



## Complete Product List: September 2020

GENERIC NAME	STRENGTH	NDC #	SIZE	BRAND REFERENCE	FORM	CASE PACK	RTG	COLOR
ABACAVIR								
ABACAVIR	300 mg	31722-557-60	60	Ziagen®	Tab	6	AB	Yellow
ABACAVIR SOL								
ABACAVIR SOL	20 mg/ml	31722-562-24	240ml	Ziagen®	Sol	16	AA	Clear Yellow
ACYCLOVIR								
ACYCLOVIR	400 mg	31722-777-01	100	Zovirax®	Tab	24	AB	Pink
ACYCLOVIR	400 mg	31722-777-05	500	Zovirax®	Tab	12	AB	Pink
ACYCLOVIR	800 mg	31722-778-01	100	Zovirax®	Tab	12	AB	Blue
ACYCLOVIR	800 mg	31722-778-05	500	Zovirax®	Tab	6	AB	Blue
ALBENDAZOLE								
ALBENDAZOLE	200 mg	31722-935-02	2	Albenza®	Tab	24	AB	White
ARIPIRAZOLE								
ARIPIRAZOLE	2 mg	31722-819-30	30	Abilify®	Tab	12	AB	Light Green
ARIPIRAZOLE	5 mg	31722-820-30	30	Abilify®	Tab	12	AB	Light Blue
ARIPIRAZOLE	10 mg	31722-827-30	30	Abilify®	Tab	12	AB	Light Pink
ARIPIRAZOLE	15 mg	31722-828-30	30	Abilify®	Tab	12	AB	Light Yellow
ARIPIRAZOLE	20 mg	31722-829-30	30	Abilify®	Tab	12	AB	White
ARIPIRAZOLE	30 mg	31722-830-30	30	Abilify®	Tab	12	AB	Light Pink
ATOVAQUONE								
ATOVAQUONE	750 mg/5 mL	31722-629-21	210mL	Mepro®	Sol	16	AB	Yellow
BENZONATATE								
BENZONATATE	100 mg	31722-956-01	100	Tessalon®	Cap	24	AA	Yellow
BENZONATATE	100 mg	31722-956-05	500	Tessalon®	Cap	24	AA	Yellow
BENZONATATE	200 mg	31722-958-01	100	Tessalon®	Cap	24	AA	Yellow
BENZONATATE	200 mg	31722-958-05	500	Tessalon®	Cap	24	AA	Yellow
CHERRY SYRUP								
CHERRY SYRUP		31722-938-47	473mL	Cherry Syrup	Sol	6	NR	Clear
CITALOPRAM								
CITALOPRAM	10 mg/5 mL	31722-564-24	240mL	Celexa®	Oral Sol	6	AA	Clear to Pale Yellow
DICYCLOMINE INJECTION								
DICYCLOMINE INJECTION	20mg/2mL	31722-963-32	5x2mL	Bentyl®	Inj	6	AB	Clear



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GENERIC NAME	STRENGTH	NDC #	SIZE	BRAND REFERENCE	FORM	CASE PACK	RTG	COLOR
<b>DONEPEZIL HYDROCHLORIDE</b>								
DONEPEZIL HYDROCHLORIDE	5 mg	31722-737-30	30	Aricept®	Tab	12	AB	White
DONEPEZIL HYDROCHLORIDE	5 mg	31722-737-90	90	Aricept®	Tab	12	AB	White
DONEPEZIL HYDROCHLORIDE	5 mg	31722-737-05	500	Aricept®	Tab	12	AB	White
DONEPEZIL HYDROCHLORIDE	10 mg	31722-738-30	30	Aricept®	Tab	12	AB	Yellow
DONEPEZIL HYDROCHLORIDE	10 mg	31722-738-90	90	Aricept®	Tab	12	AB	Yellow
DONEPEZIL HYDROCHLORIDE	10 mg	31722-738-05	500	Aricept®	Tab	12	AB	Yellow
<b>DRONABINOL</b>								
DRONABINOL	2.5 mg	31722-960-60	60	Marinol®	Cap	24	AB	Dark Brown
DRONABINOL	5 mg	31722-961-60	60	Marinol®	Cap	24	AB	Off White
DRONABINOL	10 mg	31722-962-60	60	Marinol®	Cap	24	AB	Pink
<b>DROSPIRENONE EE</b>								
DROSPIRENONE EE	3 mg/0.02 mg	31722-934-32	3x28	YAZ®	Tab	1	AB	Active-Pink Placebo-White
<b>DULOXETINE</b>								
DULOXETINE	20 mg	31722-581-60	60	Cymbalta®	Cap	12	AB	Green
DULOXETINE	30 mg	31722-582-30	30	Cymbalta®	Cap	12	AB	Blue/White
DULOXETINE	60 mg	31722-583-30	30	Cymbalta®	Cap	12	AB	Blue/Green
<b>DUTASTERIDE*</b>								
DUTASTERIDE*	0.5 mg	31722-131-30	30	Avodart®	Cap	24	AB	Yellow
DUTASTERIDE*	0.5 mg	31722-131-90	90	Avodart®	Cap	24	AB	Yellow
<b>EFAVIRENZ</b>								
EFAVIRENZ	600 mg	31722-504-30	30	Sustiva®	Tab	12	AB	Yellow
<b>ENTECAVIR</b>								
ENTECAVIR	.5 mg	31722-833-30	30	Baraclude®	Tab	12	AB	White
ENTECAVIR	.5 mg	31722-833-90	90	Baraclude®	Tab	12	AB	White
ENTECAVIR	1 mg	31722-834-30	30	Baraclude®	Tab	12	AB	Pink
<b>ESCITALOPRAM SOL</b>								
ESCITALOPRAM SOL	5 mg/5 ml	31722-569-24	240 ml	Lexapro®	Sol	12	AA	Pale Yellow
<b>ESOMEPRAZOLE</b>								
ESOMEPRAZOLE	20 mg	31722-572-30	30	Nexium®	Cap	12	AB	Blue
ESOMEPRAZOLE	20 mg	31722-572-90	90	Nexium®	Cap	12	AB	Blue
ESOMEPRAZOLE	20 mg	31722-572-10	1000	Nexium®	Cap	12	AB	Blue
ESOMEPRAZOLE	40 mg	31722-573-30	30	Nexium®	Cap	12	AB	Blue
ESOMEPRAZOLE	40 mg	31722-573-90	90	Nexium®	Cap	12	AB	Blue
ESOMEPRAZOLE	40 mg	31722-573-10	1000	Nexium®	Cap	12	AB	Blue



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GENERIC NAME	STRENGTH	NDC #	SIZE	BRAND REFERENCE	FORM	CASE PACK	RTG	COLOR
<b>FAMCICLOVIR</b>								
FAMCICLOVIR	125 mg	31722-706-30	30	Famvir®	Tab	12	AB	White
FAMCICLOVIR	250 mg	31722-707-30	30	Famvir®	Tab	12	AB	White
FAMCICLOVIR	500 mg	31722-708-30	30	Famvir®	Tab	12	AB	White
<b>FENOFIBRATE</b>								
FENOFIBRATE	48 mg	31722-595-90	90	Tricor®	Tab	12	AB	Yellow
FENOFIBRATE	145 mg	31722-596-90	90	Tricor®	Tab	12	AB	White
<b>FINASTERIDE</b>								
FINASTERIDE	1 mg	31722-526-30	30	Propecia®	Tab	24	AB	Brown
FINASTERIDE	1 mg	31722-526-90	90	Propecia®	Tab	24	AB	Brown
<b>FINASTERIDE</b>								
FINASTERIDE	5 mg	31722-525-30	30	Proscar®	Tab	24	AB	Blue
FINASTERIDE	5 mg	31722-525-90	90	Proscar®	Tab	12	AB	Blue
FINASTERIDE	5 mg	31722-525-10	1000	Proscar®	Tab	12	AB	Blue
<b>GLYCERIN</b>								
GLYCERIN		31722-939-47	473m/L	Glycerin	Sol	6	NR	Clear
<b>HYDRALAZINE</b>								
HYDRALAZINE	10 mg	31722-519-01	100	Apresoline®	Tab	12	AA	Orange
HYDRALAZINE	25 mg	31722-520-01	100	Apresoline®	Tab	12	AA	Orange
HYDRALAZINE	25 mg	31722-520-10	1000	Apresoline®	Tab	12	AA	Orange
HYDRALAZINE	50 mg	31722-521-01	100	Apresoline®	Tab	24	AA	Orange
HYDRALAZINE	50 mg	31722-521-10	1000	Apresoline®	Tab	12	AA	Orange
HYDRALAZINE	100 mg	31722-522-01	100	Apresoline®	Tab	24	AA	Orange
<b>HYDROCODONE APAP*</b>								
HYDROCODONE APAP*	5 mg/325 mg	31722-941-01	100	Norco®	Tab	24	AA	Off White
HYDROCODONE APAP*	5 mg/325 mg	31722-941-05	500	Norco®	Tab	12	AA	Off White
HYDROCODONE APAP*	7.5 mg/325 mg	31722-942-01	100	Norco®	Tab	24	AA	Off White
HYDROCODONE APAP*	7.5 mg/325 mg	31722-942-05	500	Norco®	Tab	12	AA	Off White
HYDROCODONE APAP*	10 mg/325 mg	31722-943-01	100	Norco®	Tab	24	AA	Light Yellow
HYDROCODONE APAP*	10 mg/325 mg	31722-943-05	500	Norco®	Tab	12	AA	Light Yellow
<b>INDOMETHACIN</b>								
INDOMETHACIN	25 mg	31722-542-01	100	Indomethacin®	Cap	12	AB	Green
INDOMETHACIN	50 mg	31722-543-01	100	Indomethacin®	Cap	12	AB	Green
<b>INDOMETHACIN ER</b>								
INDOMETHACIN ER	75 mg	31722-565-60	60	Indocin SR®	Cap	12	AB	White
INDOMETHACIN ER	75 mg	31722-565-01	100	Indocin SR®	Cap	12	AB	White



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GENERIC NAME	STRENGTH	NDC #	SIZE	BRAND REFERENCE	FORM	CASE PACK	RTG	COLOR
IRBESARTAN								
IRBESARTAN	75 mg	31722-729-30	30	Avapro®	Tab	12	AB	White
IRBESARTAN	75 mg	31722-729-90	90	Avapro®	Tab	12	AB	White
IRBESARTAN	150 mg	31722-730-30	30	Avapro®	Tab	12	AB	White
IRBESARTAN	150 mg	31722-730-90	90	Avapro®	Tab	24	AB	White
IRBESARTAN	300 mg	31722-731-30	30	Avapro®	Tab	12	AB	White
IRBESARTAN	300 mg	31722-731-90	90	Avapro®	Tab	24	AB	White
LAMIVUDINE/ZIDOVIDINE								
LAMIVUDINE/ZIDOVIDINE	150/300 mg	31722-506-60	60	Combivir®	Tab	12	AB	White
LEVETIRACETAM								
LEVETIRACETAM	250 mg	31722-536-12	120	Keppra®	Tab	24	AB	Blue
LEVETIRACETAM	250 mg	31722-536-05	500	Keppra®	Tab	12	AB	Blue
LEVETIRACETAM	500 mg	31722-537-12	120	Keppra®	Tab	24	AB	Yellow
LEVETIRACETAM	500 mg	31722-537-05	500	Keppra®	Tab	12	AB	Yellow
LEVETIRACETAM	750 mg	31722-538-12	120	Keppra®	Tab	24	AB	Orange
LEVETIRACETAM	750 mg	31722-538-05	500	Keppra®	Tab	12	AB	Orange
LEVETIRACETAM	1000 mg	31722-539-60	60	Keppra®	Tab	12	AB	White
LEVETIRACETAM ORAL								
LEVETIRACETAM ORAL	100 mg	31722-574-47	473 ml	Keppra®	Oral Solution	6	AA	Clear
LEVOCETIRIZINE								
LEVOCETIRIZINE	5 mg	31722-551-90	90	Xyzal®	Tab	12	AB	Off White
LEVOCETIRIZINE SOL								
LEVOCETIRIZINE SOL	2.5 mg	31722-659-31	5mL	Xyzal®	Sol	20	AA	Clear
LEVOFLOXACIN								
LEVOFLOXACIN*	250 mg	31722-721-50	50	Levaquin®	Tab	12	AB	Pink
LEVOFLOXACIN*	500 mg	31722-722-50	50	Levaquin®	Tab	12	AB	Orange
LEVOFLOXACIN*	750 mg	31722-723-20	20	Levaquin®	Tab	12	AB	White
LINEZOLID								
LINEZOLID	600 mg	31722-749-20	20	Zyvox®	Tab	12	AB	White
LINEZOLID	600 mg	31722-749-30	30	Zyvox®	Tab	12	AB	White
LITHIUM CARBONATE								
LITHIUM CARBONATE	150 mg	31722-544-01	100	Lithium Carbonate®	Cap	12	AB	White
LITHIUM CARBONATE	300 mg	31722-545-01	100	Lithium Carbonate®	Cap	12	AB	Pink
LITHIUM CARBONATE	300 mg	31722-545-10	1000	Lithium Carbonate®	Cap	12	AB	Pink
LITHIUM CARBONATE	600 mg	31722-546-01	100	Lithium Carbonate®	Cap	12	AB	Pink/White



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<b>LOSARTAN</b>								
LOSARTAN	25 mg	31722-700-90	90	Cozaar®	Tab	24	AB	White
LOSARTAN	25 mg	31722-700-05	500	Cozaar®	Tab	12	AB	White
LOSARTAN	25 mg	31722-700-10	1000	Cozaar®	Tab	24	AB	White
LOSARTAN	50 mg	31722-701-30	30	Cozaar®	Tab	24	AB	White
LOSARTAN	50 mg	31722-701-90	90	Cozaar®	Tab	24	AB	White
LOSARTAN	50 mg	31722-701-10	1000	Cozaar®	Tab	12	AB	White
LOSARTAN	100 mg	31722-702-30	30	Cozaar®	Tab	24	AB	White
LOSARTAN	100 mg	31722-702-90	90	Cozaar®	Tab	24	AB	White
LOSARTAN	100 mg	31722-702-10	1000	Cozaar®	Tab	12	AB	White
<b>MESALAMINE</b>								
MESALAMINE	1000 mg	31722-005-30	30	Canasa®	Suppository	20	AB	Light Tan
<b>METHADONE</b>								
METHADONE	5 mg	31722-946-01	100	Dolophine®	Tab	24	AA	White
METHADONE	10 mg	31722-947-01	100	Dolophine®	Tab	24	AA	White
<b>METHOCARBAMOL</b>								
METHOCARBAMOL	500 mg	31722-533-01	100	Robaxin®	Tab	12	AA	Off White
METHOCARBAMOL	500 mg	31722-533-05	500	Robaxin®	Tab	12	AA	Off White
METHOCARBAMOL	750 mg	31722-534-01	100	Robaxin®	Tab	12	AA	Off White
METHOCARBAMOL	750 mg	31722-534-05	500	Robaxin®	Tab	12	AA	Off White
<b>METHYLPHENIDATE*</b>								
METHYLPHENIDATE*	5 mg	31722-173-01	100	Ritalin®	Tab	24	AB	Light Yellow
METHYLPHENIDATE*	10 mg	31722-174-01	100	Ritalin®	Tab	24	AB	Light Blue
METHYLPHENIDATE*	20 mg	31722-175-01	100	Ritalin®	Tab	24	AB	Light Yellow
<b>METHYLPHENIDATE CHEWABLE</b>								
METHYLPHENIDATE CHEWABLE	2.5 mg	31722-926-01	100	Methylin®	Tab-Chew	24	AB	White
METHYLPHENIDATE CHEWABLE	5 mg	31722-927-01	100	Methylin®	Tab-Chew	24	AB	White
METHYLPHENIDATE CHEWABLE	10 mg	31722-928-01	100	Methylin®	Tab-Chew	24	AB	White
<b>METHYLPHENIDATE ER</b>								
METHYLPHENIDATE ER	18 mg	31722-952-01	100	Concerta®	Tab	24	AB	Yellow
METHYLPHENIDATE ER	27 mg	31722-953-01	100	Concerta® <sup>lv</sup>	Tab	24	AB	Light Pink
METHYLPHENIDATE ER	36 mg	31722-954-01	100	Concerta®	Tab	24	AB	White
METHYLPHENIDATE ER	54 mg	31722-955-01	100	Concerta®	Tab	24	AB	Light Brown



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GENERIC NAME	STRENGTH	NDC #	SIZE	BRAND REFERENCE	FORM	CASE PACK	RTG	COLOR
<b>MONTELUKAST CHEWABLE</b>								
MONTELUKAST CHEWABLE	4 mg	31722-727-30	30	Singulair®	Tab	24	AB	Light Pink
MONTELUKAST CHEWABLE	4 mg	31722-727-90	90	Singulair®	Tab	24	AB	Light Pink
MONTELUKAST CHEWABLE	5 mg	31722-728-30	30	Singulair®	Tab	12	AB	Light Pink
MONTELUKAST CHEWABLE	5mg	31722-728-90	90	Singulair®	Tab	12	AB	Light Pink
<b>MONTELUKAST SODIUM</b>								
MONTELUKAST SODIUM	10 mg	31722-726-30	30	Singulair®	Tab	24	AB	Beige
MONTELUKAST SODIUM	10 mg	31722-726-90	90	Singulair®	Tab	24	AB	Beige
MONTELUKAST SODIUM	10 mg	31722-726-10	1000	Singulair®	Tab	12	AB	Beige
<b>NEVIRAPINE</b>								
NEVIRAPINE	200 mg	31722-505-60	60	Viramune®	Tab	12	AB	Off-White
<b>OMEGA-3*</b>								
OMEGA-3*	1 gram	31722-936-12	120	Lovaza®	Cap	12	AB	Yellow
<b>OSELTAMIVIR</b>								
OSELTAMIVIR	30 mg	31722-630-31	10	Tamiflu®	Cap	11	AB	Light Yellow
OSELTAMIVIR	45 mg	31722-631-31	10	Tamiflu®	Cap	11	AB	Grey
OSELTAMIVIR	75 mg	31722-632-31	10	Tamiflu®	Cap	11	AB	Light Yellow
<b>OXYCODONE APAP</b>								
OXYCODONE APAP*	2.5mg/325 mg	31722-948-01	100	Percocet®	Tab	24	AB	White
OXYCODONE APAP*	5mg/325 mg	31722-949-01	100	Percocet®	Tab	24	AB	White
OXYCODONE APAP*	5mg/325 mg	31722-949-05	500	Percocet®	Tab	12	AB	White
OXYCODONE APAP*	7.5mg/325 mg	31722-950-01	100	Percocet®	Tab	24	AB	White
OXYCODONE APAP*	7.5mg/325 mg	31722-950-05	500	Percocet®	Tab	12	AB	White
OXYCODONE APAP*	10mg/325 mg	31722-951-01	100	Percocet®	Tab	24	AB	White
OXYCODONE APAP*	10mg/325 mg	31722-951-05	500	Percocet®	Tab	12	AB	White
<b>OXYCODONE HCl</b>								
OXYCODONE HCl*	15 mg	31722-917-01	100	Roxicodone®	Tab	24	AB	Light Yellow
OXYCODONE HCl*	15 mg	31722-917-05	500	Roxicodone®	Tab	24	AB	Light Yellow
OXYCODONE HCl*	30 mg	31722-918-01	100	Roxicodone®	Tab	24	AB	Light Yellow
OXYCODONE HCl*	30 mg	31722-918-05	500	Roxicodone®	Tab	24	AB	Light Yellow
<b>OXYMORPHONE</b>								
OXYMORPHONE	5 mg	31722-929-01	100	Opana IR®	Tab	24	AB	White
OXYMORPHONE	10 mg	31722-930-01	100	Opana IR®	Tab	24	AB	Pink
<b>PANTOPRAZOLE</b>								
PANTOPRAZOLE	20 mg	31722-712-90	90	Protonix®	Tab	24	AB	Yellow
PANTOPRAZOLE	40 mg	31722-713-90	90	Protonix®	Tab	24	AB	Yellow
PANTOPRAZOLE	40 mg	31722-713-10	1000	Protonix®	Tab	12	AB	Yellow



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RITONAVIR								
RITONAVIR	100 mg	31722-597-30	30	Norvir®	Tab	12	AB	White
ROSUVASTATIN								
ROSUVASTATIN	5 mg	31722-882-90	90	Crestor®	Tab	24	AB	Yellow
ROSUVASTATIN	10 mg	31722-883-90	90	Crestor®	Tab	24	AB	Pink
ROSUVASTATIN	20 mg	31722-884-90	90	Crestor®	Tab	24	AB	Pink
ROSUVASTATIN	40 mg	31722-885-30	30	Crestor®	Tab	24	AB	Pink
SILDENAFIL								
SILDENAFIL	20 mg	31722-776-90	90	Revatio®	Tab	12	AB	White
SILDENAFIL	20 mg	31722-776-05	500	Revatio®	Tab	24	AB	White
SILDENAFIL								
SILDENAFIL	25 mg	31722-709-30	30	Viagra®	Tab	12	AB	White
SILDENAFIL	50 mg	31722-710-30	30	Viagra®	Tab	12	AB	White
SILDENAFIL	50 mg	31722-710-01	100	Viagra®	Tab	12	AB	White
SILDENAFIL	100 mg	31722-711-30	30	Viagra®	Tab	12	AB	White
SILDENAFIL	100 mg	31722-711-01	100	Viagra®	Tab	12	AB	White
SILODOSIN								
SILODOSIN	4 mg	31722-0635-30	30	Rapaflo®	Cap	24	AB	White
SILODOSIN	8 mg	31722-0630-30	30	Rapaflo®	Cap	24	AB	White
SILODOSIN	8 mg	31722-0635-90	90	Rapaflo®	Cap	24	AB	White
SIMPLE SYRUP								
SIMPLE SYRUP		31722-937-47	473m/L	Simple Syrup	Sol	6	NR	Clear
SOSWEET SYRUP								
SOSWEET SYRUP		31722-959-01	473m/L	ORA-Sweet®	Sol	6	NR	Clear
TADALAFIL								
TADALAFIL	20 mg	31722-647-30	30	Adcirca®	Tab	12	AB	White
TADALAFIL								
TADALAFIL	2.5 mg	31722-643-30	30	Cialis®	Tab	24	AB	Blue
TADALAFIL	5 mg	31722-644-30	30	Cialis®	Tab	24	AB	White
TADALAFIL	10 mg	31722-645-30	30	Cialis®	Tab	24	AB	White
TADALAFIL	20 mg	31722-646-30	30	Cialis®	Tab	24	AB	White
TENOFIVIR								
TENOFIVIR	300mg	31722-535-30	30	Viread®	Tab	12	AB	White
TETRABENAZINE								
TETRABENAZINE	12.5 mg	31722-821-11	112	Xenazine®	Tab	12	AB	White
TETRABENAZINE	25 mg	31722-822-11	112	Xenazine®	Tab	12	AB	Yellow



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GENERIC NAME	STRENGTH	NDC #	SIZE	BRAND REFERENCE	FORM	CASE PACK	RTG	COLOR
<b>TORSEMIDE</b>								
TORSEMIDE	5 mg	31722-529-01	100	Demadex®	Tab	12	AB	Off White
TORSEMIDE	10 mg	31722-530-01	100	Demadex®	Tab	12	AB	Off White
TORSEMIDE	20 mg	31722-531-01	100	Demadex®	Tab	24	AB	Off White
TORSEMIDE	100 mg	31722-532-01	100	Demadex®	Tab	12	AB	Off White
<b>VALACYCLOVIR</b>								
VALACYCLOVIR	500 mg	31722-704-30	30	Valtrex®	Tab	24	AB	Blue
VALACYCLOVIR	500 mg	31722-704-90	90	Valtrex®	Tab	24	AB	Blue
VALACYCLOVIR	1000 mg	31722-705-30	30	Valtrex®	Tab	24	AB	White
VALACYCLOVIR	1000 mg	31722-705-90	90	Valtrex®	Tab	24	AB	White
<b>VALGANCICLOVIR</b>								
VALGANCICLOVIR	450 mg	31722-832-60	60	Valcyte®	Tab	12	AB	White
<b>VENLAFAXINE</b>								
VENLAFAXINE	37.5 mg	31722-002-30	30	Effexor XR®	Cap	24	AB	Grey/White
VENLAFAXINE	37.5 mg	31722-002-90	90	Effexor XR®	Cap	24	AB	Grey/White
VENLAFAXINE	75 mg	31722-003-30	30	Effexor XR®	Cap	24	AB	Peach/White
VENLAFAXINE	75 mg	31722-003-90	90	Effexor XR®	Cap	24	AB	Peach/White
VENLAFAXINE	150 mg	31722-004-30	30	Effexor XR®	Cap	24	AB	Orange/White
VENLAFAXINE	150 mg	31722-004-90	90	Effexor XR®	Cap	24	AB	Orange/White
<b>ZIDOVUDINE</b>								
ZIDOVUDINE	300 mg	31722-509-60	60	Retrovir®	Tab	12	AB	Off White