



PB 72 of 2014

National Health (Listing of Pharmaceutical Benefits) Amendment Instrument 2014 (No. 10)

National Health Act 1953

I, FELICITY McNEILL, First Assistant Secretary, Pharmaceutical Benefits Division, Department of Health, delegate of the Minister for Health, make this Instrument under sections 84AF, 84AK, 85, 85A, 88 and 101 of the *National Health Act 1953*.

Dated 23 September 2014

FELICITY McNEILL
First Assistant Secretary
Pharmaceutical Benefits Division
Department of Health

1 Name of Instrument

- (1) This Instrument is the *National Health (Listing of Pharmaceutical Benefits) Amendment Instrument 2014 (No. 10)*.
- (2) This Instrument may also be cited as PB 72 of 2014.

2 Commencement

This Instrument commences on 1 October 2014.

3 Amendment of *National Health (Listing of Pharmaceutical Benefits) Instrument 2012 (PB 71 of 2012)*

Schedule 1 amends the *National Health (Listing of Pharmaceutical Benefits) Instrument 2012 (PB 71 of 2012)*.

Schedule 1 Amendments

[1] Schedule 1, entry for Aciclovir in the form Tablet 200 mg [Maximum Quantity: 90; Number of Repeats: 5]

- (a) omit from the column headed "Purposes" for the brand "Aciclovir 200": **P3633**
- (b) omit from the column headed "Purposes" for the brand "Aciclovir GH": **P3633**
- (c) omit from the column headed "Purposes" for the brand "Chem mart Aciclovir": **P3633**
- (d) omit from the column headed "Purposes" for the brand "Ozvir": **P3633**
- (e) omit from the column headed "Purposes" for the brand "Terry White Chemists Aciclovir": **P3633**

[2] Schedule 1, entry for Aciclovir in the form Tablet 800 mg [Maximum Quantity: 35; Number of Repeats: 0]

- (a) omit from the column headed "Purposes" for the brand "Aciclovir 800": **P3622 P3631**
- (b) omit from the column headed "Purposes" for the brand "GenRx Aciclovir": **P3622 P3631**
- (c) omit from the column headed "Purposes" for the brand "Zovirax 800 mg": **P3622 P3631**

[3] Schedule 1, entry for Acitretin in each of the forms: Capsule 10 mg; and Capsule 25 mg

omit from the column headed "Responsible Person" for the brand "Novatin": **IA** substitute: **TX**

[4] Schedule 1, entry for Acridinium

omit from the column headed "Form": containing acridinium bromide 400 micrograms per dose, 60 doses

substitute: **322 micrograms (as bromide) per dose, 60 doses**

[5] Schedule 1, entry for Alendronic Acid

omit:

Tablet 40 mg (as alendronate sodium)	Oral	Fosamax 40 mg	MK	MP NP	C3256	30	5	30
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[6] Schedule 1, entry for Alendronic acid with colecalciferol in the form Tablet 70 mg (as alendronate sodium) with 70 micrograms colecalciferol

- (a) insert in the columns in the order indicated, and in alphabetical order for the column headed "Brand":

Alendronate plus D3-DRLA	RZ	MP NP	C4070 C4087 C4110	4	5	4
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- (b) insert in the columns in the order indicated, and in alphabetical order for the column headed "Brand":

FonatPlus	AF	MP NP	C4070 C4087 C4110	4	5	4
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[7] Schedule 1, entry for Alprazolam in each of the forms: Tablet 1 mg; and Tablet 2 mg

omit:

Ralozam	GN	MP NP	C1975	50	2	50
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[8] Schedule 1, entry for Amlodipine in each of the forms: Tablet 5 mg (as besylate); and Tablet 10 mg (as besylate)

omit:

Amlodipine-GA	UA	MP NP		30	5	30
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[9] Schedule 1, entry for Azathioprine in the form Tablet 50 mg

insert in the columns in the order indicated, and in alphabetical order for the column headed "Brand":

Imazam	ER	MP NP		100	5	100
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[10] Schedule 1, entry for Capecitabine in the form Tablet 150 mg

insert in the columns in the order indicated, and in alphabetical order for the column headed "Brand":

Xelabine	QA	MP	C1522 C1614 C1738 C1739 C3509 C3942	60	2	60
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[11] Schedule 1, entry for Capecitabine in the form Tablet 500 mg

insert in the columns in the order indicated, and in alphabetical order for the column headed "Brand":

Xelabine	QA	MP	C1522 C1614 C1738 C1739 C3509 C3942	120	2	120
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[12] Schedule 1, entry for Carbamazepine in the form Tablet 100 mg [Brand: Carbamazepine Sandoz]

(a) *omit:*

	PDP			200	0	200
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(b) *omit:*

	MP NP			200	2	200
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[13] Schedule 1, entry for Carbamazepine in the form Tablet 200 mg [Brand: Carbamazepine Sandoz]

(a) *omit:*

	PDP			200	0	200
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(b) *omit:*

	MP NP			200	2	200
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[14] Schedule 1, entry for Ceftriaxone in the form Powder for injection 2 g (as sodium)

omit:

	Ceftriaxone ICP	PP	MP NP	C1169 C1846 C1847	5	0	1	
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[15] Schedule 1, entry for Doxycycline in the form Tablet 50 mg (as hydrochloride)

insert in the columns in the order indicated, and in alphabetical order for the column headed "Brand":

	Doxycycline AN	EA	MP NP	C4475 C4529 C4539	25	5	25	
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[16] Schedule 1, entry for Doxycycline in the form Tablet 100 mg (as hydrochloride) [Maximum Quantity: 7; Number of Repeats: 0]

insert in the columns in the order indicated, and in alphabetical order for the column headed "Brand":

	Doxycycline AN	EA	PDP		7	0	7	
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[17] Schedule 1, entry for Doxycycline in the form Tablet 100 mg (as hydrochloride) [Maximum Quantity: 7; Number of Repeats: 1]

insert in the columns in the order indicated, and in alphabetical order for the column headed "Brand":

	Doxycycline AN	EA	MP NP		7	1	7	
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[18] Schedule 1, entry for Doxycycline in the form Tablet 100 mg (as hydrochloride) [Maximum Quantity: 21; Number of Repeats: 0]

insert in the columns in the order indicated, and in alphabetical order for the column headed "Brand":

	Doxycycline AN	EA	MP NP	P4485	21	0	7	
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[19] Schedule 1, entry for Duloxetine in the form Capsule 30 mg (as hydrochloride)

insert in the columns in the order indicated, and in alphabetical order for the column headed "Brand":

	Pharmacor Duloxetine 30	CR	MP NP	C1211	28	0	28	
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[20] Schedule 1, entry for Duloxetine in the form Capsule 60 mg (as hydrochloride)

insert in the columns in the order indicated, and in alphabetical order for the column headed "Brand":

	Pharmacor Duloxetine 60	CR	MP NP	C1211	28	5	28	
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[21] Schedule 1, after entry for Eptifibatide in the form Solution for I.V. infusion 75 mg (as acetate) in 100 mL

insert:

Eribulin	Solution for I.V. injection containing eribulin mesilate 1 mg in 2 mL	Injection	Halaven	EI	MP	C4646 C4649	See Note 3	See Note 3	1	D(100)
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[22] Schedule 1, entry for Escitalopram in the form Tablet 10 mg (as oxalate)

insert in the columns in the order indicated, and in alphabetical order for the column headed "Brand":

Cilopam-S	ER	MP NP	C1211	28	5	28
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[23] Schedule 1, entry for Esomeprazole in the form Tablet (enteric coated) 20 mg (as magnesium trihydrate) [Maximum Quantity: 30; Number of Repeats: 1]

insert in the columns in the order indicated, and in alphabetical order for the column headed "Brand":

Esomeprazole GxP	AF	MP NP	C1337 C1629 C2273 C3429	P2273	30	1	30
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[24] Schedule 1, entry for Esomeprazole in the form Tablet (enteric coated) 20 mg (as magnesium trihydrate) [Maximum Quantity: 30; Number of Repeats: 5]

insert in the columns in the order indicated, and in alphabetical order for the column headed "Brand":

Esomeprazole GxP	AF	MP NP	C1337 C1629 C2273 C3429	P1337 P1629 P3429	30	5	30
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[25] Schedule 1, entry for Esomeprazole in the form Tablet (enteric coated) 40 mg (as magnesium trihydrate) [Maximum Quantity: 30; Number of Repeats: 1]

insert in the columns in the order indicated, and in alphabetical order for the column headed "Brand":

Esomeprazole GxP	AF	MP NP	C1337 C1628 C3429	P1628	30	1	30
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[26] Schedule 1, entry for Esomeprazole in the form Tablet (enteric coated) 40 mg (as magnesium trihydrate) [Maximum Quantity: 30; Number of Repeats: 5]

insert in the columns in the order indicated, and in alphabetical order for the column headed "Brand":

Esomeprazole GxP	AF	MP NP	C1337 C1628 C3429	P1337 P3429 P3429	30	5	30
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[27] Schedule 1, entry for Fosinopril with Hydrochlorothiazide in the form Tablet containing fosinopril sodium 10 mg with hydrochlorothiazide 12.5 mg

omit:

Fosinopril/HCTZ- GA 10/12.5	GN	MP NP	C4389	30	5	30
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[28] Schedule 1, entry for Fosinopril with Hydrochlorothiazide in the form Tablet containing fosinopril sodium 20 mg with hydrochlorothiazide 12.5 mg

omit:

Fosinopril/HCTZ- GA 20/12.5	GN	MP NP	C4389	30	5	30
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[29] Schedule 1, after entry for Glucose Indicator—Blood in the form Test strips, 50 (CareSens N)

insert in the columns in the order indicated, and in alphabetical order for the column headed “Brand”:

Test strips, 50 (EasyMate II)	For external use	EasyMate II	WI	MP NP		2	5	1
				MP	P4241	2	11	1

[30] Schedule 1, after entry for Glucose Indicator—Blood in the form Test strips, 100 (Contour)

insert in the columns in the order indicated, and in alphabetical order for the column headed “Brand”:

Test strips, 100 (EasyMate II)	For external use	EasyMate II	WI	MP NP		1	5	1
				MP	P4241	1	11	1

[31] Schedule 1, entry for Lamotrigine in each of the forms: Tablet 25 mg; Tablet 50 mg; Tablet 100 mg; and Tablet 200 mg

insert in the columns in the order indicated, and in alphabetical order for the column headed “Brand”:

Lamotrigine AN	EA	MP NP	C1426			56	5	56
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**[32] Schedule 1, entry for Macrofol 3350 in the form Sachets containing powder for oral solution 13.125 g with electrolytes, 30
[Maximum Quantity: 1; Number of Repeats: 5]**

insert in the columns in the order indicated, and in alphabetical order for the column headed “Brand”:

Macrofol	QA	MP NP	C4576 C4577	P4576 P4577	1	5	1
		See Note 1	C4580 C4590	P4580 P4596	See Note 2	See Note 2	
			C4595 C4596	P4601			
			C4601	See Note 2			
			See Note 2				

**[33] Schedule 1, entry for Macrofol 3350 in the form Sachets containing powder for oral solution 13.125 g with electrolytes, 30
[Maximum Quantity: 2; Number of Repeats: 0]**

insert in the columns in the order indicated, and in alphabetical order for the column headed “Brand”:

Macrofol	QA	MP NP	C4576 C4577	P4590	2	0	1
		See Note 1	C4580 C4590	See Note 2	See Note 2	See Note 2	
			C4595 C4596				
			C4601				
			See Note 2				

**[34] Schedule 1, entry for Macrofol 3350 in the form Sachets containing powder for oral solution 13.125 g with electrolytes, 30
[Maximum Quantity: 2; Number of Repeats: 3]**

insert in the columns in the order indicated, and in alphabetical order for the column headed “Brand”:

Macrofol	QA	MP NP	C4576 C4577	P4595	2	3	1
		See Note 1	C4580 C4590	See Note 2	See Note 2	See Note 2	
			C4595 C4596				
			C4601				
			See Note 2				

[35] Schedule 1, entry for Memantine in the form Tablet containing memantine hydrochloride 10 mg

insert in the columns in the order indicated, and in alphabetical order for the column headed "Brand":

Memantine generichealth	GQ	MP NP	C4214 C4218 C4221	56	5	56
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[36] Schedule 1, entry for Memantine in the form Tablet containing memantine hydrochloride 20 mg

insert in the columns in the order indicated, and in alphabetical order for the column headed "Brand":

Memantine generichealth	GQ	MP NP	C4214 C4218 C4221	28	5	28
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[37] Schedule 1, entry for Methylprednisolone in each of the forms: Cream containing methylprednisolone aceponate 1 mg per g, 15 g; Ointment containing methylprednisolone aceponate 1 mg per g, 15 g; Fatty ointment containing methylprednisolone aceponate 1 mg per g, 15 g; and Lotion containing methylprednisolone aceponate 1 mg per g, 20 g

omit from the column headed "Responsible Person": **CS** *substitute:* **BN**

[38] Schedule 1, entry for Mianserin in the form Tablet containing mianserin hydrochloride 20 mg

omit:

Tolvon	MK	MP NP	C1355	50	5	50
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[39] Schedule 1, entry for Mirtazapine in the form Tablet 30 mg

omit:

Mirtazapine-DP	UA	MP NP	C1211	30	5	30
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[40] Schedule 1, entry for Moclobemide in the form Tablet 150 mg

omit from the column headed "Responsible Person" for the brand "Aurorix": **VP** *substitute:* **HM**

[41] Schedule 1, entry for Moclobemide in the form Tablet 300 mg

omit from the column headed "Responsible Person" for the brand "Aurorix 300 mg": **VP** *substitute:* **HM**

[42] Schedule 1, entry for Oestradiol and Oestradiol with Dydrogesterone

insert as first item in the columns in the order indicated:

Pack containing 14 tablets oestradiol 1 mg and 14 tablets oestradiol 1 mg with dydrogesterone 10 mg	Oral	Femoston 1/10	AB	MP NP	1	5	1
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[43] Schedule 1, after entry for Oestradiol and Oestradiol with Norethisterone in the form Pack containing 4 transdermal patches 780 micrograms oestradiol (as hemihydrate) and 4 transdermal patches 510 micrograms oestradiol (as hemihydrate) with 4.8 mg norethisterone acetate

insert:

Oestradiol with dydrogesterone	Tablet 1 mg-5 mg	Oral	Femoston-Conti	AB	MP NP	28	5	28
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[44] Schedule 1, entry for Pantoprazole in the form Tablet (enteric coated) 20 mg (as sodium sesquihydrate)

insert in the columns in the order indicated, and in alphabetical order for the column headed "Brand":

Sozol	QA	MP NP	C1337 C1476 C1533	30	5	30
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[45] Schedule 1, omit entry for Polyethylene glycol 400

[46] Schedule 1, entry for Pramipexole in the form Tablet containing pramipexole hydrochloride 125 micrograms [Maximum Quantity: 30; Number of Repeats: 0]

insert in the columns in the order indicated, and in alphabetical order for the column headed "Brand":

Pramipexole AN	EA	MP NP	C3216	30	0	30
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[47] Schedule 1, entry for Pramipexole

omit:

Tablet containing pramipexole hydrochloride 250 micrograms	Oral	Sifrol	BY	MP NP	C3088 C3216 P3088	100	2	100
				MP NP	C3088 C3216 P3216	100	5	100
		Simipex 0.25	QA	MP NP	C3216	100	5	100

substitute:

Tablet containing pramipexole hydrochloride 250 micrograms	Oral	Sifrol	BY	MP NP	C3088 C3216 P3088	100	2	100
		Pramipexole AN	EA	MP NP	C3216	100	5	100
		Sifrol	BY	MP NP	C3088 C3216 P3216	100	5	100
		Simipex 0.25	QA	MP NP	C3216	100	5	100

[48] Schedule 1, entry for Pramipexole in the form Tablet containing pramipexole hydrochloride 1 mg

insert in the columns in the order indicated, and in alphabetical order for the column headed "Brand":

Pramipexole AN	EA	MP NP	C3216	100	5	100
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[49] Schedule 1, entry for Quetiapine in the form Tablet 25 mg (as fumarate)

insert in the columns in the order indicated, and in alphabetical order for the column headed "Brand":

Kaptan	ER	MP NP	C4385 C4391 C4396	60	0	60
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[50] Schedule 1, entry for Quetiapine in the form Tablet 100 mg (as fumarate)

insert in the columns in the order indicated, and in alphabetical order for the column headed "Brand":

Kaptan	ER	MP NP	C1589 C2044 C2765	90	5	90
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[51] Schedule 1, entry for Quetiapine in each of the forms: Tablet 200 mg (as fumarate); and Tablet 300 mg (as fumarate)

insert in the columns in the order indicated, and in alphabetical order for the column headed "Brand":

Kaptan	ER	MP NP	C1589 C2044 C2765	60	5	60
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[52] Schedule 1, entry for Rabeprazole in the form Tablet containing rabeprazole sodium 10 mg (enteric coated)

omit:

Rabzole	JS	MP NP	C1337 C1533	28	5	28
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[53] Schedule 1, entry for Rabeprazole in the form Tablet containing rabeprazole sodium 20 mg (enteric coated)

(a) *omit:*

Rabzole	JS	MP NP	C1177 C1337 P1177 C1533	30	2	30
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(b) *omit:*

Rabzole	JS	MP NP	C1177 C1337 P1337 P1533 C1533	30	5	30
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[54] Schedule 1, entry for Riluzole in the form Tablet 50 mg

insert in the columns in the order indicated, and in alphabetical order for the column headed "Brand":

Pharmacor Riluzole	CR	MP NP	C1762 C2718	56	5	56
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[55] Schedule 1, entry for Salbutamol

(a) *omit:*

Capsule containing powder for oral inhalation 200 micrograms (as sulfate) (for use in Ventolin Rotahaler)	Inhalation by mouth	Ventolin Rotacaps	GK	MP NP	200	5	100
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(b) *substitute:*

Capsule containing powder for oral inhalation 200 micrograms (as sulfate) (for use in Ventolin Rotahaler)	Inhalation by mouth	Ventolin Rotacaps	GK	MP NP	256	4	128
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[56] Schedule 1, entry for Salbutamol in the form Pressurised inhalation 100 micrograms (as sulfate) per dose, 200 doses (CFC-free formulation)

omit:

Airomir	IA	MP NP		2	5	1
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- [57] **Schedule 1, entry for Salbutamol in each of the forms: Nebuliser solution 2.5 mg (as sulfate) in 2.5 mL single dose units, 30; and Nebuliser solution 5 mg (as sulfate) in 2.5 mL single dose units, 30**

insert in the columns in the order indicated, and in alphabetical order for the column headed "Brand":

Salbutamol Actavis	UA	MP	NP	C1754	C1755	2	5	1
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- [58] **Schedule 1, entry for Strontium**

(a) *omit from the column headed "Authorised Prescriber":* **NP**

(b) *omit from the column headed "Circumstances":* **C4123** *substitute:* **C4644**

- [59] **Schedule 1, entry for Telmisartan in each of the forms: Tablet 40 mg; and Tablet 80 mg**

insert in the columns in the order indicated, and in alphabetical order for the column headed "Brand":

Telmisartan RBX	RA	MP	NP			28	5	28
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- [60] **Schedule 1, entry for Terbinafine in the form Tablet 250 mg (as hydrochloride)**

(a) *omit:*

Terbinafine-GA	UA	MP	NP	C2191	C2865	P2865	P3244	42	0	42
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(b) *omit:*

Terbinafine-GA	UA	MP	NP	C2191	C2865	P2191		42	1	42
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- [61] **Schedule 1, entry for Testosterone in the form Transdermal gel 50 mg in 5 g sachet, 30**

omit from the column headed "Responsible Person": **BN** *substitute:* **HB**

- [62] **Schedule 1, entry for Topiramate in each of the forms: Tablet 25 mg; and Tablet 50 mg**

omit:

Topiramate-GA	GN	MP	NP	C2797	C2799	60	5	60
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- [63] **Schedule 1, entry for Topiramate in each of the forms: Tablet 100 mg; and Tablet 200 mg**

omit:

Topiramate-GA	GN	MP	NP	C2797		60	5	60
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- [64] **Schedule 1, entry for Tramadol in each of the forms: Tablet (sustained release) containing tramadol hydrochloride 100 mg; Tablet (sustained release) containing tramadol hydrochloride 150 mg; and Tablet (sustained release) containing tramadol hydrochloride 200 mg**

insert in the columns in the order indicated, and in alphabetical order for the column headed "Brand":

Tramadol AN SR	EA	MP	NP	C1537		20	0	20
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- [65] **Schedule 1, entry for Varenicline in the form Box containing 11 tablets 0.5 mg (as tartrate) and 14 tablets 1 mg (as tartrate) in the first pack and 28 tablets 1 mg (as tartrate) in the second pack**

omit from the column headed "Circumstances": **C2774 C2775** *substitute:* **C4645**

- [66] **Schedule 1, entry for Varenicline in the form Tablet 1 mg (as tartrate) [Maximum Quantity: 56; Number of Repeats: 2]**

(a) *omit from the column headed "Circumstances":* **C3670 C3671** *substitute:* **C4647 C4648**

(b) *omit from the column headed "Purposes":* **P3671** *substitute:* **P4647**

- [67] **Schedule 1, entry for Varenicline in the form Tablet 1 mg (as tartrate) [Maximum Quantity: 112; Number of Repeats: 0]**

(a) *omit from the column headed "Circumstances":* **C3670 C3671** *substitute:* **C4647 C4648**

(b) *omit from the column headed "Purposes":* **P3670** *substitute:* **P4648**

- [68] **Schedule 3**

omit:

AO	AMO Australia Pty Limited	95 099 963 194
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- [69] **Schedule 3, after details relevant to Responsible Person code EH**

insert:

EI	Eisai Australia Pty Ltd	73 117 970 993
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- [70] **Schedule 3, after details relevant to Responsible Person code GZ**

insert:

HB	Besins Healthcare Australia Pty Ltd	68 164 882 062
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- [71] **Schedule 3**

omit:

JS	Janssen-Cilag Pty Ltd	47 000 129 975
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- [72] **Schedule 3**

omit:

VP	Meda Valeant Pharma Australia Pty Ltd	61 140 839 658
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- [73] **Schedule 3, after details relevant to Responsible Person code WA**

insert:

WI	Wincot Pty. Limited	14 003 526 930
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[74] Schedule 4, Part 1, entry for Alendronic Acid

omit:

	C3256			Symptomatic Paget disease of bone	Compliance with Authority Required procedures – Streamlined Authority Code 3256
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[75] Schedule 4, Part 1, after entry for Eptifibatide

insert:

Eribulin	C4646			Where the patient is receiving treatment in the community setting or at/from a Private Hospital Locally advanced or metastatic breast cancer Patient must have progressive disease; AND Patient must have failed at least two prior chemotherapeutic regimens for this condition; AND The treatment must be the sole PBS-subsidised therapy for this condition	Compliance with Authority Required procedures
	C4649			Where the patient is receiving treatment at/from a Public Hospital Locally advanced or metastatic breast cancer Patient must have progressive disease; AND Patient must have failed at least two prior chemotherapeutic regimens for this condition; AND The treatment must be the sole PBS-subsidised therapy for this condition	Compliance with Authority Required procedures - Streamlined Authority Code 4649

[76] Schedule 4, Part 1, entry for Polyethylene glycol 400

[77] Schedule 4, Part 1, entry for Strontium

substitute:

Strontium	C4644			Severe established osteoporosis Patient must have fracture due to minimal trauma; AND Patient must not receive concomitant treatment with any other PBS-subsidised anti-resorptive agent for this condition; AND Patient must be at high risk of fracture; AND Patient must be unable to use other medications for the treatment of osteoporosis due to contraindications or intolerance The fracture must have been demonstrated radiologically and the year of plain x-ray or computed tomography (CT) scan or magnetic resonance imaging (MRI) scan must be documented in the patient's medical records when treatment is initiated A vertebral fracture is defined as a 20% or greater reduction in height of the anterior or mid portion of a vertebral body relative to the posterior height of that body, or, a 20% or greater reduction in any of these heights compared to the vertebral body above or below the affected vertebral body	Compliance with Authority Required procedures
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[78] Schedule 4, Part 1, entry for Varenicline

substitute:

Varenicline	C4645			Nicotine dependence Commencement of a short-term (12 weeks or 24 weeks) course of treatment The treatment must be as an aid to achieving abstinence from smoking; AND The treatment must be the sole PBS-subsidised therapy for this condition; AND Patient must have indicated they are ready to cease smoking	Compliance with Authority Required procedures
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			<p>Patient must be undergoing concurrent counselling for smoking cessation through a comprehensive support and counselling program or is about to enter such a program at the time the Authority application is requested</p> <p>Details of the support and counselling program must be documented in the patient's medical records at the time treatment is initiated</p> <p>Clinical review is recommended within 2 to 3 weeks of the initial prescription being requested</p>	
	C4647	P4647	<p>Nicotine dependence</p> <p>Completion of a short-term (24 weeks) course of treatment</p> <p>The treatment must be as an aid to achieving abstinence from smoking; AND</p> <p>The treatment must be the sole PBS-subsidised therapy for this condition; AND</p> <p>Patient must have previously been issued with an authority prescription for this drug during this current course of treatment; AND</p> <p>Patient must have ceased smoking following an initial 12-weeks of PBS-subsidised treatment with this drug in the current course of treatment</p> <p>Patient must be undergoing concurrent counselling for smoking cessation through a comprehensive support and counselling program</p>	Compliance with Authority Required procedures
	C4648	P4648	<p>Nicotine dependence</p> <p>Continuation of a short-term (12 weeks or 24 weeks) course of treatment</p> <p>The treatment must be as an aid to achieving abstinence from smoking; AND</p> <p>The treatment must be the sole PBS-subsidised therapy for this condition; AND</p> <p>Patient must have previously been issued with an authority prescription for this drug during this current course of treatment</p> <p>Patient must be undergoing concurrent counselling for smoking cessation through a comprehensive support and counselling program</p>	Compliance with Authority Required procedures