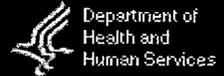




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Additions/Deletions for Prescription and OTC Drug Product Lists

This document is not a cumulative list of approved Prescription and OTC Drug Products but a list of the new additions and new deletions to the Prescription and OTC Drug Product Lists for a specific month. This information must be used in conjunction with the most current Cumulative Supplement and Orange Book. Additions and deletions are identified in this document by the symbols >ADD> and >DLT>, respectively. Products that have never been marketed, have been discontinued from marketing or that have had their approvals withdrawn for other than safety or efficacy reasons, will be flagged in this Cumulative Supplement with the "@" symbol to designate their non-marketed status. All products having a "@" symbol in the 12th Cumulative Supplement of the 26th Edition List will then be added to the "Discontinued Drug Product List" appearing in the 27th Edition.

- >ADD> or >A> indicates **Addition**
- >DLT> or >D> indicates **Deletion**
- @ indicates **drugs that have been discontinued from marketing or that have had their approvals withdrawn for other than safety or efficacy reasons**

2006	January	February	March	April
	May	June	July	August
	September	October	November	December
2005	January	February	March	April
	May	June	July	August
	September	October	November	December
2004	January	February	March	April
	May	June	July	August
	September	October	November	December
2003	January	February	March	April
	May	June	July	August



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Prescription and Over-the-Counter Drug Product List 25th Edition

Cumulative Supplement Number 6: June 2006

[Prescription - OTC]

NOTE: The format for the Monthly Additions/Deletions Drug Product List has changed as of the July Cumulative Supplement Edition to mirror the CS. Refer to the CS Preface section 1.5 CUMULATIVE SUPPLEMENT LEGEND.

ADDITIONS/DELETIONS FOR PRESCRIPTION DRUG

ACETAMINOPHEN; PROPOXYPHENE NAPSYLATE TABLET; ORAL

PROPOXYPHENE NAPSYLATE AND ACETAMINOPHEN

>A>	AB	ACTAVIS ELIZABETH	650MG;100MG	N7091
>D>	AB	PUREPAC PHARM	650MG;100MG	N7091

ACYCLOVIR

CAPSULE; ORAL

ACYCLOVIR

>A>	AB	ACTAVIS ELIZABETH	200MG	N7490
>D>	AB	PUREPAC PHARM	200MG	N7490

TABLET; ORAL

ACYCLOVIR

>A>	AB	ACTAVIS ELIZABETH	400MG	N7487
>A>	AB		800MG	N7487
>D>	AB	PUREPAC PHARM	400MG	N7487
>D>	AB		800MG	N7487

ACYCLOVIR SODIUM

INJECTABLE; INJECTION

ACYCLOVIR SODIUM

>D>	AP	HOSPIRA	EQ 500MG BASE/VIAL	N7466
>A>		@	EQ 500MG BASE/VIAL	N7466
>D>	AP		EQ 1GM BASE/VIAL	N7466
>A>		@	EQ 1GM BASE/VIAL	N7466

ALPRAZOLAM

>D>	AT	ALPHARMA US	100,000 UNITS/GM;0.1%	N6273
		OXALIPLATIN		
		INJECTABLE; IV (INFUSION)		
		ELOXATIN		
>D>	+	SANOFI AVENTIS US	50MG/VIAL	N2149
>A>	@		50MG/VIAL	N2149
>D>	+		100MG/VIAL	N2149
>A>	@		100MG/VIAL	N2149
		OXAPROZIN		
		TABLET; ORAL		
		OXAPROZIN		
>A>	AB	ACTAVIS ELIZABETH	600MG	N7584
>D>	AB	PUREPAC PHARM	600MG	N7584
		OXAZEPAM		
		CAPSULE; ORAL		
		OXAZEPAM		
>A>	AB	ACTAVIS ELIZABETH	10MG	N7225
>A>	AB		15MG	N7225
>A>	AB		30MG	N7225
>D>	AB	PUREPAC PHARM	10MG	N7225
>D>	AB		15MG	N7225
>D>	AB		30MG	N7225
		OXYMORPHONE HYDROCHLORIDE		
>A>		TABLET, EXTENDED RELEASE; ORAL		
>A>		OPANA ER		
>A>		ENDO PHARMS	5MG	N2161
>A>			10MG	N2161
>A>			20MG	N2161
>A>	+		40MG	N2161
>A>		TABLET; ORAL		
>A>		OPANA		
>A>		ENDO PHARMS	5MG	N2161
>A>	+		10MG	N2161
		PENICILLAMINE		
		CAPSULE; ORAL		
		CUPRIMINE		
>D>		MERCK	125MG	N1985
>A>	@		125MG	N1985
		PENTOXIFYLLINE		
		TABLET, EXTENDED RELEASE; ORAL		
		PENTOXIFYLLINE		
>A>	AB	ACTAVIS ELIZABETH	400MG	N7487
>D>	AB	PUREPAC PHARM	400MG	N7487
		PERMETHRIN		
		CREAM; TOPICAL		
		PERMETHRIN		
>A>	AB	ACTAVIS MID	5%	N7480
>D>	AB	ALPHARMA US	5%	N7480
		PHENTERMINE HYDROCHLORIDE		
		TABLET; ORAL		
		PHENTERMINE HYDROCHLORIDE		
>A>	AA	ACTAVIS ELIZABETH	37.5MG	N4027
>D>	AA	PUREPAC PHARM	37.5MG	N4027