



Australian Government

Department of Health and Ageing

**SCHEDULE OF PHARMACEUTICAL
BENEFITS FOR APPROVED PHARMACISTS
AND MEDICAL PRACTITIONERS**

**CHEMOTHERAPY PHARMACEUTICALS
ACCESS PROGRAM SUPPLEMENT**

This Schedule is also available on the internet at

www.pbs.gov.au

**EFFECTIVE
1 March 2012 - 31 March 2012
(ALL PREVIOUS EDITIONS CANCELLED)**

SUMMARY OF CHANGES

Additions

Addition – Item

- 1134Q **Gemcitabine**, Solution concentrate for I.V. infusion 200 mg (as hydrochloride) in 5 mL (*Gemcitabine Ebewe*)
- 1144F **Gemcitabine**, Solution concentrate for I.V. infusion 1 g (as hydrochloride) in 25 mL (*Gemcitabine Ebewe*)
- 1145G **Gemcitabine**, Solution concentrate for I.V. infusion 2 g (as hydrochloride) in 50 mL (*Gemcitabine Ebewe*)

Addition – Brand

- 5928B *Epirubicin Actavis 10, TA* – **Epirubicin Hydrochloride**, Solution for injection 10 mg in 5 mL
- 5929C *Epirubicin Actavis 20, TA* – **Epirubicin Hydrochloride**, Solution for injection 20 mg in 10 mL
- 5930D *Epirubicin Actavis 50, TA* – **Epirubicin Hydrochloride**, Solution for injection 50 mg in 25 mL
- 5885R *Epirubicin Actavis 100, TA* – **Epirubicin Hydrochloride**, Solution for injection 100 mg in 50 mL
- 5884Q *Epirubicin Actavis 200, TA* – **Epirubicin Hydrochloride**, Solution for injection 200 mg in 100 mL

Alterations

Alteration – Restriction

All forms of **Gemcitabine** are now unrestricted.

Alteration – Note

Amend existing equivalence notes for **Gemcitabine** forms to include the new items listed for 1 March 2012.

Explanatory Notes

In addition to the drugs and medicinal preparations listed in the Schedule of Pharmaceutical Benefits, a number of drugs are also available as pharmaceutical benefits but are distributed under alternative arrangements. These alternative arrangements are provided for under section 100 of the *National Health Act 1953*.

Section 100 chemotherapy drugs for day only admitted and non-admitted patients of Public Hospitals

The adoption of the Australian Government's pharmaceutical reforms will see a change to the access arrangements for cancer chemotherapy drugs for public hospitals.

A range of currently listed PBS cancer chemotherapy agents have been transferred to section 100 funding arrangements to facilitate access to day admitted and non-admitted patients. Benefits are available for the listed chemotherapy drugs only. There is no facility for individual approval for chemotherapy drugs outside those listed.

To gain access to a Commonwealth funded drug under this arrangement a patient must attend a participating public hospital and be a day admitted or non-admitted patient. Only a medical practitioner, in the course of employment with the participating public hospital, may prescribe the subsidised medication.

Chemotherapy drugs claimed under this arrangement may only be supplied by an approved hospital authority and only dispensed by the hospital pharmacy.

All drugs supplied under these arrangements will have a patient copayment deducted from the Commonwealth reimbursement price. Under the provisions of the National Healthcare Agreement, copayments cannot be raised, by the hospital, for drugs supplied to day admitted patients. Copayments can be raised and collected, by the hospital, for non-admitted patients.

Revised Arrangements for the Efficient Funding of Chemotherapy Drugs

New prescribing and dispensing arrangements for certain chemotherapy drugs covered by Chemotherapy Pharmaceuticals Access Program (CPAP) will take effect from 1 December 2011 under the Revised Arrangements for the Efficient Funding of Chemotherapy Drugs (Revised Arrangements).

The Revised Arrangements will operate under a new section 100 program, which will include chemotherapy drugs used for the treatment of cancer and administered through infusion or injection. A separate "EFFICIENT FUNDING OF CHEMOTHERAPY – SECTION 100 ARRANGEMENTS" schedule provides the listing details for these items. The schedule, in PDF format, will be available on the PBS website, www.pbs.gov.au/browse/publications from 1 December 2011.

The Revised Arrangements will apply for both public hospitals and private hospitals/clinics. While private hospitals/clinics will move to the Revised Arrangements from 1 December 2011, the implementation in public hospitals will be phased in until 31 March 2012.

- Where public hospitals have moved to the Revised Arrangements, they will need to comply with the new guidelines for writing prescriptions (please refer to the new "EFFICIENT FUNDING OF CHEMOTHERAPY – SECTION 100 ARRANGEMENTS" schedule for details).
- Where public hospitals have NOT moved to the Revised Arrangements they can continue to use the existing CPAP S100 arrangements that currently apply for chemotherapy infusibles.
- Where public hospitals write prescriptions for chemotherapy infusibles, that are to be dispensed outside public hospitals, they will need to comply with the new guidelines for writing prescriptions (please refer to the new "EFFICIENT FUNDING OF CHEMOTHERAPY – SECTION 100 ARRANGEMENTS" schedule for details).

Index of Manufacturers' Codes

<i>Code</i>	<i>Manufacturer</i>
AE	AFT Pharmaceuticals Pty Ltd Level 1, 296 Burns Bay Road Lane Cove NSW 2066 Tel: 1800 097 639 Fax: 1800 097 810
AF	Alphapharm Pty Limited Level 1, 30 The Bond 30-34 Hickson Road Millers Point NSW 2000 Tel: (02) 9298 3999 Fax: (02) 9566 4686
BQ	Bristol-Myers Squibb Pharmaceuticals A Division of Bristol-Myers Squibb Australia Pty Ltd 556 Princes Highway Noble Park Vic 3174 Tel: (03) 9213 4000 Fax: (03) 9701 1518
BX	Baxter Healthcare Pty Limited 1 Baxter Drive Old Toongabbie NSW 2146 Tel: (02) 9848 1111 Fax: (02) 9848 1123
FB	Pierre Fabre Medicament Australia Pty Limited Suite 3B, 1 Richardson Place North Ryde NSW 2113 Tel: (02) 8662 9800 Fax: (02) 8662 9888
GK	GlaxoSmithKline Australia Pty Ltd Level 4, 436-438 Johnston Street Abbotsford Vic 3067 Tel: (03) 9413 7300 Fax: (03) 8761 2410
GZ	Genzyme Australasia Pty Ltd Level 1, Building C 12-24 Talavera Road North Ryde NSW 2113 Tel: (02) 9978 3900 Fax: (02) 9889 3900
HH	Hospira Pty Ltd (David Bull Laboratories, Faulding Pharmaceuticals) Level 3, 500 Collins Street Melbourne Vic 3000 Tel: (03) 8744 5200 Fax: (03) 9866 3504
HX	Hexal Australia A division of Sandoz Pty Ltd Level 2, 19 Harris Street Pyrmont NSW 2009 Tel: (02) 9566 1500 Fax: (02) 9566 1458
JC	Janssen-Cilag Pty Ltd 1-5 Khartoum Road North Ryde NSW 2113 Tel: (02) 8875 3333 Fax: (02) 8875 3300

<i>Code</i>	<i>Manufacturer</i>
LY	Eli Lilly Australia Pty Limited 112 Wharf Road West Ryde NSW 2114 Tel: (02) 9325 4444 Fax: (02) 9325 4410
MK	Merck Sharp & Dohme (Australia) Pty Ltd 54-68 Ferndell Street South Granville NSW 2142 Tel: (02) 9795 9500 Fax: (02) 9795 9595
NV	Novartis Pharmaceuticals Australia Pty Ltd 54 Waterloo Road North Ryde NSW 2113 Tel: (02) 9805 3555 Fax: (02) 9887 4551
OA	Orphan Australia Pty Ltd A member of Aspen Group of Companies First Floor, 34-36 Chandos Street St Leonards NSW 2065 Tel: (02) 8436 8300 Fax: (02) 9901 3540
OE	Omegapharm Pty Ltd 21 Queen Street Ormond Vic 3204 Tel: (03) 9483 0070 Fax: (03) 9483 0070
PF	Pfizer Pty Limited 38-42 Wharf Road West Ryde NSW 2114 Tel: (02) 9850 3333 Fax: (02) 9858 1347
PK	Fresenius Kabi Australia Pty Limited 964 Pacific Highway Pymble NSW 2073 Tel: 1300 732 001 Fax: 1300 304 384
PL	Phebra 332 Burns Bay Road Lane Cove NSW 2066 Tel: (02) 9420 9199 Fax: (02) 9420 9177
RO	Roche Products Pty Ltd 4-10 Inman Road Dee Why NSW 2099 Tel: (02) 9454 9000 Fax: (02) 9971 7401
RZ	Dr Reddy's Laboratories (Australia) Pty Ltd Level 1, 181 Bay Street Brighton Vic 3186 Tel: (03) 9595 3812 Fax: (03) 9595 3800
SE	Servier Laboratories (Aust.) Pty Ltd 8 Cato Street Hawthorn Vic 3122 Tel: (03) 8823 7333 Fax: (03) 9822 9790

Index of Manufacturers' Codes

<i>Code</i>	<i>Manufacturer</i>
SG	Merck Serono Australia Pty Ltd Unit 3-4, 25 Frenchs Forest Road East Frenchs Forest NSW 2086 Tel: (02) 8977 4100 Fax: (02) 9975 1516
SW	Sanofi-Aventis Australia Pty Ltd Building D, Talavera Corporate Centre 12-24 Talavera Road Macquarie Park NSW 2113 Tel: (02) 8666 2000 Fax: (02) 8666 3000
SZ	Sandoz Pty Ltd Level 2, 19 Harris Street Pyrmont NSW 2009 Tel: (02) 9566 1500 Fax: (02) 9566 1458
TA	Actavis Australia Pty Ltd Upper Ground Floor 183 Melbourne Street North Adelaide SA 5006 Tel: (08) 8267 1545 Fax: (08) 8267 2642
TS	Specialised Therapeutics Australia Pty Ltd Level 1, 711 High Street Kew East Vic 3102 Tel: 1300 798 820 Fax: 1800 798 829
TX	Apotex Pty Ltd 16 Giffnock Avenue Macquarie Park NSW 2113 Tel: (02) 8877 8333 Fax: (02) 8877 8377
WA	Winthrop Pharmaceuticals Division of Sanofi- Aventis Australia Pty Limited Building D, Talavera Corporate Centre 12-24 Talavera Road Macquarie Park NSW 2113 Tel: (02) 8666 2000 Fax: (02) 8666 3000
WQ	Willow Pharmaceuticals Pty Limited Level 4, 5 Essex Street The Rocks NSW 2000 Tel: (02) 9241 2235 Fax: (02) 9241 2217
ZF	Sun Pharmaceutical Industries (Australia) Pty Ltd 1053 Burwood Highway Ferntree Gully Vic 3156 Tel: (03) 9568 6102 Fax: (03) 9568 6610
ZP	Spirit Pharmaceuticals Pty Ltd 117 Harrington Street The Rocks Sydney NSW 2000 Tel: (02) 9251 1088 Fax: (02) 9251 1099

<i>Code</i>	<i>Manufacturer</i>
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SPECIAL PHARMACEUTICAL BENEFITS

The special patient contribution is payable by all patients in addition to the relevant patient contribution for concessional and general patients. Other than for bleomycin sulfate, exemptions on medical grounds are available. For eligible veterans under RPBS provisions, see RPBS EXPLANATORY NOTES, paragraph 32.

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

Antineoplastic agents

Cytotoxic antibiotics and related substances
Other cytotoxic antibiotics

BLEOMYCIN SULFATE

Restricted benefit

Germ cell neoplasms;
Lymphoma.

5903Q	Powder for injection 15,000 i.u.	10	..	^s 367.80	*408.90	*776.70	35.40	Hospira Pty Limited	HH
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CHEMOTHERAPY PHARMACEUTICALS ACCESS PROGRAM

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
					\$	\$	

Alimentary tract and metabolism

Antiemetics and antinauseants

Antiemetics and antinauseants *Serotonin (5HT₃) antagonists*

GRANISETRON HYDROCHLORIDE

Restricted benefit

Management of nausea and vomiting associated with cytotoxic chemotherapy being used to treat malignancy which occurs within 48 hours of chemotherapy administration.

Increased maximum quantities will be limited to a maximum of 7 days per chemotherapy cycle.

5898K	Tablet 2 mg (base)	2	..	..	*44.44	35.40	Kytril	HH
5899L	Concentrated injection 3 mg (base) in 3 mL	1	..	..	25.42	26.51	^a Kytril	HH
				..	*26.51	27.60	^a Granisetron Kabi	PK

ONDANSETRON

Restricted benefit

Management of nausea and vomiting associated with cytotoxic chemotherapy being used to treat malignancy which occurs within 48 hours of chemotherapy administration.

Increased maximum quantities will be limited to a maximum of 7 days per chemotherapy cycle.

Note

Pharmaceutical benefits that have the form ondansetron tablet (orally disintegrating) 4 mg and pharmaceutical benefits that have the form ondansetron wafer 4 mg are equivalent for the purposes of substitution.

5857G	Tablet (orally disintegrating) 4 mg	4	..	..	16.17	17.26	^a Ondansetron ODT-DRLA	RZ
5969E	Wafer 4 mg	4	..	..	16.17	17.26	^a Ondaz Zydis	SZ
							^a Zofran Zydis	GK

ONDANSETRON

Restricted benefit

Management of nausea and vomiting associated with cytotoxic chemotherapy being used to treat malignancy which occurs within 48 hours of chemotherapy administration.

Increased maximum quantities will be limited to a maximum of 7 days per chemotherapy cycle.

Note

Pharmaceutical benefits that have the form ondansetron tablet (orally disintegrating) 8 mg and pharmaceutical benefits that have the form ondansetron wafer 8 mg are equivalent for the purposes of substitution.

5858H	Tablet (orally disintegrating) 8 mg	4	..	..	25.33	26.42	^a Ondansetron ODT-DRLA	RZ
5970F	Wafer 8 mg	4	..	..	25.33	26.42	^a Ondaz Zydis	SZ
							^a Zofran Zydis	GK

ONDANSETRON

Restricted benefit

Management of nausea and vomiting associated with cytotoxic chemotherapy being used to treat malignancy which occurs within 48 hours of chemotherapy administration.

Increased maximum quantities will be limited to a maximum of 7 days per chemotherapy cycle.

5848T	Syrup 4 mg (as hydrochloride dihydrate) per 5 mL, 50 mL	±1	..	..	66.76	35.40	Zofran syrup 50 mL	GK
5967C	Tablet 4 mg (as hydrochloride dihydrate)	4	..	..	16.17	17.26	^a APO-Ondansetron	TX
							^a Ondansetron-DRLA	RZ
							^a Ondaz	SZ
							^a Onsetron 4	ZP

CHEMOTHERAPY PHARMACEUTICALS ACCESS PROGRAM

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	
5968D	Tablet 8 mg (as hydrochloride dihydrate)	4	..	..	25.33	26.42	^a Zofran	GK
							^a APO-Ondansetron	TX
							^a Ondansetron-DRLA	RZ
							^a Ondaz	SZ
							^a Onsetron 8	ZP
5971G	I.V. injection 4 mg (as hydrochloride dihydrate) in 2 mL	1	..	..	8.47	9.56	^a Zofran	GK
							^a Ondansetron	AF
							^a Alphapharm	
							^a Ondansetron-Clarix	AE
							^a Ondaz	SZ
5972H	I.V. injection 8 mg (as hydrochloride dihydrate) in 4 mL	1	..	..	13.46	14.55	^a Onsetron	ZP
							^a Pfizer Australia Pty Ltd	PF
							^a Zofran	GK
							^a Ondansetron	AF
							^a Alphapharm	
							^a Ondansetron-Clarix	AE
							^a Ondaz	SZ
							^a Onsetron	ZP
							^a Pfizer Australia Pty Ltd	PF
							^a Zofran	GK

PALONOSETRON

Restricted benefit

Management of nausea and vomiting associated with cytotoxic chemotherapy being used to treat malignancy which occurs within 48 hours of chemotherapy administration.

Note

No applications for increased maximum quantities will be authorised. Palonosetron is not PBS-subsidised for administration with oral 5-HT₃ antagonists.

5853C	Injection 250 micrograms (as hydrochloride) in 5 mL	1	34.36	35.40	Aloxi	TS
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TROPISETRON HYDROCHLORIDE

Restricted benefit

Management of nausea and vomiting associated with cytotoxic chemotherapy being used to treat malignancy which occurs within 48 hours of chemotherapy administration.

Increased maximum quantities will be limited to a maximum of 7 days per chemotherapy cycle.

5986C	Capsule 5 mg (base)	2	..	..	37.02	35.40	Navoban	NV
5987D	I.V. injection 5 mg (base) in 5 mL	1	..	..	18.50	19.59	Navoban	NV

Other antiemetics

APREPITANT

Note

Aprepitant is not PBS-subsidised for nausea and vomiting associated with radiotherapy being used to treat malignancy.

Authority required (STREAMLINED)

3619

Management of nausea and vomiting associated with cytotoxic chemotherapy being used to treat malignancy, in combination with a 5HT₃ antagonist and dexamethasone, where any 1 of the following chemotherapy agents are to be administered:

- altretamine;
- carmustine;
- cisplatin when a single dose constitutes a cycle of chemotherapy;
- cyclophosphamide at a dose of 1500 mg per square metre per day or greater;
- dacarbazine;
- procarbazine when a single dose constitutes a cycle of chemotherapy;
- streptozocin.

No more than 1 pack containing 1 x 125 mg capsule and 2 x 80 mg capsules will be authorised per cycle of cytotoxic chemotherapy;

CHEMOTHERAPY PHARMACEUTICALS ACCESS PROGRAM

Code	Name, Restriction, Manner of Administration and Form	Max. Qty	No. of Rpts	Premium	Dispensed Price for	Maximum Recordable	Brand Name and Manufacturer
					Max. Qty	Value for Safety Net	
					\$	\$	
	3620 Management of nausea and vomiting associated with cytotoxic chemotherapy being used to treat breast cancer, in combination with a 5HT3 antagonist and dexamethasone, where cyclophosphamide and an anthracycline are to be co-administered. No more than 1 pack containing 1 x 125 mg capsule and 2 x 80 mg capsules will be authorised per cycle of cytotoxic chemotherapy;						
	3621 Management of nausea and vomiting associated with moderately emetogenic cytotoxic chemotherapy being used to treat malignancy, in combination with a 5HT3 antagonist and dexamethasone on day 1, where the patient has had a prior episode of chemotherapy induced nausea or vomiting where any 1 of the following intravenous chemotherapy agents is to be administered: (a) arsenic trioxide; (b) azacitidine; (c) carboplatin; (d) cyclophosphamide at a dose of less than 1500 mg per square metre per day; (e) cytarabine at a dose of greater than 1 g per square metre per day; (f) dactinomycin; (g) daunorubicin; (h) doxorubicin; (i) epirubicin; (j) fotemustine; (k) idarubicin; (l) ifosfamide; (m) irinotecan; (n) melphalan; (o) methotrexate at a dose of 250 mg to 1 g per square metre; (p) oxaliplatin; (q) raltitrexed. No more than one pack containing 1 x 125 mg capsule and 2 x 80 mg capsules will be authorised per cycle of cytotoxic chemotherapy. Concomitant use of a 5HT3 antagonist should not occur with aprepitant on days 2 and 3 of any chemotherapy cycle.						
	Note No applications for increased maximum quantities and/or repeats will be authorised.						
5888X	Pack containing 1 capsule 125 mg and 2 capsules 80 mg	1	5	..	112.01	35.40	Emend MK

CHEMOTHERAPY PHARMACEUTICALS ACCESS PROGRAM

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	
					\$	\$		

Antineoplastic and immunomodulating agents

Antineoplastic agents

Alkylating agents

Nitrogen mustard analogues

CYCLOPHOSPHAMIDE

5914G	Powder for injection 500 mg	2	..	..	*27.72	28.81	Endoxan	BX
5915H	Powder for injection 1 g	1	..	..	21.21	22.30	Endoxan	BX
5916J	Powder for injection 2 g	1	..	..	42.43	35.40	Endoxan	BX

IFOSFAMIDE

Restricted benefit

Relapsed or refractory germ cell tumours following first-line chemotherapy;

Relapsed or refractory sarcomas following first-line chemotherapy.

5943T	Powder for I.V. injection 1 g	5	5	..	*295.75	35.40	Holoxan	BX
5944W	Powder for I.V. injection 2 g	5	5	..	*592.00	35.40	Holoxan	BX

Nitrosoureas

FOTEMUSTINE

Authority required (STREAMLINED)

3181

Metastatic malignant melanoma.

5900M	Powder for injection 208 mg with solvent	1	4	..	1084.33	35.40	Muphoran	SE
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Antimetabolites

Folic acid analogues

METHOTREXATE

5873D	Solution concentrate for I.V. infusion 500 mg in 20 mL	1	47.11	35.40	Hospira Pty Limited	HH
5875F	Solution concentrate for I.V. infusion 1000 mg in 10 mL	1	..	..	94.21	35.40	^a Hospira Pty Limited	HH
							^a Methotrexate Ebewe	SZ
5876G	Solution concentrate for I.V. infusion 5000 mg in 50 mL	1	..	..	471.05	35.40	Methotrexate Ebewe	SZ
5962T	Injection 5 mg in 2 mL	5	..	..	24.09	25.18	Hospira Pty Limited	HH
5963W	Injection 50 mg in 2 mL	5	5	..	23.54	24.63	^a Hospira Pty Limited	HH
							^a Pfizer Australia Pty Ltd	PF

PEMETREXED DISODIUM

Authority required (STREAMLINED)

3885

Locally advanced or metastatic non-small cell lung cancer, after prior platinum-based chemotherapy.

Doses greater than 500 mg per metre squared body surface area (BSA) are not PBS-subsidised. The patient's BSA must be documented in the patient's medical records at the time the treatment cycle is initiated.

Authority required (STREAMLINED)

3886

Mesothelioma in combination with cisplatin.

Doses greater than 500 mg per metre squared body surface area (BSA) are not PBS-subsidised. The patient's BSA must be documented in the patient's medical records at the time the treatment cycle is initiated.

Note

No applications for increased maximum quantities for the 500 mg vial will be authorised.

5834C	Powder for I.V. infusion 500 mg (base)	1	3	..	1559.86	35.40	Alimta	LY
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CHEMOTHERAPY PHARMACEUTICALS ACCESS PROGRAM

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	
					\$	\$		
5835D	Powder for I.V. infusion 100 mg (base)	1	3	..	311.97	35.40	Alimta	LY

RALTITREXED

Authority required (STREAMLINED)

3185

For use as a single agent in the treatment of advanced colorectal cancer.

5977N	Powder for I.V. infusion 2 mg	3	2	..	*760.02	35.40	Tomudex	HH
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Purine analogues

CLADRIBINE

Authority required (STREAMLINED)

3180

Hairy cell leukaemia.

5889Y	Injection 10 mg in 5 mL	7	..	..	*4483.22	35.40	Litak	OA
5912E	Solution for I.V. infusion 10 mg in 10 mL	7	..	..	*4483.22	35.40	Leustatin	JC

FLUDARABINE PHOSPHATE

Authority required (STREAMLINED)

3887

B-cell chronic lymphocytic leukaemia in combination with cyclophosphamide where the patient has advanced disease (Binet Stage B or C) or evidence of progressive Stage A disease.

Stage A progressive disease is defined by at least one of the following: persistent rise in lymphocyte count with doubling time less than 12 months; a downward trend in haemoglobin or platelets, or both; more than 50% increase in the size of liver, spleen, or lymph nodes, or appearance of these signs if not previously present; constitutional symptoms attributable to disease.

The diagnosis of chronic lymphocytic leukaemia (CLL) must have been established based on:

- (a) a lymphocytosis, with more than 5,000 million lymphocytes per L in the peripheral blood; and
- (b) a clonal population of B-cells (CD5/CD19) documented by flow cytometry.

Note

Pharmaceutical benefits that have the form fludarabine phosphate powder for I.V. injection 50 mg (after reconstitution) and pharmaceutical benefits that have the form fludarabine phosphate solution for I.V. injection 50 mg are equivalent for the purposes of substitution.

5840J	Powder for I.V. injection 50 mg	5	3	..	1371.22	35.40	^a Fludara	GZ
					*1371.25	35.40	^a Farine	WQ
							^a Fludarabine Actavis	TA
							^a Fludarabine Ebewe	SZ
5841K	Solution for I.V. injection 50 mg in 2 mL	5	3	..	1371.22	35.40		

Pyrimidine analogues

CYTARABINE

5918L	Injection 100 mg in 5 mL	10	1	..	*100.92	35.40	Pfizer Australia Pty Ltd	PF
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FLUOROURACIL

5807P	Injection 2500 mg in 50 mL	2	*34.70	35.40	^a DBL Fluorouracil Injection BP	HH
							^a Fluorouracil Ebewe	SZ
5808Q	Injection 5000 mg in 100 mL	1	..	..	34.69	35.40	Fluorouracil Ebewe	SZ
5872C	Injection 1000 mg in 20 mL	5	..	..	34.69	35.40	^a DBL Fluorouracil Injection BP	HH
							^a Fluorouracil Ebewe	SZ
5935J	Injection 500 mg in 10 mL	10	..	..	*40.82	35.40	^a Fluorouracil Ebewe	SZ
							^a Hospira Pty Limited	HH

GEMCITABINE

Caution

Pharmaceutical benefits containing gemcitabine may have different concentrations.

CHEMOTHERAPY PHARMACEUTICALS ACCESS PROGRAM

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		
	Note Pharmaceutical benefits that have the forms gemcitabine powder for I.V. infusion 200 mg (as hydrochloride) (after reconstitution), gemcitabine solution concentrate for I.V. infusion 200 mg (as hydrochloride) in 5 mL, gemcitabine solution concentrate for I.V. infusion 200 mg (as hydrochloride) in 20 mL and gemcitabine solution for injection 200 mg (as hydrochloride) in 5.3 mL are equivalent for the purposes of substitution.								
1134Q	Solution concentrate for I.V. infusion 200 mg (as hydrochloride) in 5 mL	4	2	..	*106.28	35.40	^a	Gemcitabine Ebewe	SZ
5586B	Solution for injection 200 mg (as hydrochloride) in 5.3 mL	4	2	..	*106.28	35.40	^a	DBL Gemcitabine Injection	HH
5843M	Solution concentrate for I.V. infusion 200 mg (as hydrochloride) in 20 mL	4	2	..	*106.28	35.40	^a	Gemcitabine Ebewe	SZ
5936K	Powder for I.V. infusion 200 mg (as hydrochloride)	4	2	..	*106.28	35.40	^a	DBL Gemcitabine for Injection	HH
							^a	Gemcitabine Actavis	TA
							^a	Gemcitabine Ebewe	SZ
							^a	Gemcitabine Kabi	PK
							^a	Gemcitabine Sun	ZF
							^a	Gemcite	ZP
							^a	Gemplan	WQ
						^a	Gemzar	LY	

GEMCITABINE

Caution

Pharmaceutical benefits containing gemcitabine may have different concentrations.

5852B	Solution concentrate for I.V. infusion 500 mg (as hydrochloride) in 50 mL	4	2	..	*262.44	35.40	Gemcitabine Ebewe	SZ
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GEMCITABINE

Caution

Pharmaceutical benefits containing gemcitabine may have different concentrations.

Note

Pharmaceutical benefits that have the forms gemcitabine powder for I.V. infusion 1 g (as hydrochloride) (after reconstitution), gemcitabine solution concentrate for I.V. infusion 1 g (as hydrochloride) in 25 mL, gemcitabine solution concentrate for I.V. infusion 1000 mg (as hydrochloride) in 100 mL and gemcitabine solution for injection 1 g (as hydrochloride) in 26.3 mL are equivalent for the purposes of substitution.

1144F	Solution concentrate for I.V. infusion 1 g (as hydrochloride) in 25 mL	2	2	..	*262.40	35.40	^a Gemcitabine Ebewe	SZ
5587C	Solution for injection 1 g (as hydrochloride) in 26.3 mL	2	2	..	*262.40	35.40	^a DBL Gemcitabine Injection	HH
5844N	Solution concentrate for I.V. infusion 1000 mg (as hydrochloride) in 100 mL	2	2	..	*262.40	35.40	^a Gemcitabine Ebewe	SZ
5937L	Powder for I.V. infusion 1 g (as hydrochloride)	2	2	..	*262.40	35.40	^a DBL Gemcitabine for Injection	HH
							^a Gemcitabine Actavis	TA
							^a Gemcitabine Ebewe	SZ
							^a Gemcitabine Kabi	PK
							^a Gemcitabine Sun	ZF
							^a Gemcite	ZP
							^a Gemplan	WQ
							^a Gemzar	LY

GEMCITABINE

Caution

Pharmaceutical benefits containing gemcitabine may have different concentrations.

CHEMOTHERAPY PHARMACEUTICALS ACCESS PROGRAM

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
					\$	\$		
	Note Pharmaceutical benefits that have the forms gemcitabine powder for I.V. infusion 2 g (as hydrochloride) (after reconstitution), gemcitabine solution concentrate for I.V. infusion 2 g (as hydrochloride) in 50 mL and gemcitabine solution for injection 2 g (as hydrochloride) in 52.6 mL are equivalent for the purposes of substitution.							
1145G	Solution concentrate for I.V. infusion 2 g (as hydrochloride) in 50 mL	1	2	..	262.99	35.40	^a	Gemcitabine Ebewe SZ
5588D	Solution for injection 2 g (as hydrochloride) in 52.6 mL	1	2	..	262.99	35.40	^a	DBL Gemcitabine Injection HH
5845P	Powder for I.V. infusion 2 g (as hydrochloride)	1	2	..	262.99	35.40	^a	DBL Gemcitabine for Injection HH
							^a	Gemcitabine Kabi PK

Plant alkaloids and other natural products

Vinca alkaloids and analogues

VINBLASTINE SULFATE								
5989F	Solution for I.V. injection 10 mg in 10 mL	5	..	..	138.12	35.40		Hospira Pty Limited HH
VINCRISTINE SULFATE								
5991H	I.V. injection 1 mg in 1 mL	10	..	..	*123.28	35.40	^a	Hospira Pty Limited HH
							^a	Pfizer Australia Pty PF
								Ltd
VINORELBINE								
Authority required (STREAMLINED)								
3907								
Advanced breast cancer after failure of prior therapy which includes an anthracycline;								
3890								
Locally advanced or metastatic non-small cell lung cancer.								
5992J	Solution for I.V. infusion 10 mg (as tartrate) in 1 mL	16	2	..	*995.52	35.40	^a	Hospira Pty Limited HH
							^a	Navelbine FB
							^a	Vinorelbine Ebewe SZ
5993K	Solution for I.V. infusion 50 mg (as tartrate) in 5 mL	4	2	..	*1041.60	35.40	^a	Hospira Pty Limited HH
							^a	Navelbine FB
							^a	Vinorelbine Ebewe SZ
							^a	Vinorelbine Kabi PK

Podophyllotoxin derivatives

ETOPOSIDE								
5931E	Solution for I.V. infusion 100 mg in 5 mL	5	..	..	132.80	35.40	^a	Etoposide Ebewe SZ
					*132.80	35.40	^a	Hospira Pty Limited HH
5932F	Powder for I.V. infusion 100 mg (as phosphate)	5	..	..	*132.80	35.40		Etopophos BQ
5933G	Powder for I.V. infusion 1 g (as phosphate)	1	..	..	265.54	35.40		Etopophos BQ

Taxanes

DOCETAXEL

Caution

Pharmaceutical benefits containing docetaxel may have different concentrations.

Authority required (STREAMLINED)

3888

Neoadjuvant treatment of a patient with a WHO performance status of 1 or less, with inoperable Stage III, IVa or IVb squamous cell carcinoma of the oral cavity, larynx, oropharynx or hypopharynx, in combination with cisplatin and fluorouracil.

Note

The carcinoma can be considered inoperable for technical or organ preservation reasons.

Note

Pharmaceutical benefits that have the forms docetaxel solution concentrate for I.V. infusion 20 mg in 1 mL, docetaxel solution concentrate for I.V. infusion 20 mg in 2 mL and docetaxel concentrate for I.V. infusion 20 mg (after reconstitution) are equivalent for the purposes of substitution.

CHEMOTHERAPY PHARMACEUTICALS ACCESS PROGRAM

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	
					\$	\$		
5842L	Injection set containing 1 single use vial concentrate for I.V. infusion 20 mg (anhydrous) in 0.5 mL with solvent	1	..	..	288.29	35.40 ^a	Taxotere	SW
5854D	Solution concentrate for I.V. infusion 20 mg in 1 mL	1	..	..	288.29	35.40 ^a	Oncotaxel 20	TA
							Taxotere	SW
5859J	Solution concentrate for I.V. infusion 20 mg in 2 mL	1	..	..	288.29	35.40 ^a	DBL Docetaxel Concentrated Injection	HH
							Docetaxel Ebewe	HX
							Docetaxel Sandoz	SZ

DOCETAXEL

Caution

Pharmaceutical benefits containing docetaxel may have different concentrations.

Authority required (STREAMLINED)

3888

Neoadjuvant treatment of a patient with a WHO performance status of 1 or less, with inoperable Stage III, IVa or IVb squamous cell carcinoma of the oral cavity, larynx, oropharynx or hypopharynx, in combination with cisplatin and fluorouracil.

Note

The carcinoma can be considered inoperable for technical or organ preservation reasons.

Authority required (STREAMLINED)

3916

Adjuvant treatment of node-positive breast cancer in combination with an anthracycline and cyclophosphamide;

3955

Metastatic breast cancer;

3186

Advanced metastatic ovarian cancer after failure of prior therapy which includes a platinum compound;

3890

Locally advanced or metastatic non-small cell lung cancer.

Authority required (STREAMLINED)

3884

Treatment of androgen independent (hormone refractory) metastatic carcinoma of the prostate in a patient with a Karnofsky performance-status score of at least 60%. Docetaxel must be used as first-line chemotherapy and administered in three weekly cycles.

Note

A maximum of 10 cycles of treatment with docetaxel will be authorised under this restriction.

5809R	Solution concentrate for I.V. infusion 140 mg in 7 mL	1	..	..	2013.30	35.40	Oncotaxel 140	TA
5862M	Solution concentrate for I.V. infusion 160 mg in 16 mL	1	..	..	2310.90	35.40	DBL Docetaxel Concentrated Injection	HH

DOCETAXEL

Caution

Pharmaceutical benefits containing docetaxel may have different concentrations.

Authority required (STREAMLINED)

3956

Treatment of HER2 positive breast cancer in combination with trastuzumab.

Note

Pharmaceutical benefits that have the forms docetaxel solution concentrate for I.V. infusion 20 mg in 1 mL, docetaxel solution concentrate for I.V. infusion 20 mg in 2 mL and docetaxel concentrate for I.V. infusion 20 mg (after reconstitution) are equivalent for the purposes of substitution.

5864P	Solution concentrate for I.V. infusion 20 mg in 1 mL	2	..	..	*576.58	35.40 ^a	Oncotaxel 20	TA
							Taxotere	SW
5865Q	Solution concentrate for I.V. infusion 20 mg in 2 mL	2	..	..	*576.58	35.40 ^a	DBL Docetaxel Concentrated Injection	HH
							Docetaxel Sandoz	SZ

CHEMOTHERAPY PHARMACEUTICALS ACCESS PROGRAM

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	
					\$	\$		
5866R	Injection set containing 1 single use vial concentrate for I.V. infusion 20 mg (anhydrous) in 0.5 mL with solvent	2	..	..	*576.58	35.40 ^a	Taxotere	SW

DOCETAXEL

Caution

Pharmaceutical benefits containing docetaxel may have different concentrations.

Authority required (STREAMLINED)

3956

Treatment of HER2 positive breast cancer in combination with trastuzumab.

Note

Pharmaceutical benefits that have the forms docetaxel solution concentrate for I.V. infusion 80 mg in 4 mL, docetaxel solution concentrate for I.V. infusion 80 mg in 8 mL and docetaxel concentrate for I.V. infusion 80 mg (after reconstitution) are equivalent for the purposes of substitution.

5867T	Solution concentrate for I.V. infusion 80 mg in 4 mL	1	..	..	1155.45	35.40 ^a	Oncotaxel 80	TA
							^a Taxotere	SW
5868W	Solution concentrate for I.V. infusion 80 mg in 8 mL	1	..	..	1155.45	35.40 ^a	DBL Docetaxel Concentrated Injection	HH
							^a Docetaxel Sandoz	SZ
5869X	Injection set containing 1 single use vial concentrate for I.V. infusion 80 mg (anhydrous) in 2 mL with solvent	1	..	..	1155.45	35.40 ^a	Taxotere	SW

DOCETAXEL

Caution

Pharmaceutical benefits containing docetaxel may have different concentrations.

Authority required (STREAMLINED)

3956

Treatment of HER2 positive breast cancer in combination with trastuzumab.

Authority required (STREAMLINED)

3892

Adjuvant treatment of operable breast cancer in combination with cyclophosphamide.

Note

A maximum of four cycles of treatment will be authorised under this restriction.

5810T	Solution concentrate for I.V. infusion 140 mg in 7 mL	1	2013.30	35.40	Oncotaxel 140	TA
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DOCETAXEL

Caution

Pharmaceutical benefits containing docetaxel may have different concentrations.

Authority required (STREAMLINED)

3956

Treatment of HER2 positive breast cancer in combination with trastuzumab.

5957M	Solution concentrate for I.V. infusion 160 mg in 16 mL	1	2310.90	35.40	DBL Docetaxel Concentrated Injection	HH
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DOCETAXEL

Caution

Pharmaceutical benefits containing docetaxel may have different concentrations.

Authority required (STREAMLINED)

3955

Metastatic breast cancer;

CHEMOTHERAPY PHARMACEUTICALS ACCESS PROGRAM

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
3186								
Advanced metastatic ovarian cancer after failure of prior therapy which includes a platinum compound;								
3890								
Locally advanced or metastatic non-small cell lung cancer.								
<u>Authority required (STREAMLINED)</u>								
3884								
Treatment of androgen independent (hormone refractory) metastatic carcinoma of the prostate in a patient with a Karnofsky performance-status score of at least 60%. Docetaxel must be used as first-line chemotherapy and administered in three weekly cycles.								
<u>Note</u>								
A maximum of 10 cycles of treatment with docetaxel will be authorised under this restriction.								
<u>Note</u>								
Pharmaceutical benefits that have the forms docetaxel solution concentrate for I.V. infusion 20 mg in 1 mL and 20 mg in 2 mL, docetaxel concentrate for I.V. infusion 20 mg (after reconstitution) and docetaxel powder for I.V. infusion 20 mg (after reconstitution) are equivalent for the purposes of substitution.								
5591G	Powder for I.V. infusion 20 mg with solvent	2	..	..	*576.58	35.40	^a	Docetaxel SUN ZF
5855E	Solution concentrate for I.V. infusion 20 mg in 1 mL	2	..	..	*576.58	35.40	^a	Oncotaxel 20 TA
							^a	Taxotere SW
5860K	Solution concentrate for I.V. infusion 20 mg in 2 mL	2	..	..	*576.58	35.40	^a	DBL Docetaxel Concentrated Injection HH
							^a	Docetaxel Ebewe HX
							^a	Docetaxel Sandoz SZ
5921P	Injection set containing 1 single use vial concentrate for I.V. infusion 20 mg (anhydrous) in 0.5 mL with solvent	2	..	..	*576.58	35.40	^a	Taxotere SW

DOCETAXEL

Caution

Pharmaceutical benefits containing docetaxel may have different concentrations.

Authority required (STREAMLINED)

3955

Metastatic breast cancer;

3186

Advanced metastatic ovarian cancer after failure of prior therapy which includes a platinum compound;

3890

Locally advanced or metastatic non-small cell lung cancer.

Authority required (STREAMLINED)

3884

Treatment of androgen independent (hormone refractory) metastatic carcinoma of the prostate in a patient with a Karnofsky performance-status score of at least 60%. Docetaxel must be used as first-line chemotherapy and administered in three weekly cycles.

Note

A maximum of 10 cycles of treatment with docetaxel will be authorised under this restriction.

Note

Pharmaceutical benefits that have the forms docetaxel solution concentrate for I.V. infusion 80 mg in 4 mL and 80 mg in 8 mL, docetaxel concentrate for I.V. infusion 80 mg (after reconstitution) and docetaxel powder for I.V. infusion 80 mg (after reconstitution) are equivalent for the purposes of substitution.

5592H	Powder for I.V. infusion 80 mg with solvent	1	..	..	1155.45	35.40	^a	Docetaxel SUN ZF
5856F	Solution concentrate for I.V. infusion 80 mg in 4 mL	1	..	..	1155.45	35.40	^a	Oncotaxel 80 TA
							^a	Taxotere SW
5861L	Solution concentrate for I.V. infusion 80 mg in 8 mL	1	..	..	1155.45	35.40	^a	DBL Docetaxel Concentrated Injection HH
							^a	Docetaxel Ebewe HX
							^a	Docetaxel Sandoz SZ
5922Q	Injection set containing 1 single use vial concentrate for I.V. infusion 80 mg (anhydrous) in 2 mL with solvent	1	..	..	1155.45	35.40	^a	Taxotere SW

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
DOCETAXEL							
Caution							
Pharmaceutical benefits containing docetaxel may have different concentrations.							
Authority required (STREAMLINED)							
3916							
Adjuvant treatment of node-positive breast cancer in combination with an anthracycline and cyclophosphamide.							
Note							
Pharmaceutical benefits that have the forms docetaxel solution concentrate for I.V. infusion 20 mg in 1 mL, docetaxel solution concentrate for I.V. infusion 20 mg in 2 mL and docetaxel concentrate for I.V. infusion 20 mg (after reconstitution) are equivalent for the purposes of substitution.							
5593J	Solution concentrate for I.V. infusion 20 mg in 1 mL	2	..	..	*576.58	35.40	^a Oncotaxel 20 TA
							^a Taxotere SW
5594K	Solution concentrate for I.V. infusion 20 mg in 2 mL	2	..	..	*576.58	35.40	^a DBL Docetaxel Concentrated Injection HH
							^a Docetaxel Ebewe HX
							^a Docetaxel Sandoz SZ
5595L	Injection set containing 1 single use vial concentrate for I.V. infusion 20 mg (anhydrous) in 0.5 mL with solvent	2	..	..	*576.58	35.40	^a Taxotere SW
DOCETAXEL							
Caution							
Pharmaceutical benefits containing docetaxel may have different concentrations.							
Authority required (STREAMLINED)							
3888							
Neoadjuvant treatment of a patient with a WHO performance status of 1 or less, with inoperable Stage III, IVa or IVb squamous cell carcinoma of the oral cavity, larynx, oropharynx or hypopharynx, in combination with cisplatin and fluorouracil.							
Note							
The carcinoma can be considered inoperable for technical or organ preservation reasons.							
Authority required (STREAMLINED)							
3916							
Adjuvant treatment of node-positive breast cancer in combination with an anthracycline and cyclophosphamide.							
Note							
Pharmaceutical benefits that have the forms docetaxel solution concentrate for I.V. infusion 80 mg in 4 mL, docetaxel solution concentrate for I.V. infusion 80 mg in 8 mL and docetaxel concentrate for I.V. infusion 80 mg (after reconstitution) are equivalent for the purposes of substitution.							
5596M	Solution concentrate for I.V. infusion 80 mg in 4 mL	1	..	..	1155.45	35.40	^a Oncotaxel 80 TA
							^a Taxotere SW
5597N	Solution concentrate for I.V. infusion 80 mg in 8 mL	1	..	..	1155.45	35.40	^a DBL Docetaxel Concentrated Injection HH
							^a Docetaxel Ebewe HX
							^a Docetaxel Sandoz SZ
5598P	Injection set containing 1 single use vial concentrate for I.V. infusion 80 mg (anhydrous) in 2 mL with solvent	1	..	..	1155.45	35.40	^a Taxotere SW
DOCETAXEL							
Caution							
Pharmaceutical benefits containing docetaxel may have different concentrations.							
Authority required (STREAMLINED)							
3892							
Adjuvant treatment of operable breast cancer in combination with cyclophosphamide.							
Note							
A maximum of four cycles of treatment will be authorised under this restriction.							

CHEMOTHERAPY PHARMACEUTICALS ACCESS PROGRAM

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		
Note Pharmaceutical benefits that have the form docetaxel solution concentrate for I.V. infusion 20 mg in 1 mL and pharmaceutical benefits that have the form docetaxel concentrate for I.V. infusion 20 mg (after reconstitution) are equivalent for the purposes of substitution.									
5811W	Solution concentrate for I.V. infusion 20 mg in 1 mL	2	..	..	*576.58	35.40	^a	Oncotaxel 20	TA
							^a	Taxotere	SW
5812X	Injection set containing 1 single use vial concentrate for I.V. infusion 20 mg (anhydrous) in 0.5 mL with solvent	2	*576.58	35.40	^a	Taxotere	SW
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DOCETAXEL									
Caution Pharmaceutical benefits containing docetaxel may have different concentrations.									
Authority required (STREAMLINED) 3892 Adjuvant treatment of operable breast cancer in combination with cyclophosphamide.									
Note A maximum of four cycles of treatment will be authorised under this restriction.									
Note Pharmaceutical benefits that have the form docetaxel solution concentrate for I.V. infusion 80 mg in 4 mL and pharmaceutical benefits that have the form docetaxel concentrate for I.V. infusion 80 mg (after reconstitution) are equivalent for the purposes of substitution.									
5813Y	Solution concentrate for I.V. infusion 80 mg in 4 mL	1	..	..	1155.45	35.40	^a	Oncotaxel 80	TA
							^a	Taxotere	SW
5814B	Injection set containing 1 single use vial concentrate for I.V. infusion 80 mg (anhydrous) in 2 mL with solvent	1	..	..	1155.45	35.40	^a	Taxotere	SW
NAB PACLITAXEL									
Authority required (STREAMLINED) 3955 Metastatic breast cancer;									
3956 Treatment of HER2 positive breast cancer in combination with trastuzumab.									
5847R	Powder for I.V. injection 100 mg (base)	1	..	..	401.48	35.40		Abraxane	TS
PACLITAXEL									
Authority required (STREAMLINED) 3917 Adjuvant treatment of node-positive breast cancer administered sequentially to an anthracycline and cyclophosphamide;									
3955 Metastatic breast cancer;									
3186 Advanced metastatic ovarian cancer after failure of prior therapy which includes a platinum compound;									
3902 Primary treatment of ovarian cancer in combination with a platinum compound;									
3890 Locally advanced or metastatic non-small cell lung cancer;									
3956 Treatment of HER2 positive breast cancer in combination with trastuzumab.									
5973J	Solution concentrate for I.V. infusion 30 mg in 5 mL	5	..	..	392.48	35.40	^a	Paclitaxel Ebewe	SZ
				..	*392.50	35.40	^a	Anzatax	HH
							^a	Paclitaxel Actavis	TA
							^a	Paclitaxel Kabi	PK
							^a	Paclitaxel Pfizer	PF
							^a	Plaxel	WQ

CHEMOTHERAPY PHARMACEUTICALS ACCESS PROGRAM

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	
					\$	\$		
5974K	Solution concentrate for I.V. infusion 100 mg in 16.7 mL	2	..	..	*520.74	35.40	^a Taxol	BQ
							^a Anzatax	HH
							^a Paclitaxel Actavis	TA
							^a Paclitaxel Ebewe	SZ
							^a Paclitaxel Kabi	PK
							^a Paclitaxel Pfizer	PF
							^a Plaxel	WQ
5975L	Solution concentrate for I.V. infusion 150 mg in 25 mL	2	..	..	*759.04	35.40	^a Taxol	BQ
							^a Anzatax	HH
							^a Paclitaxel Actavis	TA
							^a Paclitaxel Ebewe	SZ
5976M	Solution concentrate for I.V. infusion 300 mg in 50 mL	1	..	..	790.88	35.40	^a Plaxel	WQ
							^a Anzatax	HH
							^a Paclitaxel Actavis	TA
							^a Paclitaxel Ebewe	SZ
							^a Paclitaxel Kabi	PK
							^a Paclitaxel Pfizer	PF
							^a Plaxel	WQ
							^a Taxol	BQ

Cytotoxic antibiotics and related substances *Anthracyclines and related substances*

DOXORUBICIN HYDROCHLORIDE								
5879K	Solution for I.V. injection or intravesical administration 100 mg in 50 mL	1	..	..	58.14	35.40	Doxorubicin Ebewe	SZ
5880L	Solution for I.V. injection or intravesical administration 200 mg in 100 mL	1	..	..	116.27	35.40	^a Adriamycin	PF
							^a Doxorubicin Ebewe	SZ
5925W	Solution for I.V. injection or intravesical administration 10 mg in 5 mL	4	..	..	*27.52	28.61	^a Adriamycin	PF
							^a Solution	
							^a Doxorubicin Ebewe	SZ
5926X	Solution for I.V. injection or intravesical administration 20 mg in 10 mL	4	..	..	*49.20	35.40	^a Hospira Pty Limited	HH
							^a Adriamycin	PF
5927Y	Solution for I.V. injection or intravesical administration 50 mg in 25 mL	3	..	..	*87.21	35.40	^a Solution	
							^a Adriamycin	PF
							^a Doxorubicin Ebewe	SZ
							^a Hospira Pty Limited	HH

DOXORUBICIN HYDROCHLORIDE, PEGYLATED LIPOSOMAL

Authority required (STREAMLINED)

3905

Advanced epithelial ovarian cancer in women who have failed a first-line platinum-based chemotherapy regimen;

3910

Metastatic breast cancer, as monotherapy, after failure of prior therapy which includes capecitabine and a taxane;

3911

Metastatic breast cancer, as monotherapy, where therapy with capecitabine and/or a taxane is contraindicated.

5891C	Suspension for I.V. infusion 20 mg in 10 mL	1	..	..	622.99	35.40	Caelyx	JC
5892D	Suspension for I.V. infusion 50 mg in 25 mL	1	..	..	1483.30	35.40	Caelyx	JC
EPIRUBICIN HYDROCHLORIDE								
5884Q	Solution for injection 200 mg in 100 mL	1	..	..	666.26	35.40	^a DBL Epirubicin Hydrochloride Injection	HH

CHEMOTHERAPY PHARMACEUTICALS ACCESS PROGRAM

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 Epirubicin Actavis 200	TA
5885R	Solution for injection 100 mg in 50 mL	2	..	..	*676.40	35.40	^a Epirubicin Ebewe	SZ
							^a Epirubicin Actavis 100	TA
							^a Epirubicin Ebewe	SZ
5928B	Solution for injection 10 mg in 5 mL	4	..	..	*143.64	35.40	^a Hospira Pty Limited	HH
							^a Epirubicin Actavis 10	TA
							^a Epirubicin Ebewe	SZ
5929C	Solution for injection 20 mg in 10 mL	4	..	..	*277.24	35.40	^a Pharmorubicin Solution	PF
							^a Pharmorubicin Solution	PF
5930D	Solution for injection 50 mg in 25 mL	4	..	..	*685.60	35.40	^a Epirubicin Actavis 20	TA
							^a Epirubicin Actavis 50	TA
							^a Epirubicin Ebewe	SZ
							^a Hospira Pty Limited	HH
							^a Pharmorubicin Solution	PF
	IDARUBICIN HYDROCHLORIDE							
	<u>Restricted benefit</u>							
	Acute myelogenous leukaemia.							
5941Q	Solution for I.V. injection 5 mg in 5 mL	3	..	..	*422.52	35.40	^a Idarubicin Ebewe	SZ
				..	422.53	35.40	^a Zavedos Solution	PF
5942R	Solution for I.V. injection 10 mg in 10 mL	6	..	..	*1633.86	35.40	^a Idarubicin Ebewe	SZ
				..	1633.90	35.40	^a Zavedos Solution	PF
	MITOZANTRONE HYDROCHLORIDE							
5964X	Injection 10 mg (base) in 5 mL	1	..	..	65.25	35.40	Pfizer Australia Pty Ltd	PF
5965Y	Injection 20 mg (base) in 10 mL	1	..	..	130.51	35.40	^a Hospira Pty Limited	HH
							^a Mitozantrone Ebewe	SZ
							^a Onkotrone	BX
							^a Pfizer Australia Pty Ltd	PF
5966B	Injection 25 mg (base) in 12.5 mL	1	..	..	163.05	35.40	^a Onkotrone	BX
							^a Pfizer Australia Pty Ltd	PF
	Other antineoplastic agents							
	<i>Platinum compounds</i>							
	CARBOPLATIN							
5906W	Solution for I.V. injection 50 mg in 5 mL	2	..	..	*49.26	35.40	^a Carboplatin Ebewe	SZ
							^a Hospira Pty Limited	HH
							^a Pfizer Australia Pty Ltd	PF
5907X	Solution for I.V. injection 150 mg in 15 mL	6	..	..	*356.76	35.40	^a Carboplatin Ebewe	SZ
							^a Hospira Pty Limited	HH
							^a Pfizer Australia Pty Ltd	PF
5908Y	Solution for I.V. injection 450 mg in 45 mL	2	..	..	*224.06	35.40	^a Carboplatin Ebewe	SZ
							^a Carboplatin Kabi	PK
							^a Hospira Pty Limited	HH
							^a Pfizer Australia Pty Ltd	PF

CHEMOTHERAPY PHARMACEUTICALS ACCESS PROGRAM

						Dispensed Price for Max. Qty \$	Maximum Recordable Value for Safety Net \$		
Code	Name, Restriction, Manner of Administration and Form	Max. Qty	No. of Rpts	Premium				Brand Name and Manufacturer	
CISPLATIN									
5909B	I.V. injection 10 mg in 10 mL	1	..	..	3.99	5.50		Pfizer Australia Pty Ltd	PF
5910C	I.V. injection 50 mg in 50 mL	1	..	..	10.71	11.80	^a	Hospira Pty Limited	HH
							^a	Pfizer Australia Pty Ltd	PF
5911D	I.V. injection 100 mg in 100 mL	1	..	..	26.98	28.07	^a	Cisplatin Ebewe	SZ
							^a	Hospira Pty Limited	HH
							^a	Pfizer Australia Pty Ltd	PF

OXALIPLATIN

Authority required (STREAMLINED)

3900

Metastatic colorectal cancer in a patient with a WHO performance status of 2 or less, to be used in combination with capecitabine;

3901

Metastatic colorectal cancer in a patient with a WHO performance status of 2 or less, to be used in combination with 5-fluorouracil and folinic acid;

3930

Adjuvant treatment of stage III (Dukes C) colon cancer following complete resection of the primary tumour used in combination with capecitabine;

3939

Adjuvant treatment of stage III (Dukes C) colon cancer following complete resection of the primary tumour used in combination with 5-fluorouracil and folinic acid.

Note

Oxaliplatin is not PBS-subsidised for the treatment of patients with stage II (Dukes B) colon cancer.

Oxaliplatin is not PBS-subsidised for the adjuvant treatment of patients with rectal cancer.

Note

Pharmaceutical benefits that have the form oxaliplatin powder for I.V. infusion 50 mg (after reconstitution) and pharmaceutical benefits that have the form oxaliplatin solution concentrate for I.V. infusion 50 mg are equivalent for the purposes of substitution.

5877H	Solution concentrate for I.V. infusion 50 mg in 10 mL	1	2	..	84.93	35.40	^a DBL Oxaliplatin Concentrate	HH
							^a Eloxatin	SW
							^a Oxaliplatin Kabi	PK
							^a Oxaliplatin SUN	ZF
5994L	Powder for I.V. infusion 50 mg	1	2	..	84.93	35.40	^a Hospira Pty Limited	HH
							^a Oxalatin	ZP
							^a Oxaliplatin Actavis	TA
							^a Oxaliplatin Alphapharm	AF
							^a Oxaliplatin Ebewe	SZ
							^a Oxaliplatin Link	PK
							^a Xalox	WQ

OXALIPLATIN

Authority required (STREAMLINED)

3900

Metastatic colorectal cancer in a patient with a WHO performance status of 2 or less, to be used in combination with capecitabine;

3901

Metastatic colorectal cancer in a patient with a WHO performance status of 2 or less, to be used in combination with 5-fluorouracil and folinic acid;

3930

Adjuvant treatment of stage III (Dukes C) colon cancer following complete resection of the primary tumour used in combination with capecitabine;

3939

Adjuvant treatment of stage III (Dukes C) colon cancer following complete resection of the primary tumour used in combination with 5-fluorouracil and folinic acid.

Note

Oxaliplatin is not PBS-subsidised for the treatment of patients with stage II (Dukes B) colon cancer.

Oxaliplatin is not PBS-subsidised for the adjuvant treatment of patients with rectal cancer.

CHEMOTHERAPY PHARMACEUTICALS ACCESS PROGRAM

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		
	<u>Note</u> Pharmaceutical benefits that have the form oxaliplatin powder for I.V. infusion 100 mg (after reconstitution) and pharmaceutical benefits that have the form oxaliplatin solution concentrate for I.V. infusion 100 mg are equivalent for the purposes of substitution.								
5878J	Solution concentrate for I.V. infusion 100 mg in 20 mL	1	2	..	164.05	35.40	^a DBL Oxaliplatin Concentrate	HH	
							^a Eloxatin	SW	
							^a Oxaliplatin Kabi	PK	
							^a Oxaliplatin SUN	ZF	
5995M	Powder for I.V. infusion 100 mg	1	2	..	164.05	35.40	^a Hospira Pty Limited	HH	
							^a Oxalatin	ZP	
							^a Oxaliplatin Actavis	TA	
							^a Oxaliplatin Alphapharm	AF	
							^a Oxaliplatin Ebewe	SZ	
							^a Oxaliplatin Link	PK	
							^a Winthrop Oxaliplatin	WA	
							^a Xalox	WQ	

OXALIPLATIN

Authority required (STREAMLINED)

3900

Metastatic colorectal cancer in a patient with a WHO performance status of 2 or less, to be used in combination with capecitabine;

3901

Metastatic colorectal cancer in a patient with a WHO performance status of 2 or less, to be used in combination with 5-fluorouracil and folinic acid;

3930

Adjuvant treatment of stage III (Dukes C) colon cancer following complete resection of the primary tumour used in combination with capecitabine;

3939

Adjuvant treatment of stage III (Dukes C) colon cancer following complete resection of the primary tumour used in combination with 5-fluorouracil and folinic acid.

Note

Oxaliplatin is not PBS-subsidised for the treatment of patients with stage II (Dukes B) colon cancer.

Oxaliplatin is not PBS-subsidised for the adjuvant treatment of patients with rectal cancer.

5999R	Solution concentrate for I.V. infusion 200 mg in 40 mL	1	2	..	326.99	35.40	^a Eloxatin	SW
							^a Oxaliplatin SUN	ZF

Monoclonal antibodies

BEVACIZUMAB

Authority required (STREAMLINED)

3894

Initial PBS-subsidised treatment, in combination with first-line chemotherapy, of a patient with previously untreated metastatic colorectal cancer with a WHO performance status of 0 or 1.

Doses greater than 5 mg per kg every 2 weeks or 7.5 mg per kg every 3 weeks will not be PBS-subsidised. The patient's WHO performance status and body weight must be recorded in the patient's medical records at the time the treatment cycle is initiated.

Note

Not for use as monotherapy.

Authority required (STREAMLINED)

3896

Continuing PBS-subsidised treatment, in combination with first-line chemotherapy, of a patient with metastatic colorectal cancer who has previously received PBS-subsidised treatment with bevacizumab and who does not have progressive disease and who remains on first-line chemotherapy.

Doses greater than 5 mg per kg every 2 weeks or 7.5 mg per kg every 3 weeks will not be PBS-subsidised. The patient's body weight must be documented in the patient's medical records at the time the treatment cycle is initiated.

Note

Not for use as monotherapy.

Note

Special Pricing Arrangements apply.

5849W	Solution for I.V. infusion 100 mg in 4 mL	1	472.50	35.40	Avastin	RO
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CHEMOTHERAPY PHARMACEUTICALS ACCESS PROGRAM

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
					\$	\$	
5850X	Solution for I.V. infusion 400 mg in 16 mL	1	..	..	1720.00	35.40	Avastin RO

CETUXIMAB

Authority required (STREAMLINED)

3903

Initial PBS-subsidised treatment, as monotherapy or in combination with an irinotecan based therapy, of a patient with a WHO performance status of 2 or less and with K-RAS wild type metastatic colorectal cancer after failure of first-line chemotherapy;

3904

Continuing PBS-subsidised treatment, as monotherapy or in combination with an irinotecan based therapy, of a patient with K-RAS wild type metastatic colorectal cancer who has previously been issued with an authority prescription for cetuximab and who does not have progressive disease.

Note

Cetuximab is not PBS-subsidised for use in combination with bevacizumab or oxaliplatin based therapies.

Note

Special Pricing Arrangements apply.

5599Q	Solution for I.V. infusion 100 mg in 20 mL	1	..	..	341.00	35.40	Erbixux SG
5600R	Solution for I.V. infusion 500 mg in 100 mL	1	..	..	1705.00	35.40	Erbixux SG

CETUXIMAB

Authority required (STREAMLINED)

3919

Initial treatment of stage III, IVa or IVb squamous cell cancer of the larynx, oropharynx or hypopharynx for the week prior to radiotherapy, where cisplatin is contraindicated according to the TGA-approved Product Information;

3920

Initial treatment of stage III, IVa or IVb squamous cell cancer of the larynx, oropharynx or hypopharynx, in combination with radiotherapy, where cisplatin is not tolerated.

Note

No applications for repeats will be authorised.

5836E	Solution for I.V. infusion 100 mg in 20 mL	1	..	..	341.00	35.40	Erbixux SG
5837F	Solution for I.V. infusion 500 mg in 100 mL	1	..	..	1705.00	35.40	Erbixux SG

CETUXIMAB

Authority required (STREAMLINED)

3921

Continuing treatment of stage III, IVa or IVb squamous cell cancer of the larynx, oropharynx or hypopharynx, in combination with radiotherapy, where cisplatin is either contraindicated or not tolerated.

Note

A maximum lifetime supply for this indication is limited to a maximum of 8 treatments per site and to 10 treatments per site for patients in whom radiotherapy is interrupted.

5838G	Solution for I.V. infusion 100 mg in 20 mL	1	6	..	341.00	35.40	Erbixux SG
5839H	Solution for I.V. infusion 500 mg in 100 mL	1	6	..	1705.00	35.40	Erbixux SG

RITUXIMAB

Authority required (STREAMLINED)

3908

Relapsed or refractory low-grade B-cell non-Hodgkin's lymphoma;

3909

Relapsed or refractory follicular B-cell non-Hodgkin's lymphoma.

5978P	Solution for I.V. infusion 100 mg in 10 mL	2	3	..	905.43	35.40	Mabthera RO
5979Q	Solution for I.V. infusion 500 mg in 50 mL	1	3	..	2263.57	35.40	Mabthera RO

CHEMOTHERAPY PHARMACEUTICALS ACCESS PROGRAM

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
					\$	\$	
RITUXIMAB							
<u>Authority required (STREAMLINED)</u>							
3912							
Treatment of previously untreated, CD20 positive, diffuse large B-cell non-Hodgkin's lymphoma, in combination with chemotherapy;							
3915							
Treatment of symptomatic patients with previously untreated, CD20 positive, Stage III or IV, follicular, B-cell non-Hodgkin's lymphoma, in combination with chemotherapy.							
5896H	Solution for I.V. infusion 100 mg in 10 mL	2	7	..	905.43	35.40	Mabthera RO
5897J	Solution for I.V. infusion 500 mg in 50 mL	1	7	..	2263.57	35.40	Mabthera RO

RITUXIMAB

Authority required (STREAMLINED)

3932

CD20 positive, chronic lymphocytic leukaemia, in combination with fludarabine and cyclophosphamide.

Note

Rituximab is not PBS-subsidised for use as monotherapy.

5589E	Solution for I.V. infusion 100 mg in 10 mL	2	5	..	905.43	35.40	Mabthera	RO
5590F	Solution for I.V. infusion 500 mg in 50 mL	2	5	..	*4527.14	35.40	Mabthera	RO

Other antineoplastic agents

ARSENIC TRIOXIDE

Authority required (STREAMLINED)

3891

Induction and consolidation treatment of relapsed acute promyelocytic leukaemia (characterised by the presence of the t(15:17) translocation or PML/RAR-alpha fusion gene transcript) in a patient who is arsenic naive at induction.

5851Y	Injection concentrate 10 mg in 10 mL	60	2	..	*24049.68	35.40	Phenasen	PL
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IRINOTECAN HYDROCHLORIDE TRIHYDRATE

Authority required (STREAMLINED)

3184

Metastatic colorectal cancer in patients with a WHO performance status of 2 or less.

Note

In first-line usage, effectiveness and tolerance may be improved when irinotecan is combined with an infusional 5-fluorouracil regimen.

5833B	I.V. injection 500 mg in 25 mL	1	3	..	549.75	35.40	^a Hospira Pty Limited	HH
							^a Irinotecan Actavis 500	TA
							^a Irinotecan Ebewe	SZ
							^a Tecan	WQ
5846Q	I.V. injection 300 mg in 15 mL	1	3	..	321.58	35.40	^a Camptosar	PF
							^a Irinotecan Ebewe	SZ
5958N	I.V. injection 40 mg in 2 mL	1	3	..	42.92	35.40	^a Camptosar	PF
							^a Hospira Pty Limited	HH
							^a Irinotecan Actavis	TA
							^a Irinotecan Alphapharm	AF
							^a Irinotecan Ebewe	SZ
							^a Irinotecan Kabi	PK
5959P	I.V. injection 100 mg in 5 mL	2	3	..	*214.58	35.40	^a Omegapharm	OE
							^a Irinotecan Tecan	WQ
							^a Camptosar	PF
							^a Hospira Pty Limited	HH
							^a Irinotecan Actavis	TA
							^a Irinotecan Alphapharm	AF
							^a Irinotecan Ebewe	SZ

CHEMOTHERAPY PHARMACEUTICALS ACCESS PROGRAM

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 Irinotecan Kabi	PK
							^a Omegapharm	OE
							^a Irinotecan	
							^a Tecan	WQ

TOPOTECAN HYDROCHLORIDE

Authority required (STREAMLINED)

3186

Advanced metastatic ovarian cancer after failure of prior therapy which includes a platinum compound.

5985B	Powder for I.V. infusion 4 mg (base)	5	1	..	1980.00	35.40	Hycamtin	GK
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Immunostimulants

Immunostimulants

Interferons

INTERFERON ALFA-2a

Caution

Treatment with interferon alfa has been associated with depression and suicide in some patients. Patients with a history of suicidal ideation or depressive illness should be warned of the risks. Psychiatric status during therapy should be monitored.

Authority required (STREAMLINED)

3180

Hairy cell leukaemia;

3899

Myeloproliferative disease with excessive thrombocytosis.

5945X	Injection 3,000,000 i.u. in 0.5 mL single dose pre-filled syringe	15	4	..	*447.00	35.40	Roferon-A	RO
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INTERFERON ALFA-2a

Caution

Treatment with interferon alfa has been associated with depression and suicide in some patients. Patients with a history of suicidal ideation or depressive illness should be warned of the risks. Psychiatric status during therapy should be monitored.

Authority required (STREAMLINED)

3899

Myeloproliferative disease with excessive thrombocytosis.

5996N	Injection 4,500,000 i.u. in 0.5 mL single dose pre-filled syringe	5	4	..	*223.50	35.40	Roferon-A	RO
5997P	Injection 6,000,000 i.u. in 0.5 mL single dose pre-filled syringe	5	4	..	*297.90	35.40	Roferon-A	RO
5998Q	Injection 9,000,000 i.u. in 0.5 mL single dose pre-filled syringe	5	4	..	*446.90	35.40	Roferon-A	RO

INTERFERON ALFA-2a

Caution

Treatment with interferon alfa has been associated with depression and suicide in some patients. Patients with a history of suicidal ideation or depressive illness should be warned of the risks. Psychiatric status during therapy should be monitored.

Authority required (STREAMLINED)

3895

Low grade non-Hodgkin's lymphoma with clinical features suggestive of a poor prognosis, in combination with anthracycline-based chemotherapy.

5946Y	Injection 3,000,000 i.u. in 0.5 mL single dose pre-filled syringe	15	5	..	*447.00	35.40	Roferon-A	RO
5947B	Injection 4,500,000 i.u. in 0.5 mL single dose pre-filled syringe	5	5	..	*223.50	35.40	Roferon-A	RO
5948C	Injection 6,000,000 i.u. in 0.5 mL single dose pre-filled syringe	5	5	..	*297.90	35.40	Roferon-A	RO
5949D	Injection 9,000,000 i.u. in 0.5 mL single dose pre-filled syringe	5	5	..	*446.90	35.40	Roferon-A	RO

CHEMOTHERAPY PHARMACEUTICALS ACCESS PROGRAM

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	
INTERFERON ALFA-2b								
<u>Caution</u>								
Treatment with interferon alfa has been associated with depression and suicide in some patients. Patients with a history of suicidal ideation or depressive illness should be warned of the risks. Psychiatric status during therapy should be monitored.								
<u>Authority required (STREAMLINED)</u>								
3180								
Hairy cell leukaemia.								
5893E	Solution for injection 18,000,000 i.u. in 1.2 mL multi-dose injection pen	3	4	..	*536.22	35.40	Intron A Redipen	MK
<hr/>								
INTERFERON ALFA-2b								
<u>Caution</u>								
Treatment with interferon alfa has been associated with depression and suicide in some patients. Patients with a history of suicidal ideation or depressive illness should be warned of the risks. Psychiatric status during therapy should be monitored.								
<u>Authority required (STREAMLINED)</u>								
3898								
Maintenance treatment of multiple myeloma once remission has been achieved with chemotherapy;								
3895								
Low grade non-Hodgkin's lymphoma with clinical features suggestive of a poor prognosis, in combination with anthracycline-based chemotherapy.								
5953H	Solution for injection 18,000,000 i.u. in 1.2 mL multi-dose injection pen	3	5	..	*536.22	35.40	Intron A Redipen	MK
5956L	Solution for injection 30,000,000 i.u. in 1.2 mL multi-dose injection pen	3	5	..	*893.70	35.40	Intron A Redipen	MK
Other immunostimulants								
BCG IMMUNOTHERAPEUTIC (Bacillus Calmette-Guérin/ Connaught strain)								
<u>Restricted benefit</u>								
Treatment of carcinoma in situ of the urinary bladder.								
5901N	Powder for intravesical administration containing 6.6 to 19.2 x 10 ⁸ CFU	3	1	..	*405.00	35.40	ImmuCyst	SW
BCG-TICE (Bacillus Calmette-Guérin/ Tice strain)								
<u>Restricted benefit</u>								
Primary and relapsing superficial urothelial carcinoma of the bladder.								
5902P	Vial containing powder for intravesical administration approximately 5 x 10 ⁸ CFU	3	1	..	491.83	35.40	OncoTICE	MK

CHEMOTHERAPY PHARMACEUTICALS ACCESS PROGRAM

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
					\$	\$	

Various

All other therapeutic products

All other therapeutic products

Detoxifying agents for antineoplastic treatment

CALCIUM FOLINATE

5863N	Injection equivalent to 1000 mg folinic acid in 100 mL	1	1	..	217.91	35.40	Calcium Folate Ebewe	SZ
5870Y	Injection equivalent to 300 mg folinic acid in 30 mL	4	1	..	*254.92	35.40	^a Calcium Folate Ebewe	SZ
							^a Leucovorin Calcium (Hospira Pty Limited)	HH
5886T	Injection equivalent to 100 mg folinic acid in 10 mL	10	1	..	*217.90	35.40	^a Calcium Folate Ebewe	SZ
				..	217.97	35.40	^a Leucovorin Calcium (Pfizer Australia Pty Ltd)	PF
5890B	Injection equivalent to 50 mg folinic acid in 5 mL	5	5	..	*118.05	35.40	^a Leucovorin Calcium (Hospira Pty Limited)	HH
				..	118.10	35.40	^a Calcium Folate Ebewe	SZ
				..	*119.17	35.40	^a Leucovorin Calcium (Pfizer Australia Pty Ltd)	PF

CALCIUM FOLINATE

Restricted benefit

Antidote to folic acid antagonists.

5904R	Tablet equivalent to 15 mg folinic acid	10	76.00	35.40	Leucovorin Calcium (Hospira Pty Limited)	HH
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MESNA

Restricted benefit

Adjunctive therapy for use with ifosfamide or high dose cyclophosphamide.

5960Q	Solution for I.V. injection 400 mg in 4 mL	15	5	..	81.89	35.40	Uromitexan	BX
5961R	Solution for I.V. injection 1 g in 10 mL	15	5	..	185.44	35.40	Uromitexan	BX

GENERIC/PROPRIETARY INDEX

A

<i>Abraxane (TS)</i>	19
<i>Adriamycin (PF)</i>	20
<i>Adriamycin Solution (PF)</i>	20
<i>Alimta (LY)</i>	11, 12
<i>Aloxi (TS)</i>	9
<i>Anzatax (HH)</i>	19, 20
<i>APO-Ondansetron (TX)</i>	8, 9
APREPITANT	9
ARSENIC TRIOXIDE	25
<i>Avastin (RO)</i>	23, 24

B

BCG IMMUNOTHERAPEUTIC (Bacillus Calmette-Guérin/ Connaught strain)	27
BCG-TICE (Bacillus Calmette-Guérin/ Tice strain)	27
BEVACIZUMAB	23
BLEOMYCIN SULFATE	7

C

<i>Caelyx (JC)</i>	20
CALCIUM FOLINATE	28
<i>Calcium Folinat Ebewe (SZ)</i>	28
<i>Camptosar (PF)</i>	25
CARBOPLATIN	21
<i>Carboplatin Ebewe (SZ)</i>	21
<i>Carboplatin Kabi (PK)</i>	21
CETUXIMAB	24
CISPLATIN	22
<i>Cisplatin Ebewe (SZ)</i>	22
CLADRIBINE	12
CYCLOPHOSPHAMIDE	11
CYTARABINE	12

D

<i>DBL Docetaxel Concentrated Injection (HH)</i>	15, 16, 17, 18
<i>DBL Epirubicin Hydrochloride Injection (HH)</i>	20
<i>DBL Fluorouracil Injection BP (HH)</i>	12
<i>DBL Gemcitabine for Injection (HH)</i>	13, 14
<i>DBL Gemcitabine Injection (HH)</i>	13, 14
<i>DBL Oxaliplatin Concentrate (HH)</i>	22, 23
DOCETAXEL	14, 15, 16, 17, 18, 19
<i>Docetaxel Ebewe (HX)</i>	15, 17, 18
<i>Docetaxel Sandoz (SZ)</i>	15, 16, 17, 18
<i>Docetaxel SUN (ZF)</i>	17
<i>Doxorubicin Ebewe (SZ)</i>	20
DOXORUBICIN HYDROCHLORIDE	20
DOXORUBICIN HYDROCHLORIDE, PEGYLATED LIPOSOMAL	20

E

<i>Eloxatin (SW)</i>	22, 23
<i>Emend (MK)</i>	10
<i>Endoxan (BX)</i>	11
<i>Epirubicin Actavis 10 (TA)</i>	21
<i>Epirubicin Actavis 100 (TA)</i>	21
<i>Epirubicin Actavis 20 (TA)</i>	21
<i>Epirubicin Actavis 200 (TA)</i>	21
<i>Epirubicin Actavis 50 (TA)</i>	21

<i>Epirubicin Ebewe (SZ)</i>	21
EPIRUBICIN HYDROCHLORIDE	20
<i>Erbitux (SG)</i>	24
<i>Etopophos (BQ)</i>	14
ETOPOSIDE	14
<i>Etoposide Ebewe (SZ)</i>	14

F

<i>Farine (WQ)</i>	12
<i>Fludara (GZ)</i>	12
<i>Fludarabine Actavis (TA)</i>	12
<i>Fludarabine Ebewe (SZ)</i>	12
FLUDARABINE PHOSPHATE	12
FLUOROURACIL	12
<i>Fluorouracil Ebewe (SZ)</i>	12
FOTEMUSTINE	11

G

GEMCITABINE	12, 13
<i>Gemcitabine Actavis (TA)</i>	13
<i>Gemcitabine Ebewe (SZ)</i>	13, 14
<i>Gemcitabine Kabi (PK)</i>	13, 14
<i>Gemcitabine Sun (ZF)</i>	13
<i>Gemcite (ZP)</i>	13
<i>Gemplan (WQ)</i>	13
<i>Gemzar (LY)</i>	13
GRANISETRON HYDROCHLORIDE	8
<i>Granisetron Kabi (PK)</i>	8

H

<i>Holoxan (BX)</i>	11
<i>Hospira Pty Limited (HH)</i>	7, 11, 12, 14, 20, 21, 22, 23, 25
<i>Hycamtin (GK)</i>	26

I

<i>Idarubicin Ebewe (SZ)</i>	21
IDARUBICIN HYDROCHLORIDE	21
IFOSFAMIDE	11
<i>ImmuCyst (SW)</i>	27
INTERFERON ALFA-2a	26
INTERFERON ALFA-2b	27
<i>Intron A Redipen (MK)</i>	27
<i>Irinotecan Actavis (TA)</i>	25
<i>Irinotecan Actavis 500 (TA)</i>	25
<i>Irinotecan Alphapharm (AF)</i>	25
<i>Irinotecan Ebewe (SZ)</i>	25
IRINOTECAN HYDROCHLORIDE TRIHYDRATE	25
<i>Irinotecan Kabi (PK)</i>	25, 26

K

<i>Kytril (HH)</i>	8
--------------------------	---

L

<i>Leucovorin Calcium (Hospira Pty Limited) (HH)</i>	28
<i>Leucovorin Calcium (Pfizer Australia Pty Ltd) (PF)</i>	28
<i>Leustatin (JC)</i>	12
<i>Litak (OA)</i>	12

M

<i>Mabthera (RO)</i>	24, 25
MESNA.....	28
METHOTREXATE	11
<i>Methotrexate Ebewe (SZ)</i>	11
<i>Mitozantrone Ebewe (SZ)</i>	21
MITOZANTRONE HYDROCHLORIDE	21
<i>Muphoran (SE)</i>	11

N

NAB PACLITAXEL.....	19
<i>Navelbine (FB)</i>	14
<i>Navoban (NV)</i>	9

O

<i>Omegapharm Irinotecan (OE)</i>	25, 26
<i>Oncotaxel 140 (TA)</i>	15, 16
<i>Oncotaxel 20 (TA)</i>	15, 17, 18, 19
<i>Oncotaxel 80 (TA)</i>	16, 17, 18, 19
<i>OncoTICE (MK)</i>	27
ONDANSETRON	8
<i>Ondansetron Alphapharm (AF)</i>	9
<i>Ondansetron ODT-DRLA (RZ)</i>	8
<i>Ondansetron-Clarix (AE)</i>	9
<i>Ondansetron-DRLA (RZ)</i>	8, 9
<i>Ondaz (SZ)</i>	8, 9
<i>Ondaz Zydis (SZ)</i>	8
<i>Onkotrone (BX)</i>	21
<i>Onsetron (ZP)</i>	9
<i>Onsetron 4 (ZP)</i>	8
<i>Onsetron 8 (ZP)</i>	9
<i>Oxalatin (ZP)</i>	22, 23
OXALIPLATIN.....	22, 23
<i>Oxaliplatin Actavis (TA)</i>	22, 23
<i>Oxaliplatin Alphapharm (AF)</i>	22, 23
<i>Oxaliplatin Ebewe (SZ)</i>	22, 23
<i>Oxaliplatin Kabi (PK)</i>	22, 23
<i>Oxaliplatin Link (PK)</i>	22, 23
<i>Oxaliplatin SUN (ZF)</i>	22, 23

P

PACLITAXEL.....	19
<i>Paclitaxel Actavis (TA)</i>	19, 20
<i>Paclitaxel Ebewe (SZ)</i>	19, 20
<i>Paclitaxel Kabi (PK)</i>	19, 20
<i>Paclitaxel Pfizer (PF)</i>	19, 20

PALONOSETRON	9
PEMETREXED DISODIUM	11
<i>Pfizer Australia Pty Ltd (PF)</i>	9, 11, 12, 14, 21, 22
<i>Pharmorubicin Solution (PF)</i>	21
<i>Phenasen (PL)</i>	25
<i>Plaxel (WQ)</i>	19, 20

R

RALTITREXED	12
RITUXIMAB.....	24, 25
<i>Roferon-A (RO)</i>	26

T

<i>Taxol (BQ)</i>	20
<i>Taxotere (SW)</i>	15, 16, 17, 18, 19
<i>Tecan (WQ)</i>	25, 26
<i>Tomudex (HH)</i>	12
TOPOTECAN HYDROCHLORIDE	26
TROPISETRON HYDROCHLORIDE.....	9

U

<i>Uromitexan (BX)</i>	28
------------------------------	----

V

VINBLASTINE SULFATE	14
VINCISTINE SULFATE	14
VINORELBINE	14
<i>Vinorelbine Ebewe (SZ)</i>	14
<i>Vinorelbine Kabi (PK)</i>	14

W

<i>Winthrop Oxaliplatin (WA)</i>	23
--	----

X

<i>Xalox (WQ)</i>	22, 23
-------------------------	--------

Z

<i>Zavedos Solution (PF)</i>	21
<i>Zofran (GK)</i>	9
<i>Zofran syrup 50 mL (GK)</i>	8
<i>Zofran Zydis (GK)</i>	8