

PREPARATIONS WHICH MAY BE PRESCRIBED FOR PATIENTS RECEIVING PALLIATIVE CARE

The prescribing of medications listed in this section is in accordance with the requirements for General Pharmaceutical Benefits in the Schedule unless otherwise detailed in the listing for the item.

In addition, certain additional principles have been applied by the Pharmaceutical Benefits Advisory Committee (PBAC) in recommending for whom these medications may be prescribed, and the number of repeats that may be approved by Medicare Australia. These principles have been encompassed in the listings for the items, and further details are provided below to help doctors prescribing under this section.

For the purposes of this section a patient receiving palliative care is defined as:

- *A patient with an active, progressive, far-advanced disease for whom the prognosis is limited and the focus of care is the quality of life.*

The provision for increased maximum quantities and up to 3 repeats on the *initial* authority prescription is intended to provide up to 4 months' therapy in total. Where *continuing* treatment is required the provision of repeats is subject to confirmation by the prescriber that a palliative care physician or palliative care service has been consulted regarding the care of the patient.

Prescribers must heed State/Territory laws when prescribing drugs listed as narcotic, specified or restricted and must notify, or receive approval from, the appropriate health authority.

When a Palliative Care authority application is for a drug of addiction, the following guidelines apply:

- the maximum quantity authorised is generally for 1 month's therapy;
- where supply for a longer period is warranted, quantities are for up to 3 months' therapy;
- telephone approvals are limited to 1 month's therapy.

Doctors should also state (on the prescription) the interval of repeat where repeats are called for, and ensure State/Territory health authorities are notified about ongoing treatment.

Prescribers should be aware that patients receiving palliative care may also access PBS items included in the general part of the Schedule of Pharmaceutical Benefits including narcotic preparations, according to the restrictions that apply to individual items and the requirements that apply to the general part of the Schedule.

**PREPARATIONS WHICH MAY BE PRESCRIBED FOR
PATIENTS RECEIVING PALLIATIVE CARE**

Code	Name, Restriction, Manner of Administration and Form	Max. Qty	No. of Rpts	Premium	Dispensed Price for Max. Qty \$	Maximum Recordable Value for Safety Net \$	Brand Name and Manufacturer	
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Alimentary tract and metabolism

Stomatological preparations

Stomatological preparations

Other agents for local oral treatment

BENZYDAMINE HYDROCHLORIDE

Authority required (STREAMLINED)

3634

Initial supply, for up to 4 months, for a palliative care patient where a painful mouth is a problem.

5385K NP	Mouth and throat rinse 22.5 mg per 15 mL, 500 mL	£1	3	..	22.26	23.33	Diffiam	IA
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BENZYDAMINE HYDROCHLORIDE

Authority required (STREAMLINED)

3635

Continuing supply for a palliative care patient where a painful mouth is a problem.

Note

Written or telephone authority applications for increased repeats may be approved where consultation with a palliative care specialist or service has occurred.

5386L NP	Mouth and throat rinse 22.5 mg per 15 mL, 500 mL	£1	22.26	23.33	Diffiam	IA
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CARMELLOSE SODIUM

Authority required (STREAMLINED)

3636

Initial supply, for up to 4 months, for a palliative care patient where dry mouth is a symptom.

5333Q NP	Mouth spray 10 mg per mL, 25 mL	£1	3	..	10.79	11.86	Aquae	HA
5334R NP	Mouth spray 10 mg per mL, 100 mL	£1	3	..	12.46	13.53	Aquae	HA

CARMELLOSE SODIUM

Authority required (STREAMLINED)

3637

Continuing supply for a palliative care patient where dry mouth is a symptom.

Note

Written or telephone authority applications for increased repeats may be approved where consultation with a palliative care specialist or service has occurred.

5335T NP	Mouth spray 10 mg per mL, 25 mL	£1	..	..	10.79	11.86	Aquae	HA
5336W NP	Mouth spray 10 mg per mL, 100 mL	£1	..	..	12.46	13.53	Aquae	HA

HYPROMELLOSE

Authority required (STREAMLINED)

3636

Initial supply, for up to 4 months, for a palliative care patient where dry mouth is a symptom.

5421H NP	Oral gel 20 mg per g, 100 g	£1	3	..	12.78	13.85	Aquae Gel	HA
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HYPROMELLOSE								
Authority required (STREAMLINED)								
3637								
Continuing supply for a palliative care patient where dry mouth is a symptom.								
Note								
Written or telephone authority applications for increased repeats may be approved where consultation with a palliative care specialist or service has occurred.								
5422J NP	Oral gel 20 mg per g, 100 g	‡1	12.78	13.85	Aquae Gel	HA

Drugs for functional gastrointestinal disorders

Belladonna and derivatives, plain

Belladonna alkaloids semisynthetic, quaternary ammonium compounds

HYOSCINE BUTYLBROMIDE

Authority required (STREAMLINED)

3638

Initial supply, for up to 4 months, for a palliative care patient where colicky pain is a symptom.

5317W NP	Injection 20 mg in 1 mL	30	3	..	*108.54	34.20	Buscopan	BY
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HYOSCINE BUTYLBROMIDE

Authority required (STREAMLINED)

3639

Continuing supply for a palliative care patient where colicky pain is a symptom.

Note

Written or telephone authority applications for increased repeats may be approved where consultation with a palliative care specialist or service has occurred.

5318X NP	Injection 20 mg in 1 mL	30	*108.54	34.20	Buscopan	BY
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Antiemetics and antinauseants

Antiemetics and antinauseants

Other antiemetics

PROMETHAZINE HYDROCHLORIDE

Authority required (STREAMLINED)

3640

Initial supply, for up to 4 months, for a palliative care patient where nausea and/or vomiting is a problem.

5325G NP	Tablet 10 mg	50	3	..	14.67	15.74	Phenergan	SW
5326H NP	Tablet 25 mg	50	3	..	16.76	17.83	Phenergan	SW
5327J NP	Oral liquid 5 mg per 5 mL, 100 mL	‡1	3	..	15.34	16.41	Phenergan	SW

PROMETHAZINE HYDROCHLORIDE

Authority required (STREAMLINED)

3641

Continuing supply for a palliative care patient where nausea and/or vomiting is a problem.

Note

Written or telephone authority applications for increased repeats may be approved where consultation with a palliative care specialist or service has occurred.

5328K NP	Tablet 10 mg	50	14.67	15.74	Phenergan	SW
5329L	Tablet 25 mg	50	16.76	17.83	Phenergan	SW

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Code	Name, Restriction, Manner of Administration and Form	Max. Qty	No. of Rpts	Premium	Dispensed Price for Max. Qty \$	Maximum Recordable Value for Safety Net \$	Brand Name and Manufacturer	
NP 5330M NP	Oral liquid 5 mg per 5 mL, 100 mL	‡1	..	..	15.34	16.41	Phenergan	SW

Laxatives

Laxatives

Contact laxatives

BISACODYL

Authority required (STREAMLINED)

3642

Initial supply, for up to 4 months, for a palliative care patient where constipation is a problem.

NP 5301B NP	Tablet 5 mg	200	3	..	14.27	15.34	Bisalax	AS
							Lax-Tab	AE
NP 5303D NP	Suppositories 10 mg, 10	3	3	..	*21.27	22.34 ^a	Petrus Bisacodyl Suppositories	PP
				^B 1.08	*22.35	22.34 ^a	Dulcolax	BY
NP 5304E NP	Suppositories 10 mg, 12	3	3	..	*18.57	19.64	Petrus Bisacodyl Suppositories	PP

BISACODYL

Authority required (STREAMLINED)

3643

Continuing supply for a palliative care patient where constipation is a problem.

Note

Written or telephone authority applications for increased repeats may be approved where consultation with a palliative care specialist or service has occurred.

NP 5305F NP	Tablet 5 mg	200	..	..	14.27	15.34	Bisalax	AS
							Lax-Tab	AE
NP 5307H NP	Suppositories 10 mg, 10	3	..	..	*21.27	22.34 ^a	Petrus Bisacodyl Suppositories	PP
				^B 1.08	*22.35	22.34 ^a	Dulcolax	BY
NP 5308J NP	Suppositories 10 mg, 12	3	..	..	*18.57	19.64	Petrus Bisacodyl Suppositories	PP

Bulk producers

STERCULIA with FRANGULA BARK

Authority required (STREAMLINED)

3642

Initial supply, for up to 4 months, for a palliative care patient where constipation is a problem.

NP 5322D NP	Granules 620 mg-80 mg per g (62%-8%), 500 g	‡1	3	..	24.95	26.02	Normacol Plus	NE
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STERCULIA with FRANGULA BARK

Authority required (STREAMLINED)

3643

Continuing supply for a palliative care patient where constipation is a problem.

Note

Written or telephone authority applications for increased repeats may be approved where consultation with a palliative care specialist or service has occurred.

NP 5324F NP	Granules 620 mg-80 mg per g (62%-8%), 500 g	‡1	24.95	26.02	Normacol Plus	NE
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Osmotically acting laxatives							
LACTULOSE							
<u>Authority required (STREAMLINED)</u>							
3642							
Initial supply, for up to 4 months, for a palliative care patient where constipation is a problem.							
5387M NP	Mixture 3.34 g per 5 mL, 500 mL	3	3	..	*29.85	30.92	^a Actilax AF
							^a Genlac SI
							^a GenRx Lactulose GX
							^a Lac-Dol GM
							^a Lactocur SZ
				^B 5.01	*34.86	30.92	^a Duphalac SM
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LACTULOSE							
<u>Authority required (STREAMLINED)</u>							
3643							
Continuing supply for a palliative care patient where constipation is a problem.							
Note							
Written or telephone authority applications for increased repeats may be approved where consultation with a palliative care specialist or service has occurred.							
5388N NP	Mixture 3.34 g per 5 mL, 500 mL	3	..	..	*29.85	30.92	^a Actilax AF
							^a Genlac SI
							^a GenRx Lactulose GX
							^a Lac-Dol GM
							^a Lactocur SZ
				^B 5.01	*34.86	30.92	^a Duphalac SM
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MACROGOL 3350							
<u>Authority required (STREAMLINED)</u>							
3642							
Initial supply, for up to 4 months, for a palliative care patient where constipation is a problem.							
5389P NP	Sachets containing powder for solution 13.125 g with electrolytes, 30	2	3	..	*34.68	34.20	Movicol NE
5426N NP	Powder for oral solution 510 g	2	3	..	*34.68	34.20	^a MediHealth ClearLax ON
							^a OsmoLax KY
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MACROGOL 3350							
<u>Authority required (STREAMLINED)</u>							
3643							
Continuing supply for a palliative care patient where constipation is a problem.							
Note							
Written or telephone authority applications for increased repeats may be approved where consultation with a palliative care specialist or service has occurred.							
5390Q NP	Sachets containing powder for solution 13.125 g with electrolytes, 30	2	..	..	*34.68	34.20	Movicol NE
5427P NP	Powder for oral solution 510 g	2	*34.68	34.20	^a MediHealth ClearLax ON
							^a OsmoLax KY

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Enemas**BISACODYL****Authority required (STREAMLINED)****3642**

Initial supply, for up to 4 months, for a palliative care patient where constipation is a problem.

5302C NP	Enemas 10 mg in 5 mL, 25	‡1	3	..	38.59	34.20	Bisalax	AS
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BISACODYL**Authority required (STREAMLINED)****3643**

Continuing supply for a palliative care patient where constipation is a problem.

Note

Written or telephone authority applications for increased repeats may be approved where consultation with a palliative care specialist or service has occurred.

5306G NP	Enemas 10 mg in 5 mL, 25	‡1	38.59	34.20	Bisalax	AS
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SORBITOL with SODIUM CITRATE and SODIUM LAURYL SULFOACETATE**Authority required (STREAMLINED)****3642**

Initial supply, for up to 4 months, for a palliative care patient where constipation is a problem.

5331N NP	Enemas 3.125 g-450 mg-45 mg in 5 mL, 12	2	3	..	*32.80	33.87	^a Micolette	AE
							^a Microlax	JT

SORBITOL with SODIUM CITRATE and SODIUM LAURYL SULFOACETATE**Authority required (STREAMLINED)****3643**

Continuing supply for a palliative care patient where constipation is a problem.

Note

Written or telephone authority applications for increased repeats may be approved where consultation with a palliative care specialist or service has occurred.

5332P NP	Enemas 3.125 g-450 mg-45 mg in 5 mL, 12	2	..	..	*32.80	33.87	^a Micolette	AE
							^a Microlax	JT

Peripheral opioid receptor antagonists**METHYLNALTREXONE****Authority required**

Initial supply, in combination with oral laxatives, for a palliative care patient with opioid-induced constipation who has failed to respond to laxatives.

Note

No applications for repeats will be authorised.

Note

Special Pricing Arrangements apply.

5423K NP	Solution for injection containing methylnaltrexone bromide 12 mg in 0.6 mL	3	*130.59	34.20	Relistor	WX
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METHYLNALTREXONE**Authority required**

Continuing supply, in combination with oral laxatives, for a palliative care patient with opioid-induced constipation who has demonstrated a response to methylnaltrexone.

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Note

For first continuing supply, applications for increased repeats may be authorised.

Where consultation with a palliative care specialist or service has occurred, applications for increased repeats may be authorised.

Note

Special Pricing Arrangements apply.

5424L NP	Solution for injection containing methylnaltrexone bromide 12 mg in 0.6 mL	7	287.84	34.20	Relistor	WX
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Other laxatives**GLYCEROL****Authority required (STREAMLINED)****3642**

Initial supply, for up to 4 months, for a palliative care patient where constipation is a problem.

5311M NP	Suppositories 700 mg (for infants), 12	3	3	..	*18.84	19.91	Petrus Pharmaceuticals Pty Ltd	PP
5312N NP	Suppositories 1.4 g (for children), 12	3	3	..	*19.26	20.33	Petrus Pharmaceuticals Pty Ltd	PP
5313P NP	Suppositories 2.8 g (for adults), 12	3	3	..	*19.74	20.81	Petrus Pharmaceuticals Pty Ltd	PP

GLYCEROL**Authority required (STREAMLINED)****3643**

Continuing supply for a palliative care patient where constipation is a problem.

Note

Written or telephone authority applications for increased repeats may be approved where consultation with a palliative care specialist or service has occurred.

5314Q NP	Suppositories 700 mg (for infants), 12	3	..	..	*18.84	19.91	Petrus Pharmaceuticals Pty Ltd	PP
5315R NP	Suppositories 1.4 g (for children), 12	3	..	..	*19.26	20.33	Petrus Pharmaceuticals Pty Ltd	PP
5316T NP	Suppositories 2.8 g (for adults), 12	3	*19.74	20.81	Petrus Pharmaceuticals Pty Ltd	PP

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Musculo-skeletal system

Antiinflammatory and antirheumatic products

Antiinflammatory and antirheumatic products, non-steroids *Acetic acid derivatives and related substances*

DICLOFENAC SODIUM

Authority required (STREAMLINED)

3645

Initial supply, for up to 4 months, for a palliative care patient where severe pain is a problem.

5361E NP	Tablet 25 mg (enteric coated)	100	3	..	*13.06	14.13	^a APO-Diclofenac	TX
							^a Chem mart	CH
							^a Diclofenac	
							^a Clonac 25	SI
							^a Diclofenac-GA	GM
							^a Diclofenac Sandoz	SZ
							^a Fenac 25	AF
							^a Terry White Chemists	TW
							^a Diclofenac	
							^a Voltaren 25	NV
5362F NP	Tablet 50 mg (enteric coated)	50	3	..	11.05	12.12	^a APO-Diclofenac	TX
							^a Chem mart	CH
							^a Diclofenac	
							^a Clonac 50	SI
							^a Diclofenac-GA	GM
							^a Diclofenac Sandoz	SZ
							^a Fenac	AF
							^a Terry White Chemists	TW
							^a Diclofenac	
							^a Voltaren 50	NV

DICLOFENAC SODIUM

Authority required

Initial supply, for up to 4 months, for a palliative care patient where severe pain is a problem.

5363G NP	Suppository 100 mg	40	3	..	*24.92	25.99	Voltaren 100	NV
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DICLOFENAC SODIUM

Authority required (STREAMLINED)

3646

Continuing supply for a palliative care patient where severe pain is a problem.

Note

Written or telephone authority applications for increased repeats may be approved where consultation with a palliative care specialist or service has occurred.

5364H NP	Tablet 25 mg (enteric coated)	100	..	..	*13.06	14.13	^a APO-Diclofenac	TX
							^a Chem mart	CH
							^a Diclofenac	
							^a Clonac 25	SI
							^a Diclofenac-GA	GM
^a Diclofenac Sandoz	SZ							

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Code	Name, Restriction, Manner of Administration and Form	Max. Qty	No. of Rpts	Premium	Dispensed Price for Max. Qty \$	Maximum Recordable Value for Safety Net \$	Brand Name and Manufacturer
							^a Fenac 25 AF
							^a Terry White Chemists Diclofenac TW
				^B 1.96	*15.02	14.13	^a Voltaren 25 NV
5365J NP	Tablet 50 mg (enteric coated)	50	..	..	11.05	12.12	^a APO-Diclofenac TX
							^a Chem mart Diclofenac CH
							^a Clonac 50 SI
							^a Diclofenac-GA GM
							^a Diclofenac Sandoz SZ
							^a Fenac AF
							^a Terry White Chemists Diclofenac TW
				^B 1.96	13.01	12.12	^a Voltaren 50 NV

DICLOFENAC SODIUM**Authority required**

Continuing supply for a palliative care patient where severe pain is a problem.

Note

Written or telephone authority applications for increased repeats may be approved where consultation with a palliative care specialist or service has occurred.

5366K NP	Suppository 100 mg	40	*24.92	25.99	Voltaren 100 NV
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INDOMETHACIN**Authority required (STREAMLINED)****3645**

Initial supply, for up to 4 months, for a palliative care patient where severe pain is a problem.

5377B NP	Capsule 25 mg	100	3	..	*12.08	13.15	^a Arthrexin AF
				^B 2.16	*14.24	13.15	^a Indocid AS

INDOMETHACIN**Authority required**

Initial supply, for up to 4 months, for a palliative care patient where severe pain is a problem.

5378C NP	Suppository 100 mg	40	3	..	*22.50	23.57	Indocid AS
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INDOMETHACIN**Authority required (STREAMLINED)****3646**

Continuing supply for a palliative care patient where severe pain is a problem.

Note

Written or telephone authority applications for increased repeats may be approved where consultation with a palliative care specialist or service has occurred.

5379D NP	Capsule 25 mg	100	*12.08	13.15	^a Arthrexin AF
				^B 2.16	*14.24	13.15	^a Indocid AS

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INDOMETHACIN							
Authority required							
Continuing supply for a palliative care patient where severe pain is a problem.							
Note							
Written or telephone authority applications for increased repeats may be approved where consultation with a palliative care specialist or service has occurred.							
5380E NP	Suppository 100 mg	40	..	..	*22.50	23.57	Indocid AS
SULINDAC							
Authority required (STREAMLINED)							
3645							
Initial supply, for up to 4 months, for a palliative care patient where severe pain is a problem.							
5381F NP	Tablet 100 mg	100	3	..	*16.34	17.41	Aclin AF
5382G NP	Tablet 200 mg	50	3	..	15.28	16.35	Aclin 200 AF
SULINDAC							
Authority required (STREAMLINED)							
3646							
Continuing supply for a palliative care patient where severe pain is a problem.							
Note							
Written or telephone authority applications for increased repeats may be approved where consultation with a palliative care specialist or service has occurred.							
5383H NP	Tablet 100 mg	100	..	..	*16.34	17.41	Aclin AF
5384J NP	Tablet 200 mg	50	..	..	15.28	16.35	Aclin 200 AF
Propionic acid derivatives							
IBUPROFEN							
Authority required							
Initial supply, for up to 4 months, for a palliative care patient where severe pain is a problem.							
5368M NP	Tablet 400 mg	90	3	..	*14.73	15.80	Brufen AB
IBUPROFEN							
Authority required							
Continuing supply for a palliative care patient where severe pain is a problem.							
Note							
Written or telephone authority applications for increased repeats may be approved where consultation with a palliative care specialist or service has occurred.							
5370P NP	Tablet 400 mg	90	..	..	*14.73	15.80	Brufen AB
NAPROXEN							
Authority required (STREAMLINED)							
3645							
Initial supply, for up to 4 months, for a palliative care patient where severe pain is a problem.							
5345H NP	Tablet 250 mg	100	3	..	*13.72	14.79 ^a	Inza 250 AF
				^B 2.34	*16.06	14.79 ^a	Naprosyn RO
5346J NP	Tablet 500 mg	50	3	..	12.91	13.98 ^a	Inza 500 AF
				^B 1.36	14.27	13.98 ^a	Naprosyn RO

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5347K NP	Tablet 750 mg (sustained release)	28	3	..	12.38	13.45 ^a		Proxen SR 750 MD
				^B 1.27	13.65	13.45 ^a		Naprosyn SR750 RO
5348L NP	Tablet 1 g (sustained release)	28	3	..	14.37	15.44 ^a		Proxen SR 1000 MD
				^B 1.34	15.71	15.44 ^a		Naprosyn SR1000 RO

NAPROXEN**Authority required (STREAMLINED)****3647**

Initial supply, for up to 4 months, for a palliative care patient where severe pain is a problem in patients unable to take a solid dose form of a non-steroidal anti-inflammatory agent.

5397C NP	Oral suspension 125 mg per 5 mL, 474 mL	‡1	3	..	78.17	34.20		Naprosyn RO
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NAPROXEN**Authority required (STREAMLINED)****3648**

Continuing supply for a palliative care patient where severe pain is a problem in patients unable to take a solid dose form of a non-steroidal anti-inflammatory agent.

Note

Written or telephone authority applications for increased repeats may be approved where consultation with a palliative care specialist or service has occurred.

5398D NP	Oral suspension 125 mg per 5 mL, 474 mL	‡1	78.17	34.20		Naprosyn RO
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NAPROXEN**Authority required (STREAMLINED)****3646**

Continuing supply for a palliative care patient where severe pain is a problem.

Note

Written or telephone authority applications for increased repeats may be approved where consultation with a palliative care specialist or service has occurred.

5349M NP	Tablet 250 mg	100	..	..	*13.72	14.79 ^a		Inza 250 AF
				^B 2.34	*16.06	14.79 ^a		Naprosyn RO
5350N NP	Tablet 500 mg	50	..	..	12.91	13.98 ^a		Inza 500 AF
				^B 1.36	14.27	13.98 ^a		Naprosyn RO
5351P NP	Tablet 750 mg (sustained release)	28	..	..	12.38	13.45 ^a		Proxen SR 750 MD
				^B 1.27	13.65	13.45 ^a		Naprosyn SR750 RO
5352Q NP	Tablet 1 g (sustained release)	28	..	..	14.37	15.44 ^a		Proxen SR 1000 MD
				^B 1.34	15.71	15.44 ^a		Naprosyn SR1000 RO

NAPROXEN SODIUM**Authority required (STREAMLINED)****3645**

Initial supply, for up to 4 months, for a palliative care patient where severe pain is a problem.

Note

Naproxen sodium 550 mg is approximately equivalent to 500 mg of naproxen acid.

5353R NP	Tablet 550 mg	50	3	..	13.10	14.17 ^a		Crysanal MD
				^B 2.29	15.39	14.17 ^a		Anaprox 550 RO

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PATIENTS RECEIVING PALLIATIVE CARE**

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NAPROXEN SODIUM							
<u>Authority required (STREAMLINED)</u>							
3646							
Continuing supply for a palliative care patient where severe pain is a problem.							
<u>Note</u>							
Written or telephone authority applications for increased repeats may be approved where consultation with a palliative care specialist or service has occurred.							
<u>Note</u>							
Naproxen sodium 550 mg is approximately equivalent to 500 mg of naproxen acid.							
5354T NP	Tablet 550 mg	50	13.10	14.17 ^a	Crysanal MD
				^B 2.29	15.39	14.17 ^a	Anaprox 550 RO

**PREPARATIONS WHICH MAY BE PRESCRIBED FOR
PATIENTS RECEIVING PALLIATIVE CARE**

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Nervous system

Analgesics

Opioids

Natural opium alkaloids

MORPHINE SULFATE

Caution

The risk of drug dependence is high.

Authority required

Initial supply, for up to 3 months, for a palliative care patient with severe disabling pain not responding to non-narcotic analgesics.

Note

Telephone approvals are limited to 1 month's therapy.

5393W NP	Tablet 10 mg	20	2	..	14.41	15.48	Sevredol	MF
5394X NP	Tablet 20 mg	20	2	..	15.39	16.46	Sevredol	MF

MORPHINE SULFATE

Caution

The risk of drug dependence is high.

Authority required

Continuing supply for a palliative care patient with severe disabling pain not responding to non-narcotic analgesics.

Note

Where consultation with a palliative care specialist or service has occurred, applications for increased repeats for up to 3 months' supply may be authorised.

Telephone approvals are limited to 1 month's therapy.

5395Y NP	Tablet 10 mg	20	..	..	14.41	15.48	Sevredol	MF
5396B NP	Tablet 20 mg	20	..	..	15.39	16.46	Sevredol	MF

MORPHINE SULFATE

Caution

The risk of drug dependence is high.

Authority required

Initial supply, for up to 3 months, for a palliative care patient with chronic severe disabling pain not responding to non-narcotic analgesics.

Note

Telephone approvals are limited to 1 month's therapy.

5391R NP	Tablet 200 mg (controlled release)	20	2	..	91.28	34.20	MS Contin	MF
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MORPHINE SULFATE

Caution

The risk of drug dependence is high.

Authority required

Continuing supply for a palliative care patient with chronic severe disabling pain not responding to non-narcotic analgesics.

Note

Where consultation with a palliative care specialist or service has occurred, applications for increased repeats for up to 3 months' supply may be authorised.

Telephone approvals are limited to 1 month's therapy.

5392T NP	Tablet 200 mg (controlled release)	20	91.28	34.20	MS Contin	MF
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**PREPARATIONS WHICH MAY BE PRESCRIBED FOR
PATIENTS RECEIVING PALLIATIVE CARE**

Code	Name, Restriction, Manner of Administration and Form	Max. Qty	No. of Rpts	Premium	Dispensed Price for Max. Qty \$	Maximum Recordable Value for Safety Net \$	Brand Name and Manufacturer	
<i>Phenylpiperidine derivatives</i>								
FENTANYL								
<u>Caution</u>								
The risk of drug dependence is high.								
<u>Authority required</u>								
Initial supply for dose titration for breakthrough pain in a palliative care patient with cancer who is receiving opioids for their persistent pain and where further escalation in the dose of morphine for breakthrough pain results in intolerable adverse effects.								
<u>Note</u>								
No applications for increased repeats will be authorised.								
<u>Note</u>								
Shared Care Model:								
For prescribing by nurse practitioners where care of a patient is shared between a nurse practitioner and medical practitioner in a formalised arrangement with an agreed management plan. Further information can be found in the Explanatory Notes for Nurse Practitioners.								
<u>Note</u>								
Special Pricing Arrangements apply.								
5401G NP	Lozenges 200 micrograms (as citrate), 3	3	..	..	*115.60	34.20	Actiq	OA
5402H NP	Lozenges 400 micrograms (as citrate), 3	3	..	..	*115.60	34.20	Actiq	OA
5403J NP	Lozenges 600 micrograms (as citrate), 3	3	..	..	*115.60	34.20	Actiq	OA
5404K NP	Lozenges 800 micrograms (as citrate), 3	3	..	..	*115.60	34.20	Actiq	OA
5405L NP	Lozenges 1200 micrograms (as citrate), 3	3	*115.60	34.20	Actiq	OA
5406M NP	Lozenges 1600 micrograms (as citrate), 3	3	*115.60	34.20	Actiq	OA
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FENTANYL								
<u>Caution</u>								
The risk of drug dependence is high.								
<u>Authority required</u>								
Continuing supply for breakthrough pain in a palliative care patient with cancer who is receiving opioids for their persistent pain and where further escalation in the dose of morphine for breakthrough pain results in intolerable adverse effects.								
<u>Note</u>								
For first continuing supply, applications for increased repeats for up to 3 months' supply may be authorised.								
Where consultation with a palliative care specialist or service has occurred, applications for increased repeats for up to 3 months' supply may be authorised.								
Telephone approvals are limited to 1 month's therapy.								
<u>Note</u>								
Shared Care Model:								
For prescribing by nurse practitioners where care of a patient is shared between a nurse practitioner and medical practitioner in a formalised arrangement with an agreed management plan. Further information can be found in the Explanatory Notes for Nurse Practitioners.								
<u>Note</u>								
Special Pricing Arrangements apply.								
5407N NP	Lozenges 200 micrograms (as citrate), 3	20	..	..	*680.13	34.20	Actiq	OA
5408P NP	Lozenges 400 micrograms (as citrate), 3	20	..	..	*680.13	34.20	Actiq	OA
5409Q NP	Lozenges 600 micrograms (as citrate), 3	20	..	..	*680.13	34.20	Actiq	OA
5410R NP	Lozenges 800 micrograms (as citrate), 3	20	..	..	*680.13	34.20	Actiq	OA
5411T NP	Lozenges 1200 micrograms (as citrate), 3	20	..	..	*680.13	34.20	Actiq	OA
5412W NP	Lozenges 1600 micrograms (as citrate), 3	20	..	..	*680.13	34.20	Actiq	OA

**PREPARATIONS WHICH MAY BE PRESCRIBED FOR
PATIENTS RECEIVING PALLIATIVE CARE**

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Diphenylpropylamine derivatives

METHADONE HYDROCHLORIDE

Caution

The risk of drug dependence is high.

Authority required

Initial supply, for up to 3 months, for a palliative care patient with chronic severe disabling pain not responding to non-narcotic analgesics.

Note

Telephone approvals are limited to 1 month's therapy.

Note

Shared Care Model:

For prescribing by nurse practitioners where care of a patient is shared between a nurse practitioner and medical practitioner in a formalised arrangement with an agreed management plan. Further information can be found in the Explanatory Notes for Nurse Practitioners.

5399E NP	Oral liquid 25 mg per 5 mL, 200 mL	1	2	..	18.92	19.99	Sigma Pharmaceuticals (Australia) Pty Ltd	SI
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METHADONE HYDROCHLORIDE

Caution

The risk of drug dependence is high.

Authority required

Continuing supply for a palliative care patient with chronic severe disabling pain not responding to non-narcotic analgesics.

Note

Where consultation with a palliative care specialist or service has occurred, applications for increased repeats for up to 3 months' supply may be authorised.

Telephone approvals are limited to 1 month's therapy.

Note

Shared Care Model:

For prescribing by nurse practitioners where care of a patient is shared between a nurse practitioner and medical practitioner in a formalised arrangement with an agreed management plan. Further information can be found in the Explanatory Notes for Nurse Practitioners.

5400F NP	Oral liquid 25 mg per 5 mL, 200 mL	1	18.92	19.99	Sigma Pharmaceuticals (Australia) Pty Ltd	SI
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Other analgesics and antipyretics

Anilides

PARACETAMOL

Authority required (STREAMLINED)

3649

Initial supply, for up to 4 months, for a palliative care patient for analgesia or fever where alternative therapy cannot be tolerated.

5319Y NP	Suppositories 500 mg, 24	4	3	..	*84.46	34.20	Panadol	GC
5343F NP	Tablet 665 mg (modified release)	192	3	..	*16.64	17.71	Panadol Osteo	GC

PARACETAMOL

Authority required (STREAMLINED)

3650

Continuing supply for a palliative care patient for analgesia or fever where alternative therapy cannot be tolerated.

Note

Written or telephone authority applications for increased repeats may be approved where consultation with a palliative care specialist or service has occurred.

5320B NP	Suppositories 500 mg, 24	4	..	..	*84.46	34.20	Panadol	GC
5344G	Tablet 665 mg (modified release)	192	..	..	*16.64	17.71	Panadol Osteo	GC

**PREPARATIONS WHICH MAY BE PRESCRIBED FOR
PATIENTS RECEIVING PALLIATIVE CARE**

Code	Name, Restriction, Manner of Administration and Form	Max. Qty	No. of Rpts	Premium	Dispensed Price for Max. Qty \$	Maximum Recordable Value for Safety Net \$	Brand Name and Manufacturer
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Antiepileptics

Antiepileptics

Benzodiazepine derivatives

CLONAZEPAM

Authority required

Initial supply, for up to 4 months, for a palliative care patient for the prevention of epilepsy.

Note

No applications for increased repeats will be authorised.

5337X NP	Tablet 500 micrograms	100	3	..	13.31	14.38	^a Paxam 0.5	AF
				^B 1.79	15.10	14.38	^a Rivotril	RO
5338Y NP	Tablet 2 mg	100	3	..	19.38	20.45	^a Paxam 2	AF
				^B 2.04	21.42	20.45	^a Rivotril	RO
5339B NP	Oral liquid 2.5 mg per mL, 10 mL	2	3	..	*15.04	16.11	Rivotril	RO

CLONAZEPAM

Authority required

Continuing supply for a palliative care patient for the prevention of epilepsy.

Note

Where consultation with a palliative care specialist or service has occurred, applications for increased repeats may be authorised.

5340C NP	Tablet 500 micrograms	100	..	..	13.31	14.38	^a Paxam 0.5	AF
				^B 1.79	15.10	14.38	^a Rivotril	RO
5341D NP	Tablet 2 mg	100	..	..	19.38	20.45	^a Paxam 2	AF
				^B 2.04	21.42	20.45	^a Rivotril	RO
5342E NP	Oral liquid 2.5 mg per mL, 10 mL	2	..	..	*15.04	16.11	Rivotril	RO

Psycholeptics

Anxiolytics

Benzodiazepine derivatives

DIAZEPAM

Authority required

Initial supply, for up to 4 months, for a palliative care patient where anxiety is a problem.

Note

No applications for increased repeats will be authorised.

5355W NP	Tablet 2 mg	50	3	..	7.79	8.86	^a Antenex 2	AF
							^a Valpam 2	SI
				^B 0.86	8.65	8.86	^a Valium	RO
5356X NP	Tablet 5 mg	50	3	..	7.93	9.00	^a Antenex 5	AF
							^a Diazepam-GA	GM
							^a Ranzepam	RA
							^a Valpam 5	SI
				^B 0.88	8.81	9.00	^a Valium	RO

**PREPARATIONS WHICH MAY BE PRESCRIBED FOR
PATIENTS RECEIVING PALLIATIVE CARE**

Code	Name, Restriction, Manner of Administration and Form	Max. Qty	No. of Rpts	Premium	Dispensed Price for Max. Qty \$	Maximum Recordable Value for Safety Net \$	Brand Name and Manufacturer
DIAZEPAM							
Authority required							
Continuing supply for a palliative care patient where anxiety is a problem.							
Note							
Where consultation with a palliative care specialist or service has occurred, applications for increased repeats may be authorised.							
5357Y NP	Tablet 2 mg	50	..	..	7.79	8.86 ^a	Antenex 2 AF
							^a Valpam 2 SI
				^B 0.86	8.65	8.86 ^a	Valium RO
5358B NP	Tablet 5 mg	50	..	..	7.93	9.00 ^a	Antenex 5 AF
							^a Diazepam-GA GM
							^a Ranzepam RA
							^a Valpam 5 SI
				^B 0.88	8.81	9.00 ^a	Valium RO

OXAZEPAM**Authority required**

Initial supply, for up to 4 months, for a palliative care patient where anxiety is a problem.

Note

No applications for increased repeats will be authorised.

5371Q NP	Tablet 15 mg	50	3	..	*8.60	9.67 ^a	Alepam 15 AF
							^a Serepax SI
				^B 5.50	*14.10	9.67 ^a	Serepax SI
5372R NP	Tablet 30 mg	50	3	..	*8.92	9.99 ^a	Alepam 30 AF
							^a APO-Oxazepam TX
							^a Murelax FM
				^B 5.50	*14.42	9.99 ^a	Serepax SI

OXAZEPAM**Authority required**

Continuing supply for a palliative care patient where anxiety is a problem.

Note

Where consultation with a palliative care specialist or service has occurred, applications for increased repeats may be authorised.

5373T NP	Tablet 15 mg	50	..	..	*8.60	9.67 ^a	Alepam 15 AF
							^a Serepax SI
				^B 5.50	*14.10	9.67 ^a	Serepax SI
5374W NP	Tablet 30 mg	50	..	..	*8.92	9.99 ^a	Alepam 30 AF
							^a APO-Oxazepam TX
							^a Murelax FM
				^B 5.50	*14.42	9.99 ^a	Serepax SI

Hypnotics and sedatives**Benzodiazepine derivatives****NITRAZEPAM****Authority required**

Initial supply, for up to 4 months, for a palliative care patient where insomnia is a problem.

Note

No applications for increased repeats will be authorised.

5359C NP	Tablet 5 mg	50	3	..	*9.36	10.43 ^a	Alodorm AF
							^a Mogadon VT
				^B 3.06	*12.42	10.43 ^a	Mogadon VT

**PREPARATIONS WHICH MAY BE PRESCRIBED FOR
PATIENTS RECEIVING PALLIATIVE CARE**

Code	Name, Restriction, Manner of Administration and Form	Max. Qty	No. of Rpts	Premium	Dispensed Price for Max. Qty \$	Maximum Recordable Value for Safety Net \$		Brand Name and Manufacturer	
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NITRAZEPAM**Authority required**

Continuing supply for a palliative care patient where insomnia is a problem.

Note

Where consultation with a palliative care specialist or service has occurred, applications for increased repeats may be authorised.

5360D NP	Tablet 5 mg	50	..	..	*9.36	10.43	^a	Alodorm	AF
				^B 3.06	*12.42	10.43	^a	Mogadon	VT

TEMAZEPAM**Authority required**

Initial supply, for up to 4 months, for a palliative care patient where insomnia is a problem.

Note

No applications for increased repeats will be authorised.

5375X NP	Tablet 10 mg	50	3	..	*9.00	10.07	^a	APO-Temazepam	TX
							^a	Temaze	AF
							^a	Temtabs	FM
				^B 3.00	*12.00	10.07	^a	Normison	SI

TEMAZEPAM**Authority required**

Continuing supply for a palliative care patient where insomnia is a problem.

Note

Where consultation with a palliative care specialist or service has occurred, applications for increased repeats may be authorised.

5376Y NP	Tablet 10 mg	50	..	..	*9.00	10.07	^a	APO-Temazepam	TX
							^a	Temaze	AF
							^a	Temtabs	FM
				^B 3.00	*12.00	10.07	^a	Normison	SI