

Pain (Adjuvants)	
Carbamazepine (Generic Tegretol)	\$
Desipramine	\$
Dexamethasone	\$\$
Gabapentin (Generic Neurontin)	\$\$\$\$
Mexiletine (Generic Mexitil)	\$\$\$
Nortriptyline	\$
Valproic Acid (Generic Depakene)	\$\$

Reflux (GERD)	
Famotidine (Generic Pepcid)	\$\$
Nizatidine (Generic Axid)	\$\$
Ranitidine	\$
Rabeprazole D.R. (Gen. Aciphex)	\$\$\$
Pantoprazole D.R. (Gen Protonix)	\$\$\$
Esomeprazole D.R. (Gen. Nexium)	\$\$\$\$
Omeprazole D.R. (Prilosec OTC)	\$\$
Lansoprazole D.R. (Generic Prevacid)	\$\$\$

Secretions (Excessive)	
Atropine Inj. or SL 0.4mg/ml	\$\$\$
Transderm Scope Patches	\$\$\$\$\$

Seizures	
Phenobarbital	\$
Carbamazepine (Generic Tegretol)	\$\$
Diazepam	\$
Phenytoin Sodium Ext (Gen Dilantin)	\$\$
Clonazepam (Gen Klonopin)	\$\$\$
Primidone (Generic Mysoline)	\$\$\$
Carbamazepine ER (Gen Tegretol XR)	\$\$\$\$\$
Valproic Acid (Generic Depakene)	\$\$\$\$
Ethosuximide (Generic Zarontin)	\$\$\$\$\$
Tiagabine (Generic Gabitril)	\$\$\$\$\$
Gabapentin (Generic Neurontin)	\$\$\$\$\$
Oxcarbazepine (Generic Trileptal)	\$\$\$\$\$
Divalproex D.R. (Gen Depakote ER)	\$\$\$\$\$
Levetiracetam (Generic Keppra)	\$\$\$\$\$
Lamotrigine (Generic Lamictal)	\$\$\$\$\$
Zonisamide (Generic Zonegran)	\$\$\$\$\$
Diazepam Rectal Gel (Valium)	\$\$\$\$\$

Thrush	
Nystatin Suspension	\$\$\$
Fluconazole (Diflucan)	\$\$\$\$\$

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Urinary Incontinence	
Oxybutynin (Generic)	\$\$
Oxybutynin ER (Ditropan XL)	\$\$\$\$
Oxybutynin Transderm (Oxytrol)	\$\$\$\$
Tolterodine ER (Detrol LA)	\$\$\$\$
Tolterodine (Detrol)	\$\$\$

Wound Management	
Bacitracin-Polymyxin	\$
Collagenase (Santyl)	\$\$\$\$
Papain-Urea (Accuzyme)	\$\$\$\$
Bacitracin-Neomy-Polymyxin	\$
Bacitracin Zinc	\$
Mupirocin (Bactroban)	\$\$\$\$
Trypsin, Balsam (Granulex)	\$\$
Papain, urea, chlorophyl (Panafil)	\$\$\$\$\$
Becaplermin (Regranex)	\$\$\$\$\$

*Hospice is responsible for paying for medication deemed appropriate by the Hospice Interdisciplinary Team (IDT)
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Hospice Admission Criteria

1. Diagnosed with a terminal illness
2. Has a life expectancy of six months or less, as determined by the attending physician AND the hospice interdisciplinary team
3. Is seeking palliative (pain & symptom relief) rather than curative treatment.
4. Admission to hospice services is approved by the attending physician & Hospice medical director
5. The patient, family, and attending physician understand that artificial, life-prolonging procedures are not consistent with hospice care
6. The patient IS NOT required to be homebound.
7. Lives in the hospice service area.

Narcotic Equivalents *

Approximate Equi-analgesic Doses:

Special Note

[IV; PO]

codeine

[120 mg; 200 mg]

fentanyl

[0.1 mg; n/a]

hydrocodone

[n/a; 30 mg]

hydromorphone

[1.3-1.5 mg; 7.5 mg]

levorphanol

[n/a; 4 mg]

meperidine

[75 mg; 300 mg]

methadone

[10 mg; 10-20 mg]

morphine

[10 mg; 30-60 mg]

oxycodone

[n/a; 15-30 mg]

oxymorphone

[1 mg; n/a]

pentazocine

[30 mg; 100 mg]

*source (e-Pocrates)

Compliments of
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IN-SIGHT HOSPICE DRUG FORMULARY & Cost Index

COMMUNITY HOSPICES OF AMERICA is pleased to provide our IN-SIGHT Pain Management & Palliative Care Formulary with Cost Index. The IN-SIGHT formulary is designed to assist practitioners in selecting appropriate and cost-effective drugs for their COMMUNITY HOSPICES OF AMERICA patients. The drugs on this formulary have been reviewed by the pharmacy department and found appropriate for formulary inclusion. Comments and suggestions from practicing physicians have also been incorporated to ensure that the formulary is reflective of current medical practice. Items highlighted in GREEN are CHA preferred products. Items that are RED are CHA's NON-preferred. Items in Blue are alternates.

Cost Indexes are provided to assist the practitioners in understanding the costs of the medications they prescribe for hospice patients. Hospice is reimbursed by Medicare/Medicaid at a rate of \$100+ per day. ALL CARE (meds, DME, nursing, CNA, MSW, pastoral care, physician consults, therapies, bereavement, etc) must be achieved from that \$100+ per day. It is imperative that CHA contain our costs, but never compromise quality of care. Thank you for using this tool to assist us.

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Anorexia-Cachexia-Wt. Loss	Cost/Day
Nortriptyline	\$
Cyproheptadine	\$
Dexamethasone	\$\$
Dronabinol (Marinol)	\$\$\$\$\$\$\$\$
Megestrol Acetate (Megestrol)	\$\$\$\$\$\$\$\$
Metoclopramide (Reglan)	\$
Prednisone	\$
Mirtazepine (Generic)(Remeron)	\$\$\$
Mirtazepine (Remeron Sol-Tab)	\$\$\$
Oxandrolone (Oxandrin)	\$\$\$\$\$\$\$

Anxiety/Restlessness	
Alprazolam (Generic Xanax)	\$\$
Bupirone (Generic Buspar)	\$\$\$\$
Chlorpromazine	\$
Diazepam	\$
Haloperidol	\$
Lorazepam	\$\$
Oxazepam (Generic Serax)	\$\$\$
ABH Suppositories	\$\$\$

Agitation Associated w Dementia	
Antipsychotics	
Risperidone (Risperdal)	\$\$\$\$\$\$
Risperidone M-Tab	\$\$\$\$\$\$\$
Olanzapine (Zyprexa)	\$\$\$\$\$\$\$
Olanzapine (Zyprexa Zydis)	\$\$\$\$\$\$\$
Haloperidol	\$
Molindone (Moban)	\$\$\$\$
Quetiapine (Seroquel)	\$\$\$\$\$\$
Ziprasidone (Geodon)	\$\$\$\$\$\$\$
Aripiprazole (Abilify)	\$\$\$\$\$\$\$

Asthenia (Fatigue & Weakness)	
Dexamethasone	\$\$
Methylphenidate (Generic Ritalin)	\$
Pemoline (Generic Cylert)	\$\$\$
Prednisone	\$

COPD	
DuoNeb (Albuterol & Ipratropium)	\$\$\$\$\$\$\$
Albuterol Sol. 5ml/ml (0.5ml)	
Ipratropium Premix 2.5ml	\$\$\$\$

Bowel Obstruction (Complete)	Cost/Day
Glycopyrrolate (Robinul)	\$\$\$\$
Hyoscyamine (Levsin, Anaspaz)	\$\$
Octreotide (Sandostatin)	\$\$\$\$\$\$\$\$

Constipation	
Bisacodyl (Generic Dulcolax)	\$
Docusate Sodium	\$
Docusate Calcium	\$
Lactulose	\$\$\$
Magnesium Hydroxide	\$
Metoclopramide (Generic Reglan)	\$
Senna	\$
Senna/Docusate	\$\$
Sorbitol 70%	\$\$\$

Cough	
Benzonatate (Generic Tessalon)	\$
Dextromethorphan	\$
Hydrocodone	\$
Codeine	\$\$

Delirium	
Chlorpromazine	\$
Haloperidol	\$
Lorazepam ONLY for intentional sedatic	\$\$\$
Midazolam ONLY for intentional sedatic	\$\$\$
Olanzapine (Zyprexa)	\$\$\$\$\$\$\$

Depression (Antidepressants)	
Bupropion (Wellbutrin)	\$\$\$\$
Desipramine	\$\$
Dextroamphetamine (Dexedrine)	\$\$\$\$
Methylphenidate (Ritalin)	\$\$
Mirtazepine (Generic) (Remeron)	\$\$\$\$
Nortriptyline	\$\$
Sertraline (Zoloft)	\$\$\$\$
Venlafaxine XR (Effexor XR)	\$\$\$\$\$

Symptom/Condition
Preferred
Alternate
NON-Preferred

Diarrhea	Cost/Day
Bismuth Subsalicylate	\$
Kaolin-Pectin	\$
Loperamide (Generic Imodium)	\$\$
Diphenoxylate/Atropine (Lomotil)	\$\$
Polycarbophil	\$
Psyllium	\$

Dyspnea (Also consider anxiolytics)	
Albuterol (Generic)	\$\$
Albuterol/Ipratropium (DuoNeb)	\$\$\$\$\$\$
Dexamethasone	\$\$
Diazepam (Generic Valium)	\$
Ipratropium (Generic Atrovent)	\$\$
Morphine	\$\$
Oxygen	\$\$\$

Itching	
Diphenhydramine	\$
Cyproheptadine	\$
Hydroxyzine (Generic Vistaril)	\$
Loratidine OTC (Claritin)	\$\$\$

Insomnia	
Lorazepam	\$
Temazepam (Generic Restoril)	\$\$
Triazolam (Generic Halcion)	\$\$
Trazodone (Generic Desyrel)	\$
Zolpidem (Ambien)	\$\$\$\$\$
Zalepion (Sonata)	\$\$\$\$\$

Nausea/Vomiting	
Chlorpromazine	\$
Dexamethasone	\$\$
D-M-D Suppositories	\$\$\$
Haloperidol	\$
Lansoprazole (Prevacid)	\$\$\$\$
Meclizine (Generic Antivert)	\$
Metoclopramide (Generic Reglan)	\$
Ondansteron (Zofran)	35\$\$\$\$\$
Prochlorperazine (Gen. Compazir)	\$\$\$
Promethazine	\$\$
Ranitidine (Generic Zantac)	\$
Granisetron (Kytrel)	50\$\$\$\$\$
Dolasetron (Anzemet)	65\$\$\$\$\$

Pain (Opiods)	Cost/Day
Codeine	\$\$\$\$
Hydromorphone (Generic Dilaudid)	\$\$\$
Methadone	\$
Morphine IR (Generic)	\$\$\$
Morphine ER (Generic)	\$\$\$\$
Oxycodone IR (Generic)	\$\$\$
Oxycodone ER (Generic)	\$\$\$\$\$
Tramadol HCl (Generic Ultram))	\$\$\$\$\$
Transdermal Fentanyl (Patch)(Duragesic)	\$\$\$\$\$\$\$
Tansmucosal Fentanyl (Actiq)	\$\$\$\$\$\$\$
Morphine SR 24 hr (Kadian)	\$\$\$\$\$
Morphine SR 24hr (Avinza)	\$\$\$\$\$
Hydrocodone/APAP 5/500	\$
Oxycodone/APAP (Generic Percocet)	\$\$\$
Hydrocodone/APAP 7.5/750	\$
Hydrocodone/APAP 7.5/500	\$
Codeine/APAP	\$\$\$
Oxycodone/Aspirin	\$\$\$\$
Hydrocodone/APAP 2.5/500	\$\$
Hydrocodone/APAP 10/650	\$\$
Hydrocodone/Ibuprofen (Vicoprofen)	\$\$\$\$\$

Pain (Non Opiod)	
Acetaminophen	\$
Aspirin	\$
Celecoxib (Celebrex)	\$\$\$\$\$
Diclofenac (Generic Voltaren)	\$\$\$\$\$
Diflunisal (Generic Dolobid)	\$\$\$\$
Etodolac (Generic Lodine)	\$\$\$\$\$
Ibuprofen (Generic Motrin)	\$\$
Ketoprofen (Generic Orudis)	\$\$\$\$
Magnesium Salicylate	\$\$
Meloxicam (Generic Mobic)	\$\$\$\$
Nabumetone (Generic Relafen)	\$\$\$\$
Naproxen (Ganeric Naprosyn)	\$\$\$\$
Oxaprozoin (Generic Daypro)	\$\$\$\$
Piroxicam (Generic Feldene)	\$\$\$\$
Rofecoxib (Vioxx)	\$\$\$\$\$
Salsalate (Generic Disalcid)	\$\$
Sulindac (Generic Clinoril)	\$\$\$\$
Choline Magnesium Trisalicylate	\$\$\$
Tramadol HCL (Generic Ultram)	\$\$\$\$\$
Tramadol Hcl w APAP (Generic Ultrace)	\$\$\$\$\$
Valdecoxib (Bextra)	\$\$\$\$\$