |                                                                                                                                                  | Miconazole Nitrate Vaginal Suppos<br>(Monistat®)                                                                                                                                                        |                                                                                                                                  |
| Co-Gesic® PO                                         |                                                                                                                                                  | See Hydrocodone/APAP PO                                                                                                                                                                                 |                                                                                                                                  |
| Codclear DH® Syrup PO                                |                                                                                                                                                  | See Hydrocodone/Guaifenesin Syrup<br>PO                                                                                                                                                                 |                                                                                                                                  |
| ColBenemid® PO                                       | 0.5 mg/500 mg (1 tab)                                                                                                                            | Colchicine + Probenecid                                                                                                                                                                                 | 0.6 mg + 500 mg                                                                                                                  |
| Colchicine PO                                        | 0.5 mg                                                                                                                                           | Colchicine PO                                                                                                                                                                                           | 0.6 mg                                                                                                                           |
| Colchicine/Probenecid PO<br>(ColBenemid®)            | 0.5 mg/500 mg (1 tab)                                                                                                                            | Colchicine + Probenecid PO                                                                                                                                                                              | 0.6 mg + 500 mg                                                                                                                  |
| ColyMycin S® Otic Susp                               |                                                                                                                                                  | Neomycin/Polymyxin B<br>Sulfates/Hydrocortisone Otic Susp<br>(Cortisporin® Otic, Cortomycin®<br>Otic)                                                                                                   |                                                                                                                                  |

| MEDICATION ORDERED                                                       | DOSE/FREQUENCY | THERAPEUTIC INTERCHANGE                                                     | DOSE/FREQUENCY  |
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| Cordran® 0.025% Cream, Ointment                                          |                | See Flurandrenolide 0.025% Cream, Ointment                                  |                 |
| Cordran® SP 0.05% Cream, Ointment                                        |                | See Flurandrenolide 0.05% Cream, Ointment                                   |                 |
| Coreg® CR PO                                                             |                | See Carvidolol Immediate Release PO                                         |                 |
| Cosopt® Ophth Soln                                                       | 1 drop         | Dorzolamide 2% + Timolol 0.5% Ophth Soln (Trusopt® + Timoptic® Ophth Solns) | 1 drop + 1 drop |
| Crestor® PO                                                              |                | See Rosuvastatin PO                                                         |                 |
| Cutivate® 0.05% Cream                                                    |                | See Fluticasone 0.05% Cream                                                 |                 |
| Cyclocort® 0.1% Ointment                                                 |                | See Amcinonide 0.1% Ointment                                                |                 |
| Dacriose® Ophth Soln                                                     |                | Eye Stream Ophth Soln                                                       |                 |
| Darvon-N® PO                                                             |                | See Propoxyphene Napsylate PO                                               |                 |
| Decadron® 0.1% Cream, Ointment                                           |                | See Dexamethasone 0.1% Cream, Ointment                                      |                 |
| Desloratadine PO (Clarinet®)                                             | 5 mg           | Loratadine PO (Claritin®)                                                   | 10 mg           |
| Denoside 0.05% Cream, Ointment (Tridesilon®)                             |                | Hydrocortisone 1% Cream, Ointment                                           |                 |
| Desoximetasone 0.05% Cream, Ointment (Topicort®)                         |                | Triamcinolone 0.1% Cream, Ointment (Aristocort A®, Kenalog®)                |                 |
| Desoximetasone 0.25% Cream (Topicort®)                                   |                | Fluocinonide 0.05% Cream (Lidex®)                                           |                 |
| Detrol LA® PO                                                            |                | See Tolterodine extended release PO                                         |                 |
| Dexamethasone 0.1% Cream, Ointment (Decadron®)                           |                | Hydrocortisone 1% Cream, Ointment                                           |                 |
| Dexlansoprazole PO (Kapidex®)<br><b>Patient able to take tablets</b>     | 30 mg<br>60 mg | Omeprazole PO (Prilosec®)                                                   | 20 mg 20        |
| Dexlansoprazole PO (Kapidex®)<br><b>Patient not able to take tablets</b> | 30 mg<br>60 mg | Lansoprazole SoluTab PO/NG (Prevacid® SoluTab)                              | 30 mg 30        |
| Dextromethorphan Liquid PO (Benylin®)                                    |                | Diphenhydramine Liquid PO (Benadryl®)                                       |                 |
| Dialvite® PO                                                             |                | See renal multivitamin PO                                                   |                 |
| Diflorasone 0.05% <b>Cream</b> (Psorcon-E®)                              |                | Fluocinonide 0.05% Cream (Lidex®)                                           |                 |
| Diflorasone 0.05% <b>Ointment</b> (Psorcon-E®)                           |                | Clobetasol 0.05% Ointment (Temovate®)                                       |                 |
| Diflorasone Diacetate 0.05% Cream (Maxiflor®)                            |                | Betamethasone Dipropionate 0.05% Cream (Diprosone®)                         |                 |
| Dilacor XR® PO                                                           |                | See Diltiazem Extended Release Products PO                                  |                 |

| MEDICATION ORDERED                                                                                                                             | DOSE/FREQUENCY                                                           | THERAPEUTIC INTERCHANGE                                                                                                                                                                          | DOSE/FREQUENCY                                                           |
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| Diltia XT® PO                                                                                                                                  |                                                                          | See Diltiazem Extended Release Products PO                                                                                                                                                       |                                                                          |
| Diltiazem Extended Release Products PO ( <b>24 hr Products</b> )<br>(Cardizem CD®, Cardizem LA®, Cartia XT®, Dilacor XR®, Diltia XT®, Tiazac®) |                                                                          | Diltiazem Extended Release PO (Cardizem CD®)                                                                                                                                                     |                                                                          |
| Dimenhydrinate PO                                                                                                                              |                                                                          | Diphenhydramine PO (Benadryl®)                                                                                                                                                                   |                                                                          |
| Diprolene AF® 0.05% <b>Cream</b>                                                                                                               |                                                                          | See Betamethasone Dipropionate - <b>Augmented 0.05% Cream</b>                                                                                                                                    |                                                                          |
| Diprolene® 0.05% <b>Ointment</b>                                                                                                               |                                                                          | See Betamethasone Dipropionate - <b>Augmented 0.05% Ointment</b>                                                                                                                                 |                                                                          |
| Diprosone® 0.05% Cream, Ointment                                                                                                               |                                                                          | See Betamethasone Dipropionate - 0.05% Cream, Ointment                                                                                                                                           |                                                                          |
| Docusate Calcium PO (Surfak®)                                                                                                                  | 240 mg                                                                   | Docusate Sodium PO (Colace®)                                                                                                                                                                     | 200 mg                                                                   |
| Docusate/Casanthranol PO (Peri-Colace®, Doxidan®)                                                                                              | 1 tab or cap                                                             | Docusate/Senna Concentrate PO (Senokot-S®)                                                                                                                                                       | 1 tab                                                                    |
| Doxidan® PO                                                                                                                                    |                                                                          | See Docusate/Casanthranol PO                                                                                                                                                                     |                                                                          |
| Dramamine® PO<br><b>NOTE:</b> Do <b>not</b> interchange for Dramamine II® <b>OR</b> Dramamine Less Drowsy®                                     |                                                                          | Diphenhydramine PO (Benadryl®)                                                                                                                                                                   |                                                                          |
| Dry Eyes® Ophth Soln                                                                                                                           |                                                                          | Polyvinyl Alcohol 1.4% Ophth Soln (AKWA Tears®)                                                                                                                                                  |                                                                          |
| DuoNeb® Inh                                                                                                                                    |                                                                          | Ipratropium + Albuterol Inh (Atrovent® + Proventil®)                                                                                                                                             | 0.5 mg + 2.5 mg                                                          |
| Duricef® PO                                                                                                                                    |                                                                          | See Cefadroxil PO                                                                                                                                                                                |                                                                          |
| Elocon® 0.1% Cream, Ointment                                                                                                                   |                                                                          | See Mometasone 0.1% Cream, Ointment                                                                                                                                                              |                                                                          |
| Enoxaparin subcut (Lovenox®)<br><br>Medical Staff approved renal dosing                                                                        | 30 mg BID / Q12h<br>40 mg Q day<br>1 mg/kg BID / Q12H<br>1.5 mg/kg Q day | <b>CrCl greater than 30 mL/min</b><br><br>NOTE: For VTE prophylaxis after hip and knee replacement surgery, the preferred dosing regimen when CrCl is greater than 30 mL/min is 30 mg BID / Q12H | 30 mg BID / Q12h<br>40 mg Q day<br>1 mg/kg BID / Q12H<br>1.5 mg/kg Q day |
|                                                                                                                                                | 30 mg BID / Q12h<br>40 mg Q day<br>1 mg/kg BID / Q12H<br>1.5 mg/kg Q day | <b>CrCl 30 mL/min or less</b>                                                                                                                                                                    | 30 mg Q day<br>30 mg Q day<br>1 mg/kg Q day<br>1 mg/kg Q day             |
| Entex LA® PO                                                                                                                                   |                                                                          | See Phenylephrine/Guaifenesin SR PO                                                                                                                                                              |                                                                          |
| EPA/DHA and combinations products PO                                                                                                           |                                                                          | See Fish Oil                                                                                                                                                                                     |                                                                          |
| Eprosartan PO (Tevetan®)                                                                                                                       | 400 mg<br>600 mg<br>800 mg                                               | Losartan PO (Cozaar®)                                                                                                                                                                            | 25 mg<br>50 mg<br>100 mg                                                 |
| Ergocalciferol PO (Vitamin D2)                                                                                                                 | 400 units                                                                | Cholecalciferol PO (Vitamin D3)                                                                                                                                                                  | 400 units                                                                |

| MEDICATION ORDERED                                                                                                                               | DOSE/FREQUENCY                                                                                                                                                                                                    | THERAPEUTIC INTERCHANGE                                            | DOSE/FREQUENCY                                      |
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| Ergoloid Mesylate Liquid Cap PO (Hydergine LC®)                                                                                                  |                                                                                                                                                                                                                   | Ergoloid Mesylates PO (Hydergine® Oral)                            |                                                     |
| Erythromycin Stearate PO (PCE®)                                                                                                                  |                                                                                                                                                                                                                   | Erythromycin Base PO (E-mycin®)                                    |                                                     |
| Esclim® Patch                                                                                                                                    |                                                                                                                                                                                                                   | See Estradiol Patch                                                |                                                     |
| Esomeprazole PO (Nexium®)<br><b>Patient able to take tablets</b>                                                                                 | 20 mg<br>40 mg<br>40 mg Q day as component of multidrug regimen for H pylori                                                                                                                                      | Omeprazole PO (Prilosec®)                                          | 20 mg<br>20 mg<br>20 mg PO BID                      |
| Esomeprazole PO/NG (Nexium®)<br><b>Patient not able to take tablets</b>                                                                          | 20 mg<br>40 mg                                                                                                                                                                                                    | Lansoprazole SoluTab PO/NG (Prevacid® SoluTab)                     | 15 mg<br>30 mg                                      |
| Esomeprazole IV (Nexium®)<br><b>NOTE:</b> Do <b>not</b> interchange continuous infusions. Contact Prescriber for change to pantoprazole infusion | 20 mg<br>40 mg                                                                                                                                                                                                    | Pantoprazole IV (Protonix®)                                        | 40 mg<br>40 mg                                      |
| Estraderm® Patch                                                                                                                                 |                                                                                                                                                                                                                   | See Estradiol Patch                                                |                                                     |
| Estradiol Patch (Alora®, Esclim®, Estraderm®, Vivelle®, Vivelle Dot®)                                                                            | 0.05 mg/day twice weekly<br>0.1 mg/day, twice weekly                                                                                                                                                              | Estradiol Patch (Climara®)                                         | 0.05 mg/day, once weekly<br>0.1 mg/day, once weekly |
| Exactacain® Spray                                                                                                                                | PRN<br><b>This interchange applies to as needed/PRN use only.</b><br><br><b>This interchange does NOT apply when used on a one-time basis to facilitate intubations, endoscopic and bronchoscopic procedures.</b> | See Benzocaine and Benzocaine-containing Topical Anesthetic Sprays |                                                     |
| Famciclovir PO (Famvir®)                                                                                                                         | 500 mg                                                                                                                                                                                                            | Valacyclovir PO (Valtrex®)                                         | 1 gram                                              |
| Famotidine PO (Pepcid®)                                                                                                                          | 10 mg<br><b>Ages 17 years and older only</b>                                                                                                                                                                      | Famotidine PO (Pepcid®)                                            | 20 mg                                               |
| Famvir® PO                                                                                                                                       |                                                                                                                                                                                                                   | See Famciclovir PO                                                 |                                                     |
| Fenofibrate all oral products                                                                                                                    | 40-100 mg<br>101-200 mg                                                                                                                                                                                           | Fenofibrate PO (Lofibra®)                                          | 67 mg<br>134 mg                                     |
| Feosol® Liquid                                                                                                                                   |                                                                                                                                                                                                                   | See Ferrous Sulfate Liquid                                         |                                                     |
| Feosol® PO                                                                                                                                       | 1 tab (Iron 50 mg)                                                                                                                                                                                                | Ferrous Sulfate PO                                                 | 300 mg or 325 mg                                    |
| Fergon® PO                                                                                                                                       |                                                                                                                                                                                                                   | See Ferrous Gluconate PO                                           |                                                     |
| Ferrous Gluconate PO (Fergon®)                                                                                                                   | Any dose                                                                                                                                                                                                          | Ferrous Sulfate PO                                                 | 300 mg or 325 mg                                    |
| Ferrous Sulfate PO                                                                                                                               | Any strength other than 300 mg or 325 mg                                                                                                                                                                          | Ferrous Sulfate PO                                                 | 300 mg or 325 mg                                    |
| Ferrous Sulfate Liquid (Feosol®)                                                                                                                 | 220 mg/5 mL                                                                                                                                                                                                       | Ferrous Sulfate Liquid                                             | 300 mg/5 mL                                         |

| MEDICATION ORDERED                                                                                                                                                                                                            | DOSE/FREQUENCY                                                                                                                                      | THERAPEUTIC INTERCHANGE                                                                     | DOSE/FREQUENCY                                                                                                       |
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| Fexofenadine PO<br>(Allegra®)                                                                                                                                                                                                 | 180 mg Q day                                                                                                                                        | Fexofenadine PO<br>(Allegra®)                                                               | 60 mg BID / Q12H                                                                                                     |
| Fish Oil Supplements PO<br>Fish Oil-Combination<br>Supplements PO<br>Includes interchange of<br>supplements and combination<br>supplements named using<br>synonyms for Fish Oil (Omega 3-<br>Acid Ethyl Esters, EPA/DHA etc.) | Up to 1500 mg<br>1501 - 2500 mg<br>2501 mg - 3500 mg<br>greater than 3501 mg<br><br>Interchange is based on<br>fish oil component of<br>supplement. | Omega 3-Acid Ethyl Esters PO<br>(Lovaza®)                                                   | 1000 mg<br>2000 mg<br>3000 mg<br>4000 mg<br><br>Maximum dose for any<br>therapeutic interchange is<br>4000 mg daily. |
| Floxin® Otic Soln                                                                                                                                                                                                             |                                                                                                                                                     | See Ofloxacin Otic Soln                                                                     |                                                                                                                      |
| Flunisolide Nasal Spray<br>(Nasalide®, Nasarel®)                                                                                                                                                                              | Any dose/Any frequency                                                                                                                              | Fluticasone Nasal Spray<br>(Flonase®)                                                       | <i>4-12 years old:</i><br>1 spray each nostril Q day<br><i>&gt; 12 years:</i><br>2 sprays each nostril Q day         |
| Fluocinolone 0.01% Cream,<br>Ointment<br>(Synalar®)                                                                                                                                                                           |                                                                                                                                                     | Hydrocortisone 1% Cream, Ointment                                                           |                                                                                                                      |
| Fluocinolone 0.025% Cream,<br>Ointment<br>(Synalar®)                                                                                                                                                                          |                                                                                                                                                     | Triamcinolone 0.1% Cream,<br>Ointment<br>(Aristocort A®, Kenalog®)                          |                                                                                                                      |
| Fluocinolone 0.2% Cream<br>(Synalar HP®)                                                                                                                                                                                      |                                                                                                                                                     | Fluocinonide 0.05% Cream<br>(Lidex®)                                                        |                                                                                                                      |
| Flurandrenolide 0.025% Cream,<br>Ointment<br>(Cordran®)                                                                                                                                                                       |                                                                                                                                                     | Triamcinolone 0.1% Cream,<br>Ointment<br>(Aristocort A®, Kenalog®)                          |                                                                                                                      |
| Flurandrenolide 0.05% Cream,<br>Ointment<br>(Cordran® SP)                                                                                                                                                                     |                                                                                                                                                     | Triamcinolone 0.1% Cream,<br>Ointment<br>(Aristocort A®, Kenalog®)                          |                                                                                                                      |
| Fluticasone Furoate Nasal Spray<br>(Veramyst®)                                                                                                                                                                                | Any dose/Any frequency                                                                                                                              | Fluticasone Nasal Spray<br>(Flonase®)                                                       | <i>4-12 years old:</i><br>1 spray each nostril Q day<br><i>&gt; 12 years:</i><br>2 sprays each nostril Q day         |
| Fluticasone 0.05% Cream<br>(Cutivate®)                                                                                                                                                                                        |                                                                                                                                                     | Triamcinolone 0.1% Cream<br>(Aristocort A®, Kenalog®)                                       |                                                                                                                      |
| Fluticasone/Salmeterol HFA<br>(Advair HFA®)<br>41/21 mcg<br>115/21 mcg<br>230/21 mcg                                                                                                                                          | 2 inhalation BID / Q12H<br>2 inhalation BID / Q12H<br>2 inhalation BID / Q12H                                                                       | Fluticasone/Salmeterol Diskus<br>(Advair Diskus®)<br>100/50 mcg<br>250/50 mcg<br>500/50 mcg | 1 inhalation BID / Q12H<br>1 inhalation BID / Q12H<br>1 inhalation BID / Q12H                                        |
| Fluvastatin PO<br>(Lescol®, Lescol® XL)                                                                                                                                                                                       | 20 mg<br>40 mg<br>80 mg                                                                                                                             | Simvastatin PO<br>(Zocor®)                                                                  | 5 mg<br>10 mg<br>20 mg                                                                                               |
| Folic Acid PO                                                                                                                                                                                                                 | 400 mcg<br>800 mcg                                                                                                                                  | Folic Acid PO                                                                               | 500 mcg<br>1 mg (1000 mcg)                                                                                           |
| Foltx® PO                                                                                                                                                                                                                     |                                                                                                                                                     | See renal multivitamin PO                                                                   |                                                                                                                      |
| Fortamet® ER PO                                                                                                                                                                                                               |                                                                                                                                                     | Metformin ER PO (Glucophage<br>XR®)                                                         |                                                                                                                      |
| Fosamax® PO                                                                                                                                                                                                                   |                                                                                                                                                     | See Alendronate PO                                                                          |                                                                                                                      |
| Fosamax+D® PO                                                                                                                                                                                                                 |                                                                                                                                                     | See Alendronate+D PO                                                                        |                                                                                                                      |

| MEDICATION ORDERED                                                                      | DOSE/FREQUENCY                                                                                                                                                                                                                          | THERAPEUTIC INTERCHANGE                                                                       | DOSE/FREQUENCY                                            |
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| Fosinopril PO<br>(Monopril®)                                                            | 5 mg<br>10 mg<br>20 mg<br>40 mg                                                                                                                                                                                                         | Lisinopril PO<br>(Prinivil®, Zestril®)                                                        | 5 mg<br>10 mg<br>20 mg<br>40 mg                           |
| Gatifloxacin 0.5% Ophth Soln<br>(Zymar®)                                                | Any dose/Any frequency                                                                                                                                                                                                                  | Moxifloxacin 0.5% Ophth Soln<br>(Vigamox®)                                                    | 1 drop TID / Q8H                                          |
| GI Cocktail PO, (unless formula<br>specified)                                           |                                                                                                                                                                                                                                         | Viscous Lidocaine 2% 8 mL<br>Mylanta® Susp 24 mL<br>Bentyl® Liquid 8 mL<br>Total Volume 40 mL | Administer dose as ordered<br>from the 40 mL total volume |
| Guaifenesin/Dextromethorphan<br>ER PO (Bidex DM®)                                       | 800 mg/30 mg (1 tab)                                                                                                                                                                                                                    | Guaifenesin/Dextromethorphan ER<br>PO                                                         | 600 mg/30 mg (1 tab)                                      |
| Gyne-Lotrimin® Vaginal Cream                                                            |                                                                                                                                                                                                                                         | See Clotrimazole Vaginal Cream                                                                |                                                           |
| Gyne-Lotrimin® Vaginal Suppos                                                           |                                                                                                                                                                                                                                         | See Clotrimazole Vaginal Suppos                                                               |                                                           |
| Halcinonide 0.1% Cream,<br>Ointment<br>(Halog®)                                         |                                                                                                                                                                                                                                         | Fluocinonide 0.05% Cream,<br>Ointment<br>(Lidex®)                                             |                                                           |
| Halobetasol 0.05% Cream,<br>Ointment<br>(Ultravate®)                                    |                                                                                                                                                                                                                                         | Clobetasol 0.05% Cream, Ointment<br>(Temovate®)                                               |                                                           |
| Halog® 0.1% Cream, Ointment                                                             |                                                                                                                                                                                                                                         | See Halcinonide 0.1% Cream,<br>Ointment                                                       |                                                           |
| <b>High Potency</b> Topical Steroid<br>Cream, Lotion, Ointment                          |                                                                                                                                                                                                                                         | Fluocinonide 0.05% Cream,<br>Ointment<br>(Lidex®)                                             |                                                           |
| Humibid DM® PO                                                                          | 1 tab (400/200/50 mg)                                                                                                                                                                                                                   | Guaifenesin/Dextromethorphan ER<br>PO                                                         | 600 mg/30 mg (1 tab)                                      |
| Humibid LA® PO                                                                          | 600 mg/300 mg (1 tab)                                                                                                                                                                                                                   | Guaifenesin LA PO<br>(Mucinex®)                                                               | 600 mg (1 tab)                                            |
| Humulin® Insulin Products<br>(Humulin® N, Humulin® R,<br>Humulin® U, Humulin® Mixtures) |                                                                                                                                                                                                                                         | Humulin® Products and Novolin®<br>Products are interchangeable                                |                                                           |
| Hurricane® Spray                                                                        | PRN<br><b>This interchange<br/>applies to as<br/>needed/PRN use only.<br/>This interchange does<br/>NOT apply when used<br/>on a one-time basis to<br/>facilitate intubations,<br/>endoscopic and<br/>bronchoscopic<br/>procedures.</b> | See Benzocaine and Benzocaine-<br>containing Topical Anesthetic Sprays                        |                                                           |
| Hycotuss® Syrup PO                                                                      |                                                                                                                                                                                                                                         | See Hydrocodone/Guaifenesin Syrup<br>PO                                                       |                                                           |
| Hydergine LC® PO                                                                        |                                                                                                                                                                                                                                         | See Ergoloid Mesylate Liquid Cap<br>PO                                                        |                                                           |

| MEDICATION ORDERED                                                       | DOSE/FREQUENCY                                                                        | THERAPEUTIC INTERCHANGE                                                                        | DOSE/FREQUENCY                                                                                |
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| Hydrocodone/APAP PO<br>(Anexsia®, Co-Gesic®, Lorcet®, Vicodin®)          | All 2.5 mg products<br>All 5 mg products<br>All 7.5 mg products<br>All 10 mg products | Hydrocodone/APAP PO<br>(Lortab®)                                                               | 5 mg/500 mg x 1/2 tab<br>5 mg/500 mg x 1 tab<br>7.5 mg/500 mg x 1 tab<br>10 mg/500 mg x 1 tab |
| Hydrocodone/Guaifenesin Syrup PO<br>(Codiclear DH®, Hycotuss®)           |                                                                                       | Hydrocodone/Homatropine Syrup PO<br>(Hycodan®)                                                 |                                                                                               |
| Hydrocortisone 0.25% Cream, Ointment, Lotion                             |                                                                                       | Hydrocortisone 1% Cream, Ointment, Lotion                                                      |                                                                                               |
| Hydrocortisone 0.5% Cream, Ointment, Lotion                              |                                                                                       | Hydrocortisone 1% Cream, Ointment, Lotion                                                      |                                                                                               |
| Hydrocortisone Butyrate 0.1% Ointment<br>(Locoid®)                       |                                                                                       | Triamcinolone 0.1% Ointment<br>(Aristocort A®, Kenalog®)                                       |                                                                                               |
| Hydrocortisone Valerate 0.2% Cream, Ointment<br>(Westcort®)              |                                                                                       | Triamcinolone 0.1% Cream, Ointment<br>(Aristocort®, Kenalog®)                                  |                                                                                               |
| Hydroxyzine Pamoate PO<br>(Vistaril®)<br>Hydroxyzine HCl PO<br>(Atarax®) |                                                                                       | Hydroxyzine Pamoate and Hydroxyzine HCl are interchangeable.                                   |                                                                                               |
| Hygroton® PO                                                             |                                                                                       | See Chlorthalidone PO                                                                          |                                                                                               |
| Hytone® 0.5% Cream, Ointment, Lotion                                     |                                                                                       | See Hydrocortisone Cream                                                                       |                                                                                               |
| Hytone® 2.5% Cream, Ointment, Lotion                                     |                                                                                       | See Hydrocortisone Cream                                                                       |                                                                                               |
| Hytrin®                                                                  |                                                                                       | See Terazosin                                                                                  |                                                                                               |
| Ibandronate PO      Boniva®                                              |                                                                                       |                                                                                                |                                                                                               |
| I-Cap®                                                                   |                                                                                       | See Multiple Vitamin – eye/ocular PO                                                           |                                                                                               |
| Inflamase Forte® 1% Ophth Solution                                       |                                                                                       | See Prednisolone Sodium Phosphate 1% Ophth Solution                                            |                                                                                               |
| Insulin Lispro Injection<br>(Humalog®)                                   |                                                                                       | Insulin Aspart Injection<br>(Novolog®)                                                         |                                                                                               |
| Insulin, Sliding Scale                                                   | <b>ROUTE</b> not specified                                                            | Give ordered insulin <b>SQ</b>                                                                 |                                                                                               |
| Insulin, Sliding Scale                                                   | <b>TYPE</b> not specified                                                             | Human Regular Insulin<br>(Novolin R®, Humulin R®)                                              |                                                                                               |
| Irbesartan PO<br>(Avapro® PO)                                            | 75 mg<br>150 mg<br>300 mg                                                             | Losartan PO<br>(Cozaar®)                                                                       | 25 mg<br>50 mg<br>100 mg                                                                      |
| Isopto® Plain Ophth Soln                                                 |                                                                                       | Polyvinyl Alcohol 1.4% Ophth Soln<br>(AKWA Tears®)                                             |                                                                                               |
| Isopto® Tears Ophth Soln                                                 |                                                                                       | Polyvinyl Alcohol 1.4% Ophth Soln<br>(AKWA Tears®)                                             |                                                                                               |
| Kaon® PO                                                                 |                                                                                       | See Potassium Gluconate PO                                                                     |                                                                                               |
| Kaopectate® PO                                                           |                                                                                       | Bismuth Subsalicylate PO<br>(Pepto-Bismol® PO)<br><b>NOTE:</b> This is a generic substitution. |                                                                                               |
| Keftab® PO                                                               |                                                                                       | See Cephadrine PO                                                                              |                                                                                               |

| MEDICATION ORDERED                                                                                                                         | DOSE/FREQUENCY                            | THERAPEUTIC INTERCHANGE                                                       | DOSE/FREQUENCY                           |
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| Kenalog® 0.025% Cream, Ointment                                                                                                            |                                           | See Triamcinolone 0.025% Cream, Ointment                                      |                                          |
| "K Phos PO" (type not specified)                                                                                                           | 1 tab or 1 packet                         | Phospha Neutral PO<br>(Generic for K-Phos Neutral® PO)                        | 1 tab (250 mg)                           |
| K Phos #2® PO                                                                                                                              | 1 tab                                     | Phospha Neutral PO<br>(Generic for K-Phos Neutral® PO)                        | 1 tab (250 mg)                           |
| K-Phos Original® PO                                                                                                                        | 1 tab                                     | Phospha Neutral PO<br>(Generic for K-Phos Neutral® PO)                        | ½ tab (125 mg)                           |
| Lacrilube® Ophth Ointment                                                                                                                  |                                           | AKWA® Tears Ophth Ointment                                                    |                                          |
| Lactinex® Tablets & Packets PO                                                                                                             |                                           | See Lactobacillus Tablets & Packets PO                                        |                                          |
| Lactobacillus Tablets & Packets PO                                                                                                         | Any dose/Any frequency                    | Lactobacillus GG PO<br>(Culturelle®)                                          | 1 cap PO BID                             |
| Lansoprazole PO<br>(Prevacid®)<br><b>Patient able to take tablets</b>                                                                      | 15 mg<br>30 mg                            | Omeprazole PO<br>(Prilosec®)                                                  | 20 mg<br>20 mg                           |
| Lansoprazole PO/NG<br>(Prevacid®)<br><b>Patient not able to take tablets</b>                                                               | 15 mg<br>30 mg                            | Lansoprazole SoluTab PO/NG<br>(Prevacid® SoluTab)                             | 15 mg<br>30 mg                           |
| <b>NOTE:</b> Patients will be automatically converted between omeprazole PO and lansoprazole SoluTab based on ability to tolerate capsules |                                           |                                                                               |                                          |
| Lansoprazole IV<br>(Prevacid®)<br><b>NOTE:</b> Do <b>not</b> interchange continuous infusions.                                             | 30 mg                                     | Pantoprazole IV<br>(Protonix®)                                                | 40 mg                                    |
| Lescol® PO<br>Lescol XL® PO                                                                                                                |                                           | See Fluvastatin PO                                                            |                                          |
| Levofloxacin 0.5% Ophth Soln<br>(Quixan®)                                                                                                  | Any dose/Any frequency                    | Moxifloxacin 0.5% Ophth Soln<br>(Vigamox®)                                    | 1 drop TID / Q8H                         |
| Lidex E® Cream                                                                                                                             |                                           | See Fluocinonide 0.05% Cream                                                  |                                          |
| Liquifilm Tears® Ophth Soln                                                                                                                |                                           | Polyvinyl Alcohol 1.4% Ophth Soln<br>(AKWA Tears®)                            |                                          |
| Locoid® 0.1% Ointment                                                                                                                      |                                           | See Hydrocortisone 0.1% Ointment                                              |                                          |
| Lorcet® PO                                                                                                                                 |                                           | See Hydrocodone/APAP PO                                                       |                                          |
| Lotensin® PO                                                                                                                               |                                           | See Benazepril PO                                                             |                                          |
| Lovastatin PO<br>(Mevacor®, Altoprev®)                                                                                                     | 10 mg<br>20 mg<br>40 mg<br>60 mg<br>80 mg | Simvastatin PO<br>(Zocor®)                                                    | 5 mg<br>10 mg<br>20 mg<br>30 mg<br>40 mg |
| <b>Low Potency</b> Topical Steroid Cream, Lotion, Ointment                                                                                 |                                           | Hydrocortisone 1% Cream, Lotion, Ointment                                     |                                          |
| Lumigan® 0.03% Ophth Soln                                                                                                                  |                                           | See Bimatoprost 0.03% Ophth Soln                                              |                                          |
| Maalox® Susp PO                                                                                                                            |                                           | Magnesium Hydroxide/Aluminum Hydroxide/Simethicone Susp PO<br>(MI-Acid® Susp) |                                          |

| MEDICATION ORDERED                                                                 | DOSE/FREQUENCY                          | THERAPEUTIC INTERCHANGE                                                                                                   | DOSE/FREQUENCY |
|------------------------------------------------------------------------------------|-----------------------------------------|---------------------------------------------------------------------------------------------------------------------------|----------------|
| Maalox® Extra Strength Susp PO                                                     |                                         | Magnesium Hydroxide/Aluminum Hydroxide/Simethicone Susp PO (MI-Acid® Susp)                                                |                |
| Maalox® Plus Susp PO                                                               |                                         | Magnesium Hydroxide/Aluminum Hydroxide/Simethicone Susp PO (MI-Acid® Susp)                                                |                |
| Magaldrate Susp PO (Riopan®)                                                       |                                         | Magnesium Hydroxide/Aluminum Hydroxide/Simethicone Susp PO (MI-Acid® Susp)                                                |                |
| Magaldrate Tab PO (Riopan® Plus)                                                   | 1 tab                                   | Magnesium Hydroxide/Aluminum Hydroxide/Simethicone Susp PO (MI-Acid® Susp)                                                | 5 mL           |
| Magaldrate/Simethicone Susp PO (Riopan® Plus)                                      |                                         | Magnesium Hydroxide/Aluminum Hydroxide/Simethicone Susp PO (MI-Acid® Susp)                                                |                |
| Magic Mouthwash PO and S&S                                                         | No dose specified<br><b>ADULTS only</b> | Magic Mouthwash PO and S&S                                                                                                | 5 mL           |
| Magic Mouthwash with Nystatin PO and S&S                                           | No dose specified<br><b>ADULTS only</b> | Magic Mouthwash with Nystatin PO and S&S                                                                                  | 5 mL           |
| Magic Mouthwash PO, (unless formula specified)                                     |                                         | Maalox® Susp 30 mL<br>Viscous Lidocaine 2% 30 mL<br>Diphenhydramine Elix 75 mg/30 mL                                      |                |
| Magic Mouthwash with Nystatin PO, (unless formula specified)                       |                                         | Maalox® Susp 30 mL<br>Viscous Lidocaine 2% 30 mL<br>Diphenhydramine Elix 75 mg/30 mL<br>Nystatin 500,000 units/5 mL 30 mL |                |
| Magnesium Hydroxide/Aluminum Hydroxide Susp PO (Maalox®)                           |                                         | Magnesium Hydroxide/Aluminum Hydroxide/Simethicone Susp PO (MI-Acid® Susp)                                                |                |
| Magnesium Hydroxide/Aluminum Hydroxide/Simethicone Susp PO (Mylanta®, Mylanta II®) |                                         | Magnesium Hydroxide/Aluminum Hydroxide/Simethicone Susp PO (MI-Acid® Susp)                                                |                |
| Magnesium PO (Slow-Mag®)                                                           | 64 mg                                   | Magnesium Oxide PO (Mag Ox®)                                                                                              | 400 mg         |
| Mavik® PO                                                                          |                                         | See Trandolapril PO                                                                                                       |                |
| Maxiflor® 0.05% Cream                                                              |                                         | See Diflorasone Diacetate 0.05% Cream                                                                                     |                |
| <b>Medium Potency</b> Topical Steroid Cream, Lotion, Ointment                      |                                         | Triamcinolone 0.01% Cream, Lotion, Ointment (Aristocort A®, Kenalog®)                                                     |                |
| Meningococcal polysaccharide vaccine (Menomune®)                                   |                                         | Meningococcal vaccine, diphtheria conjugate vaccine (Menactra®)                                                           |                |
| Menomune® vaccine                                                                  |                                         | See Meningococcal polysaccharide vaccine                                                                                  |                |
| Mephyton® PO                                                                       |                                         | See Phytonadione (Vitamin K) PO                                                                                           |                |
| Merovax II® Vaccine                                                                |                                         | See Rubella Vaccine                                                                                                       |                |
| Methenamine-Containing Urinary Antiseptics PO                                      | 1 tab                                   | Methenamine Mandelate/Sodium Acid Phosphate PO (Uroqid Acid #2®)                                                          | 1 tab          |

| MEDICATION ORDERED                                                                                               | DOSE/FREQUENCY                      | THERAPEUTIC INTERCHANGE                                                                          | DOSE/FREQUENCY                                                                              |
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| Methylcellulose Powder PO (Citrucel®)                                                                            |                                     | Psyllium Powder PO (Metamucil®)                                                                  |                                                                                             |
| Methylsalicylate Topical Creams and Ointments                                                                    |                                     | Icy Hot® Topical                                                                                 |                                                                                             |
| Mevacor® PO                                                                                                      |                                     | See Lovastatin PO                                                                                |                                                                                             |
| Micardis® PO                                                                                                     |                                     | See Telmisartan PO                                                                               |                                                                                             |
| Miracle Cream, (unless formula specified)                                                                        |                                     | Miconazole 2% Moisture Barrier Cream (Baza Moisture Barrier Antifungal Cream®)                   |                                                                                             |
| Mitomycin bladder Instillations (Mutamycin®)                                                                     | in 0.9% sodium chloride             | Mitomycin bladder Instillations (Mutamycin®)                                                     | Prepare in SWFI                                                                             |
| Moexipril PO (Univasc®)                                                                                          | 3.75 mg<br>7.5 mg<br>15 mg<br>30 mg | Lisinopril PO (Prinivil®, Zestril®)                                                              | 5 mg<br>10 mg<br>20 mg<br>40 mg                                                             |
| Mometasone Nasal Spray (Nasonex®)                                                                                | Any dose/Any frequency              | Fluticasone Nasal Spray (Flonase®)                                                               | 4-12 years old:<br>1 spray each nostril Q day<br>> 12 years:<br>2 sprays each nostril Q day |
| Mometasone 0.1% Cream, Ointment (Elocon®)                                                                        |                                     | Triamcinolone 0.1% Cream, Ointment (Aristocort A®, Kenalog®)                                     |                                                                                             |
| Monopril® PO                                                                                                     |                                     | See Fosinopril PO                                                                                |                                                                                             |
| Multiple Vitamin - Children's Chewable PO                                                                        |                                     | Fruity Chews with Iron® Vitamin Chewable PO                                                      |                                                                                             |
| Multiple Vitamin – eye/ocular PO (I-Cap®, Preservision® and all similar products)                                |                                     | Multiple Vitamin – eye/ocular PO (Ocuvite®)<br>Or Epic Formulary Therapeutic Interchange product |                                                                                             |
| Multiple Vitamin Inj (MVI Parenteral® Inj)                                                                       |                                     | Multiple Vitamin Inj (MVI-12®)                                                                   |                                                                                             |
| Multiple Vitamin Liquid PO (Theragran®, and others and all similar products)                                     |                                     | Multiple Vitamin Liquid PO                                                                       |                                                                                             |
| Multiple Vitamin with minerals PO (Centrum Silver®, One A Day – Women's®, Vicon Forte® and all similar products) |                                     | Multiple Vitamin with Iron (Theragran M®)<br>Or Epic Formulary Therapeutic Interchange product   |                                                                                             |
| Multiple Vitamin with minerals and iron/hematinics PO (Theragran Hematinic® and all similar products)            |                                     | Multiple Vitamin with Iron (Centrum®)<br>Or Epic Formulary Therapeutic Interchange product       |                                                                                             |
| Multiple Vitamin with or without Vitamin C PO (Albee with C®, Berocca Plus®, Z-Bec®, and all similar products)   |                                     | See B Complex Vitamin                                                                            |                                                                                             |
| Mutamycin® bladder Instillations                                                                                 |                                     | See Mitomycin bladder Instillations                                                              |                                                                                             |

| MEDICATION ORDERED                                                                | DOSE/FREQUENCY                        | THERAPEUTIC INTERCHANGE                                                    | DOSE/FREQUENCY             |
|-----------------------------------------------------------------------------------|---------------------------------------|----------------------------------------------------------------------------|----------------------------|
| MVI Parenteral® Inj                                                               |                                       | See Multiple Vitamin Inj                                                   |                            |
| Mycostatin® Vaginal Suppos                                                        |                                       | See Nystatin Vaginal Suppos                                                |                            |
| Mylanta® Susp PO                                                                  |                                       | Magnesium Hydroxide/Aluminum Hydroxide/Simethicone Susp PO (MI-Acid® Susp) |                            |
| Mylanta II® Susp PO                                                               |                                       | Magnesium Hydroxide/Aluminum Hydroxide/Simethicone Susp PO (MI-Acid® Susp) |                            |
| Naphazoline Ophth Soln (Naphcon®, Vasocon®)                                       |                                       | Naphazoline/Pheniramine (Naphcon-A®) Ophth Soln                            |                            |
| Naphazoline/Antazoline (Vasocon-A®) Ophth Soln                                    |                                       | Naphazoline/Pheniramine (Naphcon-A®) Ophth Soln                            |                            |
| Naphcon® Ophth Soln                                                               |                                       | See Naphazoline Ophth Soln                                                 |                            |
| Naproxen Sodium PO (Aleve®) (Anaprox®)                                            | 220 mg<br>275 mg                      | Naproxen PO (Naprosyn®)                                                    | 250 mg<br>250 mg           |
| Nasacort® Nasal Spray<br>Nasacort AQ Nasal Spray                                  |                                       | See Triamcinolone Nasal Spray                                              |                            |
| Nasalide® Nasal Spray                                                             |                                       | See Flunisolide Nasal Spray                                                |                            |
| Nasarel® Nasal Spray                                                              |                                       | See Flunisolide Nasal Spray                                                |                            |
| Nasonex® Nasal Spray                                                              |                                       | See Mometasone Nasal Spray                                                 |                            |
| Neosporin® Ointment                                                               |                                       | See Polymixin B/Neomycin/Bacitracin Ointment                               |                            |
| Neutra Phos® PO                                                                   | 1 packet                              | Phospha Neutral PO (Generic for K-Phos Neutral® )                          | 1 Tab (250 mg)             |
| Neutra Phos K® PO                                                                 | 1 packet                              | Phospha Neutral PO (Generic for K-Phos Neutral® )                          | 1 Tab (250 mg)             |
| Nexium® PO/NG                                                                     |                                       | See Esomeprazole PO/NG                                                     |                            |
| Nifedipine ER PO (Procardia XL®)                                                  |                                       | Nifedipine ER PO (Adalat CC®)                                              |                            |
| Nitrodisc®                                                                        |                                       | See Nitroglycerin Patch or Disc                                            |                            |
| Nitroglycerin Patch or Disc (Transderm-Nitro®, Nitrodisc®)                        |                                       | Nitroglycerin Patch (Nitro-Dur®)                                           |                            |
| Nitroglycerin SL (Nitrostat®)                                                     | 0.3 mg<br>0.6 mg<br>No dose specified | Nitroglycerin SL (Nitrostat®)                                              | 0.4 mg<br>0.4 mg<br>0.4 mg |
| Nitrostat® SL                                                                     |                                       | See Nitroglycerin SL                                                       |                            |
| Nizatidine PO (Axid®)                                                             |                                       | Ranitidine PO (Zantac®)                                                    |                            |
| Norfloxacin PO (Noroxin®)                                                         | 400 mg                                | Ciprofloxacin PO (Cipro®)                                                  | 500 mg                     |
| Noroxin® PO                                                                       |                                       | See Norfloxacin PO                                                         |                            |
| Novolin® Insulin Products (Novolin® N, Novolin® R, Novolin® U, Novolin® Mixtures) |                                       | Humulin® Products and Novolin® Products are interchangeable                |                            |

| MEDICATION ORDERED                                                                                                                         | DOSE/FREQUENCY                                                                                                    | THERAPEUTIC INTERCHANGE                                                      | DOSE/FREQUENCY                                                                                                       |
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| Nystatin PO and S&S                                                                                                                        | No dose specified<br><b>ADULTS only</b>                                                                           | Nystatin PO and S&S                                                          | 5 mL                                                                                                                 |
| Nystatin Vaginal Suppos<br>(Mycostatin®)                                                                                                   |                                                                                                                   | Miconazole Nitrate Suppos<br>(Monistat®)                                     |                                                                                                                      |
| Ocuflox® 0.3% Ophth Soln                                                                                                                   |                                                                                                                   | See Ofloxacin 0.3% <b>Ophth</b> Soln                                         |                                                                                                                      |
| Ofloxacin 0.3% <b>Ophth</b> Soln<br>(Ocuflox®)                                                                                             | Any dose/Any frequency                                                                                            | Moxifloxacin 0.5% <b>Ophth</b> Soln<br>(Vigamox®)                            | 1 drop TID / Q8H                                                                                                     |
| Ofloxacin 0.3% <b>Otic</b> Soln<br>(Floxin®)                                                                                               | Any dose/Any frequency                                                                                            | Ciprofloxacin 0.3% and<br>Dexamethasone 0.1% <b>Otic</b> Susp<br>(Ciprodex®) | 4 drops BID / Q12H                                                                                                   |
| Olmesartan PO<br>(Benicar®)                                                                                                                | 10 mg<br>20 mg<br>40 mg                                                                                           | Losartan PO<br>(Cozaar®)                                                     | 25 mg<br>50 mg<br>100 mg                                                                                             |
| Omega 3-Acid Ethyl Esters and<br>combination products (except<br>Lovaza®) PO                                                               |                                                                                                                   | See Fish Oil                                                                 |                                                                                                                      |
| Omeprazole PO<br>(Prilosec®)<br><b>Patient able to take tablets</b>                                                                        | 10 mg (>= 20 kg only)                                                                                             | Omeprazole PO<br>(Prilosec®)                                                 | 20 mg                                                                                                                |
| Omeprazole PO/NG<br>(Prilosec®)<br><b>Patient not able to take tablets</b>                                                                 | 10 mg<br>mg <b>ADULTS only</b> 20<br>mg 40                                                                        | Lansoprazole SoluTab PO/NG<br>(Prevacid®)                                    | 15 mg<br>30 mg<br>mg 30                                                                                              |
| <b>NOTE:</b> Patients will be automatically converted between omeprazole PO and lansoprazole SoluTab based on ability to tolerate tablets. |                                                                                                                   |                                                                              |                                                                                                                      |
| Omnaris® Nasal Spray                                                                                                                       |                                                                                                                   | See Ciclesonide Nasal Spray                                                  |                                                                                                                      |
| Ondansetron Tablets PO<br>(Zofran®)                                                                                                        | 4 mg                                                                                                              | Ondansetron Oral Disintegrating<br>Tablets PO<br>(Zofran ODT® )              | 4 mg                                                                                                                 |
| Os-Cal® 250 + D PO<br>Os-Cal® 500 + D PO                                                                                                   |                                                                                                                   | See Calcium/Calcium Carbonate with<br>Vitamin D PO                           |                                                                                                                      |
| Oxycodone/Aspirin PO<br>(Percodan®)                                                                                                        | 5 mg/325 mg                                                                                                       | Oxycodone/APAP PO<br>(Percocet®)                                             | 5 mg/325 mg                                                                                                          |
| Oxycodone/APAP PO<br>(Percocet®, Tylox®)                                                                                                   | All 2.5 mg products<br>All 5 mg products<br>All 7.5 mg products<br>All 10 mg products<br>No dose/strength ordered | Oxycodone/APAP PO<br>(Percocet®)                                             | 5 mg/325 mg x 1/2 tab<br>5 mg/325 mg x 1 tab<br>7.5 mg/325 mg x 1 tab<br>10 mg/325 mg x 1 tab<br>5 mg/325 mg x 1 tab |
| Pantoprazole PO<br>(Protonix®) <b>Patient<br/>able to take tablets</b>                                                                     | 20 mg (>= 20 kg only)<br>40 mg                                                                                    | Omeprazole PO<br>(Prilosec®)                                                 | 20 mg<br>20 mg                                                                                                       |
| Pantoprazole PO/NG<br>(Protonix®)<br><b>Patient not able to take tablets</b>                                                               | 20 mg <u>ADULTS only</u> 40<br>mg                                                                                 | Lansoprazole SoluTab PO/NG<br>(Prevacid®)                                    | 30 mg<br>30 mg                                                                                                       |
| PCE® PO                                                                                                                                    |                                                                                                                   | See Erythromycin Stearate PO                                                 |                                                                                                                      |
| Pepcid® PO                                                                                                                                 | 10 mg only                                                                                                        | See Famotidine PO                                                            |                                                                                                                      |
| Percocet® PO                                                                                                                               |                                                                                                                   | See Oxycodone/APAP PO                                                        |                                                                                                                      |
| Percodan® PO                                                                                                                               |                                                                                                                   | See Oxycodone/Aspirin PO                                                     |                                                                                                                      |
| Peri-Colace® PO                                                                                                                            |                                                                                                                   | See Docusate/Casanthranol PO                                                 |                                                                                                                      |

| MEDICATION ORDERED                                                              | DOSE/FREQUENCY                                                                                                      | THERAPEUTIC INTERCHANGE                                             | DOSE/FREQUENCY                                                                                                                    |
|---------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------|
| Perindopril PO<br>(Aceon®)                                                      | 2 mg<br>4 mg<br>8 mg<br>16 mg                                                                                       | Lisinopril PO<br>(Prinivil®, Zestril®)                              | 5 mg<br>10 mg<br>20 mg<br>40 mg                                                                                                   |
| Phenylephrine/Guaifenesin SR<br>PO<br>(Entex LA®)                               | 1 tab (30 mg/600 mg)                                                                                                | Pseudoephedrine/Guaifenesin SR<br>PO<br>(Entex PSE®)                | 1 tab (120 mg/600 mg)                                                                                                             |
| PhosLo® Capsules PO                                                             |                                                                                                                     | See Calcium Acetate Capsules PO                                     |                                                                                                                                   |
| Phytonadione (Vitamin K) PO<br>(Mephyton®)                                      | 1 mg<br>2 mg<br>3 mg<br>4 mg                                                                                        | Phytonadione (Vitamin K) PO<br>(Mephyton®)                          | 2.5 mg<br>2.5 mg<br>2.5 mg<br>5 mg                                                                                                |
| Polycitra®-K Liquid                                                             |                                                                                                                     | See Potassium Citrate/Citric Acid                                   |                                                                                                                                   |
| Polymixin B/Neomycin/Bacitracin<br>Ointment<br>(Neosporin®)                     |                                                                                                                     | Polymixin B/Neomycin/Bacitracin<br>Ointment (Triple<br>Antibiotic®) |                                                                                                                                   |
| Potassium Chloride PO<br>(Micro-K®, K-Dur®)                                     | 8 mEq                                                                                                               | Potassium Chloride PO<br>(Micro-K®, K-Dur®)                         | 10 mEq                                                                                                                            |
| Potassium Chloride IVPB<br>(K-rider, KCl bolus etc)                             | 10 mEq in up to 250 mL<br>20 mEq in up to 250 mL<br>40 mEq in up to 250 mL<br>Any dose when volume<br>not specified | Potassium Chloride IVPB <b>premix</b><br>(K-rider, KCl bolus etc)   | 10 mEq in 100 mL SWFI<br>20 mEq in 100 mL SWFI<br><b>2 x</b> 20 mEq in 100 mL SWFI<br>Utilize premix IVPB's to<br>make total dose |
| Potassium Chloride with<br>Lidocaine IVPB for central line<br>administration    |                                                                                                                     | Potassium Chloride without<br>Lidocaine                             | Same potassium dose and<br>frequency                                                                                              |
| Potassium Citrate/Citric Acid<br>(Polycitra®-K)                                 | For every 1 mL                                                                                                      | Sodium Citrate/Citric Acid<br>(Bicitra®)                            | Dose is 2 mL                                                                                                                      |
| Potassium Gluconate PO<br>(Kaon®)                                               |                                                                                                                     | Potassium Chloride PO<br>(Micro-K®, K-Dur®)                         |                                                                                                                                   |
| Potassium Phosphate -<br>Any order written: "K Phos PO"<br>(type not specified) | 1 tab or 1 packet                                                                                                   | Phospha Neutral PO<br>(Generic for K-Phos Neutral® PO)              | 1 tab (250 mg)                                                                                                                    |
| Prednisolone Sodium Phosphate<br>1% Ophth Solution<br>(Inflamase Forte 1%®)     |                                                                                                                     | Prednisolone Acetate 1% Ophth<br>Susp<br>(Pred Forte 1%®)           |                                                                                                                                   |
| Prednisone Liquid PO                                                            |                                                                                                                     | Prednisolone Liquid PO<br>(Orapred®, Pedia Pred®, Prelone®)         |                                                                                                                                   |
| Prenatal multivitamin PO<br>Prenatal® PO                                        |                                                                                                                     | Prenatal Plus® PO                                                   |                                                                                                                                   |
| Preservision®                                                                   |                                                                                                                     | Multiple Vitamin – eye/ocular PO                                    |                                                                                                                                   |
| Prevacid PO/NG                                                                  |                                                                                                                     | See Lansoprazole PO/NG                                              |                                                                                                                                   |
| Prevacid IV                                                                     |                                                                                                                     | See Lansoprazole IV                                                 |                                                                                                                                   |
| Prilosec® PO/NG                                                                 |                                                                                                                     | See Omeprazole PO/NG                                                |                                                                                                                                   |
| Procardia® XL PO                                                                |                                                                                                                     | See Nifedipine ER PO                                                |                                                                                                                                   |
| Propoxyphene Napsylate PO<br>(Darvon-N® PO)                                     | 100 mg                                                                                                              | Propoxyphene HCl PO<br>(Darvon®)                                    | 65 mg                                                                                                                             |
| Prosed/DS® PO                                                                   | 1 tab                                                                                                               | Urinary Antiseptic PO                                               | 2 tabs                                                                                                                            |

| MEDICATION ORDERED                                                         | DOSE/FREQUENCY                                                          | THERAPEUTIC INTERCHANGE                                                                                                               | DOSE/FREQUENCY                                                                                                                                                  |
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| Protonix® PO/NG                                                            |                                                                         | See Pantoprazole PO/NG                                                                                                                |                                                                                                                                                                 |
| Psocon-E® 0.05% <b>Cream</b>                                               |                                                                         | See Diflorasone 0.05% <b>Cream</b>                                                                                                    |                                                                                                                                                                 |
| Psocon-E® 0.05% <b>Ointment</b>                                            |                                                                         | See Diflorasone 0.05% <b>Ointment</b>                                                                                                 |                                                                                                                                                                 |
| Pyridium Plus® PO                                                          | 1 tab                                                                   | Phenazopyridine + Oxybutynin PO<br>(Pyridium® + Ditropan®)                                                                            | 100 mg + 5 mg                                                                                                                                                   |
| Quetiapine® Immediate Release<br>PO<br>(Seroquel®)                         | 25 mg PO Q day<br>100 mg PO Q day<br>All other doses and<br>frequencies | Quetiapine® Extended Release PO<br>(Seroquel XR®)                                                                                     | Do not interchange<br>Do not interchange<br>Convert total daily dose of<br>immediate release to<br>extended release and<br>administer once daily at<br>bedtime. |
| Quinapril PO<br>(Accupril®)                                                | 5 mg<br>10 mg<br>20 mg<br>40 mg                                         | Lisinopril PO<br>(Prinivil®, Zestril®)                                                                                                | 5 mg<br>10 mg<br>20 mg<br>40 mg                                                                                                                                 |
| Quixan 0.5% Ophth Soln                                                     |                                                                         | See Levofloxacin 0.5% Ophth Soln                                                                                                      |                                                                                                                                                                 |
| Rabeprazole PO<br>(Aciphex®)<br><b>Patient able to take tablets</b>        | 20 mg                                                                   | Omeprazole PO<br>(Prilosec®)                                                                                                          | 20 mg                                                                                                                                                           |
| Rabeprazole PO/NG<br>(Aciphex®)<br><b>Patient not able to take tablets</b> | 20 mg                                                                   | Lansoprazole SoluTab PO/NG<br>(Prevacid® SoluTab)                                                                                     | 30 mg                                                                                                                                                           |
| “Rally Pack”                                                               | No contents specified                                                   | ½ NS + Adult MVI 1 amp + folic acid<br>1 mg + thiamine 100 mg<br>Magnesium and potassium MUST be<br>ordered by Prescriber if desired. | Daily<br>Infuse at rate of current IV<br>fluids.<br>If does not have IV fluids,<br>infuse at 100 mL/hour                                                        |
| Refresh® Tears                                                             |                                                                         | Polyvinyl Alcohol 1.4% Ophth Soln<br>(AKWA Tears®)                                                                                    |                                                                                                                                                                 |
| Renagel® PO                                                                |                                                                         | See Sevelamer Hydrochloride PO                                                                                                        |                                                                                                                                                                 |
| Rhinocort® Nasal Spray<br>Rhinocort Aqua ® Nasal Spray                     |                                                                         | See Budesonide Nasal Spray                                                                                                            |                                                                                                                                                                 |
| Renal Cap® PO                                                              |                                                                         | See renal multivitamin PO                                                                                                             |                                                                                                                                                                 |
| Renal multivitamin PO                                                      |                                                                         | Nephrovite® PO                                                                                                                        |                                                                                                                                                                 |
| Riopan® Susp PO                                                            |                                                                         | See Magaldrate Susp PO                                                                                                                |                                                                                                                                                                 |
| Riopan Plus® Tab PO                                                        |                                                                         | See Magaldrate Tab PO                                                                                                                 |                                                                                                                                                                 |
| Riopan Plus® Susp PO                                                       |                                                                         | See Magaldrate/Simethicone Susp<br>PO                                                                                                 |                                                                                                                                                                 |
| Risendronate PO<br>(Actonel®)                                              |                                                                         | Discontinue during hospital<br>admission to avoid esophageal<br>adverse effects                                                       |                                                                                                                                                                 |
| Risendronate + Calcium PO<br>(Actonel + Calcium®)                          |                                                                         | Discontinue during hospital<br>admission to avoid esophageal<br>adverse effects                                                       |                                                                                                                                                                 |
| Rondec DM Drops® PO                                                        |                                                                         | Chlorpheniramine + Phenylephrine +<br>Dextromethorphan Drops PO<br>(C-Phen DM Drops®)                                                 | <b>This is a generic<br/>substitution.</b>                                                                                                                      |

| MEDICATION ORDERED                            | DOSE/FREQUENCY                                 | THERAPEUTIC INTERCHANGE                                          | DOSE/FREQUENCY                                                                                                                                |
|-----------------------------------------------|------------------------------------------------|------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------|
| Rosuvastatin PO<br>(Crestor®)                 | 5 mg<br>10 mg<br>20 mg<br>40 mg                | Atorvastatin PO<br>(Lipitor®)                                    | 20 mg<br>40 mg<br>80 mg<br>80 mg                                                                                                              |
| Rubella Vaccine                               |                                                | Measles, Mumps, and Rubella<br>Vaccine (Combined)<br>(M-M-R II®) |                                                                                                                                               |
| Seroquel® Immediate Release<br>PO             |                                                | See Quetiapine Immediate Release<br>PO                           |                                                                                                                                               |
| Sevelamer Hydrochloride PO<br>(Renagel®)      |                                                | Sevelamer Carbonate PO<br>(Renvela®)                             |                                                                                                                                               |
| Sliding Scale Insulin                         | <b>ROUTE</b> not specified                     | Give ordered insulin <b>SQ</b>                                   |                                                                                                                                               |
| Sliding Scale Insulin                         | <b>TYPE</b> not specified                      | Human Regular Insulin (Novolin<br>R®, Humulin R®)                |                                                                                                                                               |
| Slo-Bid® PO                                   |                                                | Theophylline Anhydrous SR PO<br>(NOT Uniphyll®)                  | Theophylline Therapeutic<br>Interchanges may be<br>confusing - Contact<br>Pharmacy if additional<br>clarification needed.                     |
| Slow-Mag® PO                                  |                                                | See Magnesium PO                                                 |                                                                                                                                               |
| Sotalol AF PO<br>(Betapace AF®)               |                                                | Sotalol PO<br>(Betapace®)                                        |                                                                                                                                               |
| Starch 51% Rectal Suppos<br>(Tucks®, Anusol®) |                                                | Hydrocortisone Acetate Rectal<br>Suppos (Anusol HC®)             |                                                                                                                                               |
| Sulfasalazine PO (Azulfidine®)                |                                                | Sulfasalazine EC Delayed Release<br>PO<br>(Azulfidine® EN)       |                                                                                                                                               |
| Surbex-T®, Surbex with C® PO                  |                                                | See B Complex PO                                                 |                                                                                                                                               |
| Surfak® PO                                    |                                                | See Docusate Calcium PO                                          |                                                                                                                                               |
| Symbicort® Inhaler                            |                                                | See Budesonide/Fometerol Inhaler                                 |                                                                                                                                               |
| Synalar® 0.01% Cream,<br>Ointment             |                                                | See Fluocinolone 0.01% Cream,<br>Ointment                        |                                                                                                                                               |
| Synalar® 0.025% Cream,<br>Ointment            |                                                | See Fluocinolone 0.025% Cream,<br>Ointment                       |                                                                                                                                               |
| Synalar HP® 0.2% Cream                        |                                                | See Fluocinolone 0.2% Cream                                      |                                                                                                                                               |
| Tagamet® PO                                   |                                                | See Cimetidine PO                                                |                                                                                                                                               |
| Tears Natural® Ophth Soln                     |                                                | Polyvinyl Alcohol 1.4% Ophth Soln<br>(AKWA Tears®)               |                                                                                                                                               |
| Telmisartan PO<br>(Micardis®)                 | 20 mg<br>40 mg<br>80 mg                        | Losartan PO<br>(Cozaar®)                                         | 25 mg<br>50 mg<br>100 mg                                                                                                                      |
| Terazosin PO<br>(Hytrin®)                     | 1 mg<br>2 mg<br>4 mg<br>5 mg<br>10 mg<br>20 mg | Doxazosin PO<br>(Cardura®)                                       | 1 mg, same frequency<br>2 mg, same frequency<br>4 mg, same frequency<br>4 mg, same frequency<br>8 mg, same frequency<br>16 mg, same frequency |
| Tessalon® PO                                  | Dose not specified                             | See Benzonatate PO                                               |                                                                                                                                               |

| MEDICATION ORDERED                                              | DOSE/FREQUENCY                                   | THERAPEUTIC INTERCHANGE                                               | DOSE/FREQUENCY                                                                                               |
|-----------------------------------------------------------------|--------------------------------------------------|-----------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------|
| Tetanus Toxoid (Adsorbed) Inj                                   |                                                  | Diphtheria-Tetanus Toxoid (Adsorbed) Inj                              |                                                                                                              |
| Tevetan® PO                                                     |                                                  | See Eprosartan PO                                                     |                                                                                                              |
| Theo-24® PO                                                     |                                                  | Uniphy® PO                                                            | Theophylline Therapeutic Interchanges may be confusing - Contact Pharmacy if additional clarification needed |
| Theragran® Liquid PO                                            |                                                  | See Multivitamin Liquid PO                                            |                                                                                                              |
| Theragran M® PO                                                 |                                                  | See Multiple Vitamin with Minerals PO                                 |                                                                                                              |
| Timolol 0.5% Gel Forming Ophth Solution (Timoptic XE® 0.5%)     | Q day                                            | Timolol 0.5% Ophth Solution (Timoptic® 0.5% Ophth Solution)           | Keep dose the same and increase frequency to BID                                                             |
| Timoptic XE® 0.5% Ophth                                         |                                                  | See Timolol 0.5% Gel Forming Ophth Solution                           |                                                                                                              |
| Tolterodine PO (Detrol®)                                        | 1 mg BID / Q12H<br>2 mg Q day<br>2 mg BID / Q12H | Tolterodine Extended Release PO (Detrol LA®)                          | 2 mg Q day<br>2 mg Q day<br>4 mg Q day                                                                       |
| Topical Emollients                                              |                                                  | Lubriderm® Lotion                                                     |                                                                                                              |
| Topical Steroid - <b>Very High Potency</b> Cream, Ointment      |                                                  | Clobetasol 0.05% Cream, Ointment (Temovate®)                          |                                                                                                              |
| Topical Steroid - <b>High Potency</b> Cream, Lotion, Ointment   |                                                  | Fluocinonide 0.05% Cream, Ointment (Lidex®)                           |                                                                                                              |
| Topical Steroid - <b>Medium Potency</b> Cream, Lotion, Ointment |                                                  | Triamcinolone 0.01% Cream, Lotion, Ointment (Aristocort A®, Kenalog®) |                                                                                                              |
| Topical Steroid - <b>Low Potency</b> Cream, Lotion, Ointment    |                                                  | Hydrocortisone 1% Cream, Lotion, Ointment                             |                                                                                                              |
| Topicort® 0.05% Cream, Ointment                                 |                                                  | See Desoximetasone 0.05% Cream, Ointment                              |                                                                                                              |
| Topicort® 0.25% Cream, Ointment                                 |                                                  | See Desoximetasone 0.25% Cream, Ointment                              |                                                                                                              |
| Trandolapril PO (Mavik®)                                        | 1 mg<br>2 mg<br>4 mg<br>8 mg                     | Lisinopril PO (Prinivil®, Zestril®)                                   | 5 mg<br>10 mg<br>20 mg<br>40 mg                                                                              |
| Transderm-Nitro® Patch                                          |                                                  | See Nitroglycerin Patch                                               |                                                                                                              |
| Travatan® 0.004% Ophth Soln<br>Travatan-Z® 0.004% Ophth Soln    |                                                  | See Travoprost 0.004% Ophth Soln                                      |                                                                                                              |
| Travoprost 0.004% Ophth Soln (Travatan®, Travatan-Z®)           | 1 drop Q day                                     | Latanoprost 0.005% Ophth Soln (Xalatan®)                              | 1 drop Q bedtime                                                                                             |
| Triamcinolone 0.025% Cream, Ointment (Aristocort A®, Kenalog®)  |                                                  | Triamcinolone 0.1% Cream, Ointment (Aristocort A®, Kenalog®)          |                                                                                                              |
| Triamcinolone Acetonide 0.5% Cream, Ointment (Aristocort A®)    |                                                  | Fluocinonide 0.05% Cream, Ointment (Lidex®)                           |                                                                                                              |

| MEDICATION ORDERED                                          | DOSE/FREQUENCY             | THERAPEUTIC INTERCHANGE                                                | DOSE/FREQUENCY                                                                              |
|-------------------------------------------------------------|----------------------------|------------------------------------------------------------------------|---------------------------------------------------------------------------------------------|
| Triamcinolone Nasal Spray<br>(Nasacort®, Nasacort AQ®)      | Any dose/Any frequency     | Fluticasone Nasal Spray<br>(Flonase®)                                  | 4-12 years old:<br>1 spray each nostril Q day<br>> 12 years:<br>2 sprays each nostril Q day |
| Tricor® PO                                                  |                            | See Fenofibrate PO                                                     |                                                                                             |
| Tridesilon® 0.05% Cream,<br>Ointment                        |                            | See Denoside 0.05% Cream,<br>Ointment                                  |                                                                                             |
| Tucks® Rectal Suppos                                        |                            | See Starch 51% Rectal Suppos                                           |                                                                                             |
| Tylox® PO                                                   |                            | See Oxycodone/APAP PO                                                  |                                                                                             |
| Ultracet® PO                                                | 37.5 mg/325 mg (1 tab)     | Tramadol + Acetaminophen PO<br>(Ultram® + Tylenol®)                    | 50 mg + 325 mg                                                                              |
| Ultratears® Ophth Soln                                      |                            | Polyvinyl Alcohol 1.4% Ophth Soln<br>(AKWA Tears®)                     |                                                                                             |
| Ultravate® 0.05% Cream,<br>Ointment                         |                            | See Halobetasol 0.05% Cream,<br>Ointment                               |                                                                                             |
| Univasc® PO                                                 |                            | See Moexipril PO                                                       |                                                                                             |
| Urised® PO                                                  | 1 tab                      | Methenamine Mandelate/Sodium<br>Acid Phosphate PO<br>(Uroqid Acid #2®) | 1 tab                                                                                       |
| Urinary Antiseptics with<br>Methenamine PO                  | 1 tab                      | Methenamine Mandelate/Sodium<br>Acid Phosphate PO<br>(Uroqid Acid #2®) | 1 tab                                                                                       |
| URO KP Neutral® PO                                          | 1 tab                      | Phospha Neutral PO<br>(Generic for K-Phos Neutral® PO)                 | 1 tab (250 mg)                                                                              |
| Urso® PO                                                    |                            | See Ursodiol PO                                                        |                                                                                             |
| Ursodiol PO<br>(Urso® PO)                                   | 250 mg                     | Ursodiol PO<br>(Actigall® PO)                                          | 300 mg                                                                                      |
| Valisone® 0.1% <b>Cream</b>                                 |                            | See Betamethasone Valerate 0.1%<br><b>Cream</b>                        |                                                                                             |
| Valisone® 0.1% <b>Ointment</b>                              |                            | See Betamethasone Valerate 0.1%<br><b>Ointment</b>                     |                                                                                             |
| Vancenase® Nasal Spray<br>Vancenase AQ® Nasal Spray         |                            | See Beclomethasone Nasal Spray                                         |                                                                                             |
| Vasocon® Ophth Soln                                         |                            | See Naphazoline Ophth Soln                                             |                                                                                             |
| Vasocon-A® Ophth Soln                                       |                            | Naphazoline/Pheniramine<br>(Naphcon-A®) Ophth Soln                     |                                                                                             |
| Velosef® PO                                                 |                            | See Cephadrine PO                                                      |                                                                                             |
| Veramyst® Nasal Spray                                       |                            | See Fluticasone Furoate Nasal Spray                                    |                                                                                             |
| Verelan®/Verelan PM® PO                                     | 100 mg<br>200 mg<br>300 mg | <b>DO NOT INTERCHANGE</b>                                              |                                                                                             |
| <b>Very High Potency</b> Topical<br>Steroid Cream, Ointment |                            | Clobetasol 0.05% Cream, Ointment<br>(Temovate®)                        |                                                                                             |
| Vicodin® PO                                                 |                            | See Hydrocodone/APAP PO                                                |                                                                                             |
| Vicon-C® PO                                                 |                            | See B Complex PO                                                       |                                                                                             |

| MEDICATION ORDERED                | DOSE/FREQUENCY                                                               | THERAPEUTIC INTERCHANGE                          | DOSE/FREQUENCY |
|-----------------------------------|------------------------------------------------------------------------------|--------------------------------------------------|----------------|
| Vistaril® PO                      |                                                                              | See Hydroxyzine Pamoate & Hydroxyzine HCl PO     |                |
| Vitamin D2 PO                     |                                                                              | See Ergocalciferol                               |                |
| Vitamin D3 PO                     |                                                                              | See Cholecalciferol                              |                |
| Vitamin K PO                      |                                                                              | See Phytonadione (Vitamin K) PO                  |                |
| Vivelle® Patch                    |                                                                              | See Estradiol Patch                              |                |
| Vivelle Dot® Patch                |                                                                              | See Estradiol Patch                              |                |
| Westcort 0.2% Cream, Ointment     |                                                                              | See Hydrocortisone Valerate 0.2% Cream, Ointment |                |
| Zarflurukast PO<br>(Accolate® PO) | Any dose/Any frequency<br><b>FOR PTS AGE 15<br/>YEARS AND OLDER<br/>ONLY</b> | Montelukast PO<br>(Singulair®)                   | 10 mg Q day    |
| Z-Bec® PO                         |                                                                              | See Multiple Vitamin with Vitamin C PO           |                |
| Zofran® Tablets PO                | 4 mg                                                                         | See Ondansetron Tablets PO                       |                |
| Zolpidem CR PO<br>(Ambien CR® PO) | 6.25 mg<br>12.5 mg                                                           | Zolpidem PO<br>(Ambien® PO)                      | 5 mg<br>10 mg  |
| Zymar® 0.3% Ophth Soln            |                                                                              | See Gatifloxacin 0.3% Ophth Soln                 |                |

## Appendix Therapeutic Interchanges by Medication Class

### A. Angiotensin Converting Enzyme Inhibitors (ACE-I)

| MEDICATION ORDERED           | DOSE/FREQUENCY                      | THERAPEUTIC INTERCHANGE                | DOSE/FREQUENCY                  |
|------------------------------|-------------------------------------|----------------------------------------|---------------------------------|
| Benazepril PO<br>(Lotensin®) | 5 mg<br>10 mg<br>20 mg<br>40 mg     | Lisinopril PO<br>(Prinivil®, Zestril®) | 5 mg<br>10 mg<br>20 mg<br>40 mg |
| Fosinopril PO<br>(Monopril®) | 5 mg<br>10 mg<br>20 mg<br>40 mg     | Lisinopril PO<br>(Prinivil®, Zestril®) | 5 mg<br>10 mg<br>20 mg<br>40 mg |
| Moexipril PO<br>(Univasc®)   | 3.75 mg<br>7.5 mg<br>15 mg<br>30 mg | Lisinopril PO<br>(Prinivil®, Zestril®) | 5 mg<br>10 mg<br>20 mg<br>40 mg |
| Perindopril PO<br>(Aceon®)   | 2 mg<br>4 mg<br>8 mg<br>16 mg       | Lisinopril PO<br>(Prinivil®, Zestril®) | 5 mg<br>10 mg<br>20 mg<br>40 mg |
| Quinapril PO<br>(Accupril®)  | 5 mg<br>10 mg<br>20 mg<br>40 mg     | Lisinopril PO<br>(Prinivil®, Zestril®) | 5 mg<br>10 mg<br>20 mg<br>40 mg |
| Trandolapril PO<br>(Mavik®)  | 1 mg<br>2 mg<br>4 mg<br>8 mg        | Lisinopril PO<br>(Prinivil®, Zestril®) | 5 mg<br>10 mg<br>20 mg<br>40 mg |

### B. Angiotensin II Receptor Blockers (ARB)

| MEDICATION ORDERED            | DOSE/FREQUENCY                                             | THERAPEUTIC INTERCHANGE      | DOSE/FREQUENCY                                                                |
|-------------------------------|------------------------------------------------------------|------------------------------|-------------------------------------------------------------------------------|
| Candesartan PO<br>(Atacand®)  | <b>Total daily dose:</b><br>4 mg<br>8 mg<br>16 mg<br>32 mg | Valsartan PO<br>(Diovan® PO) | 20 mg BID / Q12H<br>40 mg BID / Q12H<br>80 mg BID / Q12H<br>160 mg BID / Q12H |
| Eprosartan PO<br>(Tevetan®)   | 400 mg<br>600 mg<br>800 mg                                 | Losartan PO<br>(Cozaar®)     | 25 mg<br>50 mg<br>100 mg                                                      |
| Irbesartan PO<br>(Avapro® PO) | 75 mg<br>150 mg<br>300 mg                                  | Losartan PO<br>(Cozaar®)     | 25 mg<br>50 mg<br>100 mg                                                      |
| Olmesartan PO<br>(Benicar®)   | 10 mg<br>20 mg<br>40 mg                                    | Losartan PO<br>(Cozaar®)     | 25 mg<br>50 mg<br>100 mg                                                      |
| Telmisartan PO<br>(Micardis®) | 20 mg<br>40 mg<br>80 mg                                    | Losartan PO<br>(Cozaar®)     | 25 mg<br>50 mg<br>100 mg                                                      |

### C. HMG CoA Reductase Inhibitors (STATINS)

| MEDICATION ORDERED                     | DOSE/FREQUENCY                            | THERAPEUTIC INTERCHANGE       | DOSE/FREQUENCY                           |
|----------------------------------------|-------------------------------------------|-------------------------------|------------------------------------------|
| Fluvastatin PO<br>(Lescol, Lescol XL®) | 20 mg<br>40 mg<br>80 mg                   | Simvastatin PO<br>(Zocor®)    | 5 mg<br>10 mg<br>20 mg                   |
| Lovastatin PO<br>(Mevacor®, Altoprev®) | 10 mg<br>20 mg<br>40 mg<br>60 mg<br>80 mg | Simvastatin PO<br>(Zocor®)    | 5 mg<br>10 mg<br>20 mg<br>30 mg<br>40 mg |
| Rosuvastatin PO<br>(Crestor®)          | 5 mg<br>10 mg<br>20 mg<br>40 mg           | Atorvastatin PO<br>(Lipitor®) | 20 mg<br>40 mg<br>80 mg<br>80 mg         |

### D. Oral/NG Proton Pump Inhibitors (PPIs)

| MEDICATION ORDERED                                                                                                                        | DOSE/FREQUENCY                                                                     | THERAPEUTIC INTERCHANGE                           | DOSE/FREQUENCY                 |
|-------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------|---------------------------------------------------|--------------------------------|
| Dexlansoprazole PO<br>(Kapidex®)<br><b>Patient able to take tablets</b>                                                                   | 30 mg<br>60 mg                                                                     | Omeprazole PO<br>(Prilosec®)                      | 20 mg<br>20 mg                 |
| Dexlansoprazole PO/NG<br>(Kapidex®)<br><b>Patient not able to take tablets</b>                                                            | 30 mg<br>60 mg                                                                     | Lansoprazole SoluTab PO/NG<br>(Prevacid® SoluTab) | 30 mg<br>30 mg                 |
| Esomeprazole PO<br>(Nexium®)<br><b>Patient able to take tablets</b>                                                                       | 20 mg<br>40 mg<br>40 mg Q day as<br>component of multidrug<br>regimen for H pylori | Omeprazole PO<br>(Prilosec®)                      | 20 mg<br>20 mg<br>20 mg PO BID |
| Esomeprazole PO/NG<br>(Nexium®)<br><b>Patient not able to take tablets</b>                                                                | 20 mg<br>40 mg                                                                     | Lansoprazole SoluTab PO/NG<br>(Prevacid® SoluTab) | 15 mg<br>30 mg                 |
| Lansoprazole PO<br>(Prevacid®)<br><b>Patient able to take tablets</b>                                                                     | 15 mg<br>30 mg                                                                     | Omeprazole PO<br>(Prilosec®)                      | 20 mg<br>20 mg                 |
| Lansoprazole PO/NG<br>(Prevacid®)<br><b>Patient not able to take tablets</b>                                                              | 15 mg<br>30 mg                                                                     | Lansoprazole SoluTab PO/NG<br>(Prevacid® SoluTab) | 15 mg<br>30 mg                 |
| <b>NOTE:</b> Patients will be automatically converted between omeprazole PO and lansoprazole SoluTab based on ability to tolerate tablets |                                                                                    |                                                   |                                |
| Omeprazole PO<br>(Prilosec®)<br><b>Patient able to take tablets</b>                                                                       | 10 mg (>= 20 kg only)                                                              | Omeprazole PO<br>(Prilosec®)                      | 20 mg                          |
| Omeprazole PO/NG<br>(Prilosec®)<br><b>Patient not able to take tablets</b>                                                                | 10 mg<br>20 mg ( <b>ADULTS</b> only)<br>40 mg                                      | Lansoprazole SoluTab PO/NG<br>(Prevacid®)         | 15 mg<br>30 mg<br>30 mg        |
| Pantoprazole PO/NG<br>(Protonix®)<br><b>Patient able to take tablets</b>                                                                  | 20 mg (>= 20 kg only)<br>40 mg                                                     | Omeprazole PO<br>(Prilosec®)                      | 20 mg<br>20 mg                 |
| Pantoprazole PO/NG<br>(Protonix®)<br><b>Patient not able to take tablets</b>                                                              | 20 mg ( <b>ADULTS</b> only)<br>40 mg                                               | Lansoprazole SoluTab PO/NG<br>(Prevacid®)         | 30 mg<br>30 mg                 |

| MEDICATION ORDERED                                                                | DOSE/FREQUENCY | THERAPEUTIC INTERCHANGE                           | DOSE/FREQUENCY |
|-----------------------------------------------------------------------------------|----------------|---------------------------------------------------|----------------|
| Rabeprazole PO<br>(Aciphex®)<br><b>Patient able to take tablets</b>               | 20 mg          | Omeprazole PO<br>(Prilosec®)                      | 20 mg          |
| Rabeprazole PO/NG<br>(Aciphex®)<br><b>Patient <u>not</u> able to take tablets</b> | 20 mg          | Lansoprazole SoluTab PO/NG<br>(Prevacid® SoluTab) | 30 mg          |

## E. Steroids – Nasal

| MEDICATION ORDERED                                                                                                                                                                                                                                                           | DOSE/FREQUENCY         | THERAPEUTIC INTERCHANGE   | DOSE/FREQUENCY                                                                                      |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|---------------------------|-----------------------------------------------------------------------------------------------------|
| Beclomethasone<br>(Beconase AQ®)<br><br>Flunisolide<br>(Nasarel®)<br><br>Triamcinolone acetonide<br>(Nasocort AQ®)<br><br>Mometasone furoate<br>(Nasonex®)<br><br>Ciclesonide<br>(Omnaris®)<br><br>Budesonide<br>(Rhinocort Aqua®)<br><br>Fluticasone furoate<br>(Veramyst®) | Any dose/Any frequency | Fluticasone<br>(Flonase®) | 4-12 years old:<br>1 spray each nostril daily<br><br>> 12 years old:<br>2 sprays each nostril daily |

## F. Steroids – Topical

| POTENCY           | MEDICATION ORDERED                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | THERAPEUTIC INTERCHANGE                                      |
|-------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------|
| Very High Potency | Betamethasone dipropionate <b>augmented</b> 0.05% <b>Ointment</b> (Diprolene®)<br>Diflorasone 0.05% <b>Ointment</b> (Psorcon-E®)<br>Halobetasol 0.05% (Ultravate®)<br>Orders written as Very High Potency Topical Steroid                                                                                                                                                                                                                                                                                                        | Clobetasol 0.05% Cream, Ointment (Temovate®)                 |
| High Potency      | Amcinonide 0.1% (Cyclort®)<br>Betamethasone dipropionate <b>augmented</b> 0.05% <b>Cream</b> (Diprolene AF®)<br>Betamethasone valerate 0.1% <b>Ointment</b> (Valisone®)<br>Desoximetasone 0.25% (Topicort®)<br>Diflorasone 0.05% <b>Cream</b> (Psorcon-E®)<br>Fluocinolone acetonide 0.2% (Synalar HP)<br>Halcinonide 0.1% (Halog®)<br>Triamcinolone acetonide 0.5% (Aristocort A)<br>Orders written as High Potency Topical Steroid                                                                                             | Fluocinonide 0.05% Cream, Ointment (Lidex®)                  |
| Medium Potency    | Betamethasone dipropionate 0.05% (Diprosone®)<br>Betamethasone valerate 0.1% <b>Cream</b> (Valisone®)<br>Clocortolone 0.1% (Cloderm®)<br>Desoximetasone 0.05% (Topicort®)<br>Fluocinolone 0.025% (Synalar®)<br>Flurandrenolide 0.025 and 0.05% (Cordran®)<br>Fluticasone 0.05% <b>Cream</b> (Cutivate®)<br>Hydrocortisone butyrate 0.1% (Locoid®)<br>Hydrocortisone valerate 0.2% (Westcort®)<br>Mometasone 0.1% (Elocon®)<br>Triamcinolone 0.025% (Aristocort A®, Kenalog®)<br>Orders written as Medium Potency Topical Steroid | Triamcinolone 0.1% Cream, Ointment (Aristocort A®, Kenalog®) |

|             |                                                                                                                                                                                                                    |                                           |
|-------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------|
| Low Potency | Aclometasone 0.05% (Aclovate®)<br>Denoside 0.05% (Tridesilon®)<br>Dexamethasone 0.1% (Decadron®)<br>Fluocinolone 0.01% (Synalar®)<br>Hydrocortisone 0.5% and 2.5%<br>Orders written as Low Potency Topical Steroid | Hydrocortisone 1% Cream, Lotion, Ointment |
|-------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------|

## G. Multiple Vitamins

| MEDICATION ORDERED                                                                                                                                                                            | DOSE/FREQUENCY | THERAPEUTIC INTERCHANGE                                                | DOSE/FREQUENCY |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|------------------------------------------------------------------------|----------------|
| Multivitamin PO Products – Adult<br><b>Non-Formulary multivitamin PO products will be interchanged with the closest Formulary Therapeutic Interchange product unless otherwise specified.</b> |                |                                                                        | <b>All</b>     |
| <b>Multivitamin PO</b>                                                                                                                                                                        | .              | Theratab® PO<br>Or Epic Formulary Therapeutic Interchange product      |                |
| <b>Multivitamin with minerals</b> (except iron and hematinics) PO<br>Centrum Silver®, One A Day Womens®, Vicon Forte®, and all similar products                                               |                | Theragran M® PO<br>Or Epic Formulary Therapeutic Interchange product   |                |
| <b>Multivitamin with minerals and iron/hematinics</b> PO<br>Theragran Hematinic®, and all similar products                                                                                    |                | Centrum® PO<br>Or Epic Formulary Therapeutic Interchange product       |                |
| <b>Renal Multivitamins</b> PO<br>Dialyvite®, FoITx® and all similar products                                                                                                                  |                | Nephrovite® PO<br>Or Epic Formulary Therapeutic Interchange product    |                |
| <b>Eye/Ocular Multivitamins</b> PO<br>I-cap, PreserVision® and all similar products                                                                                                           |                | Ocuvite® PO<br>Or Epic Formulary Therapeutic Interchange product       |                |
| <b>Prenatal Multivitamins</b> PO                                                                                                                                                              |                | Prenatal Plus® PO<br>Or Epic Formulary Therapeutic Interchange product |                |

| MEDICATION ORDERED                                                                                                                                          | DOSE/FREQUENCY | THERAPEUTIC INTERCHANGE                                                                                                     | DOSE/FREQUENCY |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|-----------------------------------------------------------------------------------------------------------------------------|----------------|
| <b>B-Complex Multivitamin</b><br>PO<br><b>B-Complex with Vitamin C</b> PO<br>B-Complex ®, Allbee with C®, Surbex with C®, Vicon C® and all similar products |                | (Super B-100 Blanced B Complex® PO)<br>Or Epic Formulary Therapeutic Interchange product<br>Choose product <b>without C</b> |                |