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The impact of a health technology improvement program on medication errors in three large, teaching hospitals in London Ontario

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A thesis submitted in partial fulfillment of the requirements for the Master of Science degree in Epidemiology and Biostatistics

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Abstract

Medication errors and discrepancies occur frequently at transitions of care in inpatient settings and can lead to adverse drug events. This retrospective cohort study involving older adults has a pre-post design and is set in London, Ontario. This study evaluates the impact of a healthcare technology program called HUGO on the proportion of patient hospitalizations in which an antipsychotic, benzodiazepine or gastric acid suppressant medication was potentially continued inappropriately (i.e. continued after discharge with no medical indication for continued use). After HUGO's implementation, the proportion of hospitalizations where a potentially inappropriate antipsychotic, benzodiazepine, or gastric acid suppressant medication was filled post-discharge decreased abruptly by 7.0% ($p < 0.0001$), and there was a significant ($p = 0.0001$) decrease in the potentially inappropriate continuation of these medications over time. Had HUGO not been implemented, the pre-HUGO trend suggests that potentially inappropriate continuation of these medications may have continued to increase.

Keywords: medication reconciliation, electronic medication reconciliation, medication errors, patient safety

Summary for Lay Audience

During a patients' hospital stay medication errors can occur such as the wrong dose of a medication being recorded for a patient, or a medication being mistakenly discontinued or continued after hospital discharge. This can cause harm to patients, and sometimes such adverse drug events cause a patient to present to an emergency room and possibly be admitted again to hospital. One way to prevent medication errors from occurring is healthcare providers practicing medication reconciliation, where a patients' medications are carefully reviewed by a healthcare provider for errors at the time of hospital discharge. Some hospitals have now adopted technology into their healthcare practices to improve patient safety, including moving to an electronic format of medication reconciliation. Hospitals in London, Ontario adopted such a healthcare technology program referred to as HUGO. We used health administrative databases to assess whether adopting HUGO was associated with fewer patients being continued on antipsychotics, benzodiazepines, and gastric acid suppressant medications after hospital discharge. We found that after HUGO was implemented there was a significant decrease in the number of patients being continued on these medications after hospital discharge. We suggest that implementation of HUGO in London's hospitals has had a positive impact, and that other hospitals could look at implementing a program similar to HUGO.

Acknowledgements

I would first like to thank my supervisors Dr. Blayne Welk and Dr. Amit Garg for their mentorship and support throughout my Master's degree. Their guidance and constant encouragement were critical to the completion of this thesis and towards my career aspirations. I would also like to thank my supervisory committee member, Dr. Kelly Anderson, for helpful feedback and expertise when completing my thesis and systematic review.

I would like to extend my appreciation to the staff at ICES Western—namely Ms. Jennifer Reid, Dr. Salimah Shariff, and Mr. Eric McArthur. Ms. Reid provided support on the analytics side of this thesis, and was an invaluable resource throughout my thesis. Dr. Shariff and Mr. McArthur provided much appreciated methodological and analytic expertise respectively. I would also like to thank Dr. Andrew Appleton, a general internal medicine physician at LHSC, for his clinical expertise and input.

Finally, I would like to extend my appreciation to my friends and family for all their encouragement and support throughout my Master's degree.

Co-authorship statement

Chapter 3: I'd like to acknowledge the work of Ms. Areej Hazam, Dr. Kelly Anderson, and Dr. Blayne Welk on the systematic review portion of the thesis. Ms. Areej Hazam acted as a secondary reviewer for data extraction and risk of bias assessment of the studies included in the review. Dr. Kelly Anderson provided valuable insights and edits of the systematic review and Dr. Blayne Welk acted as a secondary reviewer for primary screening as well as offered valuable insights and edits of the review.

Chapter 4: I'd like to acknowledge the work of Ms. Jennifer Reid in ensuring the accuracy of the methods section of my thesis and for her description of the CERNER database which is included in the thesis.

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List of Abbreviations

ADE= adverse drug event

ARR= absolute risk reduction

BPMH= best possible medication history

CHIP= clinical health informatics program

CI=confidence interval

CIHI= Canadian Institute for Health Information

COPD= Ontario chronic obstructive pulmonary disease dataset *also* COPD= chronic obstructive pulmonary disease

CPDB= corporate provider database

CPOE= computerized physician order entry

DAD= discharge abstract database

DIN= druglist file *also* DIN=drug identification number

ED= emergency department

e-MAR= electronic medical administration record

GI= gastrointestinal

HPharm= high level pharmacist record

HPR=high level physician record

HUGO= healthcare undergoing optimization

HYPHER= Ontario hypertension dataset

ICD-10= international classification of disease, tenth revision

ICES= Institute of Clinical and Evaluative Sciences

ICU= intensive care unit

IKN= ICES key number

INST=institution information system

INSTNUM= institution number

IPDB= ICES physician database

IQR= interquartile range

IT= information technology

LHSC= London health sciences centre

LOS= length of stay

LPharm= low level pharmacist record

LPR= low level physician record

MH= mental health

MoHLTC= Ministry of Health and Long Term Care

MPharm= mid level pharmacist record

MPR= mid level physician record

NACRS= national ambulatory care reporting system

NNT= number needed to treat

NPV= negative predictive value

ODD= Ontario diabetes dataset

OHIP= Ontario health insurance plan

OHIP-dx= OHIP diagnoses code

OPHRDC= Ontario Physician Human Resource Data Centre

OR= odds ratio

ORAD= Ontario rheumatoid arthritis dataset

PADE= potential adverse drug event

PPV= positive predictive value

PRISMA= preferred reporting items for systematic review and meta-analyses

Q-Q plot= quantile-quantile plot

RCT= randomised controlled trial

ROB= risk of bias

ROP= required operational practice

RPDB= registered persons database

RR= risk ratio

SD= standard deviation

SDS= same day surgery

SJHC= St. Joseph's healthcare

Chapter 1

1-Introduction

1.1 The problem-an overview

Medication errors and discrepancies occur frequently at transitions of care in inpatient settings and can lead to adverse drug events (ADE). A systematic review by Alquenae et al. found that for adult patients the median rate of medication errors and discrepancies following hospital discharge was 53% (IQR: 33-60.5) and 50% (IQR: 39-76) respectively.¹ Medication errors come in many forms and can include the inappropriate continuation of medications after hospital discharge. The impact of medication errors and discrepancies can be significant, contributing to hospital readmissions, Emergency department (ED) visits, undue harm to patients, and increased healthcare costs.²⁻⁸ One solution to prevent medication errors, discrepancies and ADEs is medication reconciliation, which involves maintaining an accurate list of all medications taken by a patient in a systematic and comprehensive manner and communicating this information consistently across transitions of care.⁹⁻¹² Traditionally medication reconciliation programs have been delivered in a paper-based format, however, recently there has been a movement towards electronic-based medication reconciliation programs and enhanced medication reconciliation programs that incorporate additional components that support medication reconciliation (e.g. having a secondary reviewer for medication lists, faxing discharge medication lists directly to outpatient pharmacies). London health sciences centre (LHSC) and St. Joseph's Health Care (SJHC) in London, Ontario implemented an electronic medication reconciliation program as part of HUGO (Healthcare Under Going Optimization); while media reports suggest that HUGO has resulted in a decrease in medication errors no formal evaluation of the program has been conducted.¹³

1.2 Thesis objectives

We first conducted a systematic review of the existing literature on the impact of electronic and enhanced medication reconciliation at hospital discharge on medication errors, discrepancies, and ADEs. We specifically sought studies that compared the efficacy of basic medication reconciliation programs to computer-based approaches or enhanced medication reconciliation programs. We then conducted a retrospective cohort study with a pre-post design

of older adults hospitalized at LHSC and SJHC between 2011 and 2019, who were prescribed an antipsychotic, benzodiazepine, or gastric acid suppressant medication during their hospital stay. We conducted this study to evaluate the impact of HUGO-a healthcare technology program implemented at LHSC and SJHC in 2014-to improve patient safety. Specifically, we compared the frequency of potentially inappropriate continuation of antipsychotics, benzodiazepines and gastric acid suppressant medications pre- versus post implementation of HUGO.

1.3 Thesis overview

Chapter 2 of this thesis provides a background on medication errors, discrepancies, and ADE, medication reconciliation programs, and on the medication classes mentioned above. Chapter 3 presents the findings of our systematic review on the effectiveness of electronic and enhanced medication reconciliation. Chapter 4 details the methods used in our study of the impact of HUGO and the results of this study are described in chapter 5. An overall discussion of the findings of this thesis, their implications, strengths and limitations of our work and directions for future research are contained in chapter 6.

Chapter 2

2 Background

2.1 Chapter Overview

In this chapter medication errors, medication discrepancies and adverse drug events (ADE) will be defined, and the threat these pose to patient safety will be explored. Medications which are of particular interest for assessing and reducing medication errors will be described, including how these medications have been used in previous studies for this purpose. Medication reconciliation will be explored as a method for reducing medication errors, medication discrepancies, and ADEs. This exploration will include describing the history of and current state of medication reconciliation in Canada, and methods of medication reconciliation. Our current knowledge on the impact of basic medication reconciliation on medication errors, discrepancies, and ADEs as well as on clinical outcomes will be summarized. Finally, the medication reconciliation program implemented at London Health Sciences Centre (LHSC) and St. Joseph's Health Care (SJHC) in London, Ontario will be described.

2.2 Medications errors, discrepancies and ADE, and the scope of the problem

In the broadest definition, **medication errors** are 'a failure in the treatment process that leads to, or has the potential to lead to, harm to the patient'.¹⁴ **Medication errors** can occur at any point along the process of a medication being prescribed to it being dispensed, although errors commonly occur at the ordering or prescribing stage.¹⁴ At this stage common errors include the wrong medication, route, dose or frequency of a medication being written by a clinician; these account for 50% of all medication errors.¹⁴ **Medication errors** frequently arise at transitions of care, which occurs when patients move across or out of sites of care within the health system. These sites are hot spots for **medication errors** and **discrepancies** as they provide opportunities for miscommunication and simple transcription errors which can lead to unintentional changes in a patients' medication regimen.^{6,15-21} Because of this, the common method for detecting **medication errors** is a deviation between two medication lists for a patient, such as a deviation between the list of medications reported for a patient at hospital admission and that reported at hospital discharge. Although some changes are intentional, deviations can include inappropriate continuation or discontinuation of medications after hospital

discharge, errors of duplication, and incorrect dosing.⁶ This study definition for **medication errors** allows for the term **medication discrepancy** to sometimes be used interchangeably with the term medication error to describe a similar phenomenon. A common difference between a **medication discrepancy** and a **medication error** in the literature is that a **medication discrepancy** refers to a difference between two medications lists (typically before and after transitions of care) whereas the definition for **medication error** additionally requires the absence of a documented reason for the change in medication.^{22,23} Exceptions to these classifications exist, which makes comparing studies examining medication errors and discrepancies challenging. Additionally, the terms **discharge summary** or **medication order discrepancies** are commonly used interchangeably with the term **medication discrepancy** and describe a similar phenomenon. An **ADE** describes when exposure to a medication results in patient harm.²⁴ Of interest here are **preventable and potential ADEs**. **Preventable ADEs** occur when a patient has a **medication error** which causes harm, whereas **potential ADEs** occur when a medication error exists but does not result in harm to the patient either due to the medication error being caught and corrected or by luck.²⁴

Estimating the frequency of medication errors and discrepancies across hospital settings is challenging due to the large variation in observation methods, study definitions and standards used in studies investigating medication errors and discrepancies. However, a systematic review by Alquenae et al. found that for adult patients the median proportion of medication errors and discrepancies following hospital discharge was 53% (IQR: 33.0-60.5) and 50% (IQR: 39.0-76.0) respectively.¹ In the case of ADEs, it has been found that about 19% of patients discharged from an acute care facility experience an adverse event (not limited to but includes adverse drug events) within three weeks of hospital discharge.¹⁹ Of these adverse events approximately 66% are ADEs and 62% are preventable.¹⁹

The impact of medication errors, discrepancies and ADEs can be significant for patients, their families, the healthcare system and society. For patients and their families these events may be associated with loss of life, prolonged disability, temporary harm, complicated recovery, loss of income, and confusion about a treatment plan.²⁵ In the United States medication errors and their consequences are anonymously reported through the MEDMARX reporting system.²⁶ Hospitals pay to participate in MEDMARX, and this system allows hospitals to report, track and

share medication error data in a standardized format and to receive regular updates on medication error reports.²⁶ A study by Pham et al. abstracted and analyzed records for emergency departments from the MEDMARX system over a four year period (2000-2004).²⁶ Among other objectives, this study examined consequences of the reported medication errors, finding that 2.6% of errors resulted in harm to the patient.²⁶ In 2% of the reported medication errors the error contributed to or resulted in temporary harm to patients which required intervention, while 0.4% of medication errors contributed or resulted in temporary harm which required initial or prolonged patient hospitalization.²⁶ In 0.06% of the reported medication errors the error contributed to, or resulted in, permanent patient harm, and 0.06% of medication errors required intervention necessary to sustain life which includes cardiovascular and respiratory support such as CPR, defibrillation, and intubation.²⁶ In 0.02% of reported medication errors the error contributed to, or resulted in, the death of a patient.²⁶

The healthcare system experiences a financial expense associated with avoidable readmissions and emergency department visits, decreased efficiency due to longer recovery times, and decreased access to healthcare services for patients on account of the resources occupied by ADEs.²⁵ Various studies have investigated the frequency of ADEs leading to emergency department visits and hospital admissions: ADEs account for 8.3% to 16.2% of emergency department visits and up to 7% of hospital admissions.²⁻⁶ It should be noted that these were all-cause ADEs, not purely potential and preventable ADEs.

As a result of ADEs society faces loss of productivity, absenteeism in the workplace, increased healthcare costs (and hence increased taxes), and a loss of confidence in the healthcare system.²⁵ Absenteeism in the workplace can result in a loss of taxable revenue and may incur disability expenses for the government. Studies have found that the attributable cost per ADE (converted to 2008 Canadian dollars; includes but is not limited to ADEs that are a consequence of medication errors) to be estimated at \$3034 to \$4352.⁷ Extrapolating these costs, the national burden associated with in hospital ADEs has been estimated to be \$2.2 to \$5.6 billion (2008 Canadian dollars) annually.⁷ For these reasons finding a method for reducing medication errors, discrepancies and ADEs is of significant importance.

2.3 Priority Medications

As previously mentioned, one type of medication error is the inappropriate continuation of medications after hospital discharge. Medications that are at risk for inappropriate continuation are those that are primarily intended for acute use while in hospital, which are intended to treat symptoms and conditions during a hospital stay but should be discontinued at discharge. When chronic use of these medications is associated with negative side effects and health outcomes, the inappropriate continuation of medications is a great threat to patient safety. We selected three medication classes that fall into this category of medications generally intended for acute use in hospital: antipsychotics, benzodiazepines, and gastric acid suppressant medications. Antipsychotics such as aripiprazole (Abilify), clozapine (Clozaril), olanzapine (Zyprexa), quetiapine (Seroqual) and risperidone (Risperdal) are used to treat a broad range of symptoms and conditions. In the elderly population antipsychotics are often used to manage agitation and hospital-induced delirium.²⁷ However, chronic use of this class is associated with anticholinergic effects, tardive dyskinesia, falls, arrhythmias, and cognitive decline making medications within this class generally restricted to acute use.²⁷ Benzodiazepines such as alprazolam (Xanax), clonazepam (Klonopin), diazepam (Valium), and lorazepam (Ativan), are sedatives commonly used to treat temporary sleep disturbances.²⁸ However, the long-term use of these medications may cause cognitive impairment, sedation, falls and addiction making them not generally intended for chronic use.²⁸ Gastric acid suppression medications are commonly used to treat gastrointestinal symptoms observed during hospitalization, however, the long-term use of this class of medication is associated with increased risk of community-acquired pneumonia and enteric infection such as *C. difficile*.²⁹ This includes H2 antagonists (such as famotidine, cimetidine) and proton pump inhibitors (such as omeprazole, pantoprazole, and esomeprazole).

These three medication classes have been used previously to study the frequency of inappropriate prescriptions in a pre-post study by Scales et al.³⁰ In this paper the researchers recognized that patients discharged from acute care hospitals might be at an increased risk of unintentionally continuing medications prescribed to prevent or treat complications associated with acute illness, but which were no longer indicated after hospital discharge (i.e. inappropriate prescriptions).³⁰ The aim of the study by Scales et al. was to evaluate the frequency of and risk

factors for unintentional medication continuation after hospitalization.³⁰ The study by Scales et al. was conducted as a population-based cohort study, and the hospitalized cohort included all individuals aged ≥ 66 years who were discharged alive from an acute care hospital during the study period.³⁰ The researchers subdivided the hospitalized cohort into four medication subgroups: antipsychotic medications, benzodiazepines, gastric acid suppressants, and inhaled bronchodilators and inhaled steroids.³⁰ The researchers also excluded patients where the use of these medications after discharge appeared warranted, including those who received these medications in the year prior to hospitalization and those whose admission was associated with a clear indication for receiving the medication or for continuing the medication post-discharge.³⁰ Within each cohort the dispensing of the associated medication in an outpatient pharmacy within 7 (primary analysis) and 30 days (secondary analysis) after discharge was assessed.³⁰ The following subgroups were restricted to in order to identify risk factors for continuing a medication prescribed during hospitalization after hospital discharge: patients with emergency admission, patients with ICU admission during hospitalization, and patients with length of stay (los) ≥ 7 days.³⁰

The study found that 1.4% of patients continued antipsychotics, 3.3% of patients continued benzodiazepines, 6.1% of patients continued gastric acid suppressants, and 2.2% of patients continued respiratory inhalers as identified by filling discharge prescription within 7 days of discharge.³⁰ The 7 day period was chosen to primarily report on as the authors felt this strengthened the association with exposure to hospitalization.³⁰ Risk factors for continuation of meds within 7 days of discharge varied across medication groups, but rates were consistently higher for hospitalizations admitted through the emergency department, older patients, and those with multiple comorbidities.³⁰ The greatest risk factor for inappropriate medication continuation across all medication groups was a hospital los greater than 7 days.³⁰

2.4 Medication Reconciliation

2.4.1 History of medication reconciliation in Canada

Medication reconciliation is one solution to improve communication during transitions of care. It involves maintaining an accurate list of all medications taken by a patient in a systematic

and comprehensive manner and communicating this information consistently across transitions of care.⁹⁻¹² In Canada medication reconciliation is recognized as a patient safety priority and became a required operational practice (ROP) by Accreditation Canada in 2008. Accreditation Canada is a non-for-profit organization which accredits most hospitals in Canada based on their ability to meet a set of ROPs on an annual basis.^{25,31} ROPs are designed to mitigate risk and improve the quality and safety of health services, with mandatory compliance to receive accreditation.²⁵ Since its implementation, the national compliance rate with the Accreditation Canada medication reconciliation ROPs has increased by nearly 15.0%, yet in Canada remains an ROP with some of the lowest compliance amongst all ROPs.²⁵

2.4.2 Methods of medication reconciliation

Medication reconciliation involves three main steps starting at hospital admission with creating and completing a best possible medication history for the patient.³² This history includes all details on the patient's medications, dose, route and frequency and is obtained through patient and family interviews, phoning a patients' outpatient pharmacy and by reviewing other reliable sources of information.³² A patient's best possible medication history serves as a standard to reconcile medications in admission, transfer and discharge orders and to identify/ resolve discrepancies.³² Next changes in medication orders should be communicated to the patient, their family, and to the next provider of care.³² However, these steps can be carried out using different tools or techniques, resulting in medication reconciliation programs that are quite heterogenous across hospitals and healthcare networks. Some hospitals adopt a more simplistic intervention, to be considered basic medication reconciliation, while others incorporate many components to create an enhanced medication reconciliation process. This heterogeneity makes medication reconciliation programs difficult to compare, however, two defining features of medication reconciliation programs are their format and their method of delivery.

Traditionally medication reconciliation programs have been delivered in a paper-based format, including printed medication lists for patients and medication reconciliation checklists.³² However, in alignment with advancements in electronic medical records, there has been a movement towards electronic-based medication reconciliation programs. Electronic medication reconciliation uses information technology to access and integrate patient medication data which

has been stored electronically.³² Electronic medication reconciliation has the advantage of being able to integrate with internal hospital systems (e.g. computerized physician order entry) and external systems (e.g. drug information systems) in a way paper-based medication reconciliation cannot.³² Additionally, electronic medication reconciliation can increase the efficiency of medication reconciliation through its provision of electronic tools to support clinical activities and patient safety.³²

The delivery of medication reconciliation programs also varies widely, and can include pharmacy lead programs, pharmacist-clinician collaborations, and clinician/nurse-based programs. Pharmacy lead programs are quite common and make up a large portion of the body of literature on medication reconciliation programs. In these programs the duties and roles of the pharmacist can vary but may include: medication history taking, confirming a patients' medication history with community healthcare professionals, patient counselling, communication with outpatient provider, medication review and counselling, and reconciling medications at admission and discharge.³³ Clinician/ nurse-based programs are typically more simplistic, for example consisting of reconciling medications and creating a discharge medication list for patients, and sending discharge summaries to primary care providers.^{11,22,23,34} Pharmacist-physician collaborations can be seen to have an added layer of complexity compared to clinician-only programs, additionally including components such as completion of a medication review to identify drug-related problems and inappropriate drug use, creation of systematic medication care plan, medication counselling and discharge medication teaching sessions, follow up patient phone calls, and structured home medication interviews.^{11,35-37}

2.4.3 Impact of medication reconciliation-current knowledge

A comprehensive Cochrane systematic review and meta-analysis on the topic of medication reconciliation was conducted by Redmond et al. with the objective of assessing the effect of medication reconciliation on medication discrepancies, patient-related outcomes and healthcare utilisation in patients receiving medication reconciliation during transitions of care versus those who did not.³⁸ The researchers identified 25 eligible randomised trials, all in hospital settings, with 23 studies provider-oriented (pharmacist mediated), and two focused on electronic reconciliation tools and medical record changes.³⁸

Pooled results from 20 of the included studies comparing medication reconciliation to standard care found that those who received medication reconciliation had an almost 50.0% lower risk of experiencing at least one medication discrepancy compared to standard care [RR=0.53, 95% CI 0.42 to 0.67].³⁸ However, the certainty of the evidence for this outcome was very low due to poor quality of the primary studies, making knowledge regarding the ability of medication reconciliation to reduce discrepancies uncertain.³⁸ The researchers pooled the results of 4 studies to examine the effect of medication reconciliation on the number of reported discrepancies per patient, yielding uncertain findings due to very low certainty of the available evidence [mean difference=-1.18, 95% CI -2.58 to 0.23].³⁸ Additionally, the impact of medication reconciliation on the percentage of medications with a discrepancy or prescription error (yes/no) as compared to standard care was found to be uncertain as the certainty of the evidence was low [RR=0.13, 95% CI 0.01 to 1.29; pooled 2 studies].³⁸ Medication reconciliation was found to have little or no effect on experiencing a preventable ADEs as compared to standard care [RR=0.37, 95% CI 0.09 to 1.57; pooled 3 studies] due to very low certainty of evidence, and an uncertain effect on ADEs [RR=1.09, 95% CI 0.91 to 1.30; pooled 4 studies] due to low certainty of evidence.³⁸ Researchers found conflicting evidence on the effect of medication reconciliation programs on healthcare utilisation. When unplanned rehospitalisation was reported alone there was no significant overall effect detected (Z=1.31, p=0.19) with the pooled results of 5 studies with moderate-certainty evidence, [RR=0.72, 95% CI 0.44 to 1.18; pooled 5 studies].³⁸ It should be noted that there was substantial imprecision in the estimates of the pooled studies, which could contribute to a lack of detected significant overall effect.³⁸ Med rec had an uncertain effect on a composite measure of hospital utilisation (emergency department, rehospitalisation) due to very low-certainty evidence [RR=0.78, 95% 0.50 to 1.22; pooled 4 studies].³⁸

Overall, this points to an uncertain impact of medication reconciliation on decreasing medication errors and ADEs and on clinical outcomes. It should be noted that at least some of this uncertainty stems from the heterogeneity of the interventions and outcome definitions of the studies included in the review, and the low quality of the included studies.

2.5 Medication reconciliation at London Health Sciences Centre and St. Joseph's Healthcare

London Health Sciences Centre (LHSC), situated in London Ontario, is one of Canada's largest acute care teaching hospitals. LHSC is composed of multiple sites including but not limited to: Victoria Hospital, University Hospital, and Children's Hospital. St Joseph's Health Care (SJHC) is also situated in London, and provides specialised ambulatory, psychiatric and rehabilitation care across 3 sites. Among other reasons, LHSC and SJHC adopted the HUGO (Hospital Under Going Optimization) system to address the issue of medication errors and adverse drug events. HUGO is a system which has been implemented in 14 hospital sites across southwestern Ontario, and includes electronic medication reconciliation. With this electronic medication reconciliation physicians are prompted to indicate whether a patient should continue or discontinue a medication every time they interact with a patient. By prompting this reconciliation of medication at every point of interaction, then medication errors and associated adverse drug event should theoretically be reduced. Media reports suggest that there has been a 42.0% reduction in adverse medication errors and events at St. Joseph's and a 34.0% reduction in adverse medication errors at LHSC since HUGO's implementation.¹³ However, no formal evaluation of HUGO has been performed in London since its implementation in 2014. This proposed study will evaluate the effectiveness of the program at reducing discharge medication errors. Given HUGO's software is customizable, evaluating the current effectiveness of the program is important for system optimization. In addition, if it were to be found that the program decreased medication errors then physician compliance with use of the system may increase.

Chapter 3

3-Systematic review

3.1 Chapter Overview

This chapter is a systematic review of studies assessing the impact of electronic and enhanced medication reconciliation (medication reconciliation) programs on medication errors, discrepancies and adverse drug events (ADE). In the primary studies the outcomes of a group of patients who received electronic or enhanced medication reconciliation at the time of hospital discharge were compared to a group of patients who received paper-based/basic medication reconciliation.

3.2 Advanced medication reconciliation: a systematic review of the impact on medication errors and ADEs associated with transitions of care

3.2.1 Background

Transitions of care occur when patients move across or out of sites of care within the health system. These transitions may pose a threat to patient safety, as miscommunication or simple transcription errors can lead to unintentional changes in a patients' medication regimen.^{6,15-21} Although some changes in a patient's medication regimen between hospital admission and discharge are deliberate, other discrepancies are unintentional and can occur due to incomplete or inaccurate information about a patient's current medications or doses.⁶ These medication errors can include inappropriate continuation or discontinuation of medications after hospital discharge, errors of duplication, and incorrect dosing.⁶

Both unintentional continuation and discontinuation of medications after discharge are of death, ER visits, and unplanned hospitalizations.^{30,39} It has been estimated that 19% of patients discharged from the hospital experience an adverse event within three weeks, with 66% of these

being adverse drug events (ADE) and 62% being preventable.⁴⁰ ADE describes harm caused to a patient as a result of a medication, which includes medication errors.⁴⁰ System errors contributed to all of the preventable adverse events, with poor communication between hospital staff and patients or primary care physicians being the most common deficit in the provision of discharge care.⁴⁰

Medication reconciliation is one solution to improve communication during transitions of care. It involves obtaining and maintaining an accurate list of all medications taken by a patient.⁹⁻¹² Multiple methods of medication reconciliation exist, including standardized forms, collaborative programs, and pharmacy-led programs.⁴¹⁻⁴⁶ Recently there has been a movement away from standard paper-based medication reconciliation to electronic medication reconciliation, where electronic tools are used to deliver and support medication reconciliation. These tools may allow health care providers to better reconcile medications and doses.^{32,47} Additionally medication reconciliation programs have evolved to enhanced medication reconciliation, which incorporate multiple components (e.g. multidisciplinary checklists and discharge summaries in addition to basic medication reconciliation processes). Previous systematic reviews have focused on describing the electronic tools and evaluating their usability, user adherence, and satisfaction⁴⁸ or they have focused primarily on medication reconciliation at the time of admission.⁴⁹ Discharge medication reconciliation appears to be the most important intervention to reduce errors at home after a hospital admission.^{21,50} Additionally, previous reviews have not focused on the impact of enhanced medication reconciliation.

Our objective was to conduct a systematic review of the existing literature on the impact of **electronic** and **enhanced medication reconciliation** at hospital discharge on medication errors, discrepancies, and ADE. We specifically sought studies that compared the efficacy of

basic medication reconciliation programs to **electronic or enhanced medication reconciliation** programs.

3.2.2 Methods

3.2.2.1 Search strategy

This review follows PRIMSA reporting guidelines for systematic reviews. We conducted an electronic search of the EMBASE and MEDLINE databases using the Ovid platform and Scopus database with the date range of 1946 (EMBASE, Ovid MEDLINE)/ 1966 (Scopus) to Oct. 9, 2019. We conducted the initial search up to Sept.18, 2018 and then conducted a secondary search up to Oct. 9, 2019 to ensure we had identified any relevant recently published studies. We used a combination of controlled vocabulary and keywords reflecting the following concepts: “Patient transfer”, “Continuity of care”, “Medication errors”, “Inappropriate prescribing”, “Adverse drug events”, and “Medication reconciliation”. Details on the exact search terms and combinations are presented in appendix A. Only peer-reviewed studies in the English language were included, and no restrictions were placed in the year of publication.

3.2.2.2 Study selection

Two independent reviewers (LK, BW) performed title and abstract screening, and one reviewer (LK) performed full-text screening. We included studies that met the following inclusion criteria: (i) the study was conducted in hospital setting; (ii) **electronic medication reconciliation** or **enhanced medication reconciliation** was implemented at hospital discharge; (iii) the study assessed ADEs or medication errors or discrepancies; and (iv) the study design was a randomized controlled trial or quasi-randomized controlled trial or controlled pre-post study or an interrupted time series design with a comparison group (**basic medication**

reconciliation). We defined **basic medication reconciliation** as comparing a patient's medication lists (e.g. home medication history taken at admission compared to a discharge summary) in a paper-based format. **Electronic medication reconciliation** processes were not limited to but must involve reconciling a patient's medication lists that are in an electronic format (e.g. electronic medical record). **Enhanced medication reconciliation** processes must include the components of **basic medication reconciliation** and another intervention designed to enhance patient safety concerning medications (e.g. involving a second practitioner to further verify medication reconciliation accuracy). Studies were excluded from this review if participants were in a long-term care setting, the study was conducted in an intensive care, ambulatory or pediatric setting as the medication reconciliation procedure in these departments may vary greatly from medication reconciliation practices in other departments. Conference proceedings, editorials, review articles, and commentaries were not included as they do not contain all information necessary for data extraction. Where there were discrepancies between the two reviewers, the final decision was made based a consensus process.

3.2.2.3 Data extraction and Risk of Bias (ROB) assessment

Two reviewers (LK, AH) performed data extraction using a standardized form. This included an assessment of the ROB for all included studies using the Cochrane ROB assessment tool RoB-2 for randomized trials⁵¹ and the Cochrane ROB tool ROBINS-1 for nonrandomized intervention studies.⁵² Two independent reviewers (LK, AH) performed ROB assessments. Data extracted included: author, year of study, study setting and design, number of study participants, study inclusion/exclusion criteria, participant characteristics, description of the intervention, description of outcome definition, and length of the study. The outcomes of interest were the proportion of patients with medication discrepancies or ADEs, the mean number of discrepancies

per patient, the proportion of medications or medication orders/discharge summaries with discrepancies, or the total number of medication errors. Study results were grouped by intervention time (electronic or enhanced medication reconciliation) and further subdivided by outcome type (i.e. proportion of patients with medication discrepancies or ADEs, mean number of discrepancies per patient etc.). Results were qualitatively compared within outcome type for each intervention type.

3.2.3 Results

3.2.3.1 Search results

The electronic database search yielded 1009 (919 from the initial search and 90 from the updated search) studies from EMBASE, 1074 (982+92) from Ovid MEDLINE, and 536 (447+89) from Scopus. After duplicates were removed 1725 (1490+235) studies remained for title and abstract screening. Of those, 52 (48 +4) studies were selected for full-text screening and 14 of which met the inclusion criteria for this review (Fig.1). Reasons for study exclusion after full-text screening are presented in Fig.1. After full-text screening, we added two additional post-hoc inclusion criteria, specifically that the study compared electronic and paper-based medication reconciliation processes or the study compared basic versus enhanced medication reconciliation processes. After applying post-hoc inclusion criteria, a total of 10 studies were included in the systematic review.

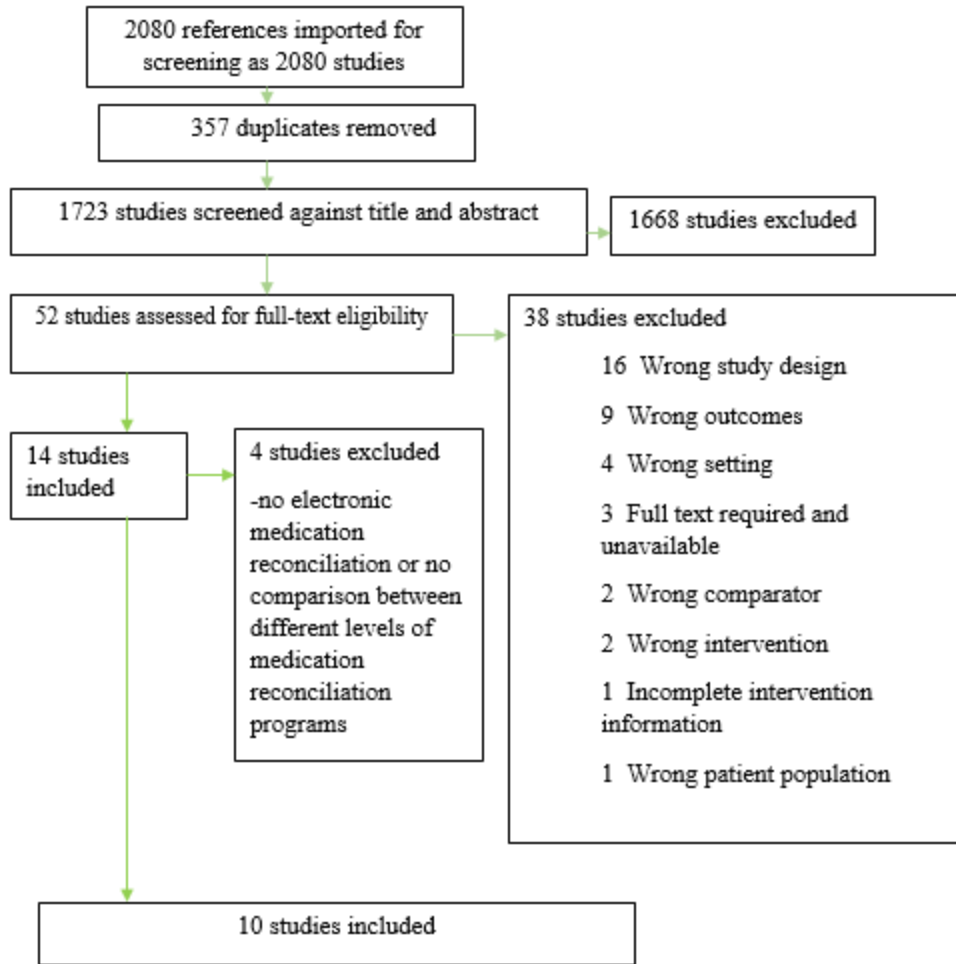


Fig.1 PRISMA flow diagram of study selection

3.2.3.2 Study characteristics

Characteristics of the included studies are summarized in appendix B. The included studies were published between 2009 and 2018. Of the included studies three were randomized trials^{22,23,53} and the remainder were nonrandomized studies, with a pre/post study design being the most common. The study settings were quite heterogenous in terms of level of care and units involved, however six of the ten included studies took place at academic hospitals.^{22,34,35,50,53,54} The country of origin of the studies also varied, with half of the study interventions occurring in hospitals in the USA.^{22,34,35,50,54} Some studies involved patients from single units whereas other

studies involved multiple units. The mean/median number of medications per patient was not reported in all studies but varied between studies where it was reported with a low of 2(range:2-4)³⁴ and a high of 12.8(IQR:11.7, 13.9).⁵⁴ It should be noted that the mean/median number of medications per patient did not appear to vary based on the hospital units involved in the study. The number of participants included in each study ranged from 85 to 3577. With the exception of one study in which the study duration was length of hospital stay plus 90-day post discharge follow-up²², all studies had a length of participation equalling the duration of a patient's hospital stay. The mean/median age of participants was not reported in all studies but varied between studies where it was reported, with the youngest mean age of 57⁵⁴and an oldest mean age of 84.³⁷ The inclusion and exclusion criteria for the studies were also heterogeneous, with one study not reporting any inclusion/exclusion criteria.²² The intervention (medication reconciliation) was delivered at discharge for six of the included studies^{23,34,50,53-55} and at both admission and discharge for four of the included studies.^{22,35-37} The personnel delivering the intervention included a physician (n=1)⁵⁴, a pharmacist (n=1)²², a physician and a pharmacist team (n=4)^{36,37,50,55}, a physician versus a pharmacist in each of the intervention arms (n=1)²³, a nurse and a pharmacist team (n=1)³⁵, and by unspecified hospital personnel.³⁴ Six of the included studies compared electronic medication reconciliation programs to another intervention (e.g. paper-based medication reconciliation programs).^{34,36,50,53-55} The remaining studies compared different medication reconciliation procedures (e.g. basic medication reconciliation programs to enhanced versions).^{22,23,35,37}

3.2.3.3 Summary of study interventions

A summary of the study interventions is presented in table 1 and study outcome in table 2. Six of the included studies^{34,36,50,53-55} compared **electronic medication reconciliation**

procedures to **basic medication reconciliation**. The **electronic medication reconciliation** interventions typically consisted of the generation of medication lists for patients within their electronic medical record, which was then reconciled during hospital discharge.^{34,36,50,54,55} One study's **electronic medication reconciliation** consisted of an automated medication reconciliation app through which discharge prescriptions were generated.⁵³ Four of the included studies compared **basic medication reconciliation** to an **enhanced version of medication reconciliation**.^{22,23,35,37} Components of **enhanced medication reconciliation** varied significantly by study, but all included the components of basic medication reconciliation. A component common between three of the included studies was the collaboration between physicians and pharmacists to complete discharge medication reconciliation.^{23,35,37} Additionally, two of the studies with enhanced medication reconciliation had admission medication reconciliation performed by a pharmacist who checked for potential drug-related symptoms, drug-related problems, and inappropriate drug use.^{22,37} Outcome definitions also varied between studies as described in table 2. In general, in the included studies a discrepancy (medication, discharge summary, medication order) referred to a difference between two medications lists (typically before and after transitions of care).^{22,23,37} Comparatively, a medication error generally additionally required an absence of a documented reason for the change in medication.^{23,34,36,37,55} Two exceptions exist: one study fails to mention an outcome definition for medication error³⁵ and another uses the term medication error but the definition is more similar to a medication discrepancy.⁵⁰ An ADE is unique from a medication error or discrepancy and describes a clinically significant event.³⁴

Table 1 Description of study interventions

Study	Type of intervention	Components of the comparison	Components of the intervention
Allison et al. (2015) [54]	Electronic medication reconciliation	Discharge: paper-based discharge medication reconciliation with discharge medications transcribed by hand from the inpatient electronic medication list.	<p>Admission/during hospital stay: Physicians input home medications electronically allowing them to easily select which home medications are appropriate for inpatient orders. The electronic list has mandatory fill-in boxes for strength, form, dose, route and time for every medication. The current inpatient list shows which medications were home medications and which are medications added during the inpatient stay.</p> <p>Discharge: At time of hospital discharge, the prescribing physician creates an electronic list of medications from the current inpatient list. Inpatient and home medications that stay on the discharge list can be easily selected, and new medications for discharge can be added as required.</p>
Bergkvist et al.(2009) [37]	Enhanced medication reconciliation	<p>Admission/during hospital stay: Medication reconciliation performed by a pharmacist. The patient's potential drug-related symptoms were checked. A medication review was performed to identify drug-related problems and inappropriate drug use. Based on identified problems, a systematic medication care plan was created in which all changes to the medication therapy were noted. The care plan was updated continuously and was decided on by the team.</p> <p>Discharge: Physician completed the discharge summary which here included a medication report and a medication list with no evaluation by pharmacist.</p>	<p>Admission/during hospital stay: Medication reconciliation performed by a pharmacist. The patient's potential drug-related symptoms were checked. A medication review was performed to identify drug-related problems and inappropriate drug use. Based on identified problems, a systematic medication care plan was created in which all changes to the medication therapy were noted. The care plan was updated continuously and was decided on by the team.</p> <p>Discharge: Physician completed the discharge summary which here included a medication report and a medication list at the day of discharge, and the pharmacist then evaluated (reconciled) the document for errors.</p>
Cunningham et al.(2014)[35]	Enhanced medication reconciliation	Provider updated and nursing theoretically reviewed with the patient and connected with the providers for any issues they hospitalization. Platforms for the medication home list and inpatient list did not interface.	<p>Admission: Nurse/pharmacist collaboration to collect and document medication history and conduct medication history verification prior to making chronic continuity therapy orders.</p> <p>Discharge: Pharmacist and prescriber work together to verify medications with a multidisciplinary checklist, with discharge medications issued after the discharge huddle.</p>
Farley et al.(2014) [22]	Enhanced medication reconciliation	<p>Control- no specific medication reconciliation process.</p> <p>Minimal intervention- Admission/during stay: Patients received medication counselling from a pharmacist case manager (PCM). The PCM took a detailed medication history, followed by medication reconciliation comparing the inpatient medications to the patient's home medication list.</p> <p>Discharge: medication reconciliation focused on comparing current inpatient medications to medications prior to hospital admission. A discharge medication teaching session was provided and patients received a discharge medication list.</p>	<p>Admission/during stay: Patients received medication counselling from PCM. The PCM took a detailed medication history, followed by medication reconciliation comparing the inpatient medications to the patient's home medication list.</p> <p>Discharge: medication reconciliation focused on comparing current inpatient medications to medications prior to hospital admission. A discharge medication teaching session was provided and patients received a discharge medication list. Discharge care plan prepared and faxed to community physician and pharmacy. Plan focused on medication issues and changed during hospitalization. Follow up phone call from PCM 3-5 days post discharge to address any medication related issues since discharge.</p>
Garcia-Molina Sáez et al.(2016) [36]	Electronic medication reconciliation	Basic medication reconciliation- Admission: Home medication history of patients obtained via structured interview by clinical pharmacist. This was compared to the treatment recorded in computerized primary care register.	Admission: Home medication history of patients obtained via structured interview by clinical pharmacist and entered into a computerized tool integrated into the electronic clinical history of the patient. This tool was designed to facilitate medication reconciliation by identifying every field

		<p>Prescription bottle or medical reports supplied by patients checked and recorded in form.</p> <p>Discharge: Medication reconciliation performed comparing the treatment prescribed to a patient at discharge with the patient's home medication history (taken at admission) accounting for treatments initiated during a patient's hospital stay.</p>	<p>necessary to correctly define a medication (route, dose, active ingredient, frequency).</p> <p>Discharge: Medication reconciliation performed comparing the treatment prescribed to a patient at discharge with the patient's home medication history (taken at admission) accounting for treatments initiated during a patient's hospital stay. Other: A training session at the beginning of the intervention period explained to physicians the concept of reconciliation errors.</p>
Midlov et al.(2011)[55]	Electronic medication reconciliation	Phase1-Discharge: paper based medication reconciliation in a form containing general information, a medication report (contains information of changes to medications during hospital stay), and a medication list of current medications. At discharge this form is discussed with and given to the patient and, if applicable, sent to the community health care and the patient's general practitioner within the same day.	<p>Phase2-Discharge: Medication list in electronic patient record gets reconciled by a physician and then reconciled by a pharmacist for quality control. Other components of the form and discharge process remain the same as pre-intervention.</p> <p>Period3-Builds on period1 processes to incorporate physicians reconciling medications listed in an electronic web-based medication dispensing system called ApoDos. A pharmacist checked the correctness of the ApoDos list and made suggestions for changes to the physician.</p>
Murphy et al.(2009) [50]	Electronic medication reconciliation	Paper based discharge medication reconciliation program in place but components not described.	<p>Admission: Clinical pharmacist obtains patient's home medication list and enters into the electronic medical record.</p> <p>Discharge: A discharge medication reconciliation report form was created through the electronic medical record. This form captures patients' home and inpatient medications and is used to order medications at discharge. It contains all active inpatient medications at the time the report is printed After the physician completes the order form, the final discharge orders are updated on the patient's medication list within the electronic medical record by pharmacist assistants. The discharge orders are then reviewed and verified by pharmacists for accuracy. Patients' updated discharge medication lists are immediately available for review across the continuum of care.</p>
Smith et al.(2016) [34]	Electronic medication reconciliation	Discharge: A paper-based nonmandatory discharge medication reconciliation process reconciling a patient's discharge medication list against medication histories obtained by hospital personnel.	Discharge: a mandatory electronic medical record-based discharge medication reconciliation procedure involving reconciling discharge medications against medication histories obtained at hospital admission. Discharge reports given to patients and sent to primary care physicians.
Tamblyn et al.(2018) [53]	Electronic medication reconciliation	Admission through discharge: Used a fillable PDF form to complete medication reconciliation.	Admission through discharge: An automated medication reconciliation application retrieves community-based medications from the provincial insurance agency and aligns it with in-hospital medications from the hospital drug information system. Discharge prescription generated using a one-click action bar where the community and hospital drugs to be continued, stopped, modified or started are determined.
Tong et al.(2017) [23]	Enhanced medication reconciliation	Discharge: Discharge summaries prepared as usual.	Discharge: Discharge summaries prepared by physician with medication management plans completed by a pharmacist.

Table 2 Summary of study outcome definitions



















Study	Outcome definition	Gold standard
Allison et al. (2015) [54]	Medication discrepancies: Were categorized by dose, frequency and route. When a drug was present on the gold standard list and absent on the discharge list, this was considered an antibiotic omission. Conversely, when a drug was absent on the gold standard list and present on the discharge list, this was considered an antibiotic addition. If a drug was prescribed that differed from the gold standard this was considered two medication errors: an antibiotic omission and antibiotic addition. We summarized antibiotic error by type (omission, dose, route, frequency, addition) as well as the total errors in aggregate.	For every patient an inpatient infectious disease consulting physician documented recommended post-discharge oral antibiotics. This recommendation was considered the gold standard and compared to the oral antibiotics in a patient's discharge summary.
Bergkvist et al.(2009) [37]	Medication error: The occurrence of one of the following discrepancies (identified by the pharmacist when comparing the medication list in the discharge summary with the medication list in the community health care) together with the lack of documentation to indicate that the change in the medication therapy was done deliberately: 1) A medication was missing in the medication list from the community health care. 2) A medication had been added to the medication list from the community health care. 3) The total dosage over 24 h had been changed in the medication list from the community health care.	
Cunningham et al.(2014)[35]	Not reported	N/A
Farley et al. (2014) [22]	Medication discrepancy: If a) medications that documentation indicated should be active were not on the patient's medication list (unintended omission), b) medications were on list without documentation (unintended addition) or c) medications were found with different dose or frequency.	N/A
Garcia-Molina Sáez et al.(2016) [36]	Reconciliation error: Any discrepancy between the medication upon admission and that prescribed at discharge that could not be justified clinically	N/A
Midlov et al. (2011) [55]	Medication error: Any discrepancy between medication lists before and after transfer to a community care/nursing home. If there was any indication (from comments or notes in any record or written documentation for a patient), it was not regarded as an error. Change of generic meds or withdrawal of drugs with long dosage intervals was not regarded as error. In-hospital medication list on day of discharge considered correct if no other information was documented and this was compared to community care dispensing list when first dose had been given. For ApoDos patients the ApoDos-list when packages delivered were checked.	N/A
Murphy et al. (2009) [50]	Medication error: Errors and omissions in physician discharge orders, errors on written prescriptions given to patients, and errors on the nursing discharge summary. Includes omission of home or inpatient medications, missing routes of administration, missing medication dosages, missing directions, missing durations of treatment, unacceptable medical abbreviations in discharge orders.	N/A
Smith et al. (2016) [34]	Medication variances: Any differences between the study-based preadmission medication case summary (gold standard) and discharge medications. Medication errors: Medication variances not considered changes required by the patient's clinical status. Clinically important medication errors: Errors in which there was the potential to cause death, permanent or temporary disability, prolonged hospital stay, readmission, or additional treatment or monitoring to protect the patient from harm.	Gold standard: A gold standard preadmission case summary was created for each patient retrospectively by research personnel examining ambulatory electronic medical record data on a patient's medications at the time of their last hospitalization with a primary care physician. This gold standard for pre-admission medications was compared to inpatient medication orders and discharge medication orders to identify medication variances and errors.

Tamblyn et al. (2018) [53]	Potential adverse drug events (PADEs): Errors in omission of community medications and therapy duplications of 2 or more medications from the same therapeutic class.	N/A
Tong et al. (2017) [23]	Medication error: An omitted drug, an incorrect dose or dose frequency, an incorrect or unnecessary drug, or an incorrect route of administration. Types and risks of error: Errors were classified on an ordinal severity scale of 5 (corresponding to insignificant risk, low risk, moderate risk, high risk, and extreme risk).	N/A

ROB assessment

ROB was assessed separately for randomized and non-randomized studies. Results for the randomized studies are described in table 3. The ROB (ROB) due to random sequence generation procedures was unclear in two studies^{22,53} and high in another.²³ Allocation concealment bias was low, unclear, and high (see table 3).^{22,23,53} The ROB presented in the blinding of personnel and participants was unclear in three studies (see table 3).^{22,23,53} There was a low ROB in the blinding of outcome assessments for one study²³ and is unclear in others (see table 3).^{22,53} Using the ROBINS-1 tool, the overall ROB among non-randomized studies was judged to be low in two studies^{34,54}, moderate in three studies^{36,54,55} and serious in one study (see table 4).³⁵

Table 3: Summary of ROB assessment for randomised studies according to A Cochrane ROB Assessment Tool for Randomized Controlled Trials (RoB-2)⁵¹

Author(citation)	Bias in random sequence generation	Bias in allocation concealment	Bias in blinding of participants and personnel	Bias in blinding of outcome assessment	Bias in selective outcome reporting	Other Bias
Farley et al.(22)	Unclear 	Low 	Unclear 	Unclear 	Unclear 	Low 
Tamblyn et al.(53)	Unclear 	Unclear 	Unclear 	Unclear 	Unclear 	Low 
Tong et al.(23)	High 	High 	Unclear 	Low 	Low 	Low 








-  Low ROB
-  Unclear ROB
-  High ROB

Table 4: Summary of ROB assessment for non-randomised studies according to A Cochrane ROB Assessment Tool for Non-randomized Studies of Interventions (ROBINS-1)⁵²

Author (study ID)	Bias due to confounding	Bias in selection of participants into the study	Bias in measurement of interventions	Bias due to departure from intended interventions	Bias due to missing data	Bias in measurement of outcomes	Bias in selection of the reported result	Overall bias
Allison et al.(54)	Low 	Low 	Low 	Low 	Low 	Low 	Low 	Low 
Bergkvist et al.(37)	Moderate 	Low 	Low 	Low 	Low 	Moderate 	Low 	Low 
Garcia-Molina Sáez et al.(36)	Low 	Low 	Low 	Low 	Low 	Serious 	Low 	Moderate 
Cunningham et al.(35)	Low 	Moderate 	Low 	Low 	Low 	Serious 	Serious 	Serious 
Midlv et al.(55)	Low 	Moderate 	Low 	Low 	Low 	Serious 	Low 	Moderate 
Murphy et al.(50)	Low 	Low 	Low 	Low 	Low 	Moderate 	Serious 	Moderate 
Smith et al.(34)	Low 	Low 	Low 	Low 	Low 	Low 	Low 	Low 

-  Low ROB
-  Moderate ROB
-  Serious ROB
-  Critical ROB

Summary of study findings

Study outcomes were grouped and organized into two tables-one for studies with electronic medication reconciliation interventions (table 5) and one for studies with enhanced medication reconciliation interventions (table 6). Within each outcome category studies were organized from lowest to highest ROB; this was done as the results varied by study and we felt more weight should be placed on the results of studies of lower ROB.

Table 5: Primary outcomes across studies with electronic medication reconciliation interventions organized low to high ROB for each outcome

Author (reference)	Study design	ROB	Outcome measure	Effect measure
Outcome 1: Proportion of patients with minimum of one medication discrepancy or adverse drug event				
Allison et al.(54)	Pre-post retrospective cohort study	Low	Pre intervention 23.0% Post intervention: 11.0%	Crude OR 0.41 (95% CI 0.19, 0.90, p=0.027) Adjusted OR* 0.39 (95% CI 0.18, 0.87, p=0.021)
Smith et al.(34)	Pre-post quasi-experimental study design	Low	Not reported	Crude OR 0.63, (95% CI 0.51-0.77, p<0.001) Adjusted** OR 0.54, (95% CI 0.43-0.69, p<0.001) Adjusted***OR: 0.52, (95% CI 0.41-0.67, p<0.001) Adjusted**** OR 0.57 (95% CI 0.44-0.74, p<0.001)
Tamblyn et al.(53)	Pragmatic randomized trial	Unclear	Intervention ward: 21.0% Control ward: 44.1%	OR 0.31 (95% CI 0.27-0.37)
Outcome 2: Mean number of medication discrepancies/medication errors per patient				
Garcia-Molina et al.(36)	Quasi-experimental interrupted time-series study	Moderate	Pre intervention: 4.4±3.2 During intervention: 1.8±2.6, Post intervention: 3.9±3.7	P<0.001 between pre and intervention and intervention and post P=0.288 between pre and post

Midlov et al.(55)	Interrupted time series	Moderate	Time period 1: 1.5 Time period 2: 1.1 Time period 3: 0.46	Not reported
Outcome 3: Proportion of medication or medication orders/discharge summaries with discrepancies				
Murphy et al. (50)	Controlled before/after pilot study	Moderate	1) Surgical unit: Pre-intervention: 90% medications with errors: Post-intervention: 47% medications with errors 2) Medical unit: Pre-intervention: 57% medications with errors Post-intervention: 33% medications with errors	1) 95% CI, 42–53%; p < 0.001 2) 95% CI, 28–38%; p < 0.001)

* adjusted for day of discharge and total number of discharge medications

**adjusted for age sex and insurance

*** adjusted for age sex insurance and comorbidity score

****adjusted for age sex insurance comorbidity score and number of medications

Note: moderate and unclear ROB considered equivalent and serious and high ROB considered equivalent for the purposes of the above table.

Table 6: Primary outcomes across studies with enhanced medication reconciliation interventions organized low to high ROB for each outcome

Author (reference)	Study design	ROB	Outcome measure	Effect measure
Outcome 1: Proportion of patients with minimum of one medication discrepancy or adverse drug event				
Cunningham et al.(35)	Controlled before/after pilot study	Serious	Baseline: 67.0-90.0% Enhanced:16.0-33.0%	No statistical test reported
Outcome 2: Mean number of medication discrepancies/medication errors per patient				
Farley et al.(22)	Randomized controlled trial	Unclear	At 30 days (control, minimal, enhanced):HPR-: 0.51, 0.49, 0.26 MPR-2.89, 2.45, 2.61 LPR-2.31, 2.14, 2.31 HPharm-0.38, 0.40, 0.45 MPharm-3.36, 3.68, 3.42, 0.655 LPharm-3.92, 4.34, 4.56 At 90 days:HPR-0.50, 0.41, 0.44 MPR-3.03, 2.56, 2.83 LPR-2.78, 2.50, 2.78 HPharm-0.41, 0.44, 0.49 MPharm-3.25, 3.44, 3.62 LPharm-4.12, 4.60, 5.04	At 30 days(p values): HPR-0.013 MPR-0.688 LPR-0.429 HPharm-0.783 MPharm-0.655 LPharm-0.134 At 90 days(p values): HPR-0.656 MPR-0.568 LPR-0.217 HPharm-0.954 MPharm-0.688 LPharm-0.030
Tong et al.(23)	Cluster randomized controlled investigation	High	Intervention: 0-n=341(85%) 1-n=41(10.2%) 2-n=13(3.2%) 3-n=1(0.2%) 4-n=1(0.2%) ≥5-n=4(1%) Pre intervention: 1-n=50(18.9%) 2-n=86(32.5%) 3-n=81(30.6%) ≥5-n=2312(4.5%)	P<0.01 ARR(95% CI): 46.5% (40.7-52.3%). If 100 discharge summaries were reconciled 46.5 of them would be prevented from containing a min. of 1 error. NNT(95% CI): Need to reconcile 2.2 (1.9-2.5) discharge summaries to prevent one discharge summary from containing min.1 error
Outcome 3: Proportion of medication or medication orders/discharge summaries with discrepancies				

Bergkvist et al.(37)	Longitudinal study with intervention and control group	Low	Intervention group: 4.8% of medications with medication errors Control group: 12% of medications with medication errors	P=0.012
Cunningham et al.(35)	Controlled before/after pilot study	Serious	At baseline: 8-26% of medications With enhanced medication reconciliation: 1-6% of medications	Not reported
Tong et al.(23)	Cluster randomized controlled investigation	High	Pre intervention: 61.5% of discharge summaries Post-intervention(pharmacist): 15.0% of discharge summaries	P<0.01

HPR=high level physician record

MPR= mid level physician record

LPR= low level physician record

HPharm= high level pharmacist record

MPharm= mid level pharmacist record

LPharm= low level pharmacist record

Note: moderate and unclear ROB considered equivalent and serious and high ROB considered equivalent for the purposes of the above table.

Electronic medication reconciliation compared to basic medication reconciliation was associated with a lower proportion of patients with at least one medication discrepancy or ADE in two^{34,54} out of three studies.^{34,53,54} Specifically, two studies of a low ROB^{34,54} found the crude and adjusted odds ratios to be statistically significant (crude OR=0.4, p=0.027; crude OR=0.63, p<0.001), and a third with unclear ROB found no statistically significant improvement.⁵³ It was unclear whether electronic medication reconciliation was associated with a significant reduction in the mean number of medication discrepancies or medication errors per patient; in one study there was a significant decrease observed in the intervention period compared to the pre-intervention period (p<0.01)³⁶, however another study did not report any statistical significance.

⁵⁵ It was also found that electronic medication reconciliation was associated with a significant reduction in the proportion of medications with errors compared to basic medication reconciliation ($p < 0.001$).⁵⁰

Enhanced medication reconciliation showed no significant impact on the proportion of patients with at least one medication discrepancy.³⁵ The impact of enhanced medication reconciliation on the mean number of medication errors/discrepancies per patient is less clear, with one study of unclear ROB finding no significant impact²² and another of high ROB finding a significant positive impact ($p < 0.01$).²³ The impact of enhanced medication reconciliation on the proportion of medications/medications orders/discharge summaries with discrepancies is also unclear. Two studies of low and high ROB, respectively, found a statistically significant reduction ($p = 0.012$, $p < 0.01$).^{23,37} In the first study clinically relevant errors (those of moderate, high, and extremely severe magnitude) were reduced, and the second study observed a decrease from 66 total medication errors across all study patients to 25 total across all study patients which in a comparable previous study was found to reduce negative clinical outcomes (hospital readmission associated with medication errors).²³ A third study of serious ROB did not report any statistical measures for their results, however did consider the results clinically significant.³⁵

3.2.4 Discussion

Looking first at the studies with electronic medication reconciliation interventions we see that both of the studies that showed no significant improvement post-intervention involved automated procedures. The study by Tamblyn et al. involved an automated electronic medication reconciliation program⁵³ and the study by Midlov et al. involved an automated medication dispensing system (ApoDos).⁵⁵ Although the studies that showed a positive impact of electronic medication reconciliation varied in their intervention components, none involved an automated

procedure and this represents a perhaps important difference in intervention components between studies showing a positive impact versus no impact of electronic medication reconciliation. Looking at studies that reported on the proportion of patients with minimum of one medication discrepancy or ADE, we see that both of the studies that showed a positive impact of electronic medication reconciliation used gold standards as a comparison to identify medication errors^{34,54} whereas no gold standard was used in the study that showed no effect.⁵³ This difference in ascertaining the presence of medication errors may contribute to the difference in the observed outcome between studies. It should be noted that in the study by Allison et al. only medication errors for oral antibiotics were considered; focusing on one medication class may have allowed for greater ease of reconciliation which may have contributed to a positive impact of electronic medication reconciliation found here and not in other studies. There were no other major variables (such as patient age, mean number of medications per patient at discharge, setting) that seemed systematically different between studies showing a positive impact versus no impact of electronic medication reconciliation.

In the case of enhanced medication reconciliation all studies involved some form of provider-pharmacist collaboration, however, there was no deeper commonality in intervention components between studies showing a positive impact of enhanced medication reconciliation versus those showing no impact. Studies showing a positive impact of enhanced medication reconciliation involved only medical units^{23,37} versus studies that showed no impact of enhanced medication reconciliation involved medical and surgical units^{35,53}; the importance of this difference is not known. There were no other major variables (e.g. patient age, mean number of medications per patient at discharge, setting) common to all studies showing positive impact of enhanced medication reconciliation that was not also common to studies showing no impact.

Although not unanimous, it appears that electronic medication reconciliation may have a positive impact on medication errors and discrepancies. This message becomes clearer if we focus on studies with a low ROB; the two studies of low ROB which focused on electronic medication reconciliation both showed a significant positive impact of the intervention.^{34,54} Additionally, of the two studies which did not report a statistically significant positive impact of electronic medication reconciliation, one study did consider the intervention to have had a clinically significant positive impact which should not be dismissed.⁵³ In the second study there was already a small number of medication discrepancies per patient pre-intervention as compared to other studies in our review; perhaps this small initial number may explain why a statistically significant decrease was not observed with implementation of the intervention.⁵⁵ The studies with enhanced medication reconciliation as an intervention varied widely in the components of the intervention, the components of the basic medication reconciliation comparison group and in their outcome definitions. Due to this it is more accurate to say that we observed inconsistent studies versus inconsistent results.

To the best of our knowledge no previous reviews have explored the impact of enhanced medication reconciliation, however, we identified one previous review examining the impact of electronic medication reconciliation on unintentional medication discrepancies during transitions of hospital care. In contrast to our study which focused on discharge medication reconciliation, the systematic review by Mekonnen et al. focused on electronic medication reconciliation at admission and the impact on clinical outcomes, namely medication discrepancies between a patient's home medications and admission orders.⁴⁹ However, admission medication reconciliation doesn't help improve communication across the transition of patients returning home from the hospital, and hence doesn't directly target the issue of patients being sent home

on unnecessary medications or medications with errors (such as incorrect dosing). This was shown in a study by Murphy et al. (2009) which evaluated discharge medication errors firstly after an admission medication reconciliation system was implemented, and then again after a discharge medication reconciliation system was implemented.²¹ We found that errors remained after admission-only medication reconciliation but were significantly reduced after the addition of discharge medication reconciliation.⁵⁰ To build on this review we chose to exclude studies with admission-only medication reconciliation to evaluate interventions targeted at the issue of patients being sent home with unnecessary medications or medications with errors. Despite our change in approach we came to the same conclusion as Mekonnen et al., namely that there was inconsistent impact of electronic medication reconciliation on minimizing the occurrence of unintentional medication discrepancies, with no statistically significant reduction in patients with medication discrepancies or mean number of medication discrepancies per patient.

One landmark study involving enhanced medication reconciliation is the MARQUIS study by Schipper et al. This study is a pragmatic quality improvement study involving five US sites-three academic medical centres, two community hospitals and one Veterans Affairs Medical Center. Medication reconciliation was implemented at all 5 sites based on a 17 point medication reconciliation toolkit. Toolkit components were grouped into 8 domains and included: taking the best possible medication history (BPMH); discharge medication reconciliation and counseling; clarifying roles and responsibilities of healthcare personnel; risk stratification; health information technology improvements to the electronic health record; improving access to medication sources; measuring then intervening to correct discrepancies in real time; and, stakeholder engagement. Not all domains were addressed by all sites, and what intervention components were implemented differed by site. We chose to exclude the

MARQUIS study from our review due to this inconsistency; results of studies included in our review would likely be difficult to compare due to differences between interventions across studies and we did not want to include a study where interventions varied within one study. The study authors concluded that implementation of a multifaceted medication reconciliation program was associated with a reduction in total, but not potentially harmful, medication discrepancies.

3.2.4.1 Study limitations

Our study is not without its limitations. We did not have access to unpublished research and restricted our search to studies published in the English language, which may have introduced publication bias. Additionally, there was a lack of consistency across the included studies for the term medication error/medication discrepancy and ADEs as well as how the outcome was measured. Consequently, what qualifies as a medication error or discrepancy may differ between studies and may reduce the comparability of the outcomes of different studies. This is one of the reasons we chose not to perform a meta-analysis. The interventions evaluated also displayed heterogeneity, in particular among studies evaluating enhanced medication reconciliation which made comparing the effects of studies challenging. Variability in setting (e.g. different healthcare systems, single unit versus multi-unit interventions, some involved outpatient programs) posed additional limitations to being able to accurately compare study results. There were also some limitations in terms of study design: only three studies were RCTs, with the remaining being predominantly controlled before/after studies. However, very few controlled before/after studies adjusted for post-intervention covariates which could explain the lack of changes in pre/post measures such as medication errors. Additionally, the majority of studies lacked information on whether blinding of participants/assessors was present, on protocol

for randomization (as applicable), or allocation concealment (as applicable), which contributed to a large number of studies being of unclear, moderate, or serious ROB. Additionally, medication reconciliation was only mandatory in one study intervention, and the majority of studies did not report on the completeness of medication reconciliation delivery.³⁵ Hence, a lack of significant observed effect in some studies may be due to a failure to consistently deliver medication reconciliation to patients. As enhanced medication reconciliation programs contain multiple components it is not possible to decipher the impact that each intervention component had alone, which is a limitation inherent to the nature of these interventions.

3.2.5 Conclusion

There may be a positive impact of electronic medication reconciliation on medication errors and discrepancies, however there is a lack of agreement across studies which in addition to some inconsistencies in the interventions and outcome definitions between our studies we were unable to come to a definitive conclusion. The lack of comparability of studies is more pronounced in studies with enhanced medication reconciliation, making a clear direction of the effect of enhanced medication reconciliation not possible. Additional studies with lower ROB, evaluating a consistently implemented intervention(s) with a uniform definition for medication discrepancies, medication errors and ADEs and which are more similar in terms of intervention and comparison group components are required to fully form a conclusion on the true impact of electronic and enhanced medication reconciliation. Development of a universal definition for medication discrepancies, medication errors and ADEs would be beneficial as it would allow for increased comparability in this field of research.

Chapter 4

4-Methods

4.1 Chapter overview

This chapter describes our study design-including study type, timeline, exposure and outcome definitions- as well as the databases used. Methods used to create our study cohort, including inclusion and exclusion criteria will also be detailed. Patient characteristics measured and methods of measuring these conditions will be described and the data analysis methods employed will be discussed.

4.2 Study design

4.2.1 Setting and timeline

This is a retrospective cohort study set at Victoria Hospital and University Hospital- two of the sites of the larger London Health Sciences Centre (LHSC) system – as well as at St. Joseph’s Health Care (SJHC) in London Ontario. Both LHSC and SJHC are large teaching hospitals and are associated with Lawson Health Research Institute and Western University’s Schulich School of Medicine and Dentistry. This study used a pre/post design, with the date of HUGO’s implementation serving as the cut-off between the pre-HUGO and post-HUGO cohorts. Both entry into and exit out of the cohort was dynamic, with patients entering and exiting the cohort as they gained or lost eligibility. It should be noted that a patient could be included in the cohort multiple times, for example if they had a hospital visit in June 2012 and another visit in September 2015. Hence, each record and data point represents a patient hospitalization not a unique patient. The accrual window for this study was February 1st, 2011 to March 26th, 2019. This start date was chosen to provide sufficient data points from the pre-HUGO cohort, and the end date was chosen to include the most up-to-date information that can be provided by the databases used in this study. The lookback window was up to 6 months prior to hospitalization in order to examine patient characteristics, with a maximum follow-up of March 31st, 2019 (end of accrual window plus 5 days to measure primary outcome). Follow up was terminated when one of the three following events was reached: discharge date plus 5 days, outcome (medication of interest filled) date, or study end date.

4.2.2 Data sources

This study made use of linked data from ICES (previously known as the Institute for Clinical and Evaluative Sciences) databases for cohort creation, measurement of patient characteristics, and exposure and outcome ascertainment. ICES is a non-for-profit research institute where scientists and clinicians collaborate to improve health and healthcare through research using administrative health data. At ICES records are linked across datasets using unique person-level identifiers called ICES key numbers (IKN). IKNs are themselves generated using a secure ICES algorithm based on Ontario health card numbers. Descriptions of each database used in the study are detailed below.

4.2.2.1 Discharge Abstract Database (DAD)

After a patient is discharged from hospital (or is transferred, signed-out or dies), a discharge abstract is created by a trained member of the health records department.⁵⁷ They use standardised codes to represent important aspects of the patient's hospital stay.⁵⁷ This record is forwarded to CIHI (Canadian Institute for Health Information) who maintains national records in the Discharge Abstract Database (DAD).⁵⁷ CIHI receives data from all participating hospitals, accounting for about 75% of all hospital inpatient discharges in Canada, and all of the hospitals in Ontario.⁵⁷ There's typically a 3 to 4-month lag time between the end of the month and when the data are received by CIHI.⁵⁷ We used DAD to identify eligible patient hospitalizations for inclusion into our study, to determine exposure status of patient hospitalizations based on discharge date, and to measure a variety of patient characteristics.

4.2.2.2 Same Day Surgery (SDS)

SDS contains patient-level data for day surgery institutions in Ontario, with each entry corresponding to one same-day surgery or procedure stay.⁵⁸ From April 2003 onwards SDS is derived from NACRS and beginning in 2009 data from SDS is available to ICES quarterly.⁵⁸ Main data elements from this database include patient demographics (e.g. sex, date of birth), clinical data (diagnoses, procedures, physician), administrative data (e.g. institution/hospital

number), financial data, and service-specific data elements.⁵⁸ We used SDS to identify eligible patient hospitalizations for inclusion into our study.

4.2.2.3 Ontario Health Insurance Plan (OHIP)

The majority of claims paid out by OHIP are contained in the OHIP database.⁵⁹ Claims are made either by healthcare providers who are paid in a fee-for-service model, or by non fee-for-service physicians who submit shadow billings to OHIP.⁵⁹ A shadow billing claim is identical to a fee-for-service claim except the billing amount is \$0.⁵⁹ The service provider prepares and submits OHIP claims to the MOHLTC (Ministry of Health and Long Term Care), who in turn provides the data to ICES. Information collected in the claims include patient and physician identifiers (e.g. physician number and speciality), fee codes for services provided, associated diagnoses and the date service was provided.⁵⁹ We used OHIP to exclude ineligible patient hospitalizations from our study and to measure patient characteristics such as prior medical conditions.

4.2.2.4 National Ambulatory Care Reporting System (NACRS)

NACRS captures information on patient visits to hospital and community-based ambulatory care services.⁵⁸ These services include visits to the ED (Emergency Department), day surgeries, and outpatient clinics, with information being collected from ED starting July 2000 and information from the remaining services collected from 2003 onwards.⁵⁸ For each patient visit to one of these services, a NACRS abstract is completed using information from admission/discharge/transfer systems, ED information systems, patient records, physician notes, and laboratory and diagnostic imaging results.⁵⁸ Participating facilities, regional health authorities and the ministry of health directly submit data to CIHI who maintain the database.⁵⁸ Demographic information as well as clinical, administrative, financial, and service-specific data are collected into the database. From 2009 onwards these data have been available to ICES on a quarterly basis.⁵⁸ We used NACRS to exclude ineligible patient hospitalizations, and to measure inpatient admissions from the ED as a patient characteristic.

4.2.2.6 Corporate Provider Database (CPDB)

The CPDB contains files maintained by the MOHLTC Provider Services branch with information on all physicians and some non-physician providers, such as chiropractors and physiotherapists, who are funded by the Ministry.⁶⁰ ICES receives information on demographics, speciality and practice location of physicians.⁶⁰

4.2.2.5 ICES Physician database (IPDB)

Data on all Ontario physicians by fiscal-year is contained within IPDB.⁶¹ IPDB is created at ICES from files received from the OPHRDC (Ontario Physician Human Resource Data Centre) on a yearly basis containing their ‘best guess’ speciality for all physicians in Ontario.⁶¹ ICES combines this information with in-house information from OHIP and CPDB (corporate provider database) to create the IPDB.⁶¹ Data contained in the IPDB includes physician demographics (gender, sex), speciality (functional and certified), location, and measures of physician activity (billings, workload, types or services provided).⁶¹ This data can be used for tasks including physician profiling, predicting physician behaviour, and measuring physician supply.⁶¹

4.2.2.7 Registered Persons Database (RPDB)

Demographic information of everyone who holds or has held an Ontario health card from 1990 onwards is contained in the RPDB.⁶² This information includes date of birth, gender, and postal code. ICES receives this data directly from the MoHLTC.⁶² We used RPDB to apply inclusion and exclusion criteria such as restricting the age of patient hospitalizations, and to measure patient characteristics such as age, neighbourhood income quintile and sex.

4.2.2.8 The Druglist file (DIN)

DIN is a file housed at ICES which contains a near exhaustive list of DINs (Drug Identification Number) used in Canada from 1990 onwards.⁶³ Drug and product names, subclass information, PCG codes, drug strength, route of administration and first and last dispensing dates from ODB are all contained in this file.⁶³ This file can be used to obtain a list of all DINs which fall under generic drug names, drug subclasses or PCG codes, and to look up properties of

a drug to gather information on the dose of a drug dispensed in an ODB claim.⁶³ We used DIN to create a druglist to apply as exclusion criteria and to use in exposure and outcome ascertainment. We also used DIN to measure medication-related patient characteristics such as presence of polypharmacy.

4.2.2.9 Institution Information System (INST)

INST is a series of datasets that contain information about Ontario health care institutions funded by the MOHLTC.⁶⁴ These datasets are linkable to administrative data by the unique institution number assigned by the MOHLTC.⁶⁴ For example, one dataset called acute beds contains information on the number and type of beds available in acute care hospitals, while INSTNUM tracks changes to institution numbers over time.⁶⁴ We used INST to exclude patient hospitalizations that were not discharged from LHSC or SJHC.

4.2.2.10 CERNER

CERNER is a hospital-based electronic medical record system that is shared across LHSC and SJHC sites. It contains information about all patient hospitalizations (visits) and is continually updated with events like registration, admission, laboratory results, physician orders, medication administration, and electronic medication reconciliation completion. The CHIP (Clinical Health Informatics Program) at ICES Western, in collaboration with the Decision Support team at LHSC/SJHC has reviewed and created data dictionaries for the relevant variables for this study. We used CERNER to identify eligible patient hospitalizations, including to flag inpatients who were prescribed a medication of interest during their hospital stay, and to identify the type of service (medical, surgical, geriatric, other) a patient received during hospitalization.

4.2.2.11 Ontario Drug Benefit (ODB)

Claims for prescription drugs received under the Ontario Drug Benefit program are contained in the ODB database. The Ontario Drug Benefit program covers prescription medications of those over the age of 65, those living in a long-term care home or home for special care, receiving professional home and community care services, those enrolled in the

Trillium Drug program, who are eligible for OHIP+, and those covered by the Ontario Disability Support Program or who are on social assistance. OHIP+ is a program introduced in 2018 which provides basic drug coverage for individuals under 25 who do not coverage under private health insurance. Each record represents a drug claim (i.e. a dispensed prescription) paid for by the Ontario Ministry of Health and Long Term Care.⁶⁵ Main data elements include: DIN (drug identifier), quantity, cost, patient, pharmacy and physician identifiers, date prescription was dispensed and a long-term care indicator.⁶⁵ We used ODB to exclude ineligible patient hospitalizations, for outcome ascertainment, and to measure patient characteristics such as polypharmacy.

4.2.2.12 Ontario Hypertension dataset (HYPER)

HYPER is an ICES-derived cohort which captures prevalent and incident cases of patients with hypertension in Ontario from 1991 onwards.⁶⁶ ICES-derived cohorts are datasets, not disease registries, which have been developed in-house to identify individuals with specific diseases.⁶⁶ The algorithms used to create these datasets usually use a combination of hospital, emergency department, and outpatient data, and specify a combination of a certain number of records coupled with diagnostic codes, that have occurred within a specific time period.⁶⁶ Validation studies for these cohorts usually involve medical chart reviews, producing sensitivity, specificity, positive (PPV) and negative predictive values (NPV).⁶⁶ For the HYPER database cases of hypertension are identified with 72% sensitivity, 95% specificity, an 87% PPV and an 88% NPV.⁶⁶ We used HYPER to measure hypertension as a patient characteristic.

4.2.2.13 Ontario Chronic Obstructive Pulmonary Disease dataset (COPD)

COPD is another ICES-derived cohort and captures prevalent and incident cases of patients in Ontario with Chronic Obstructive Pulmonary Disease (COPD) from 1991 onwards.⁶⁷ Specifically, this dataset is made up of two cohorts-a COPD specific cohort and a COPD sensitive cohort, both identifying cases of patients >35 years of age but with slightly different case definitions.⁶⁷ The COPD sensitive cohort has an 85% sensitivity and 78.4% specificity⁶⁷, and the COPD specific cohort has as sensitivity of 57.5% and a specificity of 95.4%.⁶⁷ We used the COPD dataset to measure COPD as a patient characteristic.

4.2.2.14 Ontario Rheumatoid Arthritis dataset (ORAD)

Prevalent and incident cases of patients >15 years old in Ontario with rheumatoid arthritis are identified in the ICES-derived dataset ORAD.⁶⁸ Cases from 1991 onwards are captured in the dataset, and the dataset has a sensitivity of 78%, a specificity of 100%, a PPV of 78% and an NPV of 100%.⁶⁸ We used ORAD to measure arthritis as a patient characteristic.

4.2.2.15 Ontario Diabetes dataset (ODD)

ODD is another ICES-derived dataset, and it captures prevalent and incident cases of patients in Ontario with diabetes from 1991 onwards.⁶⁹ Specifically, the dataset is made up of three cohorts-children/youth (≤ 18 years old), a sensitive cohort (19+) and a specific cohort (19+) with the case definitions being slightly different for each.⁶⁹ The validation values for the children/youth cohort are as follows: 82.8% sensitivity, 98.9% specificity.⁶⁹ The sensitive cohort (19+) has a sensitivity of 90.0%, a specificity of 97.7% and a PPV of 82.6% while the specific cohort (19+) has a sensitivity of 79.9%, a specificity of 99.1% and a PPV of 91.4%.⁶⁹ We used ODD to measure diabetes as a patient characteristic.

4.2.3 Measurements

4.2.3.1 Exposure definition

Our exposure was defined as discharge from an inpatient admission after implementation of HUGO. HUGO was implemented on April 13, 2014 at University Hospital, April 27, 2014 at Victoria Hospital, and on May 21, 2014 at SJHC. Hence our exposed group were patients discharged after HUGO's implementation and our unexposed group were patients discharged during our study period prior to HUGO's implementation. We used CERNER, with verification from INST, to identify patients discharged from our hospitals under study, and both CERNER and DAD to identify the discharge date of patients and group patients into pre- and post-HUGO groups accordingly.

4.2.3.2 Outcome definition

Our outcome of interest was the filling of at least one of the prescriptions of interest (antipsychotics, benzodiazepines or gastric acid suppressant medications, details in Appendix C) within 5 days of discharge. We chose a 5 day window to measure our outcome as in this

population the majority of discharge prescriptions are filled within 5 days of hospital discharge; upon exploration we found that >99% of medications were filled within 5 days of discharge. We used DIN to identify our medications of interest and the ODB to identify if and when patients filled a prescription of interest.

4.3 Cohort Build

4.3.1 CERNER inclusion/exclusion criteria

Table 7 shows the exclusion steps taken in CERNER to create the study cohort. We first used CERNER to identify eligible patient records. We initially restricted to patient records whose discharge date was between Jan.1, 2011 and Mar. 26, 2019; this time frame was changed in the ICES database environment for our final cohort build for ease of analysis (later discussed). Patients must have been >55 years old at time of registration, stayed in hospital for a minimum of one day, and been an inpatient or have a “one day stay” (applicable to SJHC) hospitalization type. Records with poor data quality (such as a missing discharge date or health card number) were not included. As patients may have experienced multiple different hospital stays during the study period, they could contribute more than one hospital hospitalization. Accordingly, total number of patients in the cohort and total number of hospitalizations in the cohort will not be equal.

In 2017, after several years of development, a data sharing agreement with ICES and CERNER was signed. This agreement allows CERNER data to be pulled on a project by project basis. Prior to data collection, each project requires approval from a local subcommittee made up of both LHSC and SJHC employees (such as privacy/risk officers and physicians). Once approved, a designated ICES analyst (CHIP analyst), who has access to real-time CERNER data, prepares the cohort build for the specific project. Decision Support teams at LHSC and SJHC then review the data pull and when approved transfer it to ICES using Axway Secure Transport web portal (a secure transfer system). This data is received by an ICES Data Covenantor, who removes direct personal identifiers and replaces them with a confidential ICES identifier (IKN) to enable data linkage across data holdings at ICES. The final encrypted dataset is then posted on the ICES network, where only ICES analytical staff working on the approved project are permitted to access it.

Table 7: Cohort inclusion/exclusion steps in CERNER

Step	Description	Database
1	Include all Patients discharged from LHSC or St. Joseph's Health Care London between January 1 2011 and March 31 2018	CERNER
2	Exclude length of stay(LOS)<1	CERNER
3	Exclude age <55 at registration	CERNER
4	Exclude encounter type not equal to 'Inpatient' or 'One Day Stay' (SJHC only)	CERNER

4.3.2 ICES inclusion/exclusion criteria

Our goal was to identify patients who had no recent (6 month lookback period from time of hospital admission) use of antipsychotics, benzodiazepines, or gastric acid suppressant medications, who were exposed to one of these medications during their hospitalisation and who did not have evidence of a diagnosis that would justify continued outpatient use of that medication. We only included patients who received one of the medications (Appendix C) of interest during the hospital admission; we did this by using a medication flag that had been created in CERNER specifically for this study. We then aligned CERNER records with DAD based on discharge dates, keeping only CERNER records that aligned exactly with DAD, while also making sure institutions matched using INST. We then excluded records without a valid IKN (a unique identifier assigned to patient records by ICES), those for patients <66 or >105 years old, and records of patients who were non-Ontario residents (using RPDB). Additionally, records where the patient died within 5 days of discharge, were readmitted within 5 days of discharge, or returned to the ED within 5 days of discharge were not included as there may be insufficient time to experience the outcome of interest, which could introduce survivor bias. We used RPDB, DAD and NACRS to apply these exclusion criteria. We also excluded records of patients whose site names, according to CERNER, were not University Hospital, Victoria

Hospital or St. Joseph's Campus to ensure we were only capturing patients at the main sites of interest (i.e. not Parkwood or London Regional Cancer Program).

As our study was interested in whether there was a reduction in the proportion of patients who filled a potentially inappropriate prescription post-discharge after HUGO was implemented, we had to differentiate between appropriate and inappropriate continuation of antipsychotics, benzodiazepines, and gastric acid suppressant medications. To minimise the number of people who were receiving medically appropriate prescriptions for the medications of interest, we excluded hospitalizations where the patient had a mental health or gastrointestinal diagnosis in the 6 months prior to admission and during their hospital stay (see appendix D for exclusion diagnoses) that would warrant the use of these medications. We used DAD and OHIP for these exclusion diagnoses. To make sure we were identifying incident prescriptions, we excluded patients who filled a prescription for one of our medications of interest (see appendix C) in the 6 months prior to admission using ODB. As will be discussed in the analysis section we divided our study timeline into 2 month intervals; to achieve a whole number of intervals we decided to eliminate patient records from January 2011 by excluding patient records with an index date prior to Jan.31, 2011. A table with these exclusion steps is presented in appendix E.

4.4 Patient Characteristics

Patient characteristics were measured at the aggregate level at 4 equidistant time points across the study timeline in order to assess the comparability of patients across time. To address the potential impact of seasonality on the patient characteristics we calculated the season makeup of each time segment, which is presented in appendix F. Additionally, patient characteristics were measured and the standardized difference calculated for pre- and post-HUGO periods in order to determine whether there might be clinically significant differences that would affect the comparability of these groups. Coding for all patient characteristics can be found in appendix G.

4.4.1 Demographics

Basic demographic characteristics included: age sex, neighbourhood-level income quintile, and long-term care status (yes/no). We measured the mean and median age of patients at discharge using RPDB. The RPDB was also used to measure the proportion of patients of each gender and in each income quintile at time of discharge. The ODB was used to measure the proportion of patients who were long term care residents as of discharge.

4.4.2 Comorbidities

We used the Charlson comorbidity score as an overall measure of comorbidity. The Charlson comorbidity index is a validated method that uses ICD-10 diagnosis codes in administrative data to assess comorbidities.⁷⁰ Each comorbidity category has an associated weight ranging from 1 to 6, which is based on the adjusted risk of mortality or resource use.⁷⁰ The sum of all the weights yields a comorbidity score for a patient.⁷⁰ The higher the score the greater the likelihood that the patient will experience mortality or have higher healthcare resource use, with a score of zero indicating no comorbidities were found.⁷⁰ We used DAD to measure mean comorbidity score of patients at time of discharge, with a 3 year lookback period in the administrative data.

We measured the prevalence of a number of different prior conditions including: COPD, diabetes, hypertension, ischemic heart disease, liver disease, inflammatory bowel disease, renal disease, arthritis, stroke, cerebrovascular disease, dementia, and congestive heart failure. We

used a combination of OHIP fee and diagnoses codes, and DAD/SDS diagnoses codes as per the coding definitions used in prior studies involving a comparable population.⁷¹ For measuring prior COPD, diabetes, hypertension and arthritis validated ICES-derived cohorts were additionally used to identify prior conditions in our cohort (ODD, HYPER, COPD, ORAD). We used a 5-year lookback from time of discharge to determine the presence of these conditions. All of the prior conditions measured are chronic conditions which, especially when multimorbid, have been found to be associated with increased medication use in elderly populations (>65 years old). As prior research indicates that a greater number of medications is associated with a higher proportion of ADE and medication errors, we wanted to ensure these factors were balanced between the pre- and post-HUGO periods.⁷² Similar comorbidities have been used in prior studies assessing ADE.³⁰

4.4.3 Admission characteristics

Various characteristics were measured in our study including: hospital los, type of inpatient service (medical, surgical, geriatric, other), ED to inpatient transfer, ICU admission, whether a patient was discharged to a nursing home, and whether the surgery/procedure that was the cause of the patient's admission was performed. Los has been shown to be associated with medication errors and ADEs⁷² and was assessed using DAD. Prior research evaluating medication reconciliation procedures also indicates that the ICU is a particularly vulnerable environment for medication errors as patients in this unit receive more drugs than in other units.³⁹ Medication errors are more common in the ICU versus other inpatient environments, and the resulting ADE often have more serious consequences.³⁹ ICU admission status was assessed using DAD. The literature also indicates that the prevalence of medication errors varies by hospital service, so we measured type of inpatient service at discharge via CERNER, categorizing the service codes into medical, surgical, geriatric and other services, and looked for significant differences pre- and post-HUGO periods.⁷³ We hypothesized that patients who were transferred to inpatient care from the ED would experience more transitions of care, again meaning more opportunities for medications to be changed or a mistake to occur when entering information about a patient's medication regime. Additionally, we hypothesized that those who had the surgery or procedure they were admitted to hospital for would be more likely to have more

medication changes in their regime than patients who did not have the surgery/procedure performed. We used NACRS and DAD to assess ED to inpatient transfer and surgery/procedure performed respectively. We also used DAD to identify whether patients were discharged to long term care facilities, as these patients may have additional medication reconciliation procedures performed once they arrive at long-term care.

4.4.4 Prior healthcare utilization

Primary care and specialist care visits in the year prior to hospital admission were measured separately using OHIP fee codes. We chose to measure this as the literature indicates that being exposed to multiple care providers is associated with an increased risk of medication errors and ADE. As a referral from a family physician is required in the Canadian healthcare system to visit a specialist, measuring the number of specialist care visits was our way of measuring patient interaction with multiple care providers. Exposure to primary care physicians was also found to be a risk factor for medication errors and ADE. By measuring and comparing primary care and specialist care visits in the year prior to hospital admission pre- and post-HUGO we could assess whether there was an equal distribution of this risk factor.

4.4.3 Medication utilization

We measured the number of medications patients used in the year prior to hospital admission as well as the proportion of patients with polypharmacy. We defined polypharmacy as a patient filling ≥ 10 unique DINs in the year prior to hospital admission (similar to prior studies)⁷⁴, and measured the total proportion of patients with polypharmacy in each of our four time segments and pre- vs. post-HUGO.⁷⁴ We also used ODB to measure the aggregate mean and median number of medications pre- and post-HUGO as prior research indicates that polypharmacy and a higher number of medications is associated with a higher proportion of ADE and medication errors.⁷²

4.5 Data analysis

4.5.1 Transformation of timeline and outcome

We grouped our study timeline into 2-month intervals starting Feb.1, 2011 and ending Mar. 26, 2019. This yielded intervals 1-19 capturing the pre-HUGO time segment, and intervals 20-49 capturing the post-HUGO time segment. Although HUGO was implemented on different dates across Victoria Hospital, University Hospital and SJHC, one time interval (interval 20) captured all three dates. We aggregated our data by 2-month interval to convert our outcome from a count of patient hospitalizations with our primary outcome (filled a prescription of interest within 5 days of discharge) to a proportion. The number of patient hospitalizations in a given 2-month interval with our primary outcome was the numerator, and total number of patient hospitalizations in a given 2-month interval was our denominator.

4.5.2 Preliminary analysis

With our transformed timeline and outcome, we derived the primary outcome status and calculated the proportion of patients with the primary outcome in the time period pre-HUGO (intervals 1-19) and post-HUGO (intervals 20-49). We additionally plotted our outcome over time, for the pre- and post-HUGO periods and the time of HUGO implementation.

4.5.3 Building a simple linear regression model

We first attempted to fit our data to a simple regression model. We chose not to include additional covariates (converting to a multiple regression model) as we found various covariates potentially related to medication errors to be comparable between the pre-HUGO and post-HUGO. The basic equation for this model is as follows:

$$\text{Equation 1: Proportion}(t) = B_0 + B_1 * \text{interval}(t)$$

Where proportion is the proportion of hospitalizations in a given 2-month time interval where the patient fills a medication of interest. Where t is a continuous variable for time in 2-month time intervals since the start of the observation period, and $\text{interval}(t)$ indicates the two month time interval during the observation period.

To assess the goodness of fit of the model we examined the F and R^2 statistic, looking for a statistically significant F statistic to indicate that the independent variable (time interval) is able to accurately predict the dependent variable (filled prescription of interest within 5 days of hospital discharge), and a large R^2 value to indicate that the independent variable can explain a

significant percent of the variation in the dependent variable. We also used a residual-fit spread plot, a fit plot, and an outcome vs. predicted values plot to assess goodness of fit. If the model was a good fit we would expect (i) the spread of the residuals to be similar to the spread of the fit-mean in the residual-fit spread plot; (ii) the data points to fall within the 95% confidence limits in the fit plot and to hug the fitted line; and (iii) the predicted values to lie on the 45° line in the outcome vs. predicted values plot.

We used a residual vs. predicted plot to check the assumption of constant variance (homoscedasticity), expecting no pattern in the plot. We used a histogram of residual density and a Q-Q (quantile-quantile) plot to check the assumption of normality. We would expect the residuals to fit a bell-shaped curve in the former and the datapoints to fall on the diagonal in the plot of the latter if the assumption of normality were met. To check the assumption of linearity we examined a plot of the dependent vs. independent variable (using the loess smooth feature in SAS) for evidence of a linear relationship. Results of this assessment are presented in appendix H.

4.5.4 Building a segmented regression model

We performed segmented regression using a linear model. An interrupted time series design is a quasi-experimental approach for evaluating longitudinal effects of intervention, such as HUGO.⁷⁵ Segmented regression analysis is a method used to statistically model interrupted time series data so that formal conclusions about the impact of an intervention or event can be made.⁷⁵ A time series is a sequence of values which are measured at regularly spaced intervals over time. When a sequence of measures is divided into two or more portions at change points, segments are created in a time series.⁷⁵ These change points reflect a real-world event, policy change or experimental intervention where the values of the time series may exhibit a change from a previous pattern—thus, the time series has been ‘interrupted’.⁷⁵

In the case of our study, the data fit the definition of interrupted time series data, with a clear change point (HUGO’s implementation). Our two time segments were pre-HUGO (intervals 1-19) and post-HUGO (intervals 20-49). The basic equation for this model is as follows:

$$\text{Equation 2: Proportion}(t) = B_0 + B_1 * \text{interval}(t) + B_2 * \text{intervention}(t) + B_3 * \text{time_after}(t)$$

Where proportion is the proportion of hospitalizations in a given 2-month time interval where the patient fills a medication of interest. Where t is a continuous variable for time in 2-month time intervals since the start of the observation period, interval(t) indicates the two month time interval during the observation period, intervention is an indicator for time (t) occurring before (intervention=0) or after (intervention=1) HUGO's implementation. Time_after is a continuous variable capturing the number of two-month time intervals that have passed since HUGO was implemented, with time_after=0 before HUGO (time intervals 1-19) and (time-19) after HUGO's implementation.

We interpreted the regression coefficients in terms of trend and level change. Trend describes the slope of an outcome over a time segment.⁷⁵ Here we are interested in how the proportion of discharges where a medication of interest is filled (within 5 days of discharge) changes from one 2-month interval to another and how the overall slope for pre-HUGO time segment compares to that of the post-HUGO time segment. B₁ captures interval to interval changes in our proportion outcome in the pre-HUGO period, with a significant p value indicating significant interval to interval change. B₃ captures whether there was significant interval to interval change in in our proportion outcome in the post-HUGO time segment as compared to the pre-HUGO time segment (i.e. if there is a significant difference in slope from the pre- and post-HUGO time segments). B₁ + B₃ yields the post-HUGO slope. A level change is an immediate change in outcome from one time segment to another.⁷⁵ In this case, we examined if there was a significant change in the proportion of hospitalizations where a medication of interest was filled (within 5 days of discharge) after HUGO was implemented. This level change is captured by B₂. B₀ captures the prevalence of the outcome just before the beginning of the observation period (baseline), which here is the proportion of hospitalizations where a medication of interest is filled.

Autocorrelation (where one data point is correlated to another datapoint) can be an issue in time series models, so after fitting the model we checked for autocorrelation using the Durbin-Watson statistic which was checked for statistical significance.⁷⁵ We then tested for goodness of fit and to see if model assumptions were met in a similar fashion to that described in 4.5.3. We also assessed our data for unusual or influential points using Cook's D statistic which measures

the change in predicted values that occur when you delete an observation and refit the model and can identify outliers, leverage points and influential points.

4.5.5 Exploring the counterfactual

The counterfactual is a theoretical condition in which for the same population, under the same conditions, and at the same time, a group which was exposed to a factor is no longer exposed and the outcome of interest can be re-assessed. In this study the counterfactual is the proportion of hospitalizations where patients filled a medication of interest (within 5 days of discharge) in the post-HUGO time segment under the theoretical condition that HUGO had not been implemented. We graphically examined the counterfactual using equation 2, with intervention and time_after both equal to zero and applied a linear trendline to the graph. We chose time points 6 months, 1 year, 2 years and 5 years after interval 20 (when HUGO was implemented in reality) and used equation 2 with intervention and time_after both equal to zero to calculate our outcome at these time points. We then compared our counterfactual outcome to the observed outcome at the aforementioned time points and calculated the absolute difference in outcomes that could potentially be attributed to the implementation of HUGO.

4.5.6 Additional analyses

4.5.6.1 Sensitivity analyses for leverage/influential data points

To assess the potential impact of high leverage points on our model we repeated 4.5.4 excluding these data points.

4.5.6.2 Sensitivity analysis for washout period

We recognized that time intervals immediately before, during and after HUGO's implementation may not give an accurate representation of the impact of HUGO. HUGO was not implemented simultaneously across the hospital sites in our study, and this lag time may result in an underestimate of the potential impact of HUGO on our primary outcome. There may also have been a lag time in terms of the electronic medication reconciliation portion of HUGO being adopted fully by all hospital units, and there may have been a learning curve to effectively using this medication reconciliation system which could again underestimate the impact of HUGO on

our primary outcome. In anticipation of HUGO's implementation, healthcare workers may have become more stringent about completing medication reconciliation which again would underestimate the potential impact of HUGO. Consequently, we repeated analyses 4.5.2 and 4.5.4 with a washout period where the 2-month interval before, during, and after HUGO's implementation (intervals 19-21) were excluded from analysis.

4.5.6.3 Subgroup descriptive analysis for each medication class

We repeated 4.5.2 of the primary analysis for each of the following medication classes separately: antipsychotics, benzodiazepines, gastric acid suppressant medications. We did this to investigate whether a particular medication class was prone to more errors at discharge (and hence would have a higher proportion of hospitalizations where patients filled a medication of interest within 5 days of discharge).

Chapter 5

5-Results

5.1 Chapter overview

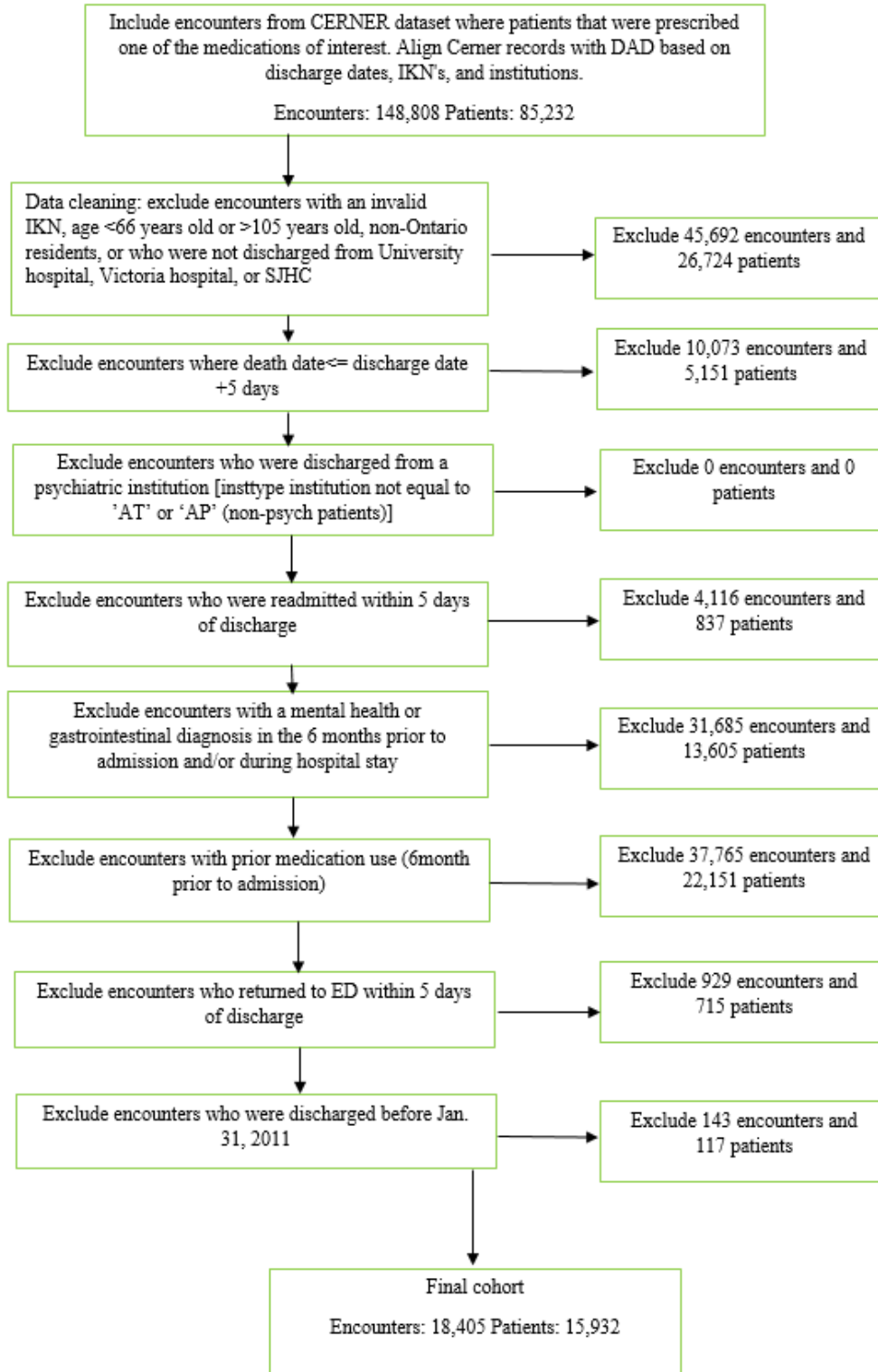
In this chapter we will discuss our results including the cohort build and patient characteristics of the sample, and the observed relationship between HUGO's implementation and the frequency of potentially inappropriate continuation of medications post discharge. We will also describe the results of our secondary analysis.

5.2 Results

5.2.1 Cohort build and patient characteristics of the sample

The total number of hospitalizations and patients, including the number of hospitalizations and patients excluded at each stage of exclusions in the final cohort, is shown in table 6. Note that these values for the CERNER and ICES derived cohorts individually can be found in appendix I. A total of 18,405 hospitalizations corresponding to 15,932 patients were included in our analysis. This corresponds to 6063 hospitalizations pre-HUGO and 12,342 hospitalizations post-HUGO. The number of hospitalizations within each of the four time segments in which we assessed patient characteristics were: 4335, 4706, 5629, and 3735.

Figure 2: Cohort build results-CERNER and ICES combined



Patient characteristics of our cohort over time are shown visually in fig.3a-g. We did not observe any irregularities in the four time periods that were felt to be relevant. Note that the pre-HUGO era is captured predominantly within time intervals 1 and 2 and the post-HUGO era is predominantly captured within time intervals 3 and 4, with some overlap in time interval 2. We chose not to test for statistically significant differences across the four time periods, opting instead to look for potentially clinically relevant differences. Testing for statistical significance would have required multiple comparisons for each variable, and we were more interested in clinically relevant differences than small differences that may have been statistically significant but of minimal clinical relevance.

Fig.3a Bar graph of binary/categorical baseline characteristics over 4 equal time segments

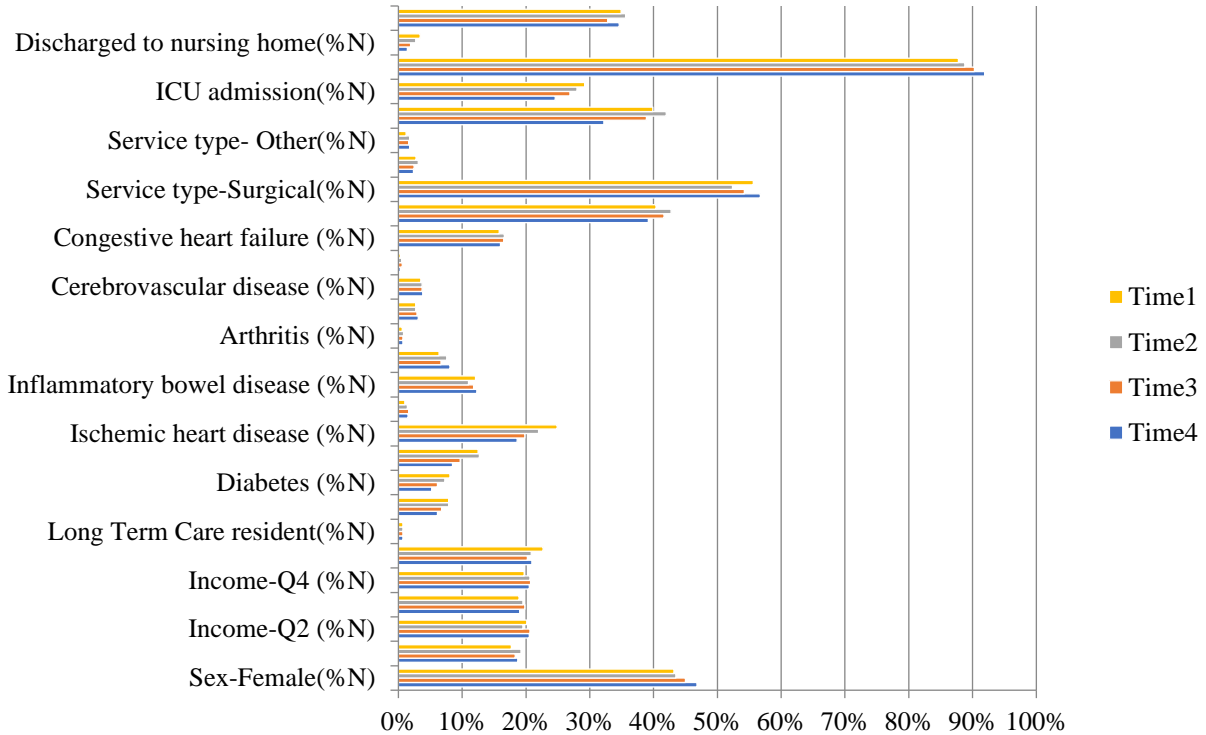


Fig.3b Bar graph of mean los over 4 equal time segments

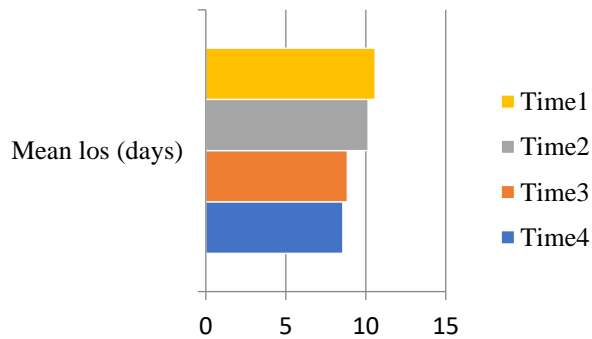


Fig.3c Bar graph of primary and specialist care visits over 4 equal time segments

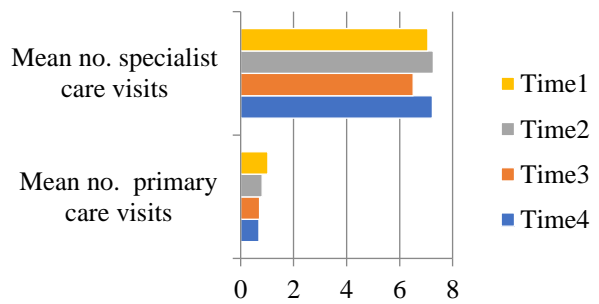


Fig.3d Bar graph of mean Charlson comorbidity score over 4 equal time segments

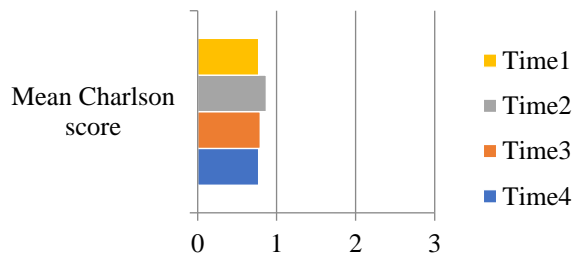


Fig.3e Bar graph of mean age over time over 4 equal time segments

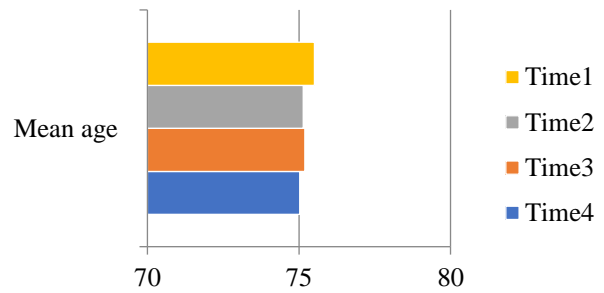


Fig.3f Bar graph of mean no. medications in year prior over 4 equal time segments

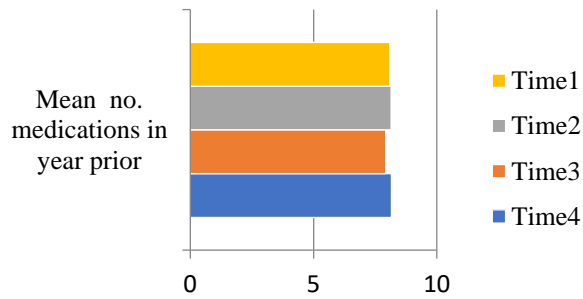
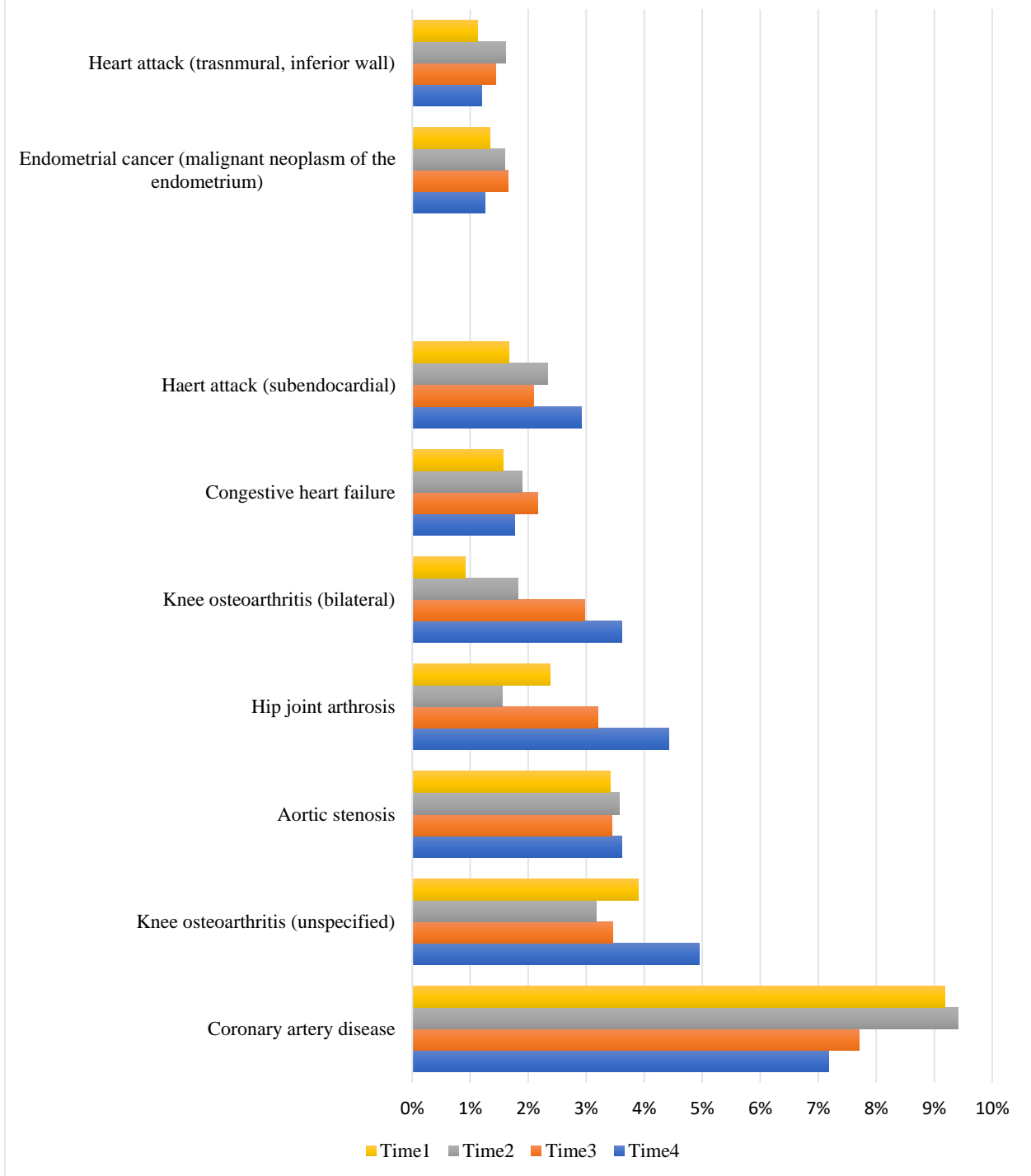
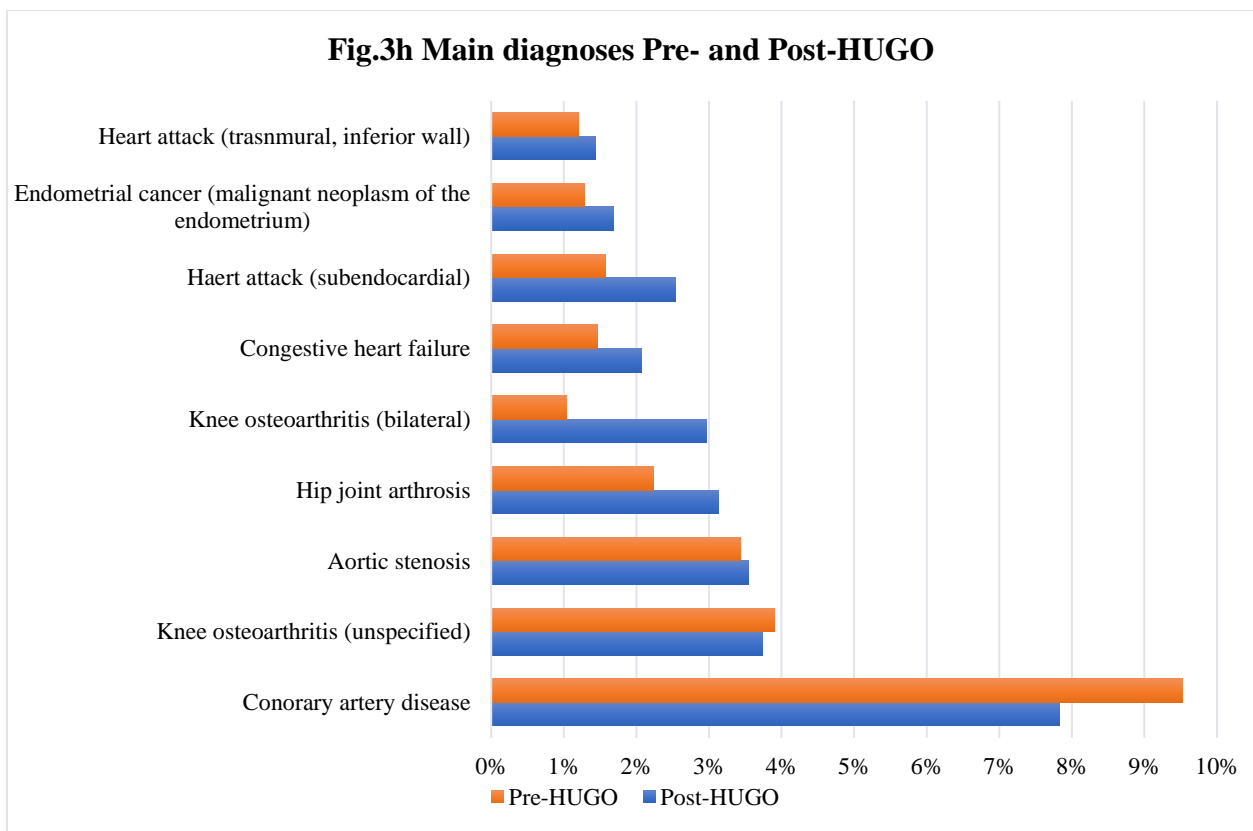


Fig.3gTop main diagnoses over 4 equal time segments



We also assessed the characteristics of the patients with hospitalizations pre and post HUGO, and compared these two groups using standardized differences. There were no significant difference in any of the above covariates pre- and post-HUGO (see appendix J for

standardized difference values), with the exception of a higher prevalence of ischemic heart disease pre-HUGO (pre-HUGO: 24.5%, post-HUGO: 19.8%, standardized difference=0.11), a longer hospital los pre-HUGO (pre-HUGO: 10.51±14.38 days, post-HUGO: 9.04±11.55 days, standardized difference=0.11), and a greater mean number of primary care visits pre-HUGO (pre-HUGO: 0.99±1.71 visits/year, post-HUGO: 0.72±1.29 visits/year, standardized difference=0.18). Additionally, there was some minor variation in the most frequent diagnoses of patients pre- and post-HUGO; coronary artery disease appears to be more prevalent in our cohort pre-HUGO whereas heart attacks, knee osteoarthritis and hip joint arthritis appear to be more prevalent post-HUGO (see fig.3h).

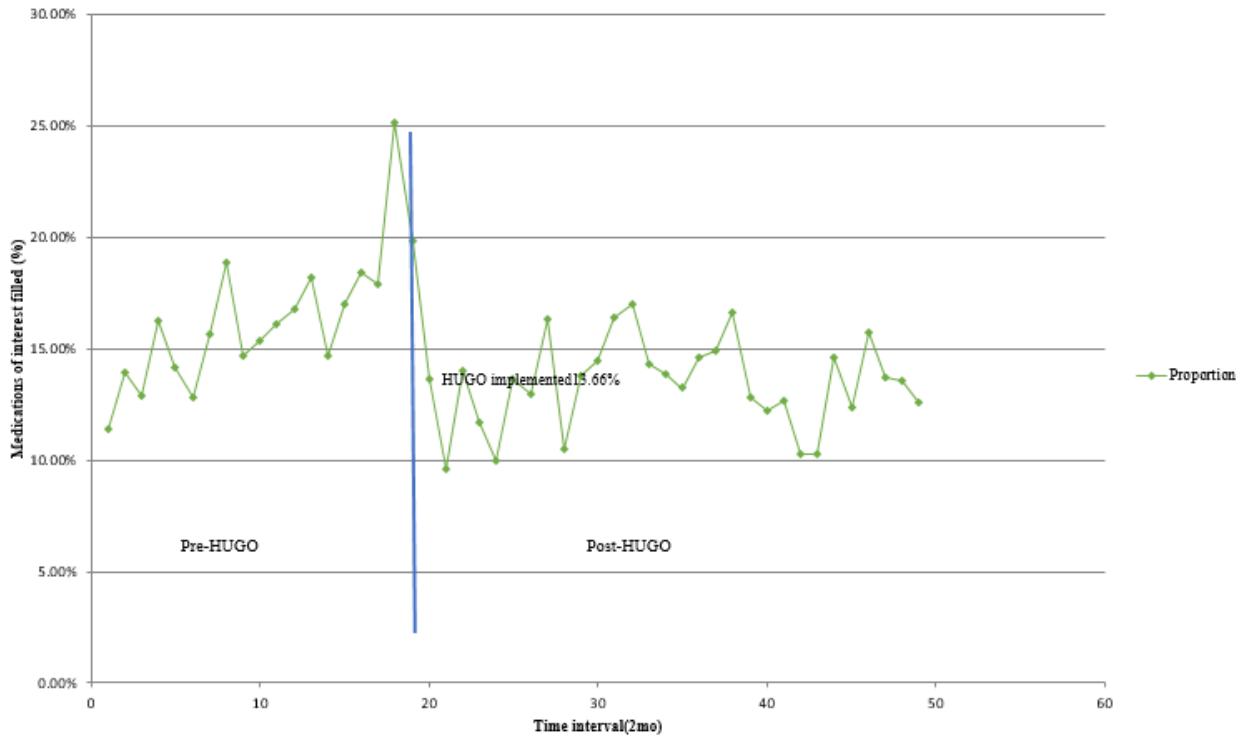


5.2.2 The relationship between HUGO’s implementation and the rate of potentially inappropriate continuation of medications post discharge

In order to explore the relationship between HUGO’s implementation and the frequency of potentially inappropriate continuation of medications, we calculated the proportion of potentially inappropriate medication filled post discharge in each two month period. We then graphed this proportion over time (figure 4), which demonstrated a decrease in the proportion of

hospitalizations where a medication of interest was filled after implementation of HUGO. This is corroborated by an observed decrease from 16.26% (971/5,971) of hospitalizations pre-HUGO resulting in a potentially inappropriate medication of interest being filled, compared to 13.43% (1670/12,434) post-HUGO.

Fig.4: The proportion of hospitalizations where a medication of interest was filled



We found that a segmented linear regression model was a good fit for our data and that model assumptions were met (see appendix K), yielding the following equation:

$$\text{Equation 3: Proportion}(t) = 0.12105 + 0.004212 * \text{interval}(t) - 0.06976 * \text{intervention}(t) - 0.00403 * \text{time_after}(t)$$

This equation tells us that at the start of the pre-HUGO observation period, the proportion of hospitalizations where a medication of interest was filled was 12.1%. There was significant ($p < 0.0001$) interval to interval increase in our primary outcome before HUGO’s implementation. The proportion of hospitalizations where a medication of interest was filled decreased abruptly by 7.0% after HUGO’s implementation, and this was statistically significant ($p < 0.0001$). Finally,

there was a significant ($p=0.0001$) decrease in slope after implementation of HUGO. These regression coefficient interpretations are summarized in table 8. In our sensitivity analyses we did not find that removing potentially influential points (intervals 18, 19, 21) resulted in a better fitting model than in the original primary analysis (see appendix L).

Table 8: Interpretation of the regression coefficients for the segmented linear regression model of our data

Variable	Parameter Estimate	P-value	Interpretation
Intercept	0.12105	<.0001	Just before the beginning of the observation period 12.1% of hospitalizations had a medication of interest filled.
Baseline Trend	0.004212	<.0001	Baseline slope; there was significant interval to interval increase in the proportion of hospitalizations with a medication of interest filled before HUGO's implementation
Level Change after intervention	-0.06976	<.0001	The proportion of hospitalizations with a medication of interest filled decreased abruptly by 7.0% after HUGO's implementation
Trend Change after intervention	-0.00403	0.0001	There was a significant change in slope (decreasing) after implementation of HUGO

By extrapolating our trendline for the counterfactual condition that HUGO had not been implemented, we see that there is a large difference between the observed and counterfactual outcome indicating that there was a reduction in the proportion of hospitalizations where an inappropriate prescription was filled post-discharge that occurred post-HUGO (see fig.5). This is further shown by the absolute difference between the counterfactual and observed outcomes at 6

months, 1 year, 2 years, and 5 years post interval 19, shown in table 9. For example, at the 6 months mark we find that if HUGO had not been implemented the proportion of hospitalizations where a medication of interest was filled would be 7.8% higher than observed. In accordance with our model we see an increasing absolute difference between the observed and counterfactual outcome over time.

Fig.5: Trendline of the observed vs. counterfactual proportion of hospitalizations where a medication of interest was filled

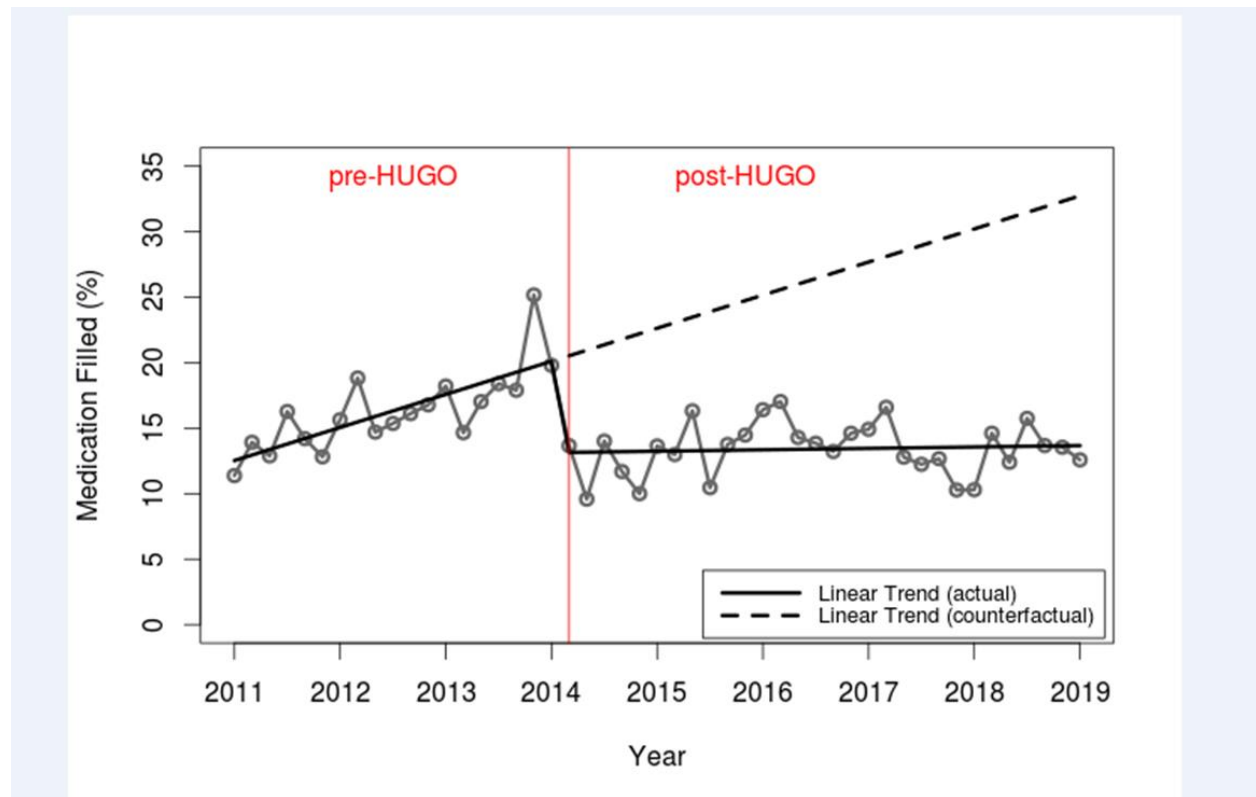


Table 9: Absolute difference between the counterfactual and observed outcome post-HUGO at various time points

Time post-HUGO (after interval 19)	Observed outcome	Counterfactual outcome	Absolute difference (observed-counterfactual)	Interpretation
6 months post	0.136076	0.213714	-0.077638	If HUGO had not been implemented then the proportion of hospitalizations where a medication of interest filled would be 7.8% higher than the current state
1 year post	0.13241	0.22635	-0.09394	If HUGO had not been implemented then the proportion of hospitalizations where a medication of interest filled would be 9.4% higher than the current state
2 years post	0.133502	0.251622	-0.11812	If HUGO had not been implemented then the proportion of hospitalizations where a medication of interest filled would be 11.8% higher than the current state
5 years post	0.136778	0.327438	-0.19066	If HUGO had not been implemented then the proportion of hospitalizations where a medication of interest filled would be 19.1% higher than the current state

5.2.3 Secondary analysis

To determine whether there was a short term disruption around the time of HUGO's implementation we used a washout period which excluded the interval before, during, and after HUGO's implementation. With our washout period we see 16.1% (913/5678) and 13.5% (191/11,756) of hospitalizations having a medication of interest filled pre- versus post-HUGO

respectively. This is comparable to our findings without the washout period (16.2% pre-HUGO, 13.4% post-HUGO) (see appendix M).

We examined the specific medication groups individually to see how the individual medication classes changed with the implementation of HUGO. In our subgroup analysis (see table 10) we see that the proportion of hospitalizations where an antipsychotic was inappropriately filled post-discharge remains unchanged after HUGO, however for the two other medication classes the proportion of hospitalizations with our outcome decreases post-HUGO.

Table 10: Subgroup analysis, medication classes

Subgroup	Exposure	N, Encounters	N, Outcomes	% with Outcome
Antipsychotics	Pre-HUGO	438	20	4.57%
	Post-HUGO	986	43	4.36%
Benzodiazepines	Pre-HUGO	3047	95	3.12%
	Post-HUGO	6190	129	1.40%
Gastric acid supressants	Pre-HUGO	4438	855	19.27%
	Post-HUGO	8727	1489	11.31%

Chapter 6

6-Discussion

6.1 Chapter overview

In this chapter the main results of this study will be summarized and compared to previous research on electronic and enhanced medication reconciliation (medication reconciliation), and the contribution of this study to the body of knowledge on medication reconciliation will be discussed. The implications for policy and clinical practice will also be discussed, as well as the study strengths and limitations and future directions for research.

6.2 Discussion

This study evaluated the impact that the implementation of HUGO has had on medications errors—specifically the potentially inappropriate continuation of antipsychotics, benzodiazepines, and gastric acid suppressants. This is the one of the first evaluations of the impact of HUGO at LHSC and SJHC, and adds to the limited body of knowledge on the impact of electronic medication reconciliation on medication errors.

6.2.1 Results

Our study demonstrated that the implementation of HUGO has resulted in a lower proportion of hospitalizations where a potentially inappropriate medication (antipsychotics, benzodiazepines, gastric acid suppressants) was filled post hospital discharge. There was both a significant reduction in the proportion of potentially inappropriate medications overall, and significant one time decrease in the filling of potentially inappropriate medications at the time of HUGO implementation. This is likely a consequence of the electronic medication reconciliation component of HUGO, however, we are unable to definitively attribute the observed outcome to solely the electronic medication reconciliation component of HUGO. HUGO is a multi-faceted program, including bar coding, computerized physician order entry (CPOE), electronic medication administration (e-Mar), and electronic medication reconciliation (e-medication reconciliation) techniques. Although electronic medication reconciliation is the intervention which in theory would have the largest impact of reducing medication errors, such as the

potentially inappropriate continuation of medications, we cannot definitively discount the role other features of HUGO might have had on reducing the proportion of hospitalizations where a medication of interest was filled post-discharge.

In our exploratory analysis of the individual medication classes, we found there was a high relative decrease after HUGO with both gastric acid suppressants (pre-HUGO: 19.27%, post-HUGO: 11.31%, relative decrease of 57.69%), and benzodiazepines (pre-HUGO: 3.12%, post-HUGO: 1.40%, relative decrease 41.3%). Antipsychotics were not commonly prescribed and did not have a large magnitude of relative decrease following the implementation of HUGO (pre-HUGO: 4.57%, post-HUGO: 4.36%, relative decrease of 4.57%). This may be due to the fact that long-term use of antipsychotics and benzodiazepines are associated with more severe side effects (e.g. falls, arrhythmias, cognitive decline, sedation, addiction) compared to gastric acid suppressants (e.g. increased risk of community-acquired pneumonia and enteric infection), resulting in physicians being more vigilant about discontinuing antipsychotics, and benzodiazepines when their use is unwarranted.

This study also assumes that we were able to effectively exclude any hospitalizations where continuation of a medication of interest would be appropriate. Although we acknowledge that it is possible we were unable to exclude all hospitalizations where continuation of a medication post-discharge would be appropriate, we believe with all of the exclusion in place it is unlikely that enough of these appropriate continuations were included in our analyses that the results would be affected. This is further supported by similar methodology and assumptions being used in a study by Scales et al. to measure potentially inappropriate continuation of the same medication classes, with this study being published in a well-respected journal.³⁰

6.2.2 Comparison to previous research

Our study results are most comparable to prior studies evaluating the impact of electronic medication reconciliation. We were unable to isolate the effect of electronic medication reconciliation from the other components of HUGO (bar coding, Computerized Physician Order Entry, and electronic Medication Administration record), which makes a direct comparison of

our study results to those which were able to isolate the effects of electronic medication reconciliation challenging.

Based on our systematic review (chapter 3), we observed inconsistent results in the reduction of medication errors and ADEs after implementation of electronic medication reconciliation. We found that electronic medication reconciliation compared to paper-based medication reconciliation was associated with a lower proportion of patients with at least one medication error or ADE in two out of 3 studies.^{34,35,53} Specifically, two studies with a low risk of bias^{35,53} found the crude and adjusted odds ratios to be statistically significant, and a third with unclear risk of bias³⁴ found no statistically significant improvement. We found that electronic medication reconciliation was not associated with a statistically significant reduction in the mean number of medication discrepancies or medication errors per patient.^{50,55} Additionally, we found that electronic medication reconciliation was associated with reduction in the proportion of medications with errors compared to basic medication reconciliation; one of these studies (with a moderate risk of bias) found a significant reduction.⁵⁴ Our outcome can be classified as the proportion of patients with at least one medication error at discharge, represented by the filling of at least one medication of interest post discharge. Two studies mentioned above from our systematic review match this outcome.^{34,54} Only one of these studies found a significant reduction in the proportion of patients with at least one medication error after implementation of electronic medication reconciliation.⁵⁴ Hence, our results are in alignment with some of the literature, and add additional evidence to support the positive impact observed from electronic medication reconciliation. Advantages of our study relative to prior literature, include a well-defined outcome based on clinically relevant medications, the use of health administrative databases to ascertain our exposure and outcome, a large sample size, and our analytic techniques.

6.2.3 Study strengths and limitations

This study used the combined power of CERNER and ICES databases to identify our cohort, with data linkage allowing us to identify conditions and covariates which would otherwise not be possible. For example performing this data linkage allowed us to flag patients who received one our medications of interest during their hospital stay, which would otherwise

not be possible with standard ICES datasets as inpatient medications are not recorded in ODB. To ensure that our exclusion diagnoses were accurate and as complete as possible we enlisted the assistance of an internal medicine specialist to identify patients where continuation of antipsychotics, benzodiazepines or gastric acid suppressant medications post discharge would be appropriate. Furthermore, our outcome measure-filling a medication of interest post-discharge as an indication of potentially inappropriate continuation of medications-has been used previously in a high-quality study.³⁰ We used validated ICES-derived cohorts to measure prior conditions of our cohort where possible, and coding definitions from previous studies where it was not. We analyzed our data using segmented regression, which has been documented as a valid, quasi-experimental approach for evaluating longitudinal effects of interventions such as HUGO.⁷⁵ Secondary analyses were used to explore the robustness of our finding, which used a washout period to adjust for the time it took for HUGO to be fully implemented, any associated learning curves for staff, and potential bias in medication reconciliation performance in anticipation of HUGO's implementation.

As previously mentioned, we are attributing the impact of HUGO to the electronic medication reconciliation component of HUGO. However, HUGO is a multi-faceted program, and we cannot definitively discount the role other features included in HUGO may have had on our outcome. We attempted to exclude as many hospitalizations as possible where continuation of a medication of interest would be appropriate, however this may not have been completely successful, so the absolute rates of potentially inappropriate medication continuation may be overestimated. In order to avoid introducing survival bias into our study we chose to exclude patient encounters where a patient died or returned to the ER within 5 days of discharge, however, excluding these patients is not without consequence. Patients who experience death or return to the ER may have still experienced our outcome of interest, which would result in an underestimate of the effect of HUGO. This study examined the impact of HUGO on medication errors but not the clinical impact for patients. Although a reduction in medication errors is generally correlated with improved patient outcomes, we cannot conclude that HUGO had a significant impact on patient outcomes.

Although we used segmented regression, which is recommended for assessing the impact of interventions such as HUGO, we did not use a controlled before/after design. In this context a controlled before/after design would have required recruiting another hospital to serve as a control group which did not implement CERNER but had a comparable medication reconciliation design to that implemented at LHSC and SJHC pre-HUGO. Recruiting such a hospital was not feasible for the purposes of this study, hence although using a controlled design may have strengthened the conclusions of our study this was not possible.

We experienced a couple of limitations surrounding the use of ODB. The Ontario Drug Benefit database (ODB) which was used to measure our outcome can only capture data on patients who are eligible for the ODB program with complete population coverage limited to those 65 and older. This resulted in our study cohort only including patients over the age of 66 at time of hospital admission, to allow for us to measure our outcome and exclude patients who received a medication of interest within 6 months of admission. Excluding patients under 66 years of age will impact the generalizability of our results, as physician electronic medication reconciliation completion habits could differ by age if physicians are more or less likely to complete electronic medication reconciliation for older patients. Additionally, using ODB we are only able to capture patients who filled prescription. If a large number of prescriptions went unfilled, this may have led to an underestimate of the number of potentially inappropriate prescriptions being continued post discharge.

6.2.4 Policy and clinical implications

6.2.4.1 Implications for LHSC and SJHC

The positive impact of HUGO on reducing medication errors suggests that investment into HUGO has resulted in a clinically relevant improvement in an important metric and indicates that continued support for electronic medication reconciliation procedures is worth while. This continued support could include more staff awareness campaigns on the impact of electronic medication reconciliation at LHSC and SJHC. These results also serve as an indicator that LHSC and SJHC are committed to improving the safety of its patients, and that this has been

a successful endeavour which is an important commitment in the eyes of patients who attend this hospital system.

6.2.4.2 Implications for patients

The results of this study indicate that electronic medication reconciliation is effective at reducing medication errors, specifically the potentially inappropriate continuation of medications after hospital discharge. If patients are less likely to be sent home on a medication they do not need then they are less likely (in theory) to experience ADEs including emergency department visits and re-hospitalizations associated with the medication. Previous research examining the impact of medication reconciliation programs on medication errors and ADEs has found that both medication errors and ADEs were reduced, supporting the theory that patient outcomes were likely improved through HUGO^{76,77}. Future studies could evaluate the impact of HUGO on patient outcomes such as 30-day hospital readmissions and return to ER to further explore the impact that electronic medication reconciliation has on patients and its value to patient safety.

6.2.4.3 Implications for clinicians

As this study shows an association between electronic medication reconciliation and decreased medication errors, physicians may be more diligent when completing electronic medication reconciliation, as they may view their efforts as making an impact. This study also highlights how frequently medication errors occur, and given the classes of medication under study and the known dangers of their long-term use these findings may make physicians more vigilant when performing medication reconciliation in the future.

6.2.4.4 Implications for the healthcare system

The positive results displayed by HUGO may guide and encourage other hospitals to take a similar approach to medication reconciliation. Overall this could lead to fewer medication errors, their associated ADEs and negative impacts to the health care system (e.g. increased costs due to unnecessary readmissions and emergency department visits) on a large scale.

6.3 Future research

Future studies could isolate the effect of the electronic medication reconciliation component of HUGO on medication errors by making use of CERNER where medication reconciliation completion is documented. Isolating this impact could strengthen the argument for a positive effect of electronic medication reconciliation on reducing medication errors. Additionally, future studies could evaluate the clinical impact of HUGO for patients, including investigating 30-day hospital readmissions and related emergency department visits. This would also provide information of the impact of HUGO, and specifically electronic medication reconciliation, on ADEs. Establishing a more concrete or uniform definition of medication reconciliation, medication discrepancies, and medication errors would allow for a more accurate comparison of medication reconciliation programs. Studies of higher quality (lower bias) would also allow for more concrete conclusions on the effectiveness of medication reconciliation programs to be formed.

6.4 Conclusions

In this retrospective cohort study of patients >65 years at LHSC and SJHC in London, Ontario we evaluated the impact of HUGO on medication errors and provided new evidence of the positive impact of electronic medication reconciliation programs on reducing medication errors. We were able to demonstrate that implementation of HUGO was associated with a significant decrease in the proportion of hospitalizations where there was potentially inappropriate continuation of antipsychotics, benzodiazepines and gastric acid suppressants post hospital discharge. Additional research is required to evaluate the clinical impact of implementing HUGO, and to explore the contribution of electronic medication reconciliation versus other components of HUGO to the observed reduction.

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Appendices

Appendix A-Search strategies for Ovid MEDLINE, EMBASE, and Scopus.

Ovid MEDLINE <1946 to Oct.9, 2019>

1 Patient admission/

2 Patient discharge/

3 Patient transfer/

4 continuity of patient care/

5 patient admi* or patient discharge* or patient transfer* or care continu* or continu* of care or continu* of patient care

6 1 or 2 or 3 or 4 or 5

7 Medication errors/

8 Patient readmission/

9 Inappropriate prescribing/

10 “Drug-Related Side Effects and Adverse Reactions”/

11 medicat* discrepant* or inappropriate prescript* or inappropriate Prescrib* or readmi* or adverse drug event* or medication error*

12 7 or 8 or 9 or 10 or 11

13 medication reconciliation/

14 Medicat* reconcil* or reconcil* medicat* or medrec

15 13 or 14

16 6 or 12

17 15 and 16

18 limit 17 to English

Embase <1946 to Oct.9, 2019>

1 Hospital admission/

2 Hospital discharge/

3 Patient transport/

4 patient adm* or patient discharge* or patient transfer* or care continu* or continu* of care or continu* of patient care

5 1 or 2 or 3 or 4

6 Medication error/

7 Hospital readmission/

8 Inappropriate prescribing/

9 Medicat* discrepanc* or Medicat* error* or patient readmi* or inappropriate prescript* or inappropriate prescrib* or adverse drug event

10 6 or 7 or 8 or 9

11 medication therapy management/

12 Medicat* reconcil* or reconcil* or medrec

13 11 or 12

14 5 and 10 and 13

15 limit 14 to English

Scopus <1966 to Oct.9, 2019>

1 ({medication error} OR {medication discrepancy} OR {hospital readmission} OR {inappropriate prescribing} OR {adverse drug event}) AND ({medication reconciliation}) AND ({patient admission} OR {patient discharge} OR {patient transfer}OR {continuity of patient care})

2 (LIMIT-TO (DOCTYPE, "ar")) AND (LIMIT-TO (LANGUAGE, "English"))

Appendix B-Summary of the characteristics of included studies in systematic review

Author(y ear, citation)	Study design	Setting	No. of patients	Target of intervention	Study inclusion criteria	Study exclusion criteria	Components of the intervention (description, timing, comparison)	Intervention delivered by	Outcomes measured
Allison et al. (2015) [32]	Retrospective cohort study	An academic , tertiary care facility (Tuft's medical centre, USA) and outpatient intravenous antimicrobial therapy program	200 (n=100 pre-EDMRT, n=100 post-EDMRT)	To measure the types and prevalence of antibiotic errors at hospital discharge before and after the addition of an electronic discharge medication reconciliation tool	patients aged 18 or older, discharged from Tufts Medical Center with IV antibiotics and followed in the Tufts MC's clinical Outpatient Parenteral Antimicrobial Therapy program from Jan. 2009 to Dec.2011.	Patients who initiated IV antibiotics as outpatients , or who were prescribed IV antibiotics as chronic suppression. Patients discharged with IV antibiotics who were not followed in the clinical OPAT program.	<p><i>For post-EDMRT:</i> physicians prescribe admission orders, input home medications electronically to create an inpatient medication list. At time of hospital discharge the prescribing physician creates an electronic list of medications from the current inpatient list.</p> <p><i>For pre-EDMRT:</i> discharge medications transcribed by hand from the inpatient electronic medication list.</p> <p>Timing: medication reconciliation at discharge</p>	For post-EDMRT : physician For pre-EDMRT : not reported	1) number of patients with min. 1 medication error 2) crude OR of discharge with at least one antibiotic error 3) types and prevalence of medication errors 4) adjusted OR for day of discharge and total number of discharge medications 5)change in OR for every 5 additional discharge medications

							Comparison: electronic versus basic medication reconciliation		
Bergkvist et al.(2009) [37]	Longitudi nal study with interventi on and control group	Departm ent of internal medicine at a referral hospital (Landskr ona hospital Sweden)	173 (n=52 for intervent ion group, n=63 for control group)	To improve the quality of discharge summaries including the medication report to reduce medication errors	65 years old, admitted to internal medicine department, resident of Landskrona or Svalov including patients discharged to the community health care and those without help from the community health care.	None reported	<p><i>For intervention group:</i> admission medication reconciliation, medication review to identify drug-related problems and inappropriate drug use, creation of systematic medication care plan (updated continuously), and discharge summary (medication report plus list).</p> <p><i>For control group:</i> same care as intervention group minus discharge summary</p>	Perform ed by physicia n and reviewe d by a pharmac ist	1) Number of medicati on discrepanc ies in discharge summary 2) total number (% of total) medicati on with medicati on errors
							Timing: medication reconciliation at admission and discharge		
							Comparison: enhanced versus basic medication reconciliation		

Farley et al.(2014) [29]	Randomized controlled trial	Cardiology, internal medicine, family medicine and orthopedic services at a tertiary care hospital (UIHC, USA)	592 (n=198 for control group, n=199 for minimal intervention group, n=195 for enhanced intervention group)	To determine if involving clinical pharmacists in hospital care, medication reconciliation, and discharge medical plan communication can reduce medication discrepancies	min. 18 yo, spoke English or Spanish, min. 1 of following diagnoses: hypertension, hyperlipidemia, hypertension, heart failure, coronary artery disease, MI, transient ischemic attack, stroke, diabetes, asthma, chronic obstructive pulmonary disease or require anticoagulation.	hearing impairment, substance abuse problems or severe psychiatric conditions	<p><i>For control group:</i> medication list collection at admission and typical discharge summaries sent to primary care physicians</p> <p><i>For minimal intervention group:</i> medication counselling and medication reconciliation at admission, medication reconciliation at discharge and discharge medication teaching session</p> <p><i>For enhanced intervention group:</i> as for minimal plus discharge care plan prepared and faxed to community physician and pharmacy. F/U phone call from PCM 3-5 days post discharge to address any medication related issues since discharge</p>	For control group: floor nurse For minimal intervention group: pharmacist case manager For enhanced intervention group: pharmacist case manager	1) number of medication discrepancies per patient of high risk, 2) number of medication discrepancies per patient, 3) average number of medication discrepancies of high relevance
							Timing: medication reconciliation at admission and discharge		

							Comparison: Enhanced versus basic medication reconciliation		
Garcia-Molina Sáez et al.(2016) [38]	Quasi-experimental interrupted time-series study	Cardiopneumology unit at referral hospital (Spain)	321 (n=199 for pre-intervention period, n=105 for post-intervention period)	To analyze the effectiveness of a computerized pharmaceutical intervention to reduce reconciliation errors at discharge	kept in unit for more than 48hrs	patients not able to be interviewed (too ill) and unaccompanied	<p><i>For pre-intervention period:</i> structured interview to obtain home medication history after obtaining the treatment recorded in computerized primary care register. Prescription bottle or medical reports supplied by patients checked and recorded in form.</p> <p><i>For post-intervention period:</i> same as above plus pharmacist included pre-admission medication in computerized tool integrated into electronic clinical history of patient and designed to facilitate medication reconciliation. Home medication history recorded by pharmacist</p>	<p>For pre-intervention period: clinical pharmacist</p> <p>For post-intervention period: clinical pharmacist and physician</p>	1) mean number of reconciliation errors per patients, 2) mean percentage of reconciliation errors per patient (visual inspection of time-series analysis graphs), 3) classification of errors (type, severity)

							Timing: medication reconciliation at admission and discharge		
							Comparison: electronic versus paper-based medication reconciliation		
Cunningham et al.(2014) [33]	Controlled before/after pilot study	Surgical and medical service wards at a large academic medical centre (unknown)	Not reported	to pilot a new best medication reconciliation along with technology enables solutions to detect and avert medication discrepancies, eliminating medication errors to prevent ADE and associated patient harm in transitions	admitted to one of the 2 surgical and medical service wards participating in pilot project during its 2-week operation time	None reported	<i>Enhanced model:</i> nurse-pharmacist collaboration to collect and document medication history at admission, prescriber chronic continuity therapy orders placed only following medication history verification at admission, multidisciplinary checklist, huddle btw pharmacist and provider at time of discharge before issuing any home going prescriptions. <i>Baseline model:</i> not reported, but indicated that some medication reconciliation program in place	Enhanced model: nurse, pharmacist, provider at time of discharge	1)patients with dismissal documentation errors, 2) medications with errors on dismissal, 3) high risk medications with errors

							Timing: medication reconciliation at admission and discharge		
							Comparison: enhanced versus basic medication reconciliation		
Midlov et al.(2011) [36]	Interrupted time series study	Internal medicine departments at a referral hospital (Landskrona hospital Sweden)	123 (for period 1: n=39, for period 53, for period 3: 31)	to assess the impact of medication reconciliation interventions on medication error rates when elderly patients are discharged from hospital to community care or nursing homes	min. 65yo, patient living in nursing homes or in their own homes with care provided by the community nursing system in the town of Landskrona and had been treated at one of the three departments of internal medicine at Landskrona hospital during the study periods. Discharged to community care or nursing home.	None reported	<i>Period 1:</i> discharge medication reconciliation. LImm discharge form written, discussed with and given to patient (plus sent to community health care and patient's GP as applicable) <i>Period 2:</i> same as above plus medication list generated in the hospital electronic patient medical record, and LImm quality control form for discharge medication reconciliation was performed by pharmacist <i>Period 3:</i> same as above (period 1 and 2) plus specific routine included to synchronise all discharge medication lists including the medication list in the ApoDos-system (a medication dispensing system).	Period 1: physician Period 2 and 3: physician and pharmacist	1) mean number of errors per patient at admission, 2) most common medication error at admission, 3) number of Apo-D patients with medication errors at discharge, 4) total number of medication errors for patients with ApoDos at discharge, 5) mean number of errors per ApoDps patient at discharge 6) number of ApoDos patients with min.3 med errors at discharge 7) number of ApoDos patients

							Timing: medication reconciliation at discharge		with min. 1 med errors at discharge 8) degree of clinical risk based on errors at discharge (for patients with ApoDos and without ApoDos)
							Comparison: electronic versus paper-based medication reconciliation		
Murphy et al.(2009) [34]	Controlled before/after pilot study	An academic medical center and level 1 trauma center (USA)	07 audit: 134, 06 audit: 149	the implement ation of a comprehen sive medication reconciliati on program to reduce errors in admission and discharge medication orders at an academic medical center	admitted to medical and surgical patient units that were originally audited in Nov./Dec 2006 during the study period (2 weeks in June 2007)	none reported	<i>For 07 audit(interventio n implemented):</i> Medical reconciliation report form created through the electronic medical record consisting of home med list (obtained and entered into EMR by clinical pharmacist at admission), active inpatient meds at time report printed, and additional or modified orders. final discharge orders updated on patient's med list within the EMR after report	For 07 audit: physicia n and pharmac ist For 06 audit: not reported	1) Difference (%) in discharge orders with errors (from 06 audit to 07 audit) by category (omitted home medicatio ns, omitted inpatient medicatio ns, missing strength, missing directions, unaccepta ble abbreviati ons)

							<p>completed, and discharge orders reviewed and verified by pharmacists for accuracy. <i>For 06 audit:</i> details not reported, however some medication reconciliation program in place.</p>		
							<p>Timing: medication reconciliation at discharge</p>		
							<p>Comparison: electronic versus paper-based medication reconciliation</p>		

Smith et al.(2016) [35]	Pre-post quasi-experimental study design	A major academic hospital (UPMC, USA)	560 (n=317 pre-intervention, n=243 post intervention)	To determine the effects of automated PCP communication and patient safety tools (including computerized discharge medication reconciliation) on discharge medication errors and post-hospitalization patient outcomes.	admitted to general medicine, geriatrics or cardiology inpatient services, >=18, discharged home, medically complex (>=2 comorbid conditions present defined using Elixhauser comorbidity system), prescribed >=5 preadmission medications (polypharmacy), outpatient care provided by PCPs who 1) use the UPMC Epic ambulatory care EMR and 2) admitted >=5 patients to UPMC Presbyterian in the year preceding the study.	admitted to critical care unit units, admitted from skilled nursing facilities, diagnosed with dementia, or organ transplant recipients	<p><i>Post-intervention:</i> mandatory electronic medical record-based discharge medication reconciliation procedure, with reports given to patients and sent to PCPs (implemented in Cerner PowerChart)reconciling against medication histories obtained by hospital personnel at admission</p> <p><i>Pre-intervention:</i> paper-based non-mandatory discharge medication reconciliation process, reconciling against medication histories obtained by hospital personnel at admission</p> <p>Timing: medication reconciliation at discharge</p>	Hospital personnel	1) number of medication errors 2) number of clinically important medication errors, 3) medically indicated variance 4) readmission (%) at thirty day follow-up 5) emergency department visit (%) at thirty day follow up 6) attended PCP follow-up appointment (%) in thirty day follow-up 7) Dies (%) in 30-day follow up 8) odds ratio of intervention effects on unintended medication variances (unadjusted, adjusted for age sex and insurance, adjusted for age sex insurance and comorbidities)
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							Comparison: electronic versus paper-based medication reconciliation		ty score, adjusted for age sex insurance comorbidi ty score and number of medicatio ns)
Tamblyn et al.(2018) [30]	Pragmatic randomiz ed trial	Medical and surgical units at an academic medical center (Canada)	4674 (consent ed to participat e: intervent ion unit: n=1692, control unit: n=1885)	To determine if automated medication reconciliati on can reduce the rate of potential adverse drug events (PADEs) in hospitalize d medical and surgical patients post discharge compared with usual care	None reported	None reported	<i>Intervention units:</i> Automated medication reconciliation application retrieves community- based medications from provincial insurance agency and aligns it with in-hospital medications from the hospital drug information system, Discharge prescription generated using a one-click action bar where the community and hospital drugs to be continued, stopped, modified or started are determined. <i>Control units:</i> used fillable PDF form to complete medication reconciliation	Not reported	1) rate of PADEs at discharge 2) OR of PADEs at discharge between the two groups 3)errors of omission (%, OR), 4) therapy duplicatio ns (%, OR)
							Timing: medication reconciliation at discharge		

							Comparison: electronic versus paper-based medication reconciliation		
Tong et al.(2017) [31]	Cluster randomized controlled investigation	General medical unit at an adult major referral hospital (The Alfred Hospital, Australia)	832 (pharmacist discharge summaries: n=401, medical discharge summaries: n=431)	to evaluate whether pharmacist completing the medication management plan in the medical discharge summary reduced the rate of medication errors in these summaries	patients discharged during the pharmacists ' working hours (8am-5pm, 7 days a week)	patients transferred to another hospital or died during inpatient admission	<p><i>For pharmacist units:</i> discharge summaries with medication management plans completed by a pharmacist</p> <p><i>For medical units:</i> standard medical discharge summaries completed by medical officers of the relevant teams</p> <p>Timing: medication reconciliation at discharge</p> <p>Comparison: enhanced versus basic medication reconciliation</p>	Pharmacist or medical officer as applicable	1) summaries with errors 2) errors per patient 3) severity of error 4) error type

Appendix C-Medications of interest for exclusion and outcome ascertainment

i. Antipsychotics

DIN	Drug Name	DCLASS
02248034	AA-CLOZAPINE	ANTIPSYCHOTIC AGENTS
02248035	AA-CLOZAPINE	ANTIPSYCHOTIC AGENTS
02458748	AA-CLOZAPINE	ANTIPSYCHOTIC AGENTS
02458756	AA-CLOZAPINE	ANTIPSYCHOTIC AGENTS
02414538	ABBOTT-OLANZAPINE ODT	ANTIPSYCHOTIC AGENTS
02414546	ABBOTT-OLANZAPINE ODT	ANTIPSYCHOTIC AGENTS

02414554	ABBOTT-OLANZAPINE ODT	ANTIPSYCHOTIC AGENTS
02420538	ACCEL-OLANZAPINE	ANTIPSYCHOTIC AGENTS
02420546	ACCEL-OLANZAPINE	ANTIPSYCHOTIC AGENTS
02420554	ACCEL-OLANZAPINE	ANTIPSYCHOTIC AGENTS
02420562	ACCEL-OLANZAPINE	ANTIPSYCHOTIC AGENTS
02420570	ACCEL-OLANZAPINE	ANTIPSYCHOTIC AGENTS
02420589	ACCEL-OLANZAPINE	ANTIPSYCHOTIC AGENTS
02450860	ACH-QUETIAPINE FUMARATE XR	ANTIPSYCHOTIC AGENTS
02450879	ACH-QUETIAPINE FUMARATE XR	ANTIPSYCHOTIC AGENTS
02450887	ACH-QUETIAPINE FUMARATE XR	ANTIPSYCHOTIC AGENTS
02450895	ACH-QUETIAPINE FUMARATE XR	ANTIPSYCHOTIC AGENTS
02450909	ACH-QUETIAPINE FUMARATE XR	ANTIPSYCHOTIC AGENTS
02325659	ACT OLANZAPINE	ANTIPSYCHOTIC AGENTS
02325667	ACT OLANZAPINE	ANTIPSYCHOTIC AGENTS
02325675	ACT OLANZAPINE	ANTIPSYCHOTIC AGENTS
02325683	ACT OLANZAPINE	ANTIPSYCHOTIC AGENTS
02325691	ACT OLANZAPINE	ANTIPSYCHOTIC AGENTS
02325713	ACT OLANZAPINE	ANTIPSYCHOTIC AGENTS
02327562	ACT OLANZAPINE ODT	ANTIPSYCHOTIC AGENTS
02327570	ACT OLANZAPINE ODT	ANTIPSYCHOTIC AGENTS
02327589	ACT OLANZAPINE ODT	ANTIPSYCHOTIC AGENTS
02327597	ACT OLANZAPINE ODT	ANTIPSYCHOTIC AGENTS
02282585	ACT RISPERIDONE	ANTIPSYCHOTIC AGENTS
02282593	ACT RISPERIDONE	ANTIPSYCHOTIC AGENTS
02282607	ACT RISPERIDONE	ANTIPSYCHOTIC AGENTS
02282615	ACT RISPERIDONE	ANTIPSYCHOTIC AGENTS
02282623	ACT RISPERIDONE	ANTIPSYCHOTIC AGENTS

02282631	ACT RISPERIDONE	ANTIPSYCHOTIC AGENTS
02487608	AG-OLANZAPINE FC	ANTIPSYCHOTIC AGENTS
02487616	AG-OLANZAPINE FC	ANTIPSYCHOTIC AGENTS
02487624	AG-OLANZAPINE FC	ANTIPSYCHOTIC AGENTS
02487632	AG-OLANZAPINE FC	ANTIPSYCHOTIC AGENTS
02487640	AG-OLANZAPINE FC	ANTIPSYCHOTIC AGENTS
02487659	AG-OLANZAPINE FC	ANTIPSYCHOTIC AGENTS
02487667	AG-OLANZAPINE ODT	ANTIPSYCHOTIC AGENTS
02487675	AG-OLANZAPINE ODT	ANTIPSYCHOTIC AGENTS
02487683	AG-OLANZAPINE ODT	ANTIPSYCHOTIC AGENTS
02487691	AG-OLANZAPINE ODT	ANTIPSYCHOTIC AGENTS
02369079	AG-RISPERIDONE	ANTIPSYCHOTIC AGENTS
02369087	AG-RISPERIDONE	ANTIPSYCHOTIC AGENTS
02369095	AG-RISPERIDONE	ANTIPSYCHOTIC AGENTS
02369117	AG-RISPERIDONE	ANTIPSYCHOTIC AGENTS
02369125	AG-RISPERIDONE	ANTIPSYCHOTIC AGENTS
02369133	AG-RISPERIDONE	ANTIPSYCHOTIC AGENTS
09900065	AMISULPRIDE	ANTIPSYCHOTIC AGENTS
92099811	AMISULPRIDE	ANTIPSYCHOTIC AGENTS
00312673	APO CHLORPROMAZINE	ANTIPSYCHOTIC AGENTS
00312681	APO CHLORPROMAZINE	ANTIPSYCHOTIC AGENTS
00312703	APO CHLORPROMAZINE	ANTIPSYCHOTIC AGENTS
00587702	APO HALOPERIDOL LIQ 2MG/ML	ANTIPSYCHOTIC AGENTS
00396796	APO HALOPERIDOL TAB 0.5MG	ANTIPSYCHOTIC AGENTS
00396818	APO HALOPERIDOL TAB 1MG	ANTIPSYCHOTIC AGENTS
02471086	APO-ARIPIRAZOLE	ANTIPSYCHOTIC AGENTS
02471094	APO-ARIPIRAZOLE	ANTIPSYCHOTIC AGENTS

02471108	APO-ARIPIPRAZOLE	ANTIPSYCHOTIC AGENTS
02471116	APO-ARIPIPRAZOLE	ANTIPSYCHOTIC AGENTS
02471124	APO-ARIPIPRAZOLE	ANTIPSYCHOTIC AGENTS
02471132	APO-ARIPIPRAZOLE	ANTIPSYCHOTIC AGENTS
02242361	APO-HALOPERIDOL LA INJECTABLE	ANTIPSYCHOTIC AGENTS
02242362	APO-HALOPERIDOL LA INJECTABLE	ANTIPSYCHOTIC AGENTS
00463698	APO-HALOPERIDOL TAB 10MG	ANTIPSYCHOTIC AGENTS
00396826	APO-HALOPERIDOL TAB 2MG	ANTIPSYCHOTIC AGENTS
00396834	APO-HALOPERIDOL TAB 5MG	ANTIPSYCHOTIC AGENTS
02237651	APO-LOXAPINE	ANTIPSYCHOTIC AGENTS
02237652	APO-LOXAPINE	ANTIPSYCHOTIC AGENTS
02237653	APO-LOXAPINE	ANTIPSYCHOTIC AGENTS
02237654	APO-LOXAPINE	ANTIPSYCHOTIC AGENTS
02281791	APO-OLANZAPINE	ANTIPSYCHOTIC AGENTS
02281805	APO-OLANZAPINE	ANTIPSYCHOTIC AGENTS
02281813	APO-OLANZAPINE	ANTIPSYCHOTIC AGENTS
02281821	APO-OLANZAPINE	ANTIPSYCHOTIC AGENTS
02281848	APO-OLANZAPINE	ANTIPSYCHOTIC AGENTS
02333015	APO-OLANZAPINE	ANTIPSYCHOTIC AGENTS
02360616	APO-OLANZAPINE ODT	ANTIPSYCHOTIC AGENTS
02360624	APO-OLANZAPINE ODT	ANTIPSYCHOTIC AGENTS
02360632	APO-OLANZAPINE ODT	ANTIPSYCHOTIC AGENTS
02360640	APO-OLANZAPINE ODT	ANTIPSYCHOTIC AGENTS
02280396	APO-RISPERIDONE	ANTIPSYCHOTIC AGENTS
02282119	APO-RISPERIDONE	ANTIPSYCHOTIC AGENTS
02282127	APO-RISPERIDONE	ANTIPSYCHOTIC AGENTS
02282135	APO-RISPERIDONE	ANTIPSYCHOTIC AGENTS

02282143	APO-RISPERIDONE	ANTIPSYCHOTIC AGENTS
02282151	APO-RISPERIDONE	ANTIPSYCHOTIC AGENTS
02282178	APO-RISPERIDONE	ANTIPSYCHOTIC AGENTS
02473674	ARIPIRAZOLE	ANTIPSYCHOTIC AGENTS
02322390	ARIPIRAZOLE	ANTIPSYCHOTIC AGENTS
02466651	ARIPIRAZOLE	ANTIPSYCHOTIC AGENTS
02460041	ARIPIRAZOLE	ANTIPSYCHOTIC AGENTS
02471108	ARIPIRAZOLE	ANTIPSYCHOTIC AGENTS
02473682	ARIPIRAZOLE	ANTIPSYCHOTIC AGENTS
02322404	ARIPIRAZOLE	ANTIPSYCHOTIC AGENTS
02460068	ARIPIRAZOLE	ANTIPSYCHOTIC AGENTS
02471116	ARIPIRAZOLE	ANTIPSYCHOTIC AGENTS
02473690	ARIPIRAZOLE	ANTIPSYCHOTIC AGENTS
02471124	ARIPIRAZOLE	ANTIPSYCHOTIC AGENTS
02466686	ARIPIRAZOLE	ANTIPSYCHOTIC AGENTS
02322412	ARIPIRAZOLE	ANTIPSYCHOTIC AGENTS
02460076	ARIPIRAZOLE	ANTIPSYCHOTIC AGENTS
02322374	ARIPIRAZOLE	ANTIPSYCHOTIC AGENTS
02466635	ARIPIRAZOLE	ANTIPSYCHOTIC AGENTS
02473658	ARIPIRAZOLE	ANTIPSYCHOTIC AGENTS
02460025	ARIPIRAZOLE	ANTIPSYCHOTIC AGENTS
02471086	ARIPIRAZOLE	ANTIPSYCHOTIC AGENTS
02420864	ARIPIRAZOLE	ANTIPSYCHOTIC AGENTS
02471132	ARIPIRAZOLE	ANTIPSYCHOTIC AGENTS
02466694	ARIPIRAZOLE	ANTIPSYCHOTIC AGENTS
02322455	ARIPIRAZOLE	ANTIPSYCHOTIC AGENTS
02473704	ARIPIRAZOLE	ANTIPSYCHOTIC AGENTS

02420872	ARIPIRAZOLE	ANTIPSYCHOTIC AGENTS
02473666	ARIPIRAZOLE	ANTIPSYCHOTIC AGENTS
02466643	ARIPIRAZOLE	ANTIPSYCHOTIC AGENTS
02471094	ARIPIRAZOLE	ANTIPSYCHOTIC AGENTS
02322382	ARIPIRAZOLE	ANTIPSYCHOTIC AGENTS
02460033	ARIPIRAZOLE	ANTIPSYCHOTIC AGENTS
00900425	ARIPIRAZOLE	ANTIPSYCHOTIC AGENTS
00965529	ARIPIRAZOLE	ANTIPSYCHOTIC AGENTS
02460084	ARIPIRAZOLE	ANTIPSYCHOTIC AGENTS
02464144	ARIPIRAZOLE	ANTIPSYCHOTIC AGENTS
02464152	ARIPIRAZOLE	ANTIPSYCHOTIC AGENTS
02464160	ARIPIRAZOLE	ANTIPSYCHOTIC AGENTS
02464179	ARIPIRAZOLE	ANTIPSYCHOTIC AGENTS
02464187	ARIPIRAZOLE	ANTIPSYCHOTIC AGENTS
02464195	ARIPIRAZOLE	ANTIPSYCHOTIC AGENTS
02466678	ARIPIRAZOLE	ANTIPSYCHOTIC AGENTS
05751321	ARIPIRAZOLE	ANTIPSYCHOTIC AGENTS
06612408	ARIPIRAZOLE	ANTIPSYCHOTIC AGENTS
22123272	ARIPIRAZOLE	ANTIPSYCHOTIC AGENTS
66124649	ARIPIRAZOLE	ANTIPSYCHOTIC AGENTS
02488000	ARIPIRAZOLE	ANTIPSYCHOTIC AGENTS
02488019	ARIPIRAZOLE	ANTIPSYCHOTIC AGENTS
02488027	ARIPIRAZOLE	ANTIPSYCHOTIC AGENTS
02488035	ARIPIRAZOLE	ANTIPSYCHOTIC AGENTS
02488043	ARIPIRAZOLE	ANTIPSYCHOTIC AGENTS
02488051	ARIPIRAZOLE	ANTIPSYCHOTIC AGENTS
02374811	ASENAPINE	ANTIPSYCHOTIC AGENTS

02374803	A SENAPINE	ANTIPSYCHOTIC AGENTS
02374803	A SENAPINE (A SENAPINE MALEATE)	ANTIPSYCHOTIC AGENTS
02374811	A SENAPINE (A SENAPINE MALEATE)	ANTIPSYCHOTIC AGENTS
02460025	AURO-ARIPIPRAZOLE	ANTIPSYCHOTIC AGENTS
02460033	AURO-ARIPIPRAZOLE	ANTIPSYCHOTIC AGENTS
02460041	AURO-ARIPIPRAZOLE	ANTIPSYCHOTIC AGENTS
02460068	AURO-ARIPIPRAZOLE	ANTIPSYCHOTIC AGENTS
02460076	AURO-ARIPIPRAZOLE	ANTIPSYCHOTIC AGENTS
02460084	AURO-ARIPIPRAZOLE	ANTIPSYCHOTIC AGENTS
02455161	AURO-CLOZAPINE	ANTIPSYCHOTIC AGENTS
02455188	AURO-CLOZAPINE	ANTIPSYCHOTIC AGENTS
02455196	AURO-CLOZAPINE	ANTIPSYCHOTIC AGENTS
02455218	AURO-CLOZAPINE	ANTIPSYCHOTIC AGENTS
02448726	AURO-OLANZAPINE ODT	ANTIPSYCHOTIC AGENTS
02448734	AURO-OLANZAPINE ODT	ANTIPSYCHOTIC AGENTS
02448742	AURO-OLANZAPINE ODT	ANTIPSYCHOTIC AGENTS
02448750	AURO-OLANZAPINE ODT	ANTIPSYCHOTIC AGENTS
02373432	AVA-OLANZAPINE	ANTIPSYCHOTIC AGENTS
02373440	AVA-OLANZAPINE	ANTIPSYCHOTIC AGENTS
02373459	AVA-OLANZAPINE	ANTIPSYCHOTIC AGENTS
02373467	AVA-OLANZAPINE	ANTIPSYCHOTIC AGENTS
02373475	AVA-OLANZAPINE	ANTIPSYCHOTIC AGENTS
02364344	AVA-RISPERIDONE	ANTIPSYCHOTIC AGENTS
02367173	AVA-RISPERIDONE	ANTIPSYCHOTIC AGENTS
02367181	AVA-RISPERIDONE	ANTIPSYCHOTIC AGENTS
02367203	AVA-RISPERIDONE	ANTIPSYCHOTIC AGENTS
02367211	AVA-RISPERIDONE	ANTIPSYCHOTIC AGENTS

02367238	AVA-RISPERIDONE	ANTIPSYCHOTIC AGENTS
02367246	AVA-RISPERIDONE	ANTIPSYCHOTIC AGENTS
00001595	BUPROPION HCL	ANTIPSYCHOTIC AGENTS
22602390	BUPROPION HCL	ANTIPSYCHOTIC AGENTS
02385694	BUPROPION HCL SR	ANTIPSYCHOTIC AGENTS
02383187	BUPROPION HCL XL	ANTIPSYCHOTIC AGENTS
02383195	BUPROPION HCL XL	ANTIPSYCHOTIC AGENTS
00033626	CHLORMEZANONE	ANTIPSYCHOTIC AGENTS
01930001	CHLORPROMAZINE	ANTIPSYCHOTIC AGENTS
00025283	CHLORPROMAZINE	ANTIPSYCHOTIC AGENTS
00025186	CHLORPROMAZINE	ANTIPSYCHOTIC AGENTS
00025151	CHLORPROMAZINE	ANTIPSYCHOTIC AGENTS
01929968	CHLORPROMAZINE	ANTIPSYCHOTIC AGENTS
00025275	CHLORPROMAZINE	ANTIPSYCHOTIC AGENTS
01929933	CHLORPROMAZINE HCL	ANTIPSYCHOTIC AGENTS
00232831	CHLORPROMAZINE HCL	ANTIPSYCHOTIC AGENTS
00025496	CHLORPROMAZINE HCL	ANTIPSYCHOTIC AGENTS
00025178	CHLORPROMAZINE HCL	ANTIPSYCHOTIC AGENTS
01929976	CHLORPROMAZINE HCL	ANTIPSYCHOTIC AGENTS
01929909	CHLORPROMAZINE HCL	ANTIPSYCHOTIC AGENTS
00025453	CHLORPROMAZINE HCL	ANTIPSYCHOTIC AGENTS
00232157	CHLORPROMAZINE HCL	ANTIPSYCHOTIC AGENTS
00025518	CHLORPROMAZINE HCL	ANTIPSYCHOTIC AGENTS
01929941	CHLORPROMAZINE HCL	ANTIPSYCHOTIC AGENTS
00580988	CHLORPROMAZINE HCL	ANTIPSYCHOTIC AGENTS
00025461	CHLORPROMAZINE HCL	ANTIPSYCHOTIC AGENTS
00232823	CHLORPROMAZINE HCL	ANTIPSYCHOTIC AGENTS

01929917	CHLORPROMAZINE HCL	ANTIPSYCHOTIC AGENTS
01929992	CHLORPROMAZINE HCL	ANTIPSYCHOTIC AGENTS
01929984	CHLORPROMAZINE HCL	ANTIPSYCHOTIC AGENTS
00163953	CHLORPROMAZINE HCL	ANTIPSYCHOTIC AGENTS
00025488	CHLORPROMAZINE HCL	ANTIPSYCHOTIC AGENTS
00232807	CHLORPROMAZINE HCL	ANTIPSYCHOTIC AGENTS
01929925	CHLORPROMAZINE HCL	ANTIPSYCHOTIC AGENTS
00016993	CHLORPROMAZINE HCL	ANTIPSYCHOTIC AGENTS
00017000	CHLORPROMAZINE HCL	ANTIPSYCHOTIC AGENTS
00017019	CHLORPROMAZINE HCL	ANTIPSYCHOTIC AGENTS
00017027	CHLORPROMAZINE HCL	ANTIPSYCHOTIC AGENTS
00021318	CHLORPROMAZINE HCL	ANTIPSYCHOTIC AGENTS
00021326	CHLORPROMAZINE HCL	ANTIPSYCHOTIC AGENTS
00021334	CHLORPROMAZINE HCL	ANTIPSYCHOTIC AGENTS
00021342	CHLORPROMAZINE HCL	ANTIPSYCHOTIC AGENTS
00131725	CHLORPROMAZINE HCL	ANTIPSYCHOTIC AGENTS
00163988	CHLORPROMAZINE HCL	ANTIPSYCHOTIC AGENTS
00164003	CHLORPROMAZINE HCL	ANTIPSYCHOTIC AGENTS
00209902	CHLORPROMAZINE HCL	ANTIPSYCHOTIC AGENTS
00209910	CHLORPROMAZINE HCL	ANTIPSYCHOTIC AGENTS
00210684	CHLORPROMAZINE HCL	ANTIPSYCHOTIC AGENTS
00249394	CHLORPROMAZINE HCL	ANTIPSYCHOTIC AGENTS
00271101	CHLORPROMAZINE HCL	ANTIPSYCHOTIC AGENTS
00271128	CHLORPROMAZINE HCL	ANTIPSYCHOTIC AGENTS
00295086	CHLORPROMAZINE HCL	ANTIPSYCHOTIC AGENTS
00312673	CHLORPROMAZINE HCL	ANTIPSYCHOTIC AGENTS
00312681	CHLORPROMAZINE HCL	ANTIPSYCHOTIC AGENTS

00312703	CHLORPROMAZINE HCL	ANTIPSYCHOTIC AGENTS
00324299	CHLORPROMAZINE HCL	ANTIPSYCHOTIC AGENTS
00324302	CHLORPROMAZINE HCL	ANTIPSYCHOTIC AGENTS
00386588	CHLORPROMAZINE HCL	ANTIPSYCHOTIC AGENTS
00386596	CHLORPROMAZINE HCL	ANTIPSYCHOTIC AGENTS
00386618	CHLORPROMAZINE HCL	ANTIPSYCHOTIC AGENTS
00430943	CHLORPROMAZINE HCL	ANTIPSYCHOTIC AGENTS
00430951	CHLORPROMAZINE HCL	ANTIPSYCHOTIC AGENTS
00430978	CHLORPROMAZINE HCL	ANTIPSYCHOTIC AGENTS
00478334	CHLORPROMAZINE HCL	ANTIPSYCHOTIC AGENTS
00502456	CHLORPROMAZINE HCL	ANTIPSYCHOTIC AGENTS
00502464	CHLORPROMAZINE HCL	ANTIPSYCHOTIC AGENTS
00523097	CHLORPROMAZINE HCL	ANTIPSYCHOTIC AGENTS
00627615	CHLORPROMAZINE HCL	ANTIPSYCHOTIC AGENTS
00690805	CHLORPROMAZINE HCL	ANTIPSYCHOTIC AGENTS
00743518	CHLORPROMAZINE HCL	ANTIPSYCHOTIC AGENTS
00774383	CHLORPROMAZINE HCL	ANTIPSYCHOTIC AGENTS
00903042	CHLORPROMAZINE HCL	ANTIPSYCHOTIC AGENTS
01933272	CHLORPROMAZINE HCL	ANTIPSYCHOTIC AGENTS
01985434	CHLORPROMAZINE HCL	ANTIPSYCHOTIC AGENTS
01985442	CHLORPROMAZINE HCL	ANTIPSYCHOTIC AGENTS
01985450	CHLORPROMAZINE HCL	ANTIPSYCHOTIC AGENTS
01933272	CHLORPROMAZINE HCL INJ 25MG/ML USP	ANTIPSYCHOTIC AGENTS
00627615	CHLORPROMAZINE HCL INJ 27.9MG/ML	ANTIPSYCHOTIC AGENTS
02382016	CHLORPROMAZINE HCL INJ USP	ANTIPSYCHOTIC AGENTS
00743518	CHLORPROMAZINE HYDROCHLORIDE INJECTION	ANTIPSYCHOTIC AGENTS
00430943	CHLORPROMAZINE TAB 25MG	ANTIPSYCHOTIC AGENTS

01985442	CHLORPROMAZINE TABLETS B.P. 100MG	ANTIPSYCHOTIC AGENTS
01985434	CHLORPROMAZINE TABLETS B.P. 25MG	ANTIPSYCHOTIC AGENTS
01985450	CHLORPROMAZINE TABLETS B.P. 50MG	ANTIPSYCHOTIC AGENTS
00013234	CHLORPROTHIXENE	ANTIPSYCHOTIC AGENTS
00013242	CHLORPROTHIXENE	ANTIPSYCHOTIC AGENTS
66124036	CHLORPROTHIXENE	ANTIPSYCHOTIC AGENTS
66124101	CHLORPROTHIXENE	ANTIPSYCHOTIC AGENTS
00894745	CLOZAPINE	ANTIPSYCHOTIC AGENTS
02247244	CLOZAPINE	ANTIPSYCHOTIC AGENTS
02248034	CLOZAPINE	ANTIPSYCHOTIC AGENTS
02247243	CLOZAPINE	ANTIPSYCHOTIC AGENTS
00894737	CLOZAPINE	ANTIPSYCHOTIC AGENTS
02240668	CLOZAPINE	ANTIPSYCHOTIC AGENTS
02240669	CLOZAPINE	ANTIPSYCHOTIC AGENTS
02247798	CLOZAPINE	ANTIPSYCHOTIC AGENTS
02247805	CLOZAPINE	ANTIPSYCHOTIC AGENTS
02248035	CLOZAPINE	ANTIPSYCHOTIC AGENTS
02305003	CLOZAPINE	ANTIPSYCHOTIC AGENTS
02305011	CLOZAPINE	ANTIPSYCHOTIC AGENTS
02458748	CLOZAPINE	ANTIPSYCHOTIC AGENTS
02458756	CLOZAPINE	ANTIPSYCHOTIC AGENTS
22123233	CLOZAPINE	ANTIPSYCHOTIC AGENTS
22472440	CLOZAPINE	ANTIPSYCHOTIC AGENTS
90894737	CLOZAPINE	ANTIPSYCHOTIC AGENTS
90894745	CLOZAPINE	ANTIPSYCHOTIC AGENTS
02470020	CLOZAPINE TABLETS	ANTIPSYCHOTIC AGENTS
02470039	CLOZAPINE TABLETS	ANTIPSYCHOTIC AGENTS

02239919	DOM-LOXAPINE TABLETS 10MG	ANTIPSYCHOTIC AGENTS
02239920	DOM-LOXAPINE TABLETS 25MG	ANTIPSYCHOTIC AGENTS
02239921	DOM-LOXAPINE TABLETS 50MG	ANTIPSYCHOTIC AGENTS
02239918	DOM-LOXAPINE TABLETS 5MG	ANTIPSYCHOTIC AGENTS
02307324	DOM-OLANZAPINE	ANTIPSYCHOTIC AGENTS
02307332	DOM-OLANZAPINE	ANTIPSYCHOTIC AGENTS
02307340	DOM-OLANZAPINE	ANTIPSYCHOTIC AGENTS
02307359	DOM-OLANZAPINE	ANTIPSYCHOTIC AGENTS
02307367	DOM-OLANZAPINE	ANTIPSYCHOTIC AGENTS
02307375	DOM-OLANZAPINE ODT	ANTIPSYCHOTIC AGENTS
02307383	DOM-OLANZAPINE ODT	ANTIPSYCHOTIC AGENTS
02307391	DOM-OLANZAPINE ODT	ANTIPSYCHOTIC AGENTS
02278421	DOM-RISPERIDONE	ANTIPSYCHOTIC AGENTS
02278448	DOM-RISPERIDONE	ANTIPSYCHOTIC AGENTS
02278456	DOM-RISPERIDONE	ANTIPSYCHOTIC AGENTS
02278464	DOM-RISPERIDONE	ANTIPSYCHOTIC AGENTS
02278472	DOM-RISPERIDONE	ANTIPSYCHOTIC AGENTS
02278480	DOM-RISPERIDONE	ANTIPSYCHOTIC AGENTS
02309572	DOM-RISPERIDONE	ANTIPSYCHOTIC AGENTS
02294478	DOM-RISPERIDONE ODT	ANTIPSYCHOTIC AGENTS
02294486	DOM-RISPERIDONE ODT	ANTIPSYCHOTIC AGENTS
02294494	DOM-RISPERIDONE ODT	ANTIPSYCHOTIC AGENTS
00132446	DROPERIDOL	ANTIPSYCHOTIC AGENTS
00554251	DROPERIDOL	ANTIPSYCHOTIC AGENTS
02157832	DROPERIDOL	ANTIPSYCHOTIC AGENTS
02167832	DROPERIDOL	ANTIPSYCHOTIC AGENTS
02232449	DROPERIDOL	ANTIPSYCHOTIC AGENTS

02232449	DROPERIDOL INJECTION	ANTIPSYCHOTIC AGENTS
02167832	DROPERIDOL INJECTION USP 2.5MG/ML	ANTIPSYCHOTIC AGENTS
02156008	FLUPENTIXOL	ANTIPSYCHOTIC AGENTS
02156040	FLUPENTIXOL	ANTIPSYCHOTIC AGENTS
02156016	FLUPENTIXOL	ANTIPSYCHOTIC AGENTS
02331721	FLUPENTIXOL	ANTIPSYCHOTIC AGENTS
02156016	FLUPENTIXOL (FLUPENTIXOL DIHYDROCHLORIDE)	ANTIPSYCHOTIC AGENTS
02156008	FLUPENTIXOL (FLUPENTIXOL DIHYDROCHLORIDE)	ANTIPSYCHOTIC AGENTS
00524530	FLUPENTIXOL DECANOATE	ANTIPSYCHOTIC AGENTS
00524522	FLUPENTIXOL DECANOATE	ANTIPSYCHOTIC AGENTS
02156032	FLUPENTIXOL DECANOATE	ANTIPSYCHOTIC AGENTS
02024950	FLUPENTIXOL DECANOATE	ANTIPSYCHOTIC AGENTS
02024969	FLUPENTIXOL DECANOATE	ANTIPSYCHOTIC AGENTS
02091895	FLUPENTIXOL DECANOATE	ANTIPSYCHOTIC AGENTS
02092816	FLUPENTIXOL DECANOATE	ANTIPSYCHOTIC AGENTS
02242363	FLUPENTIXOL DECANOATE	ANTIPSYCHOTIC AGENTS
02242364	FLUPENTIXOL DECANOATE	ANTIPSYCHOTIC AGENTS
02331713	FLUPENTIXOL DECANOATE	ANTIPSYCHOTIC AGENTS
09857337	FLUPENTIXOL DECANOATE	ANTIPSYCHOTIC AGENTS
09857339	FLUPENTIXOL DECANOATE	ANTIPSYCHOTIC AGENTS
02331713	FLUPENTIXOL DECANOATE INJECTION BP	ANTIPSYCHOTIC AGENTS
02331721	FLUPENTIXOL DECANOATE INJECTION BP	ANTIPSYCHOTIC AGENTS
00585157	FLUPENTIXOL DIHYDROCHLORIDE	ANTIPSYCHOTIC AGENTS
00580619	FLUPENTIXOL DIHYDROCHLORIDE	ANTIPSYCHOTIC AGENTS
00580619	FLUPENTIXOL HCL	ANTIPSYCHOTIC AGENTS
00585157	FLUPENTIXOL HCL	ANTIPSYCHOTIC AGENTS
00392316	FLUPENTIXOL HCL	ANTIPSYCHOTIC AGENTS

00544426	FLUPENTIXOL HCL	ANTIPSYCHOTIC AGENTS
02024942	FLUPENTIXOL HCL	ANTIPSYCHOTIC AGENTS
02025043	FLUPENTIXOL HCL	ANTIPSYCHOTIC AGENTS
02091860	FLUPENTIXOL HCL	ANTIPSYCHOTIC AGENTS
02092794	FLUPENTIXOL HCL	ANTIPSYCHOTIC AGENTS
02129086	FLUPENTIXOL HCL	ANTIPSYCHOTIC AGENTS
02156024	FLUPENTIXOL HCL	ANTIPSYCHOTIC AGENTS
00755575	FLUPHENAZINE DECANOATE	ANTIPSYCHOTIC AGENTS
02091275	FLUPHENAZINE DECANOATE	ANTIPSYCHOTIC AGENTS
00349917	FLUPHENAZINE DECANOATE	ANTIPSYCHOTIC AGENTS
02137402	FLUPHENAZINE DECANOATE	ANTIPSYCHOTIC AGENTS
02189089	FLUPHENAZINE DECANOATE	ANTIPSYCHOTIC AGENTS
02189097	FLUPHENAZINE DECANOATE	ANTIPSYCHOTIC AGENTS
02211157	FLUPHENAZINE DECANOATE	ANTIPSYCHOTIC AGENTS
02211165	FLUPHENAZINE DECANOATE	ANTIPSYCHOTIC AGENTS
02239636	FLUPHENAZINE DECANOATE	ANTIPSYCHOTIC AGENTS
02241928	FLUPHENAZINE DECANOATE	ANTIPSYCHOTIC AGENTS
02242570	FLUPHENAZINE DECANOATE	ANTIPSYCHOTIC AGENTS
02189089	FLUPHENAZINE DECANOATE INJECTION B.P.	ANTIPSYCHOTIC AGENTS
02189097	FLUPHENAZINE DECANOATE INJECTION B.P.	ANTIPSYCHOTIC AGENTS
02383225	FLUPHENAZINE DECANOATE INJECTION, USP	ANTIPSYCHOTIC AGENTS
00029173	FLUPHENAZINE ENANTHATE	ANTIPSYCHOTIC AGENTS
00029378	FLUPHENAZINE HCL	ANTIPSYCHOTIC AGENTS
00405345	FLUPHENAZINE HCL	ANTIPSYCHOTIC AGENTS
00245240	FLUPHENAZINE HCL	ANTIPSYCHOTIC AGENTS
00410632	FLUPHENAZINE HCL	ANTIPSYCHOTIC AGENTS
00029386	FLUPHENAZINE HCL	ANTIPSYCHOTIC AGENTS

00504459	FLUPHENAZINE HCL	ANTIPSYCHOTIC AGENTS
00405361	FLUPHENAZINE HCL	ANTIPSYCHOTIC AGENTS
00029408	FLUPHENAZINE HCL	ANTIPSYCHOTIC AGENTS
00029394	FLUPHENAZINE HCL	ANTIPSYCHOTIC AGENTS
00405353	FLUPHENAZINE HCL	ANTIPSYCHOTIC AGENTS
00471518	FLUPHENAZINE HCL	ANTIPSYCHOTIC AGENTS
00504424	FLUPHENAZINE HCL	ANTIPSYCHOTIC AGENTS
00504432	FLUPHENAZINE HCL	ANTIPSYCHOTIC AGENTS
00563803	FLUPHENAZINE HCL	ANTIPSYCHOTIC AGENTS
00563838	FLUPHENAZINE HCL	ANTIPSYCHOTIC AGENTS
00563846	FLUPHENAZINE HCL	ANTIPSYCHOTIC AGENTS
00582514	FLUPHENAZINE HCL	ANTIPSYCHOTIC AGENTS
00632643	FLUPHENAZINE HCL	ANTIPSYCHOTIC AGENTS
00726338	FLUPHENAZINE HCL	ANTIPSYCHOTIC AGENTS
00726346	FLUPHENAZINE HCL	ANTIPSYCHOTIC AGENTS
00726354	FLUPHENAZINE HCL	ANTIPSYCHOTIC AGENTS
00893420	FLUPHENAZINE HCL	ANTIPSYCHOTIC AGENTS
02244166	FLUPHENAZINE HCL	ANTIPSYCHOTIC AGENTS
00405353	FLUPHENAZINE HYDROCHLORIDE	ANTIPSYCHOTIC AGENTS
00405345	FLUPHENAZINE HYDROCHLORIDE	ANTIPSYCHOTIC AGENTS
00405361	FLUPHENAZINE HYDROCHLORIDE	ANTIPSYCHOTIC AGENTS
00410632	FLUPHENAZINE HYDROCHLORIDE	ANTIPSYCHOTIC AGENTS
00563846	FLUPHENAZINE HYDROCHLORIDE	ANTIPSYCHOTIC AGENTS
00563838	FLUPHENAZINE HYDROCHLORIDE	ANTIPSYCHOTIC AGENTS
00563803	FLUPHENAZINE HYDROCHLORIDE	ANTIPSYCHOTIC AGENTS
00582514	FLUPHENAZINE HYDROCHLORIDE	ANTIPSYCHOTIC AGENTS
00726338	FLUPHENAZINE HYDROCHLORIDE	ANTIPSYCHOTIC AGENTS

00726346	FLUPHENAZINE HYDROCHLORIDE	ANTIPSYCHOTIC AGENTS
00726354	FLUPHENAZINE HYDROCHLORIDE	ANTIPSYCHOTIC AGENTS
00893420	FLUPHENAZINE HYDROCHLORIDE	ANTIPSYCHOTIC AGENTS
00542903	FLUSPIRILENE	ANTIPSYCHOTIC AGENTS
00368393	FLUSPIRILENE	ANTIPSYCHOTIC AGENTS
00542903	FLUSPIRILENE	ANTIPSYCHOTIC AGENTS
00368393	FLUSPIRILENE	ANTIPSYCHOTIC AGENTS
02247243	GEN-CLOZAPINE	ANTIPSYCHOTIC AGENTS
02247244	GEN-CLOZAPINE	ANTIPSYCHOTIC AGENTS
02305003	GEN-CLOZAPINE	ANTIPSYCHOTIC AGENTS
02305011	GEN-CLOZAPINE	ANTIPSYCHOTIC AGENTS
02421097	GEN-CLOZAPINE	ANTIPSYCHOTIC AGENTS
00749419	HALOPERIDOL	ANTIPSYCHOTIC AGENTS
00396796	HALOPERIDOL	ANTIPSYCHOTIC AGENTS
00017655	HALOPERIDOL	ANTIPSYCHOTIC AGENTS
00363685	HALOPERIDOL	ANTIPSYCHOTIC AGENTS
00552135	HALOPERIDOL	ANTIPSYCHOTIC AGENTS
00587702	HALOPERIDOL	ANTIPSYCHOTIC AGENTS
00463698	HALOPERIDOL	ANTIPSYCHOTIC AGENTS
00381772	HALOPERIDOL	ANTIPSYCHOTIC AGENTS
00713449	HALOPERIDOL	ANTIPSYCHOTIC AGENTS
00749451	HALOPERIDOL	ANTIPSYCHOTIC AGENTS
00749427	HALOPERIDOL	ANTIPSYCHOTIC AGENTS
00552143	HALOPERIDOL	ANTIPSYCHOTIC AGENTS
00396818	HALOPERIDOL	ANTIPSYCHOTIC AGENTS
00017663	HALOPERIDOL	ANTIPSYCHOTIC AGENTS
00363677	HALOPERIDOL	ANTIPSYCHOTIC AGENTS

00499579	HALOPERIDOL	ANTIPSYCHOTIC AGENTS
00768820	HALOPERIDOL	ANTIPSYCHOTIC AGENTS
00017582	HALOPERIDOL	ANTIPSYCHOTIC AGENTS
00396826	HALOPERIDOL	ANTIPSYCHOTIC AGENTS
00017671	HALOPERIDOL	ANTIPSYCHOTIC AGENTS
00363669	HALOPERIDOL	ANTIPSYCHOTIC AGENTS
00749435	HALOPERIDOL	ANTIPSYCHOTIC AGENTS
00552429	HALOPERIDOL	ANTIPSYCHOTIC AGENTS
00396834	HALOPERIDOL	ANTIPSYCHOTIC AGENTS
00017698	HALOPERIDOL	ANTIPSYCHOTIC AGENTS
00363650	HALOPERIDOL	ANTIPSYCHOTIC AGENTS
00749443	HALOPERIDOL	ANTIPSYCHOTIC AGENTS
00017574	HALOPERIDOL	ANTIPSYCHOTIC AGENTS
00587788	HALOPERIDOL	ANTIPSYCHOTIC AGENTS
00587796	HALOPERIDOL	ANTIPSYCHOTIC AGENTS
00647969	HALOPERIDOL	ANTIPSYCHOTIC AGENTS
00728292	HALOPERIDOL	ANTIPSYCHOTIC AGENTS
00728306	HALOPERIDOL	ANTIPSYCHOTIC AGENTS
00745561	HALOPERIDOL	ANTIPSYCHOTIC AGENTS
00759503	HALOPERIDOL	ANTIPSYCHOTIC AGENTS
00761745	HALOPERIDOL	ANTIPSYCHOTIC AGENTS
00761753	HALOPERIDOL	ANTIPSYCHOTIC AGENTS
00761761	HALOPERIDOL	ANTIPSYCHOTIC AGENTS
02229307	HALOPERIDOL	ANTIPSYCHOTIC AGENTS
02366010	HALOPERIDOL	ANTIPSYCHOTIC AGENTS
02406411	HALOPERIDOL	ANTIPSYCHOTIC AGENTS
80363669	HALOPERIDOL	ANTIPSYCHOTIC AGENTS

99100846	HALOPERIDOL	ANTIPSYCHOTIC AGENTS
09853758	HALOPERIDOL DECANOATE	ANTIPSYCHOTIC AGENTS
00599093	HALOPERIDOL DECANOATE	ANTIPSYCHOTIC AGENTS
02130300	HALOPERIDOL DECANOATE	ANTIPSYCHOTIC AGENTS
00980803	HALOPERIDOL DECANOATE	ANTIPSYCHOTIC AGENTS
02130297	HALOPERIDOL DECANOATE	ANTIPSYCHOTIC AGENTS
00599085	HALOPERIDOL DECANOATE	ANTIPSYCHOTIC AGENTS
00559093	HALOPERIDOL DECANOATE	ANTIPSYCHOTIC AGENTS
00897426	HALOPERIDOL DECANOATE	ANTIPSYCHOTIC AGENTS
00980781	HALOPERIDOL DECANOATE	ANTIPSYCHOTIC AGENTS
02099616	HALOPERIDOL DECANOATE	ANTIPSYCHOTIC AGENTS
02099624	HALOPERIDOL DECANOATE	ANTIPSYCHOTIC AGENTS
02194430	HALOPERIDOL DECANOATE	ANTIPSYCHOTIC AGENTS
02194449	HALOPERIDOL DECANOATE	ANTIPSYCHOTIC AGENTS
02211130	HALOPERIDOL DECANOATE	ANTIPSYCHOTIC AGENTS
02211149	HALOPERIDOL DECANOATE	ANTIPSYCHOTIC AGENTS
02230707	HALOPERIDOL DECANOATE	ANTIPSYCHOTIC AGENTS
02230708	HALOPERIDOL DECANOATE	ANTIPSYCHOTIC AGENTS
02236866	HALOPERIDOL DECANOATE	ANTIPSYCHOTIC AGENTS
02239639	HALOPERIDOL DECANOATE	ANTIPSYCHOTIC AGENTS
02239640	HALOPERIDOL DECANOATE	ANTIPSYCHOTIC AGENTS
02242361	HALOPERIDOL DECANOATE	ANTIPSYCHOTIC AGENTS
02242362	HALOPERIDOL DECANOATE	ANTIPSYCHOTIC AGENTS
02242631	HALOPERIDOL DECANOATE	ANTIPSYCHOTIC AGENTS
02099624	HALOPERIDOL DECANOATE INJ. LIQ IM 100MG/ML	ANTIPSYCHOTIC AGENTS
02099616	HALOPERIDOL DECANOATE INJ. LIQ IM 50MG/ML	ANTIPSYCHOTIC AGENTS
02194430	HALOPERIDOL DECANOATE INJECTION	ANTIPSYCHOTIC AGENTS

02194449	HALOPERIDOL DECANOATE INJECTION	ANTIPSYCHOTIC AGENTS
02383748	HALOPERIDOL DECANOATE INJECTION	ANTIPSYCHOTIC AGENTS
02383756	HALOPERIDOL DECANOATE INJECTION	ANTIPSYCHOTIC AGENTS
00808652	HALOPERIDOL INJ 5MG/ML USP	ANTIPSYCHOTIC AGENTS
02366010	HALOPERIDOL INJECTION	ANTIPSYCHOTIC AGENTS
02406411	HALOPERIDOL INJECTION, USP	ANTIPSYCHOTIC AGENTS
02130297	HALOPERIDOL LA	ANTIPSYCHOTIC AGENTS
02130300	HALOPERIDOL LA	ANTIPSYCHOTIC AGENTS
00749400	HALOPERIDOL LACTATE	ANTIPSYCHOTIC AGENTS
00808652	HALOPERIDOL LACTATE	ANTIPSYCHOTIC AGENTS
02236866	HALOPERIDOL LONG ACTING	ANTIPSYCHOTIC AGENTS
02242631	HALOPERIDOL LONG ACTING	ANTIPSYCHOTIC AGENTS
00587796	HALOPERIDOL TAB 0.5MG	ANTIPSYCHOTIC AGENTS
00587788	HALOPERIDOL TAB 1MG	ANTIPSYCHOTIC AGENTS
00761745	HALOPERIDOL TAB 2MG	ANTIPSYCHOTIC AGENTS
00761753	HALOPERIDOL TAB 5MG	ANTIPSYCHOTIC AGENTS
00761761	HALOPERIDOL-10 TAB 10MG	ANTIPSYCHOTIC AGENTS
02239639	HALOPERIDOL-LA OMEGA	ANTIPSYCHOTIC AGENTS
02239640	HALOPERIDOL-LA OMEGA	ANTIPSYCHOTIC AGENTS
02418975	IPG-OLANZAPINE	ANTIPSYCHOTIC AGENTS
02418983	IPG-OLANZAPINE	ANTIPSYCHOTIC AGENTS
02418991	IPG-OLANZAPINE	ANTIPSYCHOTIC AGENTS
02419009	IPG-OLANZAPINE	ANTIPSYCHOTIC AGENTS
02419017	IPG-OLANZAPINE	ANTIPSYCHOTIC AGENTS
02419025	IPG-OLANZAPINE	ANTIPSYCHOTIC AGENTS
02387506	IPG-OLANZAPINE ODT	ANTIPSYCHOTIC AGENTS
02387514	IPG-OLANZAPINE ODT	ANTIPSYCHOTIC AGENTS

02387522	IPG-OLANZAPINE ODT	ANTIPSYCHOTIC AGENTS
02387530	IPG-OLANZAPINE ODT	ANTIPSYCHOTIC AGENTS
02359057	IPG-RISPERIDONE	ANTIPSYCHOTIC AGENTS
02359065	IPG-RISPERIDONE	ANTIPSYCHOTIC AGENTS
02359073	IPG-RISPERIDONE	ANTIPSYCHOTIC AGENTS
02359081	IPG-RISPERIDONE	ANTIPSYCHOTIC AGENTS
02359103	IPG-RISPERIDONE	ANTIPSYCHOTIC AGENTS
02359111	IPG-RISPERIDONE	ANTIPSYCHOTIC AGENTS
02417243	JAMP OLANZAPINE FC	ANTIPSYCHOTIC AGENTS
02417251	JAMP OLANZAPINE FC	ANTIPSYCHOTIC AGENTS
02417278	JAMP OLANZAPINE FC	ANTIPSYCHOTIC AGENTS
02417286	JAMP OLANZAPINE FC	ANTIPSYCHOTIC AGENTS
02417294	JAMP OLANZAPINE FC	ANTIPSYCHOTIC AGENTS
02417308	JAMP OLANZAPINE FC	ANTIPSYCHOTIC AGENTS
02406624	JAMP OLANZAPINE ODT	ANTIPSYCHOTIC AGENTS
02406632	JAMP OLANZAPINE ODT	ANTIPSYCHOTIC AGENTS
02406640	JAMP OLANZAPINE ODT	ANTIPSYCHOTIC AGENTS
02406659	JAMP OLANZAPINE ODT	ANTIPSYCHOTIC AGENTS
02390140	JAMP QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02390159	JAMP QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02390167	JAMP QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02390175	JAMP QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02359529	JAMP-RISPERIDONE	ANTIPSYCHOTIC AGENTS
02359537	JAMP-RISPERIDONE	ANTIPSYCHOTIC AGENTS
02359545	JAMP-RISPERIDONE	ANTIPSYCHOTIC AGENTS
02359553	JAMP-RISPERIDONE	ANTIPSYCHOTIC AGENTS
02359561	JAMP-RISPERIDONE	ANTIPSYCHOTIC AGENTS

02359588	JAMP-RISPERIDONE	ANTIPSYCHOTIC AGENTS
02454319	JAMP-RISPERIDONE	ANTIPSYCHOTIC AGENTS
02230838	LOXAPINE	ANTIPSYCHOTIC AGENTS
02230839	LOXAPINE	ANTIPSYCHOTIC AGENTS
02170000	LOXAPINE	ANTIPSYCHOTIC AGENTS
00361364	LOXAPINE	ANTIPSYCHOTIC AGENTS
02230840	LOXAPINE	ANTIPSYCHOTIC AGENTS
00439819	LOXAPINE	ANTIPSYCHOTIC AGENTS
02169991	LOXAPINE	ANTIPSYCHOTIC AGENTS
02230837	LOXAPINE	ANTIPSYCHOTIC AGENTS
00217000	LOXAPINE	ANTIPSYCHOTIC AGENTS
02239918	LOXAPINE	ANTIPSYCHOTIC AGENTS
02239919	LOXAPINE	ANTIPSYCHOTIC AGENTS
02239920	LOXAPINE	ANTIPSYCHOTIC AGENTS
02242868	LOXAPINE	ANTIPSYCHOTIC AGENTS
02239101	LOXAPINE HCL	ANTIPSYCHOTIC AGENTS
02239921	LOXAPINE HCL	ANTIPSYCHOTIC AGENTS
02255448	LOXAPINE HCL	ANTIPSYCHOTIC AGENTS
02255456	LOXAPINE HCL	ANTIPSYCHOTIC AGENTS
02232966	LOXAPINE HYDROCHLORIDE IM INJECTION 50MG/ML	ANTIPSYCHOTIC AGENTS
02232968	LOXAPINE HYDROCHLORIDE ORAL CONCENTRATE 25MG/ML	ANTIPSYCHOTIC AGENTS
02237652	LOXAPINE SUCCINATE	ANTIPSYCHOTIC AGENTS
02237535	LOXAPINE SUCCINATE	ANTIPSYCHOTIC AGENTS
02170027	LOXAPINE SUCCINATE	ANTIPSYCHOTIC AGENTS
00346799	LOXAPINE SUCCINATE	ANTIPSYCHOTIC AGENTS
00346802	LOXAPINE SUCCINATE	ANTIPSYCHOTIC AGENTS
02170132	LOXAPINE SUCCINATE	ANTIPSYCHOTIC AGENTS

02237653	LOXAPINE SUCCINATE	ANTIPSYCHOTIC AGENTS
02237536	LOXAPINE SUCCINATE	ANTIPSYCHOTIC AGENTS
02237654	LOXAPINE SUCCINATE	ANTIPSYCHOTIC AGENTS
02237537	LOXAPINE SUCCINATE	ANTIPSYCHOTIC AGENTS
02170035	LOXAPINE SUCCINATE	ANTIPSYCHOTIC AGENTS
00346810	LOXAPINE SUCCINATE	ANTIPSYCHOTIC AGENTS
00346780	LOXAPINE SUCCINATE	ANTIPSYCHOTIC AGENTS
02170019	LOXAPINE SUCCINATE	ANTIPSYCHOTIC AGENTS
02237651	LOXAPINE SUCCINATE	ANTIPSYCHOTIC AGENTS
02237534	LOXAPINE SUCCINATE	ANTIPSYCHOTIC AGENTS
02236943	LOXAPINE SUCCINATE	ANTIPSYCHOTIC AGENTS
02236944	LOXAPINE SUCCINATE	ANTIPSYCHOTIC AGENTS
02236945	LOXAPINE SUCCINATE	ANTIPSYCHOTIC AGENTS
02236946	LOXAPINE SUCCINATE	ANTIPSYCHOTIC AGENTS
02238196	LOXAPINE SUCCINATE	ANTIPSYCHOTIC AGENTS
02238197	LOXAPINE SUCCINATE	ANTIPSYCHOTIC AGENTS
02238198	LOXAPINE SUCCINATE	ANTIPSYCHOTIC AGENTS
02238199	LOXAPINE SUCCINATE	ANTIPSYCHOTIC AGENTS
02242956	LOXAPINE SUCCINATE	ANTIPSYCHOTIC AGENTS
02232960	LOXAPINE SUCCINATE TABLETS 10MG	ANTIPSYCHOTIC AGENTS
02232961	LOXAPINE SUCCINATE TABLETS 25MG	ANTIPSYCHOTIC AGENTS
02232938	LOXAPINE SUCCINATE TABLETS 5 MG	ANTIPSYCHOTIC AGENTS
02232962	LOXAPINE SUCCINATE TABLETS 50MG	ANTIPSYCHOTIC AGENTS
02238197	LOXAPINE-10	ANTIPSYCHOTIC AGENTS
02238198	LOXAPINE-25	ANTIPSYCHOTIC AGENTS
02238196	LOXAPINE-5	ANTIPSYCHOTIC AGENTS
02238199	LOXAPINE-50	ANTIPSYCHOTIC AGENTS

02421232	MAR-OLANZAPINE	ANTIPSYCHOTIC AGENTS
02421240	MAR-OLANZAPINE	ANTIPSYCHOTIC AGENTS
02421259	MAR-OLANZAPINE	ANTIPSYCHOTIC AGENTS
02421267	MAR-OLANZAPINE	ANTIPSYCHOTIC AGENTS
02421275	MAR-OLANZAPINE	ANTIPSYCHOTIC AGENTS
02421283	MAR-OLANZAPINE	ANTIPSYCHOTIC AGENTS
02389088	MAR-OLANZAPINE ODT	ANTIPSYCHOTIC AGENTS
02389096	MAR-OLANZAPINE ODT	ANTIPSYCHOTIC AGENTS
02389118	MAR-OLANZAPINE ODT	ANTIPSYCHOTIC AGENTS
02389126	MAR-OLANZAPINE ODT	ANTIPSYCHOTIC AGENTS
02371766	MAR-RISPERIDONE	ANTIPSYCHOTIC AGENTS
02371774	MAR-RISPERIDONE	ANTIPSYCHOTIC AGENTS
02371782	MAR-RISPERIDONE	ANTIPSYCHOTIC AGENTS
02371790	MAR-RISPERIDONE	ANTIPSYCHOTIC AGENTS
02371804	MAR-RISPERIDONE	ANTIPSYCHOTIC AGENTS
02371812	MAR-RISPERIDONE	ANTIPSYCHOTIC AGENTS
00027464	MESORIDAZINE (MESORIDAZINE BESYLATE)	
00027456	MESORIDAZINE (MESORIDAZINE BESYLATE)	
00027448	MESORIDAZINE (MESORIDAZINE BESYLATE)	
00027448	MESORIDAZINE BESYLATE	ANTIPSYCHOTIC AGENTS
00259489	MESORIDAZINE BESYLATE	ANTIPSYCHOTIC AGENTS
00027456	MESORIDAZINE BESYLATE	ANTIPSYCHOTIC AGENTS
00027464	MESORIDAZINE BESYLATE	ANTIPSYCHOTIC AGENTS
02232904	METHOTRIMEPRAZINE	ANTIPSYCHOTIC AGENTS
01927728	METHOTRIMEPRAZINE	ANTIPSYCHOTIC AGENTS
02232905	METHOTRIMEPRAZINE	ANTIPSYCHOTIC AGENTS
02232903	METHOTRIMEPRAZINE	ANTIPSYCHOTIC AGENTS

00903463	METHOTRIMEPRAZINE	ANTIPSYCHOTIC AGENTS
22123112	METHOTRIMEPRAZINE	ANTIPSYCHOTIC AGENTS
22123124	METHOTRIMEPRAZINE	ANTIPSYCHOTIC AGENTS
22123130	METHOTRIMEPRAZINE	ANTIPSYCHOTIC AGENTS
22123189	METHOTRIMEPRAZINE	ANTIPSYCHOTIC AGENTS
99100694	METHOTRIMEPRAZINE	ANTIPSYCHOTIC AGENTS
99100837	METHOTRIMEPRAZINE	ANTIPSYCHOTIC AGENTS
99100838	METHOTRIMEPRAZINE	ANTIPSYCHOTIC AGENTS
01927728	METHOTRIMEPRAZINE (METHOTRIMEPRAZINE HYDROCHLORIDE)	ANTIPSYCHOTIC AGENTS
01927698	METHOTRIMEPRAZINE (METHOTRIMEPRAZINE HYDROCHLORIDE)	ANTIPSYCHOTIC AGENTS
01927701	METHOTRIMEPRAZINE (METHOTRIMEPRAZINE HYDROCHLORIDE)	ANTIPSYCHOTIC AGENTS
02238403	METHOTRIMEPRAZINE (METHOTRIMEPRAZINE MALEATE)	ANTIPSYCHOTIC AGENTS
02238404	METHOTRIMEPRAZINE (METHOTRIMEPRAZINE MALEATE)	ANTIPSYCHOTIC AGENTS
02238405	METHOTRIMEPRAZINE (METHOTRIMEPRAZINE MALEATE)	ANTIPSYCHOTIC AGENTS
02238406	METHOTRIMEPRAZINE (METHOTRIMEPRAZINE MALEATE)	ANTIPSYCHOTIC AGENTS
01964933	METHOTRIMEPRAZINE (METHOTRIMEPRAZINE MALEATE)	ANTIPSYCHOTIC AGENTS
01964925	METHOTRIMEPRAZINE (METHOTRIMEPRAZINE MALEATE)	ANTIPSYCHOTIC AGENTS
01964909	METHOTRIMEPRAZINE (METHOTRIMEPRAZINE MALEATE)	ANTIPSYCHOTIC AGENTS
01927655	METHOTRIMEPRAZINE (METHOTRIMEPRAZINE MALEATE)	ANTIPSYCHOTIC AGENTS
01927663	METHOTRIMEPRAZINE (METHOTRIMEPRAZINE MALEATE)	ANTIPSYCHOTIC AGENTS
01927647	METHOTRIMEPRAZINE (METHOTRIMEPRAZINE MALEATE)	ANTIPSYCHOTIC AGENTS
01927671	METHOTRIMEPRAZINE (METHOTRIMEPRAZINE MALEATE)	ANTIPSYCHOTIC AGENTS
02241197	METHOTRIMEPRAZINE (METHOTRIMEPRAZINE MALEATE)	ANTIPSYCHOTIC AGENTS

02241198	METHOTRIMEPRAZINE (METHOTRIMEPRAZINE MALEATE)	ANTIPSYCHOTIC AGENTS
02241199	METHOTRIMEPRAZINE (METHOTRIMEPRAZINE MALEATE)	ANTIPSYCHOTIC AGENTS
01927698	METHOTRIMEPRAZINE HCL	ANTIPSYCHOTIC AGENTS
00025003	METHOTRIMEPRAZINE HCL	ANTIPSYCHOTIC AGENTS
00025194	METHOTRIMEPRAZINE HCL	ANTIPSYCHOTIC AGENTS
00025208	METHOTRIMEPRAZINE HCL	ANTIPSYCHOTIC AGENTS
01927701	METHOTRIMEPRAZINE HCL	ANTIPSYCHOTIC AGENTS
01964925	METHOTRIMEPRAZINE MALEATE	ANTIPSYCHOTIC AGENTS
01927663	METHOTRIMEPRAZINE MALEATE	ANTIPSYCHOTIC AGENTS
00025593	METHOTRIMEPRAZINE MALEATE	ANTIPSYCHOTIC AGENTS
02238405	METHOTRIMEPRAZINE MALEATE	ANTIPSYCHOTIC AGENTS
02238403	METHOTRIMEPRAZINE MALEATE	ANTIPSYCHOTIC AGENTS
00025577	METHOTRIMEPRAZINE MALEATE	ANTIPSYCHOTIC AGENTS
01927647	METHOTRIMEPRAZINE MALEATE	ANTIPSYCHOTIC AGENTS
01964933	METHOTRIMEPRAZINE MALEATE	ANTIPSYCHOTIC AGENTS
01927671	METHOTRIMEPRAZINE MALEATE	ANTIPSYCHOTIC AGENTS
00025607	METHOTRIMEPRAZINE MALEATE	ANTIPSYCHOTIC AGENTS
02238406	METHOTRIMEPRAZINE MALEATE	ANTIPSYCHOTIC AGENTS
02238404	METHOTRIMEPRAZINE MALEATE	ANTIPSYCHOTIC AGENTS
00025585	METHOTRIMEPRAZINE MALEATE	ANTIPSYCHOTIC AGENTS
01964909	METHOTRIMEPRAZINE MALEATE	ANTIPSYCHOTIC AGENTS
01927655	METHOTRIMEPRAZINE MALEATE	ANTIPSYCHOTIC AGENTS
00927647	METHOTRIMEPRAZINE MALEATE	ANTIPSYCHOTIC AGENTS
00927655	METHOTRIMEPRAZINE MALEATE	ANTIPSYCHOTIC AGENTS
00927663	METHOTRIMEPRAZINE MALEATE	ANTIPSYCHOTIC AGENTS
00927671	METHOTRIMEPRAZINE MALEATE	ANTIPSYCHOTIC AGENTS
02239632	METHOTRIMEPRAZINE MALEATE	ANTIPSYCHOTIC AGENTS

02239633	METHOTRIMEPRAZINE MALEATE	ANTIPSYCHOTIC AGENTS
02239634	METHOTRIMEPRAZINE MALEATE	ANTIPSYCHOTIC AGENTS
02239635	METHOTRIMEPRAZINE MALEATE	ANTIPSYCHOTIC AGENTS
02241197	METHOTRIMEPRAZINE MALEATE	ANTIPSYCHOTIC AGENTS
02241198	METHOTRIMEPRAZINE MALEATE	ANTIPSYCHOTIC AGENTS
02241199	METHOTRIMEPRAZINE MALEATE	ANTIPSYCHOTIC AGENTS
02239632	METHOTRIMEPRAZINE-2	ANTIPSYCHOTIC AGENTS
02239634	METHOTRIMEPRAZINE-25	ANTIPSYCHOTIC AGENTS
02239633	METHOTRIMEPRAZINE-5	ANTIPSYCHOTIC AGENTS
02239635	METHOTRIMEPRAZINE-50	ANTIPSYCHOTIC AGENTS
02483556	MINT-ARIPIRAZOLE	ANTIPSYCHOTIC AGENTS
02483564	MINT-ARIPIRAZOLE	ANTIPSYCHOTIC AGENTS
02483572	MINT-ARIPIRAZOLE	ANTIPSYCHOTIC AGENTS
02483580	MINT-ARIPIRAZOLE	ANTIPSYCHOTIC AGENTS
02483599	MINT-ARIPIRAZOLE	ANTIPSYCHOTIC AGENTS
02483602	MINT-ARIPIRAZOLE	ANTIPSYCHOTIC AGENTS
02410141	MINT-OLANZAPINE	ANTIPSYCHOTIC AGENTS
02410168	MINT-OLANZAPINE	ANTIPSYCHOTIC AGENTS
02410176	MINT-OLANZAPINE	ANTIPSYCHOTIC AGENTS
02410184	MINT-OLANZAPINE	ANTIPSYCHOTIC AGENTS
02410192	MINT-OLANZAPINE	ANTIPSYCHOTIC AGENTS
02410206	MINT-OLANZAPINE	ANTIPSYCHOTIC AGENTS
02436965	MINT-OLANZAPINE ODT	ANTIPSYCHOTIC AGENTS
02436973	MINT-OLANZAPINE ODT	ANTIPSYCHOTIC AGENTS
02436981	MINT-OLANZAPINE ODT	ANTIPSYCHOTIC AGENTS
02437007	MINT-OLANZAPINE ODT	ANTIPSYCHOTIC AGENTS
02337878	MYLAN-OLANZAPINE	ANTIPSYCHOTIC AGENTS

02337886	MYLAN-OLANZAPINE	ANTIPSYCHOTIC AGENTS
02337894	MYLAN-OLANZAPINE	ANTIPSYCHOTIC AGENTS
02337908	MYLAN-OLANZAPINE	ANTIPSYCHOTIC AGENTS
02337916	MYLAN-OLANZAPINE	ANTIPSYCHOTIC AGENTS
02337924	MYLAN-OLANZAPINE	ANTIPSYCHOTIC AGENTS
02382709	MYLAN-OLANZAPINE ODT	ANTIPSYCHOTIC AGENTS
02382717	MYLAN-OLANZAPINE ODT	ANTIPSYCHOTIC AGENTS
02382725	MYLAN-OLANZAPINE ODT	ANTIPSYCHOTIC AGENTS
02382733	MYLAN-OLANZAPINE ODT	ANTIPSYCHOTIC AGENTS
02282240	MYLAN-RISPERIDONE	ANTIPSYCHOTIC AGENTS
02282259	MYLAN-RISPERIDONE	ANTIPSYCHOTIC AGENTS
02282267	MYLAN-RISPERIDONE	ANTIPSYCHOTIC AGENTS
02282275	MYLAN-RISPERIDONE	ANTIPSYCHOTIC AGENTS
02282283	MYLAN-RISPERIDONE	ANTIPSYCHOTIC AGENTS
02282291	MYLAN-RISPERIDONE	ANTIPSYCHOTIC AGENTS
02413485	MYLAN-RISPERIDONE ODT	ANTIPSYCHOTIC AGENTS
02413493	MYLAN-RISPERIDONE ODT	ANTIPSYCHOTIC AGENTS
02413507	MYLAN-RISPERIDONE ODT	ANTIPSYCHOTIC AGENTS
02413515	MYLAN-RISPERIDONE ODT	ANTIPSYCHOTIC AGENTS
02413523	MYLAN-RISPERIDONE ODT	ANTIPSYCHOTIC AGENTS
00021342	NOVO-CHLORPROMAZINE 200MG	ANTIPSYCHOTIC AGENTS
00232157	NOVO-CHLORPROMAZINE TAB 10MG	ANTIPSYCHOTIC AGENTS
02346044	NTP-OLANZAPINE	ANTIPSYCHOTIC AGENTS
02346052	NTP-OLANZAPINE	ANTIPSYCHOTIC AGENTS
02346060	NTP-OLANZAPINE	ANTIPSYCHOTIC AGENTS
02346079	NTP-OLANZAPINE	ANTIPSYCHOTIC AGENTS
02346087	NTP-OLANZAPINE	ANTIPSYCHOTIC AGENTS

02239216	NU-HALOPERIDOL	ANTIPSYCHOTIC AGENTS
02239217	NU-HALOPERIDOL	ANTIPSYCHOTIC AGENTS
02239218	NU-HALOPERIDOL	ANTIPSYCHOTIC AGENTS
02239219	NU-HALOPERIDOL	ANTIPSYCHOTIC AGENTS
02239220	NU-HALOPERIDOL	ANTIPSYCHOTIC AGENTS
02237534	NU-LOXAPINE	ANTIPSYCHOTIC AGENTS
02237535	NU-LOXAPINE	ANTIPSYCHOTIC AGENTS
02237536	NU-LOXAPINE	ANTIPSYCHOTIC AGENTS
02237537	NU-LOXAPINE	ANTIPSYCHOTIC AGENTS
02310015	NU-OLANZAPINE	ANTIPSYCHOTIC AGENTS
02310031	NU-OLANZAPINE	ANTIPSYCHOTIC AGENTS
02310058	NU-OLANZAPINE	ANTIPSYCHOTIC AGENTS
02310082	NU-OLANZAPINE	ANTIPSYCHOTIC AGENTS
02310090	NU-OLANZAPINE	ANTIPSYCHOTIC AGENTS
02334372	NU-RISPERIDONE	ANTIPSYCHOTIC AGENTS
02334380	NU-RISPERIDONE	ANTIPSYCHOTIC AGENTS
02334399	NU-RISPERIDONE	ANTIPSYCHOTIC AGENTS
02334402	NU-RISPERIDONE	ANTIPSYCHOTIC AGENTS
02334410	NU-RISPERIDONE	ANTIPSYCHOTIC AGENTS
02334429	NU-RISPERIDONE	ANTIPSYCHOTIC AGENTS
02414546	OLANZAPINE	ANTIPSYCHOTIC AGENTS
02325683	OLANZAPINE	ANTIPSYCHOTIC AGENTS
02372843	OLANZAPINE	ANTIPSYCHOTIC AGENTS
02403099	OLANZAPINE	ANTIPSYCHOTIC AGENTS
02337908	OLANZAPINE	ANTIPSYCHOTIC AGENTS
02307448	OLANZAPINE	ANTIPSYCHOTIC AGENTS
02310384	OLANZAPINE	ANTIPSYCHOTIC AGENTS

02303175	OLANZAPINE	ANTIPSYCHOTIC AGENTS
02281821	OLANZAPINE	ANTIPSYCHOTIC AGENTS
02276747	OLANZAPINE	ANTIPSYCHOTIC AGENTS
02229285	OLANZAPINE	ANTIPSYCHOTIC AGENTS
02243087	OLANZAPINE	ANTIPSYCHOTIC AGENTS
02303205	OLANZAPINE	ANTIPSYCHOTIC AGENTS
02414104	OLANZAPINE	ANTIPSYCHOTIC AGENTS
02321351	OLANZAPINE	ANTIPSYCHOTIC AGENTS
02406632	OLANZAPINE	ANTIPSYCHOTIC AGENTS
02327783	OLANZAPINE	ANTIPSYCHOTIC AGENTS
02327570	OLANZAPINE	ANTIPSYCHOTIC AGENTS
02389096	OLANZAPINE	ANTIPSYCHOTIC AGENTS
02360624	OLANZAPINE	ANTIPSYCHOTIC AGENTS
02382717	OLANZAPINE	ANTIPSYCHOTIC AGENTS
02428032	OLANZAPINE	ANTIPSYCHOTIC AGENTS
02421267	OLANZAPINE	ANTIPSYCHOTIC AGENTS
02417286	OLANZAPINE	ANTIPSYCHOTIC AGENTS
02436973	OLANZAPINE	ANTIPSYCHOTIC AGENTS
02448734	OLANZAPINE	ANTIPSYCHOTIC AGENTS
02325691	OLANZAPINE	ANTIPSYCHOTIC AGENTS
02372851	OLANZAPINE	ANTIPSYCHOTIC AGENTS
02403102	OLANZAPINE	ANTIPSYCHOTIC AGENTS
02337916	OLANZAPINE	ANTIPSYCHOTIC AGENTS
02310392	OLANZAPINE	ANTIPSYCHOTIC AGENTS
02303183	OLANZAPINE	ANTIPSYCHOTIC AGENTS
02238850	OLANZAPINE	ANTIPSYCHOTIC AGENTS
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02276755	OLANZAPINE	ANTIPSYCHOTIC AGENTS
02243088	OLANZAPINE	ANTIPSYCHOTIC AGENTS
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02360632	OLANZAPINE	ANTIPSYCHOTIC AGENTS
02327791	OLANZAPINE	ANTIPSYCHOTIC AGENTS
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02281791	OLANZAPINE	ANTIPSYCHOTIC AGENTS
02276712	OLANZAPINE	ANTIPSYCHOTIC AGENTS
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02428008	OLANZAPINE	ANTIPSYCHOTIC AGENTS

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02376237	OLANZAPINE	ANTIPSYCHOTIC AGENTS
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02348144	OLANZAPINE	ANTIPSYCHOTIC AGENTS
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02372819	OLANZAPINE	ANTIPSYCHOTIC AGENTS
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02385864	OLANZAPINE	ANTIPSYCHOTIC AGENTS
02385872	OLANZAPINE	ANTIPSYCHOTIC AGENTS
02385880	OLANZAPINE	ANTIPSYCHOTIC AGENTS
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02385902	OLANZAPINE	ANTIPSYCHOTIC AGENTS
02385910	OLANZAPINE	ANTIPSYCHOTIC AGENTS
02419386	OLANZAPINE	ANTIPSYCHOTIC AGENTS
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02419416	OLANZAPINE	ANTIPSYCHOTIC AGENTS
02419424	OLANZAPINE	ANTIPSYCHOTIC AGENTS
02419432	OLANZAPINE	ANTIPSYCHOTIC AGENTS
02421704	OLANZAPINE	ANTIPSYCHOTIC AGENTS
02416522	OLANZAPINE FOR INJECTION	ANTIPSYCHOTIC AGENTS
02338645	OLANZAPINE ODT	ANTIPSYCHOTIC AGENTS
02338653	OLANZAPINE ODT	ANTIPSYCHOTIC AGENTS
02338661	OLANZAPINE ODT	ANTIPSYCHOTIC AGENTS
02343665	OLANZAPINE ODT	ANTIPSYCHOTIC AGENTS
02343673	OLANZAPINE ODT	ANTIPSYCHOTIC AGENTS
02343681	OLANZAPINE ODT	ANTIPSYCHOTIC AGENTS
02343703	OLANZAPINE ODT	ANTIPSYCHOTIC AGENTS
02348160	OLANZAPINE ODT	ANTIPSYCHOTIC AGENTS
02348179	OLANZAPINE ODT	ANTIPSYCHOTIC AGENTS
02348187	OLANZAPINE ODT	ANTIPSYCHOTIC AGENTS

02352974	OLANZAPINE ODT	ANTIPSYCHOTIC AGENTS
02352982	OLANZAPINE ODT	ANTIPSYCHOTIC AGENTS
02352990	OLANZAPINE ODT	ANTIPSYCHOTIC AGENTS
02353008	OLANZAPINE ODT	ANTIPSYCHOTIC AGENTS
02425114	OLANZAPINE ODT	ANTIPSYCHOTIC AGENTS
02430444	OLANZAPINE-ODT	ANTIPSYCHOTIC AGENTS
02430452	OLANZAPINE-ODT	ANTIPSYCHOTIC AGENTS
02430460	OLANZAPINE-ODT	ANTIPSYCHOTIC AGENTS
02430479	OLANZAPINE-ODT	ANTIPSYCHOTIC AGENTS
02300273	PALIPERIDONE	ANTIPSYCHOTIC AGENTS
02300281	PALIPERIDONE	ANTIPSYCHOTIC AGENTS
02300303	PALIPERIDONE	ANTIPSYCHOTIC AGENTS
02300311	PALIPERIDONE	ANTIPSYCHOTIC AGENTS
02331276	PALIPERIDONE	ANTIPSYCHOTIC AGENTS
02354209	PALIPERIDONE (PALIPERIDONE PALMITATE)	ANTIPSYCHOTIC AGENTS
02354217	PALIPERIDONE (PALIPERIDONE PALMITATE)	ANTIPSYCHOTIC AGENTS
02354225	PALIPERIDONE (PALIPERIDONE PALMITATE)	ANTIPSYCHOTIC AGENTS
02354233	PALIPERIDONE (PALIPERIDONE PALMITATE)	ANTIPSYCHOTIC AGENTS
02354241	PALIPERIDONE (PALIPERIDONE PALMITATE)	ANTIPSYCHOTIC AGENTS
02455943	PALIPERIDONE (PALIPERIDONE PALMITATE)	ANTIPSYCHOTIC AGENTS
02455986	PALIPERIDONE (PALIPERIDONE PALMITATE)	ANTIPSYCHOTIC AGENTS
02455994	PALIPERIDONE (PALIPERIDONE PALMITATE)	ANTIPSYCHOTIC AGENTS
02456001	PALIPERIDONE (PALIPERIDONE PALMITATE)	ANTIPSYCHOTIC AGENTS
02354233	PALIPERIDONE PALMITATE	ANTIPSYCHOTIC AGENTS
02354241	PALIPERIDONE PALMITATE	ANTIPSYCHOTIC AGENTS
02455943	PALIPERIDONE PALMITATE	ANTIPSYCHOTIC AGENTS

02455986	PALIPERIDONE PALMITATE	ANTIPSYCHOTIC AGENTS
02455994	PALIPERIDONE PALMITATE	ANTIPSYCHOTIC AGENTS
02354217	PALIPERIDONE PALMITATE	ANTIPSYCHOTIC AGENTS
02456001	PALIPERIDONE PALMITATE	ANTIPSYCHOTIC AGENTS
02354225	PALIPERIDONE PALMITATE	ANTIPSYCHOTIC AGENTS
02354209	PALIPERIDONE PALMITATE	ANTIPSYCHOTIC AGENTS
01926772	PERICIAZINE	ANTIPSYCHOTIC AGENTS
00024899	PERICIAZINE	ANTIPSYCHOTIC AGENTS
00379301	PERICIAZINE	ANTIPSYCHOTIC AGENTS
01926756	PERICIAZINE	ANTIPSYCHOTIC AGENTS
01926780	PERICIAZINE	ANTIPSYCHOTIC AGENTS
00024880	PERICIAZINE	ANTIPSYCHOTIC AGENTS
00379328	PERICIAZINE	ANTIPSYCHOTIC AGENTS
00926772	PERICIAZINE	ANTIPSYCHOTIC AGENTS
01926764	PERICIAZINE	ANTIPSYCHOTIC AGENTS
01926756	PERICIAZINE	ANTIPSYCHOTIC AGENTS
01926764	PERICIAZINE	ANTIPSYCHOTIC AGENTS
01926772	PERICIAZINE	ANTIPSYCHOTIC AGENTS
01926780	PERICIAZINE	ANTIPSYCHOTIC AGENTS
02237603	PERICYAZINE	ANTIPSYCHOTIC AGENTS
02237604	PERICYAZINE	ANTIPSYCHOTIC AGENTS
02237605	PERICYAZINE	ANTIPSYCHOTIC AGENTS
02237606	PERICYAZINE	ANTIPSYCHOTIC AGENTS
00481920	PERPHENAZINE	ANTIPSYCHOTIC AGENTS
00335096	PERPHENAZINE	ANTIPSYCHOTIC AGENTS
00028320	PERPHENAZINE	ANTIPSYCHOTIC AGENTS
00028169	PERPHENAZINE	ANTIPSYCHOTIC AGENTS

00456039	PERPHENAZINE	ANTIPSYCHOTIC AGENTS
00335134	PERPHENAZINE	ANTIPSYCHOTIC AGENTS
00028290	PERPHENAZINE	ANTIPSYCHOTIC AGENTS
00028150	PERPHENAZINE	ANTIPSYCHOTIC AGENTS
00456047	PERPHENAZINE	ANTIPSYCHOTIC AGENTS
00335126	PERPHENAZINE	ANTIPSYCHOTIC AGENTS
00028304	PERPHENAZINE	ANTIPSYCHOTIC AGENTS
00028002	PERPHENAZINE	ANTIPSYCHOTIC AGENTS
00456055	PERPHENAZINE	ANTIPSYCHOTIC AGENTS
00335118	PERPHENAZINE	ANTIPSYCHOTIC AGENTS
00028312	PERPHENAZINE	ANTIPSYCHOTIC AGENTS
00294799	PERPHENAZINE	ANTIPSYCHOTIC AGENTS
00294802	PERPHENAZINE	ANTIPSYCHOTIC AGENTS
00296309	PERPHENAZINE	ANTIPSYCHOTIC AGENTS
00296317	PERPHENAZINE	ANTIPSYCHOTIC AGENTS
00563722	PERPHENAZINE	ANTIPSYCHOTIC AGENTS
00563730	PERPHENAZINE	ANTIPSYCHOTIC AGENTS
00563749	PERPHENAZINE	ANTIPSYCHOTIC AGENTS
00563757	PERPHENAZINE	ANTIPSYCHOTIC AGENTS
00726184	PERPHENAZINE	ANTIPSYCHOTIC AGENTS
00726192	PERPHENAZINE	ANTIPSYCHOTIC AGENTS
00726206	PERPHENAZINE	ANTIPSYCHOTIC AGENTS
00726281	PERPHENAZINE	ANTIPSYCHOTIC AGENTS
00751898	PERPHENAZINE	ANTIPSYCHOTIC AGENTS
66124095	PERPHENAZINE	ANTIPSYCHOTIC AGENTS
66124096	PERPHENAZINE	ANTIPSYCHOTIC AGENTS
99100719	PERPHENAZINE	ANTIPSYCHOTIC AGENTS

99100720	PERPHENAZINE	ANTIPSYCHOTIC AGENTS
99100721	PERPHENAZINE	ANTIPSYCHOTIC AGENTS
99100722	PERPHENAZINE	ANTIPSYCHOTIC AGENTS
99101199	PERPHENAZINE	ANTIPSYCHOTIC AGENTS
99101200	PERPHENAZINE	ANTIPSYCHOTIC AGENTS
00335096	PERPHENAZINE	ANTIPSYCHOTIC AGENTS
00335118	PERPHENAZINE	ANTIPSYCHOTIC AGENTS
00335126	PERPHENAZINE	ANTIPSYCHOTIC AGENTS
00335134	PERPHENAZINE	ANTIPSYCHOTIC AGENTS
00563722	PERPHENAZINE 16 TAB	ANTIPSYCHOTIC AGENTS
00563757	PERPHENAZINE 2 TAB 2MG	ANTIPSYCHOTIC AGENTS
00563730	PERPHENAZINE 8 TAB 8MG	ANTIPSYCHOTIC AGENTS
00456039	PERPHENAZINE TAB 2MG	ANTIPSYCHOTIC AGENTS
00456047	PERPHENAZINE TAB 4MG	ANTIPSYCHOTIC AGENTS
00563749	PERPHENAZINE TAB 4MG	ANTIPSYCHOTIC AGENTS
02236943	PHL-LOXAPINE	ANTIPSYCHOTIC AGENTS
02236944	PHL-LOXAPINE	ANTIPSYCHOTIC AGENTS
02236945	PHL-LOXAPINE	ANTIPSYCHOTIC AGENTS
02236946	PHL-LOXAPINE	ANTIPSYCHOTIC AGENTS
02255448	PHL-LOXAPINE	ANTIPSYCHOTIC AGENTS
02255456	PHL-LOXAPINE	ANTIPSYCHOTIC AGENTS
02307405	PHL-OLANZAPINE	ANTIPSYCHOTIC AGENTS
02307413	PHL-OLANZAPINE	ANTIPSYCHOTIC AGENTS
02307421	PHL-OLANZAPINE	ANTIPSYCHOTIC AGENTS
02307448	PHL-OLANZAPINE	ANTIPSYCHOTIC AGENTS
02307456	PHL-OLANZAPINE	ANTIPSYCHOTIC AGENTS
02307464	PHL-OLANZAPINE ODT	ANTIPSYCHOTIC AGENTS

02307472	PHL-OLANZAPINE ODT	ANTIPSYCHOTIC AGENTS
02307480	PHL-OLANZAPINE ODT	ANTIPSYCHOTIC AGENTS
02258439	PHL-RISPERIDONE	ANTIPSYCHOTIC AGENTS
02258447	PHL-RISPERIDONE	ANTIPSYCHOTIC AGENTS
02258455	PHL-RISPERIDONE	ANTIPSYCHOTIC AGENTS
02258463	PHL-RISPERIDONE	ANTIPSYCHOTIC AGENTS
02258471	PHL-RISPERIDONE	ANTIPSYCHOTIC AGENTS
02258498	PHL-RISPERIDONE	ANTIPSYCHOTIC AGENTS
02294435	PHL-RISPERIDONE ODT	ANTIPSYCHOTIC AGENTS
02294443	PHL-RISPERIDONE ODT	ANTIPSYCHOTIC AGENTS
02294451	PHL-RISPERIDONE ODT	ANTIPSYCHOTIC AGENTS
00573817	PIMOZIDE	ANTIPSYCHOTIC AGENTS
00313815	PIMOZIDE	ANTIPSYCHOTIC AGENTS
02245432	PIMOZIDE	ANTIPSYCHOTIC AGENTS
02245433	PIMOZIDE	ANTIPSYCHOTIC AGENTS
00313823	PIMOZIDE	ANTIPSYCHOTIC AGENTS
02239829	PIMOZIDE	ANTIPSYCHOTIC AGENTS
02239830	PIMOZIDE	ANTIPSYCHOTIC AGENTS
02239831	PIMOZIDE	ANTIPSYCHOTIC AGENTS
99100767	PIMOZIDE	ANTIPSYCHOTIC AGENTS
02245432	PIMOZIDE	ANTIPSYCHOTIC AGENTS
02245433	PIMOZIDE	ANTIPSYCHOTIC AGENTS
00427918	PIPOTIAZINE PALMITATE	ANTIPSYCHOTIC AGENTS
01926667	PIPOTIAZINE PALMITATE	ANTIPSYCHOTIC AGENTS
00427926	PIPOTIAZINE PALMITATE	ANTIPSYCHOTIC AGENTS
00990507	PIPOTIAZINE PALMITATE	ANTIPSYCHOTIC AGENTS
01926675	PIPOTIAZINE PALMITATE	ANTIPSYCHOTIC AGENTS

00894672	PIPOTIAZINE PALMITATE	ANTIPSYCHOTIC AGENTS
02236468	PIPOTIAZINE PALMITATE	ANTIPSYCHOTIC AGENTS
02236471	PIPOTIAZINE PALMITATE	ANTIPSYCHOTIC AGENTS
01926667	PIPOTIAZINE PALMITATE	ANTIPSYCHOTIC AGENTS
01926675	PIPOTIAZINE PALMITATE	ANTIPSYCHOTIC AGENTS
00751898	PMS PERPHENAZINE CONCENTRATE LIQ 3.2MG/ML	ANTIPSYCHOTIC AGENTS
00726206	PMS PERPHENAZINE TAB 16MG	ANTIPSYCHOTIC AGENTS
00726184	PMS PERPHENAZINE TAB 2MG	ANTIPSYCHOTIC AGENTS
00726192	PMS PERPHENAZINE TAB 4MG	ANTIPSYCHOTIC AGENTS
00726281	PMS PERPHENAZINE TAB 8MG	ANTIPSYCHOTIC AGENTS
00753645	PMS PROCHLORPERAZINE INJ 5MG/ML	ANTIPSYCHOTIC AGENTS
00751871	PMS TRIFLUOPERAZINE HCL SYRUP 11.8MG/ML	ANTIPSYCHOTIC AGENTS
00726249	PMS TRIFLUOPERAZINE TAB 10MG	ANTIPSYCHOTIC AGENTS
00726214	PMS TRIFLUOPERAZINE TAB 1MG	ANTIPSYCHOTIC AGENTS
00726257	PMS TRIFLUOPERAZINE TAB 20MG	ANTIPSYCHOTIC AGENTS
00726222	PMS TRIFLUOPERAZINE TAB 2MG	ANTIPSYCHOTIC AGENTS
00726230	PMS TRIFLUOPERAZINE TAB 5MG	ANTIPSYCHOTIC AGENTS
02466635	PMS-ARIPIPRAZOLE	ANTIPSYCHOTIC AGENTS
02466643	PMS-ARIPIPRAZOLE	ANTIPSYCHOTIC AGENTS
02466651	PMS-ARIPIPRAZOLE	ANTIPSYCHOTIC AGENTS
02466678	PMS-ARIPIPRAZOLE	ANTIPSYCHOTIC AGENTS
02466686	PMS-ARIPIPRAZOLE	ANTIPSYCHOTIC AGENTS
02466694	PMS-ARIPIPRAZOLE	ANTIPSYCHOTIC AGENTS
02240668	PMS-CLOZAPINE	ANTIPSYCHOTIC AGENTS
02240669	PMS-CLOZAPINE	ANTIPSYCHOTIC AGENTS
02241928	PMS-FLUPHENAZINE DECANOATE	ANTIPSYCHOTIC AGENTS
02091275	PMS-FLUPHENAZINE DECANOATE INJ (BP) 25MG/ML	ANTIPSYCHOTIC AGENTS

00759503	PMS-HALOPERIDOL SOLN 2MG/ML	ANTIPSYCHOTIC AGENTS
02230707	PMS-HALOPERIDOL-LA	ANTIPSYCHOTIC AGENTS
02230708	PMS-HALOPERIDOL-LA	ANTIPSYCHOTIC AGENTS
02232903	PMS-METHOTRIMEPRAZINE	ANTIPSYCHOTIC AGENTS
02232904	PMS-METHOTRIMEPRAZINE	ANTIPSYCHOTIC AGENTS
02232905	PMS-METHOTRIMEPRAZINE	ANTIPSYCHOTIC AGENTS
02303116	PMS-OLANZAPINE	ANTIPSYCHOTIC AGENTS
02303159	PMS-OLANZAPINE	ANTIPSYCHOTIC AGENTS
02303167	PMS-OLANZAPINE	ANTIPSYCHOTIC AGENTS
02303175	PMS-OLANZAPINE	ANTIPSYCHOTIC AGENTS
02303183	PMS-OLANZAPINE	ANTIPSYCHOTIC AGENTS
02367483	PMS-OLANZAPINE	ANTIPSYCHOTIC AGENTS
02303191	PMS-OLANZAPINE ODT	ANTIPSYCHOTIC AGENTS
02303205	PMS-OLANZAPINE ODT	ANTIPSYCHOTIC AGENTS
02303213	PMS-OLANZAPINE ODT	ANTIPSYCHOTIC AGENTS
02423944	PMS-OLANZAPINE ODT	ANTIPSYCHOTIC AGENTS
02239829	PMS-PIMOZIDE	ANTIPSYCHOTIC AGENTS
02239830	PMS-PIMOZIDE	ANTIPSYCHOTIC AGENTS
02239831	PMS-PIMOZIDE	ANTIPSYCHOTIC AGENTS
00753688	PMS-PROCHLORPERAZINE SUPPOSITOIRES 10MG	ANTIPSYCHOTIC AGENTS
00753637	PMS-PROCHLORPERAZINE TAB 10MG	ANTIPSYCHOTIC AGENTS
00753661	PMS-PROCHLORPERAZINE TAB 5MG	ANTIPSYCHOTIC AGENTS
02252007	PMS-RISPERIDONE	ANTIPSYCHOTIC AGENTS
02252015	PMS-RISPERIDONE	ANTIPSYCHOTIC AGENTS
02252023	PMS-RISPERIDONE	ANTIPSYCHOTIC AGENTS
02252031	PMS-RISPERIDONE	ANTIPSYCHOTIC AGENTS
02252058	PMS-RISPERIDONE	ANTIPSYCHOTIC AGENTS

02252066	PMS-RISPERIDONE	ANTIPSYCHOTIC AGENTS
02279266	PMS-RISPERIDONE	ANTIPSYCHOTIC AGENTS
02291770	PMS-RISPERIDONE ODT	ANTIPSYCHOTIC AGENTS
02291789	PMS-RISPERIDONE ODT	ANTIPSYCHOTIC AGENTS
02291797	PMS-RISPERIDONE ODT	ANTIPSYCHOTIC AGENTS
02370697	PMS-RISPERIDONE ODT	ANTIPSYCHOTIC AGENTS
02370700	PMS-RISPERIDONE ODT	ANTIPSYCHOTIC AGENTS
00776505	PMS-TRIFLUOPERAZINE HCL SYR 1.18MG/ML	ANTIPSYCHOTIC AGENTS
01927795	PROCHLORPERAZINE	ANTIPSYCHOTIC AGENTS
00789720	PROCHLORPERAZINE	ANTIPSYCHOTIC AGENTS
00753688	PROCHLORPERAZINE	ANTIPSYCHOTIC AGENTS
00025364	PROCHLORPERAZINE	ANTIPSYCHOTIC AGENTS
00789747	PROCHLORPERAZINE	ANTIPSYCHOTIC AGENTS
00025356	PROCHLORPERAZINE	ANTIPSYCHOTIC AGENTS
00753645	PROCHLORPERAZINE	ANTIPSYCHOTIC AGENTS
00777803	PROCHLORPERAZINE	ANTIPSYCHOTIC AGENTS
00809179	PROCHLORPERAZINE	ANTIPSYCHOTIC AGENTS
09991048	PROCHLORPERAZINE	ANTIPSYCHOTIC AGENTS
01927779	PROCHLORPERAZINE MESYLATE	ANTIPSYCHOTIC AGENTS
00578185	PROCHLORPERAZINE MESYLATE	ANTIPSYCHOTIC AGENTS
00025216	PROCHLORPERAZINE MESYLATE	ANTIPSYCHOTIC AGENTS
01927787	PROCHLORPERAZINE MESYLATE	ANTIPSYCHOTIC AGENTS
00025100	PROCHLORPERAZINE MESYLATE	ANTIPSYCHOTIC AGENTS
00753653	PROCHLORPERAZINE MESYLATE	ANTIPSYCHOTIC AGENTS
00789747	PROCHLORPERAZINE MESYLATE INJ 5MG/ML	ANTIPSYCHOTIC AGENTS
00093580	PROMAZINE	ANTIPSYCHOTIC AGENTS
00093599	PROMAZINE	ANTIPSYCHOTIC AGENTS

00017124	PROMAZINE HCL	ANTIPSYCHOTIC AGENTS
00017132	PROMAZINE HCL	ANTIPSYCHOTIC AGENTS
00017140	PROMAZINE HCL	ANTIPSYCHOTIC AGENTS
00030066	PROMAZINE HCL	ANTIPSYCHOTIC AGENTS
00034088	PROMAZINE HCL	ANTIPSYCHOTIC AGENTS
00034177	PROMAZINE HCL	ANTIPSYCHOTIC AGENTS
00034185	PROMAZINE HCL	ANTIPSYCHOTIC AGENTS
00289612	PROMAZINE HCL	ANTIPSYCHOTIC AGENTS
00497509	PROMAZINE HCL	ANTIPSYCHOTIC AGENTS
00497509	PROMAZINE HCL INJ 50MG/ML	ANTIPSYCHOTIC AGENTS
02312700	PRO-RISPERIDONE	ANTIPSYCHOTIC AGENTS
02312719	PRO-RISPERIDONE	ANTIPSYCHOTIC AGENTS
02312727	PRO-RISPERIDONE	ANTIPSYCHOTIC AGENTS
02312735	PRO-RISPERIDONE	ANTIPSYCHOTIC AGENTS
02312743	PRO-RISPERIDONE	ANTIPSYCHOTIC AGENTS
02312751	PRO-RISPERIDONE	ANTIPSYCHOTIC AGENTS
02372622	Q-RISPERIDONE	ANTIPSYCHOTIC AGENTS
02372630	Q-RISPERIDONE	ANTIPSYCHOTIC AGENTS
02372649	Q-RISPERIDONE	ANTIPSYCHOTIC AGENTS
02372657	Q-RISPERIDONE	ANTIPSYCHOTIC AGENTS
02372665	Q-RISPERIDONE	ANTIPSYCHOTIC AGENTS
02372673	Q-RISPERIDONE	ANTIPSYCHOTIC AGENTS
02353202	QUETIAPINE	ANTIPSYCHOTIC AGENTS
02330423	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02399830	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02397102	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02390213	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS

02387808	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02438011	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02236952	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02311712	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02317907	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02316099	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02313928	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02314002	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02307812	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02299062	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02296578	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02284243	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02434032	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02439166	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02457237	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02407698	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02240862	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02321513	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02395452	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02457245	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02438046	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02412993	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02407701	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02353199	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02330458	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02399849	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02397110	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS

02390248	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02387824	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02236953	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02317923	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02316110	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02314010	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02313936	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02311747	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02307839	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02296594	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02284278	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02300192	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02395460	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02434040	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02439182	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02412977	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02353164	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02330415	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02399822	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02397099	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02390205	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02387794	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02438003	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02236951	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02317893	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02316080	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02313995	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS

02313901	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02311704	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02307804	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02299054	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02296551	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02284235	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02434024	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02439158	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02457253	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02413000	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02407728	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02395479	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02330466	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02399857	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02397129	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02390256	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02387832	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02438054	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02314029	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02317931	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02316129	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02313944	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02311755	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02307847	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02296608	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02284286	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02244107	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS

02300206	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02434059	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02439190	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02457261	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02407736	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02395487	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02300214	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02457229	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02407671	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02395444	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02300184	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02284251	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02296586	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02298996	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02299003	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02299011	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02299038	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02299046	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02299070	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02299089	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02299097	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02307820	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02316102	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02316692	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02316706	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02316714	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02316722	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS

02316730	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02317346	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02317354	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02317362	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02317370	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02317915	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02323737	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02323745	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02323753	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02323761	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02323788	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02330431	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02333031	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02333058	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02333066	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02333074	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02339153	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02339161	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02339188	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02339196	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02340127	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02340135	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02340143	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02340151	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02342596	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02342618	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02342626	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS

02342634	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02342642	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02353172	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02353180	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02361892	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
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02363941	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02387816	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02390221	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02395800	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
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02400383	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02412985	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02417359	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02417367	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02417375	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02417383	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02417391	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02417782	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02417790	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02417804	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS

02417812	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02417820	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02439174	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02447088	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02447096	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
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02447134	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02447193	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02447207	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02447223	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02447258	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
22123257	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
82236951	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
82236952	QUETIAPINE FUMARATE	ANTIPSYCHOTIC AGENTS
02403064	RAN-OLANZAPINE	ANTIPSYCHOTIC AGENTS
02403072	RAN-OLANZAPINE	ANTIPSYCHOTIC AGENTS
02403080	RAN-OLANZAPINE	ANTIPSYCHOTIC AGENTS
02403099	RAN-OLANZAPINE	ANTIPSYCHOTIC AGENTS
02403102	RAN-OLANZAPINE	ANTIPSYCHOTIC AGENTS
02429594	RAN-OLANZAPINE IR	ANTIPSYCHOTIC AGENTS
02429608	RAN-OLANZAPINE IR	ANTIPSYCHOTIC AGENTS
02429616	RAN-OLANZAPINE IR	ANTIPSYCHOTIC AGENTS
02429624	RAN-OLANZAPINE IR	ANTIPSYCHOTIC AGENTS
02429632	RAN-OLANZAPINE IR	ANTIPSYCHOTIC AGENTS
02429640	RAN-OLANZAPINE IR	ANTIPSYCHOTIC AGENTS
02414090	RAN-OLANZAPINE ODT	ANTIPSYCHOTIC AGENTS
02414104	RAN-OLANZAPINE ODT	ANTIPSYCHOTIC AGENTS

02414112	RAN-OLANZAPINE ODT	ANTIPSYCHOTIC AGENTS
02414120	RAN-OLANZAPINE ODT	ANTIPSYCHOTIC AGENTS
02280906	RAN-RISPERIDONE	ANTIPSYCHOTIC AGENTS
02280914	RAN-RISPERIDONE	ANTIPSYCHOTIC AGENTS
02280922	RAN-RISPERIDONE	ANTIPSYCHOTIC AGENTS
02280930	RAN-RISPERIDONE	ANTIPSYCHOTIC AGENTS
02280949	RAN-RISPERIDONE	ANTIPSYCHOTIC AGENTS
02280957	RAN-RISPERIDONE	ANTIPSYCHOTIC AGENTS
02328305	RAN-RISPERIDONE	ANTIPSYCHOTIC AGENTS
02328313	RAN-RISPERIDONE	ANTIPSYCHOTIC AGENTS
02328321	RAN-RISPERIDONE	ANTIPSYCHOTIC AGENTS
02328348	RAN-RISPERIDONE	ANTIPSYCHOTIC AGENTS
02328364	RAN-RISPERIDONE	ANTIPSYCHOTIC AGENTS
02328372	RAN-RISPERIDONE	ANTIPSYCHOTIC AGENTS
00552429	RATIO-HALOPERIDOL 2MG/ML	ANTIPSYCHOTIC AGENTS
00552135	RATIO-HALOPERIDOL TAB 0.5MG	ANTIPSYCHOTIC AGENTS
00728306	RATIO-HALOPERIDOL TAB 10MG	ANTIPSYCHOTIC AGENTS
00552143	RATIO-HALOPERIDOL TAB 1MG	ANTIPSYCHOTIC AGENTS
00728292	RATIO-HALOPERIDOL TAB 2MG	ANTIPSYCHOTIC AGENTS
00647969	RATIO-HALOPERIDOL TAB 5MG	ANTIPSYCHOTIC AGENTS
02264757	RATIO-RISPERIDONE	ANTIPSYCHOTIC AGENTS
02264765	RATIO-RISPERIDONE	ANTIPSYCHOTIC AGENTS
02264773	RATIO-RISPERIDONE	ANTIPSYCHOTIC AGENTS
02264781	RATIO-RISPERIDONE	ANTIPSYCHOTIC AGENTS
02264803	RATIO-RISPERIDONE	ANTIPSYCHOTIC AGENTS
02264811	RATIO-RISPERIDONE	ANTIPSYCHOTIC AGENTS
02036363	REMOXIPRIDE HCL	ANTIPSYCHOTIC AGENTS

02036371	REMOXIPRIDE HCL	ANTIPSYCHOTIC AGENTS
02036398	REMOXIPRIDE HCL	ANTIPSYCHOTIC AGENTS
02211165	RHO-FLUPHENAZINE DECANOATE INJ.CONC-100MG/ML	ANTIPSYCHOTIC AGENTS
02211157	RHO-FLUPHENAZINE DECANOATE INJ-25MG/ML IM SC	ANTIPSYCHOTIC AGENTS
02211149	RHO-HALOPERIDOL DECANOATE INJ.-IM 100MG/ML	ANTIPSYCHOTIC AGENTS
02211130	RHO-HALOPERIDOL DECANOATE INJ.-IM 50MG/ML	ANTIPSYCHOTIC AGENTS
02332051	RISPERIDONE	ANTIPSYCHOTIC AGENTS
02332078	RISPERIDONE	ANTIPSYCHOTIC AGENTS
02371766	RISPERIDONE	ANTIPSYCHOTIC AGENTS
02359790	RISPERIDONE	ANTIPSYCHOTIC AGENTS
02328305	RISPERIDONE	ANTIPSYCHOTIC AGENTS
02359529	RISPERIDONE	ANTIPSYCHOTIC AGENTS
02356880	RISPERIDONE	ANTIPSYCHOTIC AGENTS
02264757	RISPERIDONE	ANTIPSYCHOTIC AGENTS
02252007	RISPERIDONE	ANTIPSYCHOTIC AGENTS
02240551	RISPERIDONE	ANTIPSYCHOTIC AGENTS
02303655	RISPERIDONE	ANTIPSYCHOTIC AGENTS
02303485	RISPERIDONE	ANTIPSYCHOTIC AGENTS
02292807	RISPERIDONE	ANTIPSYCHOTIC AGENTS
02282690	RISPERIDONE	ANTIPSYCHOTIC AGENTS
02282585	RISPERIDONE	ANTIPSYCHOTIC AGENTS
02282240	RISPERIDONE	ANTIPSYCHOTIC AGENTS
02282119	RISPERIDONE	ANTIPSYCHOTIC AGENTS
02280906	RISPERIDONE	ANTIPSYCHOTIC AGENTS
02279509	RISPERIDONE	ANTIPSYCHOTIC AGENTS
02264765	RISPERIDONE	ANTIPSYCHOTIC AGENTS
02264188	RISPERIDONE	ANTIPSYCHOTIC AGENTS

02252015	RISPERIDONE	ANTIPSYCHOTIC AGENTS
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02282593	RISPERIDONE	ANTIPSYCHOTIC AGENTS
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02413485	RISPERIDONE	ANTIPSYCHOTIC AGENTS
02332086	RISPERIDONE	ANTIPSYCHOTIC AGENTS
02371782	RISPERIDONE	ANTIPSYCHOTIC AGENTS
02359812	RISPERIDONE	ANTIPSYCHOTIC AGENTS
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02359545	RISPERIDONE	ANTIPSYCHOTIC AGENTS
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02264196	RISPERIDONE	ANTIPSYCHOTIC AGENTS
02258455	RISPERIDONE	ANTIPSYCHOTIC AGENTS
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02282607	RISPERIDONE	ANTIPSYCHOTIC AGENTS

02282267	RISPERIDONE	ANTIPSYCHOTIC AGENTS
02282135	RISPERIDONE	ANTIPSYCHOTIC AGENTS
02280922	RISPERIDONE	ANTIPSYCHOTIC AGENTS
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02332094	RISPERIDONE	ANTIPSYCHOTIC AGENTS
02371790	RISPERIDONE	ANTIPSYCHOTIC AGENTS
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02413515	RISPERIDONE	ANTIPSYCHOTIC AGENTS
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02268086	RISPERIDONE	ANTIPSYCHOTIC AGENTS
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02258498	RISPERIDONE	ANTIPSYCHOTIC AGENTS

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02359588	RISPERIDONE	ANTIPSYCHOTIC AGENTS
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02278456	RISPERIDONE	ANTIPSYCHOTIC AGENTS

02278464	RISPERIDONE	ANTIPSYCHOTIC AGENTS
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02278480	RISPERIDONE	ANTIPSYCHOTIC AGENTS
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02289660	RISPERIDONE	ANTIPSYCHOTIC AGENTS
02291770	RISPERIDONE	ANTIPSYCHOTIC AGENTS
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02294451	RISPERIDONE	ANTIPSYCHOTIC AGENTS
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02303507	RISPERIDONE	ANTIPSYCHOTIC AGENTS
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02343762	RISPERIDONE	ANTIPSYCHOTIC AGENTS
02343770	RISPERIDONE	ANTIPSYCHOTIC AGENTS
02356880	RISPERIDONE	ANTIPSYCHOTIC AGENTS
02356899	RISPERIDONE	ANTIPSYCHOTIC AGENTS
02356902	RISPERIDONE	ANTIPSYCHOTIC AGENTS
02356910	RISPERIDONE	ANTIPSYCHOTIC AGENTS
02356929	RISPERIDONE	ANTIPSYCHOTIC AGENTS
02356937	RISPERIDONE	ANTIPSYCHOTIC AGENTS
02296756	RISPERIDONE - 0.25	ANTIPSYCHOTIC AGENTS
02296764	RISPERIDONE - 0.5	ANTIPSYCHOTIC AGENTS
02296772	RISPERIDONE - 1	ANTIPSYCHOTIC AGENTS
02296780	RISPERIDONE - 2	ANTIPSYCHOTIC AGENTS
02296799	RISPERIDONE - 3	ANTIPSYCHOTIC AGENTS
02296802	RISPERIDONE - 4	ANTIPSYCHOTIC AGENTS
02236950	RISPERIDONE (RISPERIDONE TARTRATE)	ANTIPSYCHOTIC AGENTS
02332051	RISPERIDONE TABLETS	ANTIPSYCHOTIC AGENTS
02332078	RISPERIDONE TABLETS	ANTIPSYCHOTIC AGENTS
02332086	RISPERIDONE TABLETS	ANTIPSYCHOTIC AGENTS
02332094	RISPERIDONE TABLETS	ANTIPSYCHOTIC AGENTS
02332108	RISPERIDONE TABLETS	ANTIPSYCHOTIC AGENTS
02332116	RISPERIDONE TABLETS	ANTIPSYCHOTIC AGENTS
02454319	RISPERIDONE TARTRATE	ANTIPSYCHOTIC AGENTS

02479346	RIVA-ARIPIPRAZOLE	ANTIPSYCHOTIC AGENTS
02479354	RIVA-ARIPIPRAZOLE	ANTIPSYCHOTIC AGENTS
02479362	RIVA-ARIPIPRAZOLE	ANTIPSYCHOTIC AGENTS
02479370	RIVA-ARIPIPRAZOLE	ANTIPSYCHOTIC AGENTS
02479389	RIVA-ARIPIPRAZOLE	ANTIPSYCHOTIC AGENTS
02479397	RIVA-ARIPIPRAZOLE	ANTIPSYCHOTIC AGENTS
02337126	RIVA-OLANZAPINE	ANTIPSYCHOTIC AGENTS
02337134	RIVA-OLANZAPINE	ANTIPSYCHOTIC AGENTS
02337142	RIVA-OLANZAPINE	ANTIPSYCHOTIC AGENTS
02337150	RIVA-OLANZAPINE	ANTIPSYCHOTIC AGENTS
02337169	RIVA-OLANZAPINE	ANTIPSYCHOTIC AGENTS
02339811	RIVA-OLANZAPINE ODT	ANTIPSYCHOTIC AGENTS
02339838	RIVA-OLANZAPINE ODT	ANTIPSYCHOTIC AGENTS
02339846	RIVA-OLANZAPINE ODT	ANTIPSYCHOTIC AGENTS
02392399	RIVA-OLANZAPINE ODT	ANTIPSYCHOTIC AGENTS
02283565	RIVA-RISPERIDONE	ANTIPSYCHOTIC AGENTS
02283573	RIVA-RISPERIDONE	ANTIPSYCHOTIC AGENTS
02283581	RIVA-RISPERIDONE	ANTIPSYCHOTIC AGENTS
02283603	RIVA-RISPERIDONE	ANTIPSYCHOTIC AGENTS
02283611	RIVA-RISPERIDONE	ANTIPSYCHOTIC AGENTS
02283638	RIVA-RISPERIDONE	ANTIPSYCHOTIC AGENTS
02473658	SANDOZ ARIPIPRAZOLE	ANTIPSYCHOTIC AGENTS
02473666	SANDOZ ARIPIPRAZOLE	ANTIPSYCHOTIC AGENTS
02473674	SANDOZ ARIPIPRAZOLE	ANTIPSYCHOTIC AGENTS
02473682	SANDOZ ARIPIPRAZOLE	ANTIPSYCHOTIC AGENTS
02473690	SANDOZ ARIPIPRAZOLE	ANTIPSYCHOTIC AGENTS
02473704	SANDOZ ARIPIPRAZOLE	ANTIPSYCHOTIC AGENTS

02247798	SANDOZ CLOZAPINE	ANTIPSYCHOTIC AGENTS
02247805	SANDOZ CLOZAPINE	ANTIPSYCHOTIC AGENTS
02310341	SANDOZ OLANZAPINE	ANTIPSYCHOTIC AGENTS
02310368	SANDOZ OLANZAPINE	ANTIPSYCHOTIC AGENTS
02310376	SANDOZ OLANZAPINE	ANTIPSYCHOTIC AGENTS
02310384	SANDOZ OLANZAPINE	ANTIPSYCHOTIC AGENTS
02310392	SANDOZ OLANZAPINE	ANTIPSYCHOTIC AGENTS
02310406	SANDOZ OLANZAPINE	ANTIPSYCHOTIC AGENTS
02327775	SANDOZ OLANZAPINE ODT	ANTIPSYCHOTIC AGENTS
02327783	SANDOZ OLANZAPINE ODT	ANTIPSYCHOTIC AGENTS
02327791	SANDOZ OLANZAPINE ODT	ANTIPSYCHOTIC AGENTS
02327805	SANDOZ OLANZAPINE ODT	ANTIPSYCHOTIC AGENTS
00789720	SANDOZ PROCHLORPERAZINE	ANTIPSYCHOTIC AGENTS
02279495	SANDOZ RISPERIDONE	ANTIPSYCHOTIC AGENTS
02279509	SANDOZ RISPERIDONE	ANTIPSYCHOTIC AGENTS
02279800	SANDOZ RISPERIDONE	ANTIPSYCHOTIC AGENTS
02279819	SANDOZ RISPERIDONE	ANTIPSYCHOTIC AGENTS
02279827	SANDOZ RISPERIDONE	ANTIPSYCHOTIC AGENTS
02279835	SANDOZ RISPERIDONE	ANTIPSYCHOTIC AGENTS
02292807	SANDOZ RISPERIDONE	ANTIPSYCHOTIC AGENTS
02303655	SANDOZ RISPERIDONE	ANTIPSYCHOTIC AGENTS
02303663	SANDOZ RISPERIDONE	ANTIPSYCHOTIC AGENTS
66124173	SULPIRIDE	ANTIPSYCHOTIC AGENTS
02464144	TEVA-ARIPIRAZOLE	ANTIPSYCHOTIC AGENTS
02464152	TEVA-ARIPIRAZOLE	ANTIPSYCHOTIC AGENTS
02464160	TEVA-ARIPIRAZOLE	ANTIPSYCHOTIC AGENTS
02464179	TEVA-ARIPIRAZOLE	ANTIPSYCHOTIC AGENTS

02464187	TEVA-ARIPIRAZOLE	ANTIPSYCHOTIC AGENTS
02464195	TEVA-ARIPIRAZOLE	ANTIPSYCHOTIC AGENTS
00232807	TEVA-CHLORPROMAZINE	ANTIPSYCHOTIC AGENTS
00232823	TEVA-CHLORPROMAZINE	ANTIPSYCHOTIC AGENTS
00232831	TEVA-CHLORPROMAZINE	ANTIPSYCHOTIC AGENTS
00363650	TEVA-HALOPERIDOL	ANTIPSYCHOTIC AGENTS
00363669	TEVA-HALOPERIDOL	ANTIPSYCHOTIC AGENTS
00363677	TEVA-HALOPERIDOL	ANTIPSYCHOTIC AGENTS
00363685	TEVA-HALOPERIDOL	ANTIPSYCHOTIC AGENTS
00713449	TEVA-HALOPERIDOL	ANTIPSYCHOTIC AGENTS
00768820	TEVA-HALOPERIDOL	ANTIPSYCHOTIC AGENTS
02276712	TEVA-OLANZAPINE	ANTIPSYCHOTIC AGENTS
02276720	TEVA-OLANZAPINE	ANTIPSYCHOTIC AGENTS
02276739	TEVA-OLANZAPINE	ANTIPSYCHOTIC AGENTS
02276747	TEVA-OLANZAPINE	ANTIPSYCHOTIC AGENTS
02276755	TEVA-OLANZAPINE	ANTIPSYCHOTIC AGENTS
02359707	TEVA-OLANZAPINE	ANTIPSYCHOTIC AGENTS
02321378	TEVA-OLANZAPINE OD	ANTIPSYCHOTIC AGENTS
02321386	TEVA-OLANZAPINE OD	ANTIPSYCHOTIC AGENTS
02321343	TEVA-OLANZAPINE ODT	ANTIPSYCHOTIC AGENTS
02321351	TEVA-OLANZAPINE ODT	ANTIPSYCHOTIC AGENTS
02264188	TEVA-RISPERIDONE	ANTIPSYCHOTIC AGENTS
02264196	TEVA-RISPERIDONE	ANTIPSYCHOTIC AGENTS
02264218	TEVA-RISPERIDONE	ANTIPSYCHOTIC AGENTS
02264226	TEVA-RISPERIDONE	ANTIPSYCHOTIC AGENTS
02264234	TEVA-RISPERIDONE	ANTIPSYCHOTIC AGENTS
02282690	TEVA-RISPERIDONE	ANTIPSYCHOTIC AGENTS

00028614	THIOPROPAZATE HCL	ANTIPSYCHOTIC AGENTS
00025763	THIOPROPERAZINE MESYLATE	ANTIPSYCHOTIC AGENTS
01927639	THIOPROPERAZINE MESYLATE	ANTIPSYCHOTIC AGENTS
00025747	THIOPROPERAZINE MESYLATE	ANTIPSYCHOTIC AGENTS
00025755	THIOPROPERAZINE MESYLATE	ANTIPSYCHOTIC AGENTS
00456101	THIORIDAZINE HCL	ANTIPSYCHOTIC AGENTS
00037478	THIORIDAZINE HCL	ANTIPSYCHOTIC AGENTS
00360244	THIORIDAZINE HCL	ANTIPSYCHOTIC AGENTS
00027553	THIORIDAZINE HCL	ANTIPSYCHOTIC AGENTS
00575143	THIORIDAZINE HCL	ANTIPSYCHOTIC AGENTS
00027375	THIORIDAZINE HCL	ANTIPSYCHOTIC AGENTS
00456063	THIORIDAZINE HCL	ANTIPSYCHOTIC AGENTS
00037508	THIORIDAZINE HCL	ANTIPSYCHOTIC AGENTS
00360228	THIORIDAZINE HCL	ANTIPSYCHOTIC AGENTS
00027529	THIORIDAZINE HCL	ANTIPSYCHOTIC AGENTS
00575119	THIORIDAZINE HCL	ANTIPSYCHOTIC AGENTS
00456071	THIORIDAZINE HCL	ANTIPSYCHOTIC AGENTS
00037494	THIORIDAZINE HCL	ANTIPSYCHOTIC AGENTS
00360198	THIORIDAZINE HCL	ANTIPSYCHOTIC AGENTS
00027537	THIORIDAZINE HCL	ANTIPSYCHOTIC AGENTS
00575127	THIORIDAZINE HCL	ANTIPSYCHOTIC AGENTS
00238775	THIORIDAZINE HCL	ANTIPSYCHOTIC AGENTS
02229553	THIORIDAZINE HCL	ANTIPSYCHOTIC AGENTS
00027359	THIORIDAZINE HCL	ANTIPSYCHOTIC AGENTS
00775320	THIORIDAZINE HCL	ANTIPSYCHOTIC AGENTS
00456098	THIORIDAZINE HCL	ANTIPSYCHOTIC AGENTS
00037486	THIORIDAZINE HCL	ANTIPSYCHOTIC AGENTS

00360236	THIORIDAZINE HCL	ANTIPSYCHOTIC AGENTS
00027545	THIORIDAZINE HCL	ANTIPSYCHOTIC AGENTS
00575135	THIORIDAZINE HCL	ANTIPSYCHOTIC AGENTS
00027561	THIORIDAZINE HCL	ANTIPSYCHOTIC AGENTS
00238783	THIORIDAZINE HCL	ANTIPSYCHOTIC AGENTS
00238791	THIORIDAZINE HCL	ANTIPSYCHOTIC AGENTS
00238805	THIORIDAZINE HCL	ANTIPSYCHOTIC AGENTS
00238813	THIORIDAZINE HCL	ANTIPSYCHOTIC AGENTS
00238821	THIORIDAZINE HCL	ANTIPSYCHOTIC AGENTS
00262587	THIORIDAZINE HCL	ANTIPSYCHOTIC AGENTS
00268844	THIORIDAZINE HCL	ANTIPSYCHOTIC AGENTS
00268852	THIORIDAZINE HCL	ANTIPSYCHOTIC AGENTS
00271209	THIORIDAZINE HCL	ANTIPSYCHOTIC AGENTS
00271217	THIORIDAZINE HCL	ANTIPSYCHOTIC AGENTS
00271225	THIORIDAZINE HCL	ANTIPSYCHOTIC AGENTS
00272728	THIORIDAZINE HCL	ANTIPSYCHOTIC AGENTS
00324345	THIORIDAZINE HCL	ANTIPSYCHOTIC AGENTS
00324353	THIORIDAZINE HCL	ANTIPSYCHOTIC AGENTS
00386537	THIORIDAZINE HCL	ANTIPSYCHOTIC AGENTS
00386545	THIORIDAZINE HCL	ANTIPSYCHOTIC AGENTS
00386553	THIORIDAZINE HCL	ANTIPSYCHOTIC AGENTS
00393541	THIORIDAZINE HCL	ANTIPSYCHOTIC AGENTS
00431125	THIORIDAZINE HCL	ANTIPSYCHOTIC AGENTS
00431133	THIORIDAZINE HCL	ANTIPSYCHOTIC AGENTS
00431141	THIORIDAZINE HCL	ANTIPSYCHOTIC AGENTS
00445223	THIORIDAZINE HCL	ANTIPSYCHOTIC AGENTS
00456381	THIORIDAZINE HCL	ANTIPSYCHOTIC AGENTS

00502359	THIORIDAZINE HCL	ANTIPSYCHOTIC AGENTS
00502367	THIORIDAZINE HCL	ANTIPSYCHOTIC AGENTS
00502375	THIORIDAZINE HCL	ANTIPSYCHOTIC AGENTS
00502383	THIORIDAZINE HCL	ANTIPSYCHOTIC AGENTS
00776513	THIORIDAZINE HCL	ANTIPSYCHOTIC AGENTS
00885592	THIORIDAZINE HCL	ANTIPSYCHOTIC AGENTS
00885606	THIORIDAZINE HCL	ANTIPSYCHOTIC AGENTS
00885614	THIORIDAZINE HCL	ANTIPSYCHOTIC AGENTS
00903700	THIORIDAZINE HCL	ANTIPSYCHOTIC AGENTS
00903726	THIORIDAZINE HCL	ANTIPSYCHOTIC AGENTS
66124536	THIORIDAZINE HCL	ANTIPSYCHOTIC AGENTS
66124538	THIORIDAZINE HCL	ANTIPSYCHOTIC AGENTS
66124547	THIORIDAZINE HCL	ANTIPSYCHOTIC AGENTS
00027359	THIORIDAZINE HYDROCHLORIDE	ANTIPSYCHOTIC AGENTS
00027553	THIORIDAZINE HYDROCHLORIDE	ANTIPSYCHOTIC AGENTS
00027529	THIORIDAZINE HYDROCHLORIDE	ANTIPSYCHOTIC AGENTS
00027561	THIORIDAZINE HYDROCHLORIDE	ANTIPSYCHOTIC AGENTS
00027537	THIORIDAZINE HYDROCHLORIDE	ANTIPSYCHOTIC AGENTS
00027545	THIORIDAZINE HYDROCHLORIDE	ANTIPSYCHOTIC AGENTS
00037478	THIORIDAZINE HYDROCHLORIDE	ANTIPSYCHOTIC AGENTS
00037508	THIORIDAZINE HYDROCHLORIDE	ANTIPSYCHOTIC AGENTS
00037494	THIORIDAZINE HYDROCHLORIDE	ANTIPSYCHOTIC AGENTS
00037486	THIORIDAZINE HYDROCHLORIDE	ANTIPSYCHOTIC AGENTS
00262587	THIORIDAZINE HYDROCHLORIDE	ANTIPSYCHOTIC AGENTS
00575135	THIORIDAZINE HYDROCHLORIDE	ANTIPSYCHOTIC AGENTS
00575143	THIORIDAZINE HYDROCHLORIDE	ANTIPSYCHOTIC AGENTS
00575119	THIORIDAZINE HYDROCHLORIDE	ANTIPSYCHOTIC AGENTS

00775320	THIORIDAZINE HYDROCHLORIDE	ANTIPSYCHOTIC AGENTS
00776513	THIORIDAZINE HYDROCHLORIDE	ANTIPSYCHOTIC AGENTS
00575127	THIORIDAZINE HYDROCHLORIDE	ANTIPSYCHOTIC AGENTS
00431125	THIORIDAZINE HYDROCHLORIDE	ANTIPSYCHOTIC AGENTS
00431133	THIORIDAZINE HYDROCHLORIDE	ANTIPSYCHOTIC AGENTS
00431141	THIORIDAZINE HYDROCHLORIDE	ANTIPSYCHOTIC AGENTS
00024457	THIOTHIXENE	ANTIPSYCHOTIC AGENTS
00024430	THIOTHIXENE	ANTIPSYCHOTIC AGENTS
00024449	THIOTHIXENE	ANTIPSYCHOTIC AGENTS
00024449	THIOTHIXENE	ANTIPSYCHOTIC AGENTS
00024430	THIOTHIXENE	ANTIPSYCHOTIC AGENTS
00024457	THIOTHIXENE	ANTIPSYCHOTIC AGENTS
02404702	TORRENT-OLANZAPINE ODT	ANTIPSYCHOTIC AGENTS
02404729	TORRENT-OLANZAPINE ODT	ANTIPSYCHOTIC AGENTS
02404737	TORRENT-OLANZAPINE ODT	ANTIPSYCHOTIC AGENTS
02404745	TORRENT-OLANZAPINE ODT	ANTIPSYCHOTIC AGENTS
00017175	TRIFLUOPERAZINE	ANTIPSYCHOTIC AGENTS
00131733	TRIFLUOPERAZINE	ANTIPSYCHOTIC AGENTS
00726214	TRIFLUOPERAZINE	ANTIPSYCHOTIC AGENTS
00726222	TRIFLUOPERAZINE	ANTIPSYCHOTIC AGENTS
00726230	TRIFLUOPERAZINE	ANTIPSYCHOTIC AGENTS
00726249	TRIFLUOPERAZINE	ANTIPSYCHOTIC AGENTS
00726257	TRIFLUOPERAZINE	ANTIPSYCHOTIC AGENTS
00312746	TRIFLUOPERAZINE	ANTIPSYCHOTIC AGENTS
00312754	TRIFLUOPERAZINE	ANTIPSYCHOTIC AGENTS
00326836	TRIFLUOPERAZINE	ANTIPSYCHOTIC AGENTS
00345539	TRIFLUOPERAZINE	ANTIPSYCHOTIC AGENTS

00595942	TRIFLUOPERAZINE	ANTIPSYCHOTIC AGENTS
02232692	TRIFLUOPERAZINE 10MG TABLETS	ANTIPSYCHOTIC AGENTS
02232680	TRIFLUOPERAZINE 1MG TABLETS	ANTIPSYCHOTIC AGENTS
02232690	TRIFLUOPERAZINE 2MG TABLETS	ANTIPSYCHOTIC AGENTS
02232691	TRIFLUOPERAZINE 5MG TABLETS	ANTIPSYCHOTIC AGENTS
00298212	TRIFLUOPERAZINE HCL	ANTIPSYCHOTIC AGENTS
00027022	TRIFLUOPERAZINE HCL	ANTIPSYCHOTIC AGENTS
01918249	TRIFLUOPERAZINE HCL	ANTIPSYCHOTIC AGENTS
01918230	TRIFLUOPERAZINE HCL	ANTIPSYCHOTIC AGENTS
00021881	TRIFLUOPERAZINE HCL	ANTIPSYCHOTIC AGENTS
00326836	TRIFLUOPERAZINE HCL	ANTIPSYCHOTIC AGENTS
00280399	TRIFLUOPERAZINE HCL	ANTIPSYCHOTIC AGENTS
00027170	TRIFLUOPERAZINE HCL	ANTIPSYCHOTIC AGENTS
00249092	TRIFLUOPERAZINE HCL	ANTIPSYCHOTIC AGENTS
00021857	TRIFLUOPERAZINE HCL	ANTIPSYCHOTIC AGENTS
00345539	TRIFLUOPERAZINE HCL	ANTIPSYCHOTIC AGENTS
00027146	TRIFLUOPERAZINE HCL	ANTIPSYCHOTIC AGENTS
00249068	TRIFLUOPERAZINE HCL	ANTIPSYCHOTIC AGENTS
01918206	TRIFLUOPERAZINE HCL	ANTIPSYCHOTIC AGENTS
01918257	TRIFLUOPERAZINE HCL	ANTIPSYCHOTIC AGENTS
00026999	TRIFLUOPERAZINE HCL	ANTIPSYCHOTIC AGENTS
00021865	TRIFLUOPERAZINE HCL	ANTIPSYCHOTIC AGENTS
00312754	TRIFLUOPERAZINE HCL	ANTIPSYCHOTIC AGENTS
00013900	TRIFLUOPERAZINE HCL	ANTIPSYCHOTIC AGENTS
00027154	TRIFLUOPERAZINE HCL	ANTIPSYCHOTIC AGENTS
00249076	TRIFLUOPERAZINE HCL	ANTIPSYCHOTIC AGENTS
01918214	TRIFLUOPERAZINE HCL	ANTIPSYCHOTIC AGENTS

01918222	TRIFLUOPERAZINE HCL	ANTIPSYCHOTIC AGENTS
00021873	TRIFLUOPERAZINE HCL	ANTIPSYCHOTIC AGENTS
00312746	TRIFLUOPERAZINE HCL	ANTIPSYCHOTIC AGENTS
00013919	TRIFLUOPERAZINE HCL	ANTIPSYCHOTIC AGENTS
00027162	TRIFLUOPERAZINE HCL	ANTIPSYCHOTIC AGENTS
00271527	TRIFLUOPERAZINE HCL	ANTIPSYCHOTIC AGENTS
00249084	TRIFLUOPERAZINE HCL	ANTIPSYCHOTIC AGENTS
00013897	TRIFLUOPERAZINE HCL	ANTIPSYCHOTIC AGENTS
00013927	TRIFLUOPERAZINE HCL	ANTIPSYCHOTIC AGENTS
00017183	TRIFLUOPERAZINE HCL	ANTIPSYCHOTIC AGENTS
00017191	TRIFLUOPERAZINE HCL	ANTIPSYCHOTIC AGENTS
00017205	TRIFLUOPERAZINE HCL	ANTIPSYCHOTIC AGENTS
00018473	TRIFLUOPERAZINE HCL	ANTIPSYCHOTIC AGENTS
00018481	TRIFLUOPERAZINE HCL	ANTIPSYCHOTIC AGENTS
00018503	TRIFLUOPERAZINE HCL	ANTIPSYCHOTIC AGENTS
00018511	TRIFLUOPERAZINE HCL	ANTIPSYCHOTIC AGENTS
00024279	TRIFLUOPERAZINE HCL	ANTIPSYCHOTIC AGENTS
00024287	TRIFLUOPERAZINE HCL	ANTIPSYCHOTIC AGENTS
00024295	TRIFLUOPERAZINE HCL	ANTIPSYCHOTIC AGENTS
00027006	TRIFLUOPERAZINE HCL	ANTIPSYCHOTIC AGENTS
00027030	TRIFLUOPERAZINE HCL	ANTIPSYCHOTIC AGENTS
00116734	TRIFLUOPERAZINE HCL	ANTIPSYCHOTIC AGENTS
00210749	TRIFLUOPERAZINE HCL	ANTIPSYCHOTIC AGENTS
00210757	TRIFLUOPERAZINE HCL	ANTIPSYCHOTIC AGENTS
00210838	TRIFLUOPERAZINE HCL	ANTIPSYCHOTIC AGENTS
00210862	TRIFLUOPERAZINE HCL	ANTIPSYCHOTIC AGENTS
00255149	TRIFLUOPERAZINE HCL	ANTIPSYCHOTIC AGENTS

00294861	TRIFLUOPERAZINE HCL	ANTIPSYCHOTIC AGENTS
00303453	TRIFLUOPERAZINE HCL	ANTIPSYCHOTIC AGENTS
00345881	TRIFLUOPERAZINE HCL	ANTIPSYCHOTIC AGENTS
00345903	TRIFLUOPERAZINE HCL	ANTIPSYCHOTIC AGENTS
00345911	TRIFLUOPERAZINE HCL	ANTIPSYCHOTIC AGENTS
00346381	TRIFLUOPERAZINE HCL	ANTIPSYCHOTIC AGENTS
00386502	TRIFLUOPERAZINE HCL	ANTIPSYCHOTIC AGENTS
00386510	TRIFLUOPERAZINE HCL	ANTIPSYCHOTIC AGENTS
00386529	TRIFLUOPERAZINE HCL	ANTIPSYCHOTIC AGENTS
00389943	TRIFLUOPERAZINE HCL	ANTIPSYCHOTIC AGENTS
00431176	TRIFLUOPERAZINE HCL	ANTIPSYCHOTIC AGENTS
00431184	TRIFLUOPERAZINE HCL	ANTIPSYCHOTIC AGENTS
00431192	TRIFLUOPERAZINE HCL	ANTIPSYCHOTIC AGENTS
00431206	TRIFLUOPERAZINE HCL	ANTIPSYCHOTIC AGENTS
00451630	TRIFLUOPERAZINE HCL	ANTIPSYCHOTIC AGENTS
00460028	TRIFLUOPERAZINE HCL	ANTIPSYCHOTIC AGENTS
00460044	TRIFLUOPERAZINE HCL	ANTIPSYCHOTIC AGENTS
00460052	TRIFLUOPERAZINE HCL	ANTIPSYCHOTIC AGENTS
00460060	TRIFLUOPERAZINE HCL	ANTIPSYCHOTIC AGENTS
00503452	TRIFLUOPERAZINE HCL	ANTIPSYCHOTIC AGENTS
00503460	TRIFLUOPERAZINE HCL	ANTIPSYCHOTIC AGENTS
00503479	TRIFLUOPERAZINE HCL	ANTIPSYCHOTIC AGENTS
00503487	TRIFLUOPERAZINE HCL	ANTIPSYCHOTIC AGENTS
00595942	TRIFLUOPERAZINE HCL	ANTIPSYCHOTIC AGENTS
00751871	TRIFLUOPERAZINE HCL	ANTIPSYCHOTIC AGENTS
00886718	TRIFLUOPERAZINE HCL	ANTIPSYCHOTIC AGENTS
02232680	TRIFLUOPERAZINE HCL	ANTIPSYCHOTIC AGENTS

02232690	TRIFLUOPERAZINE HCL	ANTIPSYCHOTIC AGENTS
02232691	TRIFLUOPERAZINE HCL	ANTIPSYCHOTIC AGENTS
02232692	TRIFLUOPERAZINE HCL	ANTIPSYCHOTIC AGENTS
00389943	TRIFLUOPERAZINE TAB 10MG	ANTIPSYCHOTIC AGENTS
00431206	TRIFLUOPERAZINE TAB 10MG	ANTIPSYCHOTIC AGENTS
00386529	TRIFLUOPERAZINE TAB 1MG	ANTIPSYCHOTIC AGENTS
00431176	TRIFLUOPERAZINE TAB 1MG	ANTIPSYCHOTIC AGENTS
00386510	TRIFLUOPERAZINE TAB 2MG	ANTIPSYCHOTIC AGENTS
00431184	TRIFLUOPERAZINE TAB 2MG	ANTIPSYCHOTIC AGENTS
00386502	TRIFLUOPERAZINE TAB 5MG	ANTIPSYCHOTIC AGENTS
00431192	TRIFLUOPERAZINE TAB 5MG	ANTIPSYCHOTIC AGENTS
02428008	VAN-OLANZAPINE	ANTIPSYCHOTIC AGENTS
02428016	VAN-OLANZAPINE	ANTIPSYCHOTIC AGENTS
02428024	VAN-OLANZAPINE	ANTIPSYCHOTIC AGENTS
02428032	VAN-OLANZAPINE	ANTIPSYCHOTIC AGENTS
02428040	VAN-OLANZAPINE	ANTIPSYCHOTIC AGENTS
02438828	VAN-OLANZAPINE ODT	ANTIPSYCHOTIC AGENTS
02438836	VAN-OLANZAPINE ODT	ANTIPSYCHOTIC AGENTS
02438844	VAN-OLANZAPINE ODT	ANTIPSYCHOTIC AGENTS
02438852	VAN-OLANZAPINE ODT	ANTIPSYCHOTIC AGENTS
02449544	ZIPRASIDONE (ZIPRASIDONE HYDROCHLORIDE MONOHYDRATE)	ANTIPSYCHOTIC AGENTS
02449552	ZIPRASIDONE (ZIPRASIDONE HYDROCHLORIDE MONOHYDRATE)	ANTIPSYCHOTIC AGENTS
02449560	ZIPRASIDONE (ZIPRASIDONE HYDROCHLORIDE MONOHYDRATE)	ANTIPSYCHOTIC AGENTS
02449579	ZIPRASIDONE (ZIPRASIDONE HYDROCHLORIDE MONOHYDRATE)	ANTIPSYCHOTIC AGENTS
02441357	ZIPRASIDONE (ZIPRASIDONE HYDROCHLORIDE MONOHYDRATE)	ANTIPSYCHOTIC AGENTS
02441365	ZIPRASIDONE (ZIPRASIDONE HYDROCHLORIDE MONOHYDRATE)	ANTIPSYCHOTIC AGENTS

02441373	ZIPRASIDONE (ZIPRASIDONE HYDROCHLORIDE MONOHYDRATE)	ANTIPSYCHOTIC AGENTS
02441381	ZIPRASIDONE (ZIPRASIDONE HYDROCHLORIDE MONOHYDRATE)	ANTIPSYCHOTIC AGENTS
02429365	ZIPRASIDONE (ZIPRASIDONE HYDROCHLORIDE MONOHYDRATE)	ANTIPSYCHOTIC AGENTS
02429373	ZIPRASIDONE (ZIPRASIDONE HYDROCHLORIDE MONOHYDRATE)	ANTIPSYCHOTIC AGENTS
02429381	ZIPRASIDONE (ZIPRASIDONE HYDROCHLORIDE MONOHYDRATE)	ANTIPSYCHOTIC AGENTS
02429403	ZIPRASIDONE (ZIPRASIDONE HYDROCHLORIDE MONOHYDRATE)	ANTIPSYCHOTIC AGENTS
02298597	ZIPRASIDONE (ZIPRASIDONE HYDROCHLORIDE MONOHYDRATE)	ANTIPSYCHOTIC AGENTS
02298600	ZIPRASIDONE (ZIPRASIDONE HYDROCHLORIDE MONOHYDRATE)	ANTIPSYCHOTIC AGENTS
02298619	ZIPRASIDONE (ZIPRASIDONE HYDROCHLORIDE MONOHYDRATE)	ANTIPSYCHOTIC AGENTS
02298627	ZIPRASIDONE (ZIPRASIDONE HYDROCHLORIDE MONOHYDRATE)	ANTIPSYCHOTIC AGENTS
02478803	ZIPRASIDONE (ZIPRASIDONE HYDROCHLORIDE MONOHYDRATE)	ANTIPSYCHOTIC AGENTS
02478811	ZIPRASIDONE (ZIPRASIDONE HYDROCHLORIDE MONOHYDRATE)	ANTIPSYCHOTIC AGENTS
02478838	ZIPRASIDONE (ZIPRASIDONE HYDROCHLORIDE MONOHYDRATE)	ANTIPSYCHOTIC AGENTS
02478846	ZIPRASIDONE (ZIPRASIDONE HYDROCHLORIDE MONOHYDRATE)	ANTIPSYCHOTIC AGENTS
02449544	ZIPRASIDONE HCL	ANTIPSYCHOTIC AGENTS
02298597	ZIPRASIDONE HCL	ANTIPSYCHOTIC AGENTS
02298600	ZIPRASIDONE HCL	ANTIPSYCHOTIC AGENTS
02449552	ZIPRASIDONE HCL	ANTIPSYCHOTIC AGENTS
02449560	ZIPRASIDONE HCL	ANTIPSYCHOTIC AGENTS
02298619	ZIPRASIDONE HCL	ANTIPSYCHOTIC AGENTS
02298627	ZIPRASIDONE HCL	ANTIPSYCHOTIC AGENTS
02449579	ZIPRASIDONE HCL	ANTIPSYCHOTIC AGENTS
02162903	ZUCLOPENTHIXOL (ZUCLOPENTHIXOL HYDROCHLORIDE)	ANTIPSYCHOTIC AGENTS
02162911	ZUCLOPENTHIXOL (ZUCLOPENTHIXOL HYDROCHLORIDE)	ANTIPSYCHOTIC AGENTS

02162938	ZUCLOPENTHIXOL (ZUCLOPENTHIXOL HYDROCHLORIDE)	ANTIPSYCHOTIC AGENTS
02230402	ZUCLOPENTHIXOL (ZUCLOPENTHIXOL HYDROCHLORIDE)	ANTIPSYCHOTIC AGENTS
02230403	ZUCLOPENTHIXOL (ZUCLOPENTHIXOL HYDROCHLORIDE)	ANTIPSYCHOTIC AGENTS
02230404	ZUCLOPENTHIXOL (ZUCLOPENTHIXOL HYDROCHLORIDE)	ANTIPSYCHOTIC AGENTS
02230405	ZUCLOPENTHIXOL ACETATE	ANTIPSYCHOTIC AGENTS
02162946	ZUCLOPENTHIXOL ACETATE	ANTIPSYCHOTIC AGENTS
02162946	ZUCLOPENTHIXOL ACETATE	ANTIPSYCHOTIC AGENTS
02230405	ZUCLOPENTHIXOL ACETATE	ANTIPSYCHOTIC AGENTS
02230406	ZUCLOPENTHIXOL DECANOATE	ANTIPSYCHOTIC AGENTS
02162954	ZUCLOPENTHIXOL DECANOATE	ANTIPSYCHOTIC AGENTS
02162962	ZUCLOPENTHIXOL DECANOATE	ANTIPSYCHOTIC AGENTS
02230407	ZUCLOPENTHIXOL DECANOATE	ANTIPSYCHOTIC AGENTS
02162954	ZUCLOPENTHIXOL DECANOATE	ANTIPSYCHOTIC AGENTS
02162962	ZUCLOPENTHIXOL DECANOATE	ANTIPSYCHOTIC AGENTS
02230406	ZUCLOPENTHIXOL DECANOATE	ANTIPSYCHOTIC AGENTS
02230407	ZUCLOPENTHIXOL DECANOATE	ANTIPSYCHOTIC AGENTS
02162903	ZUCLOPENTHIXOL HCL	ANTIPSYCHOTIC AGENTS
02230402	ZUCLOPENTHIXOL HCL	ANTIPSYCHOTIC AGENTS
02230403	ZUCLOPENTHIXOL HCL	ANTIPSYCHOTIC AGENTS
02162911	ZUCLOPENTHIXOL HCL	ANTIPSYCHOTIC AGENTS
02162938	ZUCLOPENTHIXOL HCL	ANTIPSYCHOTIC AGENTS
02230404	ZUCLOPENTHIXOL HCL	ANTIPSYCHOTIC AGENTS
00002590	ZUCLOPENTHIXOL HCL	ANTIPSYCHOTIC AGENTS

ii. Benzodiazepines

DIN	Drug Name	DCLASS
02400111	ALPRAZOLAM	BENZODIAZEPINE DERIVATIVES
02230074	ALPRAZOLAM	BENZODIAZEPINE DERIVATIVES
01913239	ALPRAZOLAM	BENZODIAZEPINE DERIVATIVES
02137534	ALPRAZOLAM	BENZODIAZEPINE DERIVATIVES
00865397	ALPRAZOLAM	BENZODIAZEPINE DERIVATIVES
01913484	ALPRAZOLAM	BENZODIAZEPINE DERIVATIVES
00548359	ALPRAZOLAM	BENZODIAZEPINE DERIVATIVES
00677485	ALPRAZOLAM	BENZODIAZEPINE DERIVATIVES
02417634	ALPRAZOLAM	BENZODIAZEPINE DERIVATIVES
02400138	ALPRAZOLAM	BENZODIAZEPINE DERIVATIVES
02349205	ALPRAZOLAM	BENZODIAZEPINE DERIVATIVES
02230075	ALPRAZOLAM	BENZODIAZEPINE DERIVATIVES
00677477	ALPRAZOLAM	BENZODIAZEPINE DERIVATIVES
00548367	ALPRAZOLAM	BENZODIAZEPINE DERIVATIVES
01913492	ALPRAZOLAM	BENZODIAZEPINE DERIVATIVES
02137542	ALPRAZOLAM	BENZODIAZEPINE DERIVATIVES
01913247	ALPRAZOLAM	BENZODIAZEPINE DERIVATIVES
00865400	ALPRAZOLAM	BENZODIAZEPINE DERIVATIVES
02417642	ALPRAZOLAM	BENZODIAZEPINE DERIVATIVES
00813958	ALPRAZOLAM	BENZODIAZEPINE DERIVATIVES
00723770	ALPRAZOLAM	BENZODIAZEPINE DERIVATIVES
00913484	ALPRAZOLAM	BENZODIAZEPINE DERIVATIVES
00913492	ALPRAZOLAM	BENZODIAZEPINE DERIVATIVES
01908170	ALPRAZOLAM	BENZODIAZEPINE DERIVATIVES
01908189	ALPRAZOLAM	BENZODIAZEPINE DERIVATIVES
02018179	ALPRAZOLAM	BENZODIAZEPINE DERIVATIVES
02018187	ALPRAZOLAM	BENZODIAZEPINE DERIVATIVES
02083418	ALPRAZOLAM	BENZODIAZEPINE DERIVATIVES
02083426	ALPRAZOLAM	BENZODIAZEPINE DERIVATIVES
02147572	ALPRAZOLAM	BENZODIAZEPINE DERIVATIVES
02147580	ALPRAZOLAM	BENZODIAZEPINE DERIVATIVES
02228858	ALPRAZOLAM	BENZODIAZEPINE DERIVATIVES
02228866	ALPRAZOLAM	BENZODIAZEPINE DERIVATIVES
02229813	ALPRAZOLAM	BENZODIAZEPINE DERIVATIVES
02229814	ALPRAZOLAM	BENZODIAZEPINE DERIVATIVES
02230744	ALPRAZOLAM	BENZODIAZEPINE DERIVATIVES
02230745	ALPRAZOLAM	BENZODIAZEPINE DERIVATIVES
02237264	ALPRAZOLAM	BENZODIAZEPINE DERIVATIVES

02237265	ALPRAZOLAM	BENZODIAZEPINE DERIVATIVES
02237266	ALPRAZOLAM	BENZODIAZEPINE DERIVATIVES
02237267	ALPRAZOLAM	BENZODIAZEPINE DERIVATIVES
02242107	ALPRAZOLAM	BENZODIAZEPINE DERIVATIVES
02242108	ALPRAZOLAM	BENZODIAZEPINE DERIVATIVES
02243611	ALPRAZOLAM	BENZODIAZEPINE DERIVATIVES
02243612	ALPRAZOLAM	BENZODIAZEPINE DERIVATIVES
02248706	ALPRAZOLAM	BENZODIAZEPINE DERIVATIVES
02248707	ALPRAZOLAM	BENZODIAZEPINE DERIVATIVES
02287277	ALPRAZOLAM	BENZODIAZEPINE DERIVATIVES
02287315	ALPRAZOLAM	BENZODIAZEPINE DERIVATIVES
02287323	ALPRAZOLAM	BENZODIAZEPINE DERIVATIVES
02287331	ALPRAZOLAM	BENZODIAZEPINE DERIVATIVES
02346990	ALPRAZOLAM	BENZODIAZEPINE DERIVATIVES
02347008	ALPRAZOLAM	BENZODIAZEPINE DERIVATIVES
02349191	ALPRAZOLAM	BENZODIAZEPINE DERIVATIVES
02400146	ALPRAZOLAM	BENZODIAZEPINE DERIVATIVES
02400154	ALPRAZOLAM	BENZODIAZEPINE DERIVATIVES
02404877	ALPRAZOLAM	BENZODIAZEPINE DERIVATIVES
02404885	ALPRAZOLAM	BENZODIAZEPINE DERIVATIVES
02404893	ALPRAZOLAM	BENZODIAZEPINE DERIVATIVES
02404907	ALPRAZOLAM	BENZODIAZEPINE DERIVATIVES
02417650	ALPRAZOLAM	BENZODIAZEPINE DERIVATIVES
02417669	ALPRAZOLAM	BENZODIAZEPINE DERIVATIVES
02248706	ALPRAZOLAM	BENZODIAZEPINE DERIVATIVES
02349191	ALPRAZOLAM	BENZODIAZEPINE DERIVATIVES
02349205	ALPRAZOLAM	BENZODIAZEPINE DERIVATIVES
02434601	ALPRAZOLAM	BENZODIAZEPINE DERIVATIVES
02434628	ALPRAZOLAM	BENZODIAZEPINE DERIVATIVES
02434636	ALPRAZOLAM	BENZODIAZEPINE DERIVATIVES
02434644	ALPRAZOLAM	BENZODIAZEPINE DERIVATIVES
02230074	ALPRAZOLAM	BENZODIAZEPINE DERIVATIVES
02230075	ALPRAZOLAM	BENZODIAZEPINE DERIVATIVES
02248707	ALPRAZOLAM	BENZODIAZEPINE DERIVATIVES
01908189	ALPRAZOLAM	BENZODIAZEPINE DERIVATIVES
01908170	ALPRAZOLAM	BENZODIAZEPINE DERIVATIVES
02397021	ALPRAZOLAM	BENZODIAZEPINE DERIVATIVES
02397048	ALPRAZOLAM	BENZODIAZEPINE DERIVATIVES
02397056	ALPRAZOLAM	BENZODIAZEPINE DERIVATIVES
02397064	ALPRAZOLAM	BENZODIAZEPINE DERIVATIVES
02400111	ALPRAZOLAM	BENZODIAZEPINE DERIVATIVES

02400138	ALPRAZOLAM	BENZODIAZEPINE DERIVATIVES
02400146	ALPRAZOLAM	BENZODIAZEPINE DERIVATIVES
02400154	ALPRAZOLAM	BENZODIAZEPINE DERIVATIVES
02137534	ALPRAZOLAM	BENZODIAZEPINE DERIVATIVES
02137542	ALPRAZOLAM	BENZODIAZEPINE DERIVATIVES
02229813	ALPRAZOLAM	BENZODIAZEPINE DERIVATIVES
02229814	ALPRAZOLAM	BENZODIAZEPINE DERIVATIVES
02417634	ALPRAZOLAM	BENZODIAZEPINE DERIVATIVES
02417642	ALPRAZOLAM	BENZODIAZEPINE DERIVATIVES
02417650	ALPRAZOLAM	BENZODIAZEPINE DERIVATIVES
02417669	ALPRAZOLAM	BENZODIAZEPINE DERIVATIVES
02346990	ALPRAZOLAM	BENZODIAZEPINE DERIVATIVES
02347008	ALPRAZOLAM	BENZODIAZEPINE DERIVATIVES
00677477	ALPRAZOLAM	BENZODIAZEPINE DERIVATIVES
00677485	ALPRAZOLAM	BENZODIAZEPINE DERIVATIVES
02404877	ALPRAZOLAM	BENZODIAZEPINE DERIVATIVES
02404885	ALPRAZOLAM	BENZODIAZEPINE DERIVATIVES
02404893	ALPRAZOLAM	BENZODIAZEPINE DERIVATIVES
02404907	ALPRAZOLAM	BENZODIAZEPINE DERIVATIVES
02242107	ALPRAZOLAM	BENZODIAZEPINE DERIVATIVES
02242108	ALPRAZOLAM	BENZODIAZEPINE DERIVATIVES
01913484	ALPRAZOLAM	BENZODIAZEPINE DERIVATIVES
01913492	ALPRAZOLAM	BENZODIAZEPINE DERIVATIVES
00682314	BROMAZEPAM	BENZODIAZEPINE DERIVATIVES
02177153	BROMAZEPAM	BENZODIAZEPINE DERIVATIVES
02171856	BROMAZEPAM	BENZODIAZEPINE DERIVATIVES
02192705	BROMAZEPAM	BENZODIAZEPINE DERIVATIVES
02167808	BROMAZEPAM	BENZODIAZEPINE DERIVATIVES
02167816	BROMAZEPAM	BENZODIAZEPINE DERIVATIVES
02171864	BROMAZEPAM	BENZODIAZEPINE DERIVATIVES
02177161	BROMAZEPAM	BENZODIAZEPINE DERIVATIVES
02192713	BROMAZEPAM	BENZODIAZEPINE DERIVATIVES
00518123	BROMAZEPAM	BENZODIAZEPINE DERIVATIVES
02230584	BROMAZEPAM	BENZODIAZEPINE DERIVATIVES
02230585	BROMAZEPAM	BENZODIAZEPINE DERIVATIVES
00518131	BROMAZEPAM	BENZODIAZEPINE DERIVATIVES
02177188	BROMAZEPAM	BENZODIAZEPINE DERIVATIVES
02167824	BROMAZEPAM	BENZODIAZEPINE DERIVATIVES
02171872	BROMAZEPAM	BENZODIAZEPINE DERIVATIVES
02192721	BROMAZEPAM	BENZODIAZEPINE DERIVATIVES
02220512	BROMAZEPAM	BENZODIAZEPINE DERIVATIVES

02220520	BROMAZEPAM	BENZODIAZEPINE DERIVATIVES
02220539	BROMAZEPAM	BENZODIAZEPINE DERIVATIVES
02228874	BROMAZEPAM	BENZODIAZEPINE DERIVATIVES
02228882	BROMAZEPAM	BENZODIAZEPINE DERIVATIVES
02228890	BROMAZEPAM	BENZODIAZEPINE DERIVATIVES
02230039	BROMAZEPAM	BENZODIAZEPINE DERIVATIVES
02230040	BROMAZEPAM	BENZODIAZEPINE DERIVATIVES
02230041	BROMAZEPAM	BENZODIAZEPINE DERIVATIVES
02230666	BROMAZEPAM	BENZODIAZEPINE DERIVATIVES
02230667	BROMAZEPAM	BENZODIAZEPINE DERIVATIVES
02230668	BROMAZEPAM	BENZODIAZEPINE DERIVATIVES
02232556	BROMAZEPAM	BENZODIAZEPINE DERIVATIVES
02232558	BROMAZEPAM	BENZODIAZEPINE DERIVATIVES
02242152	BROMAZEPAM	BENZODIAZEPINE DERIVATIVES
02242153	BROMAZEPAM	BENZODIAZEPINE DERIVATIVES
99101489	BROMAZEPAM	BENZODIAZEPINE DERIVATIVES
99101490	BROMAZEPAM	BENZODIAZEPINE DERIVATIVES
02167808	BROMAZEPAM	BENZODIAZEPINE DERIVATIVES
02167816	BROMAZEPAM	BENZODIAZEPINE DERIVATIVES
02167824	BROMAZEPAM	BENZODIAZEPINE DERIVATIVES
02177153	BROMAZEPAM	BENZODIAZEPINE DERIVATIVES
02177161	BROMAZEPAM	BENZODIAZEPINE DERIVATIVES
02177188	BROMAZEPAM	BENZODIAZEPINE DERIVATIVES
02220512	BROMAZEPAM	BENZODIAZEPINE DERIVATIVES
02220520	BROMAZEPAM	BENZODIAZEPINE DERIVATIVES
02220539	BROMAZEPAM	BENZODIAZEPINE DERIVATIVES
02192713	BROMAZEPAM	BENZODIAZEPINE DERIVATIVES
02192721	BROMAZEPAM	BENZODIAZEPINE DERIVATIVES
02192705	BROMAZEPAM	BENZODIAZEPINE DERIVATIVES
02171856	BROMAZEPAM	BENZODIAZEPINE DERIVATIVES
02171864	BROMAZEPAM	BENZODIAZEPINE DERIVATIVES
02171872	BROMAZEPAM	BENZODIAZEPINE DERIVATIVES
02232556	BROMAZEPAM	BENZODIAZEPINE DERIVATIVES
02232558	BROMAZEPAM	BENZODIAZEPINE DERIVATIVES
02242152	BROMAZEPAM	BENZODIAZEPINE DERIVATIVES
02242153	BROMAZEPAM	BENZODIAZEPINE DERIVATIVES
02230584	BROMAZEPAM	BENZODIAZEPINE DERIVATIVES
02230585	BROMAZEPAM	BENZODIAZEPINE DERIVATIVES
00522988	CHLORDIAZEPOXIDE	BENZODIAZEPINE DERIVATIVES
00522996	CHLORDIAZEPOXIDE	BENZODIAZEPINE DERIVATIVES
00522724	CHLORDIAZEPOXIDE	BENZODIAZEPINE DERIVATIVES

00016764	CHLORDIAZEPOXIDE	BENZODIAZEPINE DERIVATIVES
00430927	CHLORDIAZEPOXIDE	BENZODIAZEPINE DERIVATIVES
00430935	CHLORDIAZEPOXIDE	BENZODIAZEPINE DERIVATIVES
00448737	CHLORDIAZEPOXIDE	BENZODIAZEPINE DERIVATIVES
00903688	CHLORDIAZEPOXIDE	BENZODIAZEPINE DERIVATIVES
00013471	CHLORDIAZEPOXIDE HCL	BENZODIAZEPINE DERIVATIVES
00020923	CHLORDIAZEPOXIDE HCL	BENZODIAZEPINE DERIVATIVES
00012637	CHLORDIAZEPOXIDE HCL	BENZODIAZEPINE DERIVATIVES
00398411	CHLORDIAZEPOXIDE HCL	BENZODIAZEPINE DERIVATIVES
00012645	CHLORDIAZEPOXIDE HCL	BENZODIAZEPINE DERIVATIVES
00020931	CHLORDIAZEPOXIDE HCL	BENZODIAZEPINE DERIVATIVES
00398438	CHLORDIAZEPOXIDE HCL	BENZODIAZEPINE DERIVATIVES
00013498	CHLORDIAZEPOXIDE HCL	BENZODIAZEPINE DERIVATIVES
00295051	CHLORDIAZEPOXIDE HCL	BENZODIAZEPINE DERIVATIVES
00398403	CHLORDIAZEPOXIDE HCL	BENZODIAZEPINE DERIVATIVES
00013463	CHLORDIAZEPOXIDE HCL	BENZODIAZEPINE DERIVATIVES
00020915	CHLORDIAZEPOXIDE HCL	BENZODIAZEPINE DERIVATIVES
00012629	CHLORDIAZEPOXIDE HCL	BENZODIAZEPINE DERIVATIVES
00012815	CHLORDIAZEPOXIDE HCL	BENZODIAZEPINE DERIVATIVES
00016756	CHLORDIAZEPOXIDE HCL	BENZODIAZEPINE DERIVATIVES
00022020	CHLORDIAZEPOXIDE HCL	BENZODIAZEPINE DERIVATIVES
00134325	CHLORDIAZEPOXIDE HCL	BENZODIAZEPINE DERIVATIVES
00134333	CHLORDIAZEPOXIDE HCL	BENZODIAZEPINE DERIVATIVES
00156590	CHLORDIAZEPOXIDE HCL	BENZODIAZEPINE DERIVATIVES
00210064	CHLORDIAZEPOXIDE HCL	BENZODIAZEPINE DERIVATIVES
00235873	CHLORDIAZEPOXIDE HCL	BENZODIAZEPINE DERIVATIVES
00251259	CHLORDIAZEPOXIDE HCL	BENZODIAZEPINE DERIVATIVES
00251267	CHLORDIAZEPOXIDE HCL	BENZODIAZEPINE DERIVATIVES
00267090	CHLORDIAZEPOXIDE HCL	BENZODIAZEPINE DERIVATIVES
00301558	CHLORDIAZEPOXIDE HCL	BENZODIAZEPINE DERIVATIVES
00314471	CHLORDIAZEPOXIDE HCL	BENZODIAZEPINE DERIVATIVES
00314498	CHLORDIAZEPOXIDE HCL	BENZODIAZEPINE DERIVATIVES
00314528	CHLORDIAZEPOXIDE HCL	BENZODIAZEPINE DERIVATIVES
00324418	CHLORDIAZEPOXIDE HCL	BENZODIAZEPINE DERIVATIVES
00363596	CHLORDIAZEPOXIDE HCL	BENZODIAZEPINE DERIVATIVES
00379913	CHLORDIAZEPOXIDE HCL	BENZODIAZEPINE DERIVATIVES
00434426	CHLORDIAZEPOXIDE HCL	BENZODIAZEPINE DERIVATIVES
00440183	CHLORDIAZEPOXIDE HCL	BENZODIAZEPINE DERIVATIVES
00451479	CHLORDIAZEPOXIDE HCL	BENZODIAZEPINE DERIVATIVES
00451487	CHLORDIAZEPOXIDE HCL	BENZODIAZEPINE DERIVATIVES
00451495	CHLORDIAZEPOXIDE HCL	BENZODIAZEPINE DERIVATIVES

00502626	CHLORDIAZEPOXIDE HCL	BENZODIAZEPINE DERIVATIVES
99101299	CHLORDIAZEPOXIDE HCL	BENZODIAZEPINE DERIVATIVES
99101354	CHLORDIAZEPOXIDE HCL	BENZODIAZEPINE DERIVATIVES
00618454	CHLORDIAZEPOXIDE HCL & CLIDINIUM BROMIDE	BENZODIAZEPINE DERIVATIVES
00115630	CHLORDIAZEPOXIDE HCL & CLIDINIUM HCL	BENZODIAZEPINE DERIVATIVES
00391077	CHLORDIAZEPOXIDE HCL & CLIDINIUM HCL	BENZODIAZEPINE DERIVATIVES
00636223	CHLORDIAZEPOXIDE HCL & CLIDINIUM HCL	BENZODIAZEPINE DERIVATIVES
00807516	CHLORDIAZEPOXIDE HCL & CLIDINIUM HCL	BENZODIAZEPINE DERIVATIVES
00522724	CHLORDIAZEPOXIDE HYDROCHLORIDE	BENZODIAZEPINE DERIVATIVES
00522988	CHLORDIAZEPOXIDE HYDROCHLORIDE	BENZODIAZEPINE DERIVATIVES
00522996	CHLORDIAZEPOXIDE HYDROCHLORIDE	BENZODIAZEPINE DERIVATIVES
00156590	CHLORDIAZEPOXIDE HYDROCHLORIDE	BENZODIAZEPINE DERIVATIVES
00363596	CHLORDIAZEPOXIDE HYDROCHLORIDE	BENZODIAZEPINE DERIVATIVES
00618454	CHLORDIAZEPOXIDE HYDROCHLORIDE	BENZODIAZEPINE DERIVATIVES
00448737	CHLORDIAZEPOXIDE HYDROCHLORIDE	BENZODIAZEPINE DERIVATIVES
00430935	CHLORDIAZEPOXIDE HYDROCHLORIDE	BENZODIAZEPINE DERIVATIVES
00434426	CHLORDIAZEPOXIDE HYDROCHLORIDE	BENZODIAZEPINE DERIVATIVES
00235873	CHLORDIAZEPOXIDE HYDROCHLORIDE	BENZODIAZEPINE DERIVATIVES
00267090	CHLORDIAZEPOXIDE HYDROCHLORIDE	BENZODIAZEPINE DERIVATIVES
00295051	CHLORDIAZEPOXIDE HYDROCHLORIDE	BENZODIAZEPINE DERIVATIVES
00391077	CHLORDIAZEPOXIDE HYDROCHLORIDE	BENZODIAZEPINE DERIVATIVES
00115630	CHLORDIAZEPOXIDE HYDROCHLORIDE	BENZODIAZEPINE DERIVATIVES
00134333	CHLORDIAZEPOXIDE HYDROCHLORIDE	BENZODIAZEPINE DERIVATIVES
00134325	CHLORDIAZEPOXIDE HYDROCHLORIDE	BENZODIAZEPINE DERIVATIVES
00020923	CHLORDIAZEPOXIDE HYDROCHLORIDE	BENZODIAZEPINE DERIVATIVES
00020931	CHLORDIAZEPOXIDE HYDROCHLORIDE	BENZODIAZEPINE DERIVATIVES
00020915	CHLORDIAZEPOXIDE HYDROCHLORIDE	BENZODIAZEPINE DERIVATIVES
02239110	CHLORDIAZEPOXIDE HYDROCHLORIDE	BENZODIAZEPINE DERIVATIVES
00636223	CHLORDIAZEPOXIDE HYDROCHLORIDE	BENZODIAZEPINE DERIVATIVES
00846392	CLOBAZAM	BENZODIAZEPINE DERIVATIVES
01989634	CLOBAZAM	BENZODIAZEPINE DERIVATIVES
02221799	CLOBAZAM	BENZODIAZEPINE DERIVATIVES
02244474	CLOBAZAM	BENZODIAZEPINE DERIVATIVES
02238334	CLOBAZAM	BENZODIAZEPINE DERIVATIVES
02238797	CLOBAZAM	BENZODIAZEPINE DERIVATIVES
02244638	CLOBAZAM	BENZODIAZEPINE DERIVATIVES
00903405	CLOBAZAM	BENZODIAZEPINE DERIVATIVES
02247230	CLOBAZAM	BENZODIAZEPINE DERIVATIVES
02248454	CLOBAZAM	BENZODIAZEPINE DERIVATIVES
02347598	CLOBAZAM	BENZODIAZEPINE DERIVATIVES
09851844	CLOBAZAM	BENZODIAZEPINE DERIVATIVES

09851968	CLOBAZAM	BENZODIAZEPINE DERIVATIVES
22123230	CLOBAZAM	BENZODIAZEPINE DERIVATIVES
99101484	CLOBAZAM	BENZODIAZEPINE DERIVATIVES
02244638	CLOBAZAM	BENZODIAZEPINE DERIVATIVES
02248454	CLOBAZAM	BENZODIAZEPINE DERIVATIVES
02247230	CLOBAZAM	BENZODIAZEPINE DERIVATIVES
02347598	CLOBAZAM	BENZODIAZEPINE DERIVATIVES
02244474	CLOBAZAM	BENZODIAZEPINE DERIVATIVES
02238797	CLOBAZAM	BENZODIAZEPINE DERIVATIVES
02238334	CLOBAZAM	BENZODIAZEPINE DERIVATIVES
09852395	CLONAZEPAM	BENZODIAZEPINE DERIVATIVES
02345676	CLONAZEPAM	BENZODIAZEPINE DERIVATIVES
02230950	CLONAZEPAM	BENZODIAZEPINE DERIVATIVES
02233960	CLONAZEPAM	BENZODIAZEPINE DERIVATIVES
02239024	CLONAZEPAM	BENZODIAZEPINE DERIVATIVES
02230366	CLONAZEPAM	BENZODIAZEPINE DERIVATIVES
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02344610	CLONAZEPAM	BENZODIAZEPINE DERIVATIVES
02344629	CLONAZEPAM	BENZODIAZEPINE DERIVATIVES
02365243	CLONAZEPAM	BENZODIAZEPINE DERIVATIVES
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02365278	CLONAZEPAM	BENZODIAZEPINE DERIVATIVES
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02239025	CLONAZEPAM	BENZODIAZEPINE DERIVATIVES
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02303337	CLONAZEPAM	BENZODIAZEPINE DERIVATIVES
02345676	CLONAZEPAM	BENZODIAZEPINE DERIVATIVES
00628212	CLORAZEPATE DIPOTASSIUM	BENZODIAZEPINE DERIVATIVES
00264911	CLORAZEPATE DIPOTASSIUM	BENZODIAZEPINE DERIVATIVES
00860697	CLORAZEPATE DIPOTASSIUM	BENZODIAZEPINE DERIVATIVES
00860689	CLORAZEPATE DIPOTASSIUM	BENZODIAZEPINE DERIVATIVES
00628190	CLORAZEPATE DIPOTASSIUM	BENZODIAZEPINE DERIVATIVES
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00272639	DIAZEPAM	BENZODIAZEPINE DERIVATIVES
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09991151	DIAZEPAM	BENZODIAZEPINE DERIVATIVES
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99101249	DIAZEPAM	BENZODIAZEPINE DERIVATIVES
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00891797	DIAZEPAM	BENZODIAZEPINE DERIVATIVES
66990914	DIAZEPAM & METHYLCELLULOSE	BENZODIAZEPINE DERIVATIVES
02015102	ESTAZOLAM	BENZODIAZEPINE DERIVATIVES
02016060	ESTAZOLAM	BENZODIAZEPINE DERIVATIVES
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99503020	EXTEMPORANEOUS MIXTURE	BENZODIAZEPINE DERIVATIVES
00496545	FLURAZEPAM HCL	BENZODIAZEPINE DERIVATIVES
00012696	FLURAZEPAM HCL	BENZODIAZEPINE DERIVATIVES
00521698	FLURAZEPAM HCL	BENZODIAZEPINE DERIVATIVES
00483826	FLURAZEPAM HCL	BENZODIAZEPINE DERIVATIVES
00012718	FLURAZEPAM HCL	BENZODIAZEPINE DERIVATIVES
00496553	FLURAZEPAM HCL	BENZODIAZEPINE DERIVATIVES
00521701	FLURAZEPAM HCL	BENZODIAZEPINE DERIVATIVES
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02241281	FLURAZEPAM HCL	BENZODIAZEPINE DERIVATIVES
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02248126	FLURAZEPAM HCL	BENZODIAZEPINE DERIVATIVES
02248127	FLURAZEPAM HCL	BENZODIAZEPINE DERIVATIVES
49012696	FLURAZEPAM HCL	BENZODIAZEPINE DERIVATIVES
02070901	FLURAZEPAM HYDROCHLORIDE	BENZODIAZEPINE DERIVATIVES
02070928	FLURAZEPAM HYDROCHLORIDE	BENZODIAZEPINE DERIVATIVES
02128934	FLURAZEPAM HYDROCHLORIDE	BENZODIAZEPINE DERIVATIVES
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02248126	FLURAZEPAM HYDROCHLORIDE	BENZODIAZEPINE DERIVATIVES
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00496545	FLURAZEPAM HYDROCHLORIDE	BENZODIAZEPINE DERIVATIVES
00496553	FLURAZEPAM HYDROCHLORIDE	BENZODIAZEPINE DERIVATIVES
00667102	FLURAZEPAM HYDROCHLORIDE	BENZODIAZEPINE DERIVATIVES
00667099	FLURAZEPAM HYDROCHLORIDE	BENZODIAZEPINE DERIVATIVES
02241281	FLURAZEPAM HYDROCHLORIDE	BENZODIAZEPINE DERIVATIVES
02241282	FLURAZEPAM HYDROCHLORIDE	BENZODIAZEPINE DERIVATIVES
00414220	FLURAZEPAM HYDROCHLORIDE	BENZODIAZEPINE DERIVATIVES
00414239	FLURAZEPAM HYDROCHLORIDE	BENZODIAZEPINE DERIVATIVES
00483826	FLURAZEPAM HYDROCHLORIDE	BENZODIAZEPINE DERIVATIVES
00483818	FLURAZEPAM HYDROCHLORIDE	BENZODIAZEPINE DERIVATIVES
02459973	IVABRADINE (IVABRADINE HYDROCHLORIDE)	BENZODIAZEPINE DERIVATIVES
02459981	IVABRADINE (IVABRADINE HYDROCHLORIDE)	BENZODIAZEPINE DERIVATIVES

02459973	IVABRADINE HCL	BENZODIAZEPINE RELATED DRUGS
02459981	IVABRADINE HCL	BENZODIAZEPINE RELATED DRUGS
00514519	KETAZOLAM	BENZODIAZEPINE DERIVATIVES
00514527	KETAZOLAM	BENZODIAZEPINE DERIVATIVES
00559245	KETAZOLAM	BENZODIAZEPINE DERIVATIVES
01919512	KETAZOLAM	BENZODIAZEPINE DERIVATIVES
01919520	KETAZOLAM	BENZODIAZEPINE DERIVATIVES
00865672	LORAZEPAM	BENZODIAZEPINE DERIVATIVES
02041413	LORAZEPAM	BENZODIAZEPINE DERIVATIVES
00728187	LORAZEPAM	BENZODIAZEPINE DERIVATIVES
00399124	LORAZEPAM	BENZODIAZEPINE DERIVATIVES
00711101	LORAZEPAM	BENZODIAZEPINE DERIVATIVES
00655740	LORAZEPAM	BENZODIAZEPINE DERIVATIVES
02041456	LORAZEPAM	BENZODIAZEPINE DERIVATIVES
00722138	LORAZEPAM	BENZODIAZEPINE DERIVATIVES
02410753	LORAZEPAM	BENZODIAZEPINE DERIVATIVES
00865680	LORAZEPAM	BENZODIAZEPINE DERIVATIVES
02041421	LORAZEPAM	BENZODIAZEPINE DERIVATIVES
00728195	LORAZEPAM	BENZODIAZEPINE DERIVATIVES
00348325	LORAZEPAM	BENZODIAZEPINE DERIVATIVES
00637742	LORAZEPAM	BENZODIAZEPINE DERIVATIVES
00655759	LORAZEPAM	BENZODIAZEPINE DERIVATIVES
00557757	LORAZEPAM	BENZODIAZEPINE DERIVATIVES
02041464	LORAZEPAM	BENZODIAZEPINE DERIVATIVES
02410761	LORAZEPAM	BENZODIAZEPINE DERIVATIVES
00865699	LORAZEPAM	BENZODIAZEPINE DERIVATIVES
02041448	LORAZEPAM	BENZODIAZEPINE DERIVATIVES
00728209	LORAZEPAM	BENZODIAZEPINE DERIVATIVES
00348333	LORAZEPAM	BENZODIAZEPINE DERIVATIVES
00655767	LORAZEPAM	BENZODIAZEPINE DERIVATIVES
00637750	LORAZEPAM	BENZODIAZEPINE DERIVATIVES
00557765	LORAZEPAM	BENZODIAZEPINE DERIVATIVES
02041472	LORAZEPAM	BENZODIAZEPINE DERIVATIVES
02041405	LORAZEPAM	BENZODIAZEPINE DERIVATIVES
00557773	LORAZEPAM	BENZODIAZEPINE DERIVATIVES
09857216	LORAZEPAM	BENZODIAZEPINE DERIVATIVES
02243278	LORAZEPAM	BENZODIAZEPINE DERIVATIVES
00655643	LORAZEPAM	BENZODIAZEPINE DERIVATIVES

00655651	LORAZEPAM	BENZODIAZEPINE DERIVATIVES
00655678	LORAZEPAM	BENZODIAZEPINE DERIVATIVES
02240725	LORAZEPAM	BENZODIAZEPINE DERIVATIVES
02240726	LORAZEPAM	BENZODIAZEPINE DERIVATIVES
02240727	LORAZEPAM	BENZODIAZEPINE DERIVATIVES
02245784	LORAZEPAM	BENZODIAZEPINE DERIVATIVES
02245785	LORAZEPAM	BENZODIAZEPINE DERIVATIVES
02245786	LORAZEPAM	BENZODIAZEPINE DERIVATIVES
02280477	LORAZEPAM	BENZODIAZEPINE DERIVATIVES
02280485	LORAZEPAM	BENZODIAZEPINE DERIVATIVES
02298201	LORAZEPAM	BENZODIAZEPINE DERIVATIVES
02298228	LORAZEPAM	BENZODIAZEPINE DERIVATIVES
02298236	LORAZEPAM	BENZODIAZEPINE DERIVATIVES
02347733	LORAZEPAM	BENZODIAZEPINE DERIVATIVES
02347741	LORAZEPAM	BENZODIAZEPINE DERIVATIVES
02347768	LORAZEPAM	BENZODIAZEPINE DERIVATIVES
02351072	LORAZEPAM	BENZODIAZEPINE DERIVATIVES
02351080	LORAZEPAM	BENZODIAZEPINE DERIVATIVES
02351099	LORAZEPAM	BENZODIAZEPINE DERIVATIVES
02388669	LORAZEPAM	BENZODIAZEPINE DERIVATIVES
02410745	LORAZEPAM	BENZODIAZEPINE DERIVATIVES
02429810	LORAZEPAM	BENZODIAZEPINE DERIVATIVES
02429829	LORAZEPAM	BENZODIAZEPINE DERIVATIVES
02438704	LORAZEPAM	BENZODIAZEPINE DERIVATIVES
05022457	LORAZEPAM	BENZODIAZEPINE DERIVATIVES
22123248	LORAZEPAM	BENZODIAZEPINE DERIVATIVES
49348325	LORAZEPAM	BENZODIAZEPINE DERIVATIVES

80637742	LORAZEPAM	BENZODIAZEPINE DERIVATIVES
80711101	LORAZEPAM	BENZODIAZEPINE DERIVATIVES
00655740	LORAZEPAM	BENZODIAZEPINE DERIVATIVES
00655759	LORAZEPAM	BENZODIAZEPINE DERIVATIVES
00655767	LORAZEPAM	BENZODIAZEPINE DERIVATIVES
02245784	LORAZEPAM	BENZODIAZEPINE DERIVATIVES
02245785	LORAZEPAM	BENZODIAZEPINE DERIVATIVES
02245786	LORAZEPAM	BENZODIAZEPINE DERIVATIVES
02351072	LORAZEPAM	BENZODIAZEPINE DERIVATIVES
02351080	LORAZEPAM	BENZODIAZEPINE DERIVATIVES
02351099	LORAZEPAM	BENZODIAZEPINE DERIVATIVES
02429802	LORAZEPAM	BENZODIAZEPINE DERIVATIVES
02429810	LORAZEPAM	BENZODIAZEPINE DERIVATIVES
02429829	LORAZEPAM	BENZODIAZEPINE DERIVATIVES
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02388669	LORAZEPAM	BENZODIAZEPINE DERIVATIVES
02438704	LORAZEPAM	BENZODIAZEPINE DERIVATIVES
02410745	LORAZEPAM	BENZODIAZEPINE DERIVATIVES
02410753	LORAZEPAM	BENZODIAZEPINE DERIVATIVES
02410761	LORAZEPAM	BENZODIAZEPINE DERIVATIVES
02347733	LORAZEPAM	BENZODIAZEPINE DERIVATIVES
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02347768	LORAZEPAM	BENZODIAZEPINE DERIVATIVES
02298201	LORAZEPAM	BENZODIAZEPINE DERIVATIVES
02298228	LORAZEPAM	BENZODIAZEPINE DERIVATIVES
02298236	LORAZEPAM	BENZODIAZEPINE DERIVATIVES
00728187	LORAZEPAM	BENZODIAZEPINE DERIVATIVES
00728195	LORAZEPAM	BENZODIAZEPINE DERIVATIVES
00728209	LORAZEPAM	BENZODIAZEPINE DERIVATIVES
00655643	LORAZEPAM	BENZODIAZEPINE DERIVATIVES
00655651	LORAZEPAM	BENZODIAZEPINE DERIVATIVES
00655678	LORAZEPAM	BENZODIAZEPINE DERIVATIVES
02240725	LORAZEPAM	BENZODIAZEPINE DERIVATIVES
02240726	LORAZEPAM	BENZODIAZEPINE DERIVATIVES
02240727	LORAZEPAM	BENZODIAZEPINE DERIVATIVES
00637742	LORAZEPAM	BENZODIAZEPINE DERIVATIVES
00637750	LORAZEPAM	BENZODIAZEPINE DERIVATIVES
00711101	LORAZEPAM	BENZODIAZEPINE DERIVATIVES
02243254	MIDAZOLAM	BENZODIAZEPINE DERIVATIVES
02382342	MIDAZOLAM	BENZODIAZEPINE DERIVATIVES
02382350	MIDAZOLAM	BENZODIAZEPINE DERIVATIVES

02382377	MIDAZOLAM	BENZODIAZEPINE DERIVATIVES
02382385	MIDAZOLAM	BENZODIAZEPINE DERIVATIVES
02240285	MIDAZOLAM	BENZODIAZEPINE DERIVATIVES
02240286	MIDAZOLAM	BENZODIAZEPINE DERIVATIVES
02242904	MIDAZOLAM	BENZODIAZEPINE DERIVATIVES
02242905	MIDAZOLAM	BENZODIAZEPINE DERIVATIVES
02423758	MIDAZOLAM	BENZODIAZEPINE DERIVATIVES
02423766	MIDAZOLAM	BENZODIAZEPINE DERIVATIVES
02382873	MIDAZOLAM	BENZODIAZEPINE DERIVATIVES
02382903	MIDAZOLAM	BENZODIAZEPINE DERIVATIVES
02382342	MIDAZOLAM	BENZODIAZEPINE DERIVATIVES
02382350	MIDAZOLAM	BENZODIAZEPINE DERIVATIVES
02382377	MIDAZOLAM	BENZODIAZEPINE DERIVATIVES
02382385	MIDAZOLAM	BENZODIAZEPINE DERIVATIVES
02243253	MIDAZOLAM (MIDAZOLAM HYDROCHLORIDE)	BENZODIAZEPINE DERIVATIVES
02243254	MIDAZOLAM (MIDAZOLAM HYDROCHLORIDE)	BENZODIAZEPINE DERIVATIVES
02243934	MIDAZOLAM (MIDAZOLAM HYDROCHLORIDE)	BENZODIAZEPINE DERIVATIVES
02243935	MIDAZOLAM (MIDAZOLAM HYDROCHLORIDE)	BENZODIAZEPINE DERIVATIVES
02383586	MIDAZOLAM (MIDAZOLAM HYDROCHLORIDE)	BENZODIAZEPINE DERIVATIVES
02383594	MIDAZOLAM (MIDAZOLAM HYDROCHLORIDE)	BENZODIAZEPINE DERIVATIVES
02241753	MIDAZOLAM (MIDAZOLAM HYDROCHLORIDE)	BENZODIAZEPINE DERIVATIVES
02241754	MIDAZOLAM (MIDAZOLAM HYDROCHLORIDE)	BENZODIAZEPINE DERIVATIVES
02242653	MIDAZOLAM (MIDAZOLAM HYDROCHLORIDE)	BENZODIAZEPINE DERIVATIVES
02242654	MIDAZOLAM (MIDAZOLAM HYDROCHLORIDE)	BENZODIAZEPINE DERIVATIVES
02240285	MIDAZOLAM HCL	BENZODIAZEPINE DERIVATIVES
00784516	MIDAZOLAM HCL	BENZODIAZEPINE DERIVATIVES
00766011	MIDAZOLAM HCL	BENZODIAZEPINE DERIVATIVES
09857438	MIDAZOLAM HCL	BENZODIAZEPINE DERIVATIVES
09857437	MIDAZOLAM HCL	BENZODIAZEPINE DERIVATIVES
09857436	MIDAZOLAM HCL	BENZODIAZEPINE DERIVATIVES
09857225	MIDAZOLAM HCL	BENZODIAZEPINE DERIVATIVES
02242905	MIDAZOLAM HCL	BENZODIAZEPINE DERIVATIVES
02240286	MIDAZOLAM HCL	BENZODIAZEPINE DERIVATIVES
02241753	MIDAZOLAM HCL	BENZODIAZEPINE DERIVATIVES
02241754	MIDAZOLAM HCL	BENZODIAZEPINE DERIVATIVES
02242653	MIDAZOLAM HCL	BENZODIAZEPINE DERIVATIVES
02242654	MIDAZOLAM HCL	BENZODIAZEPINE DERIVATIVES
02242904	MIDAZOLAM HCL	BENZODIAZEPINE DERIVATIVES
02243253	MIDAZOLAM HCL	BENZODIAZEPINE DERIVATIVES
02243934	MIDAZOLAM HCL	BENZODIAZEPINE DERIVATIVES
02243935	MIDAZOLAM HCL	BENZODIAZEPINE DERIVATIVES

02244788	MIDAZOLAM HCL	BENZODIAZEPINE DERIVATIVES
02244789	MIDAZOLAM HCL	BENZODIAZEPINE DERIVATIVES
02382873	MIDAZOLAM HCL	BENZODIAZEPINE DERIVATIVES
02382903	MIDAZOLAM HCL	BENZODIAZEPINE DERIVATIVES
02423758	MIDAZOLAM HCL	BENZODIAZEPINE DERIVATIVES
02423766	MIDAZOLAM HCL	BENZODIAZEPINE DERIVATIVES
99100865	MIDAZOLAM HCL	BENZODIAZEPINE DERIVATIVES
02234007	NITRAZEPAM	BENZODIAZEPINE DERIVATIVES
02245231	NITRAZEPAM	BENZODIAZEPINE DERIVATIVES
02229655	NITRAZEPAM	BENZODIAZEPINE DERIVATIVES
00511536	NITRAZEPAM	BENZODIAZEPINE DERIVATIVES
00511528	NITRAZEPAM	BENZODIAZEPINE DERIVATIVES
02234003	NITRAZEPAM	BENZODIAZEPINE DERIVATIVES
02245230	NITRAZEPAM	BENZODIAZEPINE DERIVATIVES
02229654	NITRAZEPAM	BENZODIAZEPINE DERIVATIVES
00903215	NITRAZEPAM	BENZODIAZEPINE DERIVATIVES
02200961	NITRAZEPAM	BENZODIAZEPINE DERIVATIVES
02200988	NITRAZEPAM	BENZODIAZEPINE DERIVATIVES
02255561	NITRAZEPAM	BENZODIAZEPINE DERIVATIVES
02255588	NITRAZEPAM	BENZODIAZEPINE DERIVATIVES
22296655	NITRAZEPAM	BENZODIAZEPINE DERIVATIVES
99101127	NITRAZEPAM	BENZODIAZEPINE DERIVATIVES
02245230	NITRAZEPAM	BENZODIAZEPINE DERIVATIVES
02245231	NITRAZEPAM	BENZODIAZEPINE DERIVATIVES
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02234003	NITRAZEPAM	BENZODIAZEPINE DERIVATIVES
02234007	NITRAZEPAM	BENZODIAZEPINE DERIVATIVES
02043653	OXAZEPAM	BENZODIAZEPINE DERIVATIVES
00500852	OXAZEPAM	BENZODIAZEPINE DERIVATIVES
00483893	OXAZEPAM	BENZODIAZEPINE DERIVATIVES
00402680	OXAZEPAM	BENZODIAZEPINE DERIVATIVES
00295701	OXAZEPAM	BENZODIAZEPINE DERIVATIVES
00496529	OXAZEPAM	BENZODIAZEPINE DERIVATIVES
00483915	OXAZEPAM	BENZODIAZEPINE DERIVATIVES
00402745	OXAZEPAM	BENZODIAZEPINE DERIVATIVES
00295698	OXAZEPAM	BENZODIAZEPINE DERIVATIVES
02043661	OXAZEPAM	BENZODIAZEPINE DERIVATIVES
02043688	OXAZEPAM	BENZODIAZEPINE DERIVATIVES
00496537	OXAZEPAM	BENZODIAZEPINE DERIVATIVES
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00402737	OXAZEPAM	BENZODIAZEPINE DERIVATIVES
00231363	OXAZEPAM	BENZODIAZEPINE DERIVATIVES
00414247	OXAZEPAM	BENZODIAZEPINE DERIVATIVES
00414255	OXAZEPAM	BENZODIAZEPINE DERIVATIVES
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00497754	OXAZEPAM	BENZODIAZEPINE DERIVATIVES
00497762	OXAZEPAM	BENZODIAZEPINE DERIVATIVES
00497770	OXAZEPAM	BENZODIAZEPINE DERIVATIVES
00568392	OXAZEPAM	BENZODIAZEPINE DERIVATIVES
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00568414	OXAZEPAM	BENZODIAZEPINE DERIVATIVES
00702745	OXAZEPAM	BENZODIAZEPINE DERIVATIVES
00726362	OXAZEPAM	BENZODIAZEPINE DERIVATIVES
00726370	OXAZEPAM	BENZODIAZEPINE DERIVATIVES
00726389	OXAZEPAM	BENZODIAZEPINE DERIVATIVES
00903599	OXAZEPAM	BENZODIAZEPINE DERIVATIVES
02232721	OXAZEPAM	BENZODIAZEPINE DERIVATIVES
02232727	OXAZEPAM	BENZODIAZEPINE DERIVATIVES
02232732	OXAZEPAM	BENZODIAZEPINE DERIVATIVES
02247177	OXAZEPAM	BENZODIAZEPINE DERIVATIVES
02247178	OXAZEPAM	BENZODIAZEPINE DERIVATIVES
02247179	OXAZEPAM	BENZODIAZEPINE DERIVATIVES
02253968	OXAZEPAM	BENZODIAZEPINE DERIVATIVES
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02294079	OXAZEPAM	BENZODIAZEPINE DERIVATIVES
02294087	OXAZEPAM	BENZODIAZEPINE DERIVATIVES
02294095	OXAZEPAM	BENZODIAZEPINE DERIVATIVES
80402680	OXAZEPAM	BENZODIAZEPINE DERIVATIVES
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00402737	OXAZEPAM	BENZODIAZEPINE DERIVATIVES
02247177	OXAZEPAM	BENZODIAZEPINE DERIVATIVES
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02247179	OXAZEPAM	BENZODIAZEPINE DERIVATIVES
00497754	OXAZEPAM	BENZODIAZEPINE DERIVATIVES
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00497770	OXAZEPAM	BENZODIAZEPINE DERIVATIVES

02232732	OXAZEPAM	BENZODIAZEPINE DERIVATIVES
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00726362	OXAZEPAM	BENZODIAZEPINE DERIVATIVES
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00726389	OXAZEPAM	BENZODIAZEPINE DERIVATIVES
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00568414	OXAZEPAM	BENZODIAZEPINE DERIVATIVES
02273039	TEMAZEPAM	BENZODIAZEPINE DERIVATIVES
02243023	TEMAZEPAM	BENZODIAZEPINE DERIVATIVES
02230095	TEMAZEPAM	BENZODIAZEPINE DERIVATIVES
02231615	TEMAZEPAM	BENZODIAZEPINE DERIVATIVES
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02229455	TEMAZEPAM	BENZODIAZEPINE DERIVATIVES
00604453	TEMAZEPAM	BENZODIAZEPINE DERIVATIVES
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02223570	TEMAZEPAM	BENZODIAZEPINE DERIVATIVES
02225972	TEMAZEPAM	BENZODIAZEPINE DERIVATIVES
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00604461	TEMAZEPAM	BENZODIAZEPINE DERIVATIVES
02273047	TEMAZEPAM	BENZODIAZEPINE DERIVATIVES
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02230102	TEMAZEPAM	BENZODIAZEPINE DERIVATIVES
02231616	TEMAZEPAM	BENZODIAZEPINE DERIVATIVES
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02229456	TEMAZEPAM	BENZODIAZEPINE DERIVATIVES
00513881	TEMAZEPAM	BENZODIAZEPINE DERIVATIVES
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02229756	TEMAZEPAM	BENZODIAZEPINE DERIVATIVES
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02229760	TEMAZEPAM	BENZODIAZEPINE DERIVATIVES
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02239071	TEMAZEPAM	BENZODIAZEPINE DERIVATIVES
02239072	TEMAZEPAM	BENZODIAZEPINE DERIVATIVES
02243624	TEMAZEPAM	BENZODIAZEPINE DERIVATIVES
02247526	TEMAZEPAM	BENZODIAZEPINE DERIVATIVES

02247527	TEMAZEPAM	BENZODIAZEPINE DERIVATIVES
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02253089	TEMAZEPAM	BENZODIAZEPINE DERIVATIVES
02297957	TEMAZEPAM	BENZODIAZEPINE DERIVATIVES
02297965	TEMAZEPAM	BENZODIAZEPINE DERIVATIVES
02347865	TEMAZEPAM	BENZODIAZEPINE DERIVATIVES
02347873	TEMAZEPAM	BENZODIAZEPINE DERIVATIVES
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22123262	TEMAZEPAM	BENZODIAZEPINE DERIVATIVES
99101293	TEMAZEPAM	BENZODIAZEPINE DERIVATIVES
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02244815	TEMAZEPAM	BENZODIAZEPINE DERIVATIVES
02229756	TEMAZEPAM	BENZODIAZEPINE DERIVATIVES
02229758	TEMAZEPAM	BENZODIAZEPINE DERIVATIVES
02231615	TEMAZEPAM	BENZODIAZEPINE DERIVATIVES
02231616	TEMAZEPAM	BENZODIAZEPINE DERIVATIVES
02347865	TEMAZEPAM	BENZODIAZEPINE DERIVATIVES
02347873	TEMAZEPAM	BENZODIAZEPINE DERIVATIVES
02223570	TEMAZEPAM	BENZODIAZEPINE DERIVATIVES
02223589	TEMAZEPAM	BENZODIAZEPINE DERIVATIVES
02239071	TEMAZEPAM	BENZODIAZEPINE DERIVATIVES
02239072	TEMAZEPAM	BENZODIAZEPINE DERIVATIVES
02297957	TEMAZEPAM	BENZODIAZEPINE DERIVATIVES
02297965	TEMAZEPAM	BENZODIAZEPINE DERIVATIVES
02273039	TEMAZEPAM	BENZODIAZEPINE DERIVATIVES
02273047	TEMAZEPAM	BENZODIAZEPINE DERIVATIVES
02229455	TEMAZEPAM	BENZODIAZEPINE DERIVATIVES
02229456	TEMAZEPAM	BENZODIAZEPINE DERIVATIVES
02243023	TEMAZEPAM	BENZODIAZEPINE DERIVATIVES
02243024	TEMAZEPAM	BENZODIAZEPINE DERIVATIVES
02225964	TEMAZEPAM	BENZODIAZEPINE DERIVATIVES
02225972	TEMAZEPAM	BENZODIAZEPINE DERIVATIVES
02229760	TEMAZEPAM	BENZODIAZEPINE DERIVATIVES
02229761	TEMAZEPAM	BENZODIAZEPINE DERIVATIVES
02230095	TEMAZEPAM	BENZODIAZEPINE DERIVATIVES
02230102	TEMAZEPAM	BENZODIAZEPINE DERIVATIVES
00512559	TRIAZOLAM	BENZODIAZEPINE DERIVATIVES
00614351	TRIAZOLAM	BENZODIAZEPINE DERIVATIVES
01995227	TRIAZOLAM	BENZODIAZEPINE DERIVATIVES
00808563	TRIAZOLAM	BENZODIAZEPINE DERIVATIVES
00886084	TRIAZOLAM	BENZODIAZEPINE DERIVATIVES

02230024	TRIAZOLAM	BENZODIAZEPINE DERIVATIVES
02230025	TRIAZOLAM	BENZODIAZEPINE DERIVATIVES
00808571	TRIAZOLAM	BENZODIAZEPINE DERIVATIVES
00886092	TRIAZOLAM	BENZODIAZEPINE DERIVATIVES
00872431	TRIAZOLAM	BENZODIAZEPINE DERIVATIVES
01913506	TRIAZOLAM	BENZODIAZEPINE DERIVATIVES
00443158	TRIAZOLAM	BENZODIAZEPINE DERIVATIVES
00614378	TRIAZOLAM	BENZODIAZEPINE DERIVATIVES
00443123	TRIAZOLAM	BENZODIAZEPINE DERIVATIVES
00443131	TRIAZOLAM	BENZODIAZEPINE DERIVATIVES
00860816	TRIAZOLAM	BENZODIAZEPINE DERIVATIVES
00860824	TRIAZOLAM	BENZODIAZEPINE DERIVATIVES
00872423	TRIAZOLAM	BENZODIAZEPINE DERIVATIVES
02084406	TRIAZOLAM	BENZODIAZEPINE DERIVATIVES
02084414	TRIAZOLAM	BENZODIAZEPINE DERIVATIVES
02232553	TRIAZOLAM	BENZODIAZEPINE DERIVATIVES
02232554	TRIAZOLAM	BENZODIAZEPINE DERIVATIVES
05019135	TRIAZOLAM	BENZODIAZEPINE DERIVATIVES
99100774	TRIAZOLAM	BENZODIAZEPINE DERIVATIVES
99100775	TRIAZOLAM	BENZODIAZEPINE DERIVATIVES
00614351	TRIAZOLAM	BENZODIAZEPINE DERIVATIVES
00614378	TRIAZOLAM	BENZODIAZEPINE DERIVATIVES
01913506	TRIAZOLAM	BENZODIAZEPINE DERIVATIVES
01995227	TRIAZOLAM	BENZODIAZEPINE DERIVATIVES
02232553	TRIAZOLAM	BENZODIAZEPINE DERIVATIVES
02232554	TRIAZOLAM	BENZODIAZEPINE DERIVATIVES
00808563	TRIAZOLAM	BENZODIAZEPINE DERIVATIVES
00808571	TRIAZOLAM	BENZODIAZEPINE DERIVATIVES
00860816	TRIAZOLAM	BENZODIAZEPINE DERIVATIVES
00860824	TRIAZOLAM	BENZODIAZEPINE DERIVATIVES
02230024	TRIAZOLAM	BENZODIAZEPINE DERIVATIVES
02230025	TRIAZOLAM	BENZODIAZEPINE DERIVATIVES
02242219	ZALEPLON	BENZODIAZEPINE RELATED DRUGS
02242220	ZALEPLON	BENZODIAZEPINE RELATED DRUGS
02297124	ZALEPLON	BENZODIAZEPINE RELATED DRUGS
02297132	ZALEPLON	BENZODIAZEPINE RELATED DRUGS
09991096	ZALEPLON	BENZODIAZEPINE RELATED DRUGS
02242219	ZALEPLON	BENZODIAZEPINE RELATED DRUGS

02242220	ZALEPLON	BENZODIAZEPINE RELATED DRUGS
02297124	ZALEPLON	BENZODIAZEPINE RELATED DRUGS
02297132	ZALEPLON	BENZODIAZEPINE RELATED DRUGS

iii. Gastric acid suppressants

DIN	Drug Name	DCLASS
02238525	AMOXICILLIN TRIHYDRATE & CLARITHROMYCIN & LANSOPRAZOLE	PROTON PUMP INHIBITORS
02231831	BISMUTH CITRATE & RANITIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02227436	CIMETIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
01916793	CIMETIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
00865796	CIMETIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
00563560	CIMETIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
00546232	CIMETIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
00584215	CIMETIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
00582409	CIMETIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02229717	CIMETIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02229718	CIMETIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
00487872	CIMETIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
00397474	CIMETIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
00582417	CIMETIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
00546240	CIMETIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02227444	CIMETIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
01916815	CIMETIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
00865818	CIMETIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02227452	CIMETIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
01916785	CIMETIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
00865826	CIMETIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST

00568449	CIMETIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
00603678	CIMETIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
00600059	CIMETIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
00563579	CIMETIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02229719	CIMETIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02229720	CIMETIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
00563587	CIMETIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
00603686	CIMETIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
00600067	CIMETIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
00584282	CIMETIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
01916777	CIMETIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02227460	CIMETIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
00865834	CIMETIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
00749494	CIMETIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
01916769	CIMETIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
00663727	CIMETIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
00618616	CIMETIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
00653411	CIMETIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02229721	CIMETIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
00486876	CIMETIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
00596469	CIMETIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
00596477	CIMETIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
00616230	CIMETIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
00618691	CIMETIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
00618705	CIMETIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
00639893	CIMETIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
00639907	CIMETIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST

00639915	CIMETIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
00644277	CIMETIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
00644285	CIMETIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
00749454	CIMETIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
00811610	CIMETIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
00811629	CIMETIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
00811637	CIMETIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
00901390	CIMETIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
00916815	CIMETIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02227479	CIMETIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02231285	CIMETIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02231287	CIMETIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02231288	CIMETIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02231290	CIMETIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02231291	CIMETIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02237010	CIMETIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02237412	CIMETIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02237619	CIMETIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02238161	CIMETIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02238257	CIMETIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
99101253	CIMETIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
99101285	CIMETIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
99101291	CIMETIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
99101301	CIMETIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
00487872	CIMETIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
00584215	CIMETIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
00600059	CIMETIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST

00600067	CIMETIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
00749494	CIMETIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
00596469	CIMETIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
00596477	CIMETIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
00618691	CIMETIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
00618705	CIMETIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02231285	CIMETIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02231287	CIMETIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02231288	CIMETIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02231290	CIMETIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02231291	CIMETIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02227436	CIMETIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02227444	CIMETIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02227452	CIMETIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02227460	CIMETIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02227479	CIMETIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02229717	CIMETIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02229718	CIMETIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02229719	CIMETIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02229720	CIMETIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02229721	CIMETIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02237619	CIMETIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02237010	CIMETIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02238161	CIMETIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
00582409	CIMETIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
00582417	CIMETIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
00603678	CIMETIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST

00603686	CIMETIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
00663727	CIMETIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
00865796	CIMETIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
00865818	CIMETIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
00865826	CIMETIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
00865834	CIMETIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
00546232	CIMETIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
00546240	CIMETIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
00568449	CIMETIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
00584282	CIMETIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
00618616	CIMETIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
01916815	CIMETIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
01916785	CIMETIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
01916777	CIMETIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02243085	CIMETIDINE (CIMETIDINE HYDROCHLORIDE)	HISTAMINE H2 RECEPTOR ANTAGONIST
02209063	CIMETIDINE (CIMETIDINE HYDROCHLORIDE)	HISTAMINE H2 RECEPTOR ANTAGONIST
01916807	CIMETIDINE (CIMETIDINE HYDROCHLORIDE)	HISTAMINE H2 RECEPTOR ANTAGONIST
00397482	CIMETIDINE (CIMETIDINE HYDROCHLORIDE)	HISTAMINE H2 RECEPTOR ANTAGONIST
01916750	CIMETIDINE (CIMETIDINE HYDROCHLORIDE)	HISTAMINE H2 RECEPTOR ANTAGONIST
02243085	CIMETIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
00397482	CIMETIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
01916750	CIMETIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
00397490	CIMETIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
00527076	CIMETIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
01916807	CIMETIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
02209063	CIMETIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
02240385	CIMETIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST

01927280	CIMETIDINE HYDROCHLORIDE	HISTAMINE H2 RECEPTOR ANTAGONIST
02354696	DEXLANSOPRAZOLE	PROTON PUMP INHIBITORS
02354950	DEXLANSOPRAZOLE	PROTON PUMP INHIBITORS
02354969	DEXLANSOPRAZOLE	PROTON PUMP INHIBITORS
02423855	ESOMEPRAZOLE (ESOMEPRAZOLE MAGNESIUM DIHYDRATE)	PROTON PUMP INHIBITORS
02423863	ESOMEPRAZOLE (ESOMEPRAZOLE MAGNESIUM DIHYDRATE)	PROTON PUMP INHIBITORS
02417480	ESOMEPRAZOLE (ESOMEPRAZOLE MAGNESIUM DIHYDRATE)	PROTON PUMP INHIBITORS
02417499	ESOMEPRAZOLE (ESOMEPRAZOLE MAGNESIUM DIHYDRATE)	PROTON PUMP INHIBITORS
02384329	ESOMEPRAZOLE (ESOMEPRAZOLE MAGNESIUM DIHYDRATE)	PROTON PUMP INHIBITORS
02384337	ESOMEPRAZOLE (ESOMEPRAZOLE MAGNESIUM DIHYDRATE)	PROTON PUMP INHIBITORS
02379163	ESOMEPRAZOLE (ESOMEPRAZOLE MAGNESIUM DIHYDRATE)	PROTON PUMP INHIBITORS
02379171	ESOMEPRAZOLE (ESOMEPRAZOLE MAGNESIUM DIHYDRATE)	PROTON PUMP INHIBITORS
02386216	ESOMEPRAZOLE (ESOMEPRAZOLE MAGNESIUM DIHYDRATE)	PROTON PUMP INHIBITORS
02386224	ESOMEPRAZOLE (ESOMEPRAZOLE MAGNESIUM DIHYDRATE)	PROTON PUMP INHIBITORS
02460920	ESOMEPRAZOLE (ESOMEPRAZOLE MAGNESIUM DIHYDRATE)	PROTON PUMP INHIBITORS
02460939	ESOMEPRAZOLE (ESOMEPRAZOLE MAGNESIUM DIHYDRATE)	PROTON PUMP INHIBITORS
02449587	ESOMEPRAZOLE (ESOMEPRAZOLE MAGNESIUM TRIHYDRATE)	PROTON PUMP INHIBITORS
02449595	ESOMEPRAZOLE (ESOMEPRAZOLE MAGNESIUM TRIHYDRATE)	PROTON PUMP INHIBITORS
02479419	ESOMEPRAZOLE (ESOMEPRAZOLE MAGNESIUM TRIHYDRATE)	PROTON PUMP INHIBITORS
02479427	ESOMEPRAZOLE (ESOMEPRAZOLE MAGNESIUM TRIHYDRATE)	PROTON PUMP INHIBITORS
02383039	ESOMEPRAZOLE (ESOMEPRAZOLE MAGNESIUM TRIHYDRATE)	PROTON PUMP INHIBITORS
02383047	ESOMEPRAZOLE (ESOMEPRAZOLE MAGNESIUM TRIHYDRATE)	PROTON PUMP INHIBITORS
02300524	ESOMEPRAZOLE (ESOMEPRAZOLE MAGNESIUM TRIHYDRATE)	PROTON PUMP INHIBITORS
02244521	ESOMEPRAZOLE (ESOMEPRAZOLE MAGNESIUM TRIHYDRATE)	PROTON PUMP INHIBITORS
02244522	ESOMEPRAZOLE (ESOMEPRAZOLE MAGNESIUM TRIHYDRATE)	PROTON PUMP INHIBITORS
02444712	ESOMEPRAZOLE (ESOMEPRAZOLE MAGNESIUM TRIHYDRATE)	PROTON PUMP INHIBITORS
02339099	ESOMEPRAZOLE (ESOMEPRAZOLE MAGNESIUM)	PROTON PUMP INHIBITORS
02339102	ESOMEPRAZOLE (ESOMEPRAZOLE MAGNESIUM)	PROTON PUMP INHIBITORS
02394839	ESOMEPRAZOLE (ESOMEPRAZOLE MAGNESIUM)	PROTON PUMP INHIBITORS

02394847	ESOMEPRAZOLE (ESOMEPRAZOLE MAGNESIUM)	PROTON PUMP INHIBITORS
02431173	ESOMEPRAZOLE (ESOMEPRAZOLE MAGNESIUM)	PROTON PUMP INHIBITORS
02438461	ESOMEPRAZOLE (ESOMEPRAZOLE MAGNESIUM)	PROTON PUMP INHIBITORS
02438488	ESOMEPRAZOLE (ESOMEPRAZOLE MAGNESIUM)	PROTON PUMP INHIBITORS
02442493	ESOMEPRAZOLE (ESOMEPRAZOLE MAGNESIUM)	PROTON PUMP INHIBITORS
02442507	ESOMEPRAZOLE (ESOMEPRAZOLE MAGNESIUM)	PROTON PUMP INHIBITORS
02414392	ESOMEPRAZOLE (ESOMEPRAZOLE MAGNESIUM)	PROTON PUMP INHIBITORS
02414406	ESOMEPRAZOLE (ESOMEPRAZOLE MAGNESIUM)	PROTON PUMP INHIBITORS
02423979	ESOMEPRAZOLE (ESOMEPRAZOLE MAGNESIUM)	PROTON PUMP INHIBITORS
02423987	ESOMEPRAZOLE (ESOMEPRAZOLE MAGNESIUM)	PROTON PUMP INHIBITORS
02300524	ESOMEPRAZOLE MAGNESIUM	PROTON PUMP INHIBITORS
02244522	ESOMEPRAZOLE MAGNESIUM	PROTON PUMP INHIBITORS
02244521	ESOMEPRAZOLE MAGNESIUM	PROTON PUMP INHIBITORS
02339099	ESOMEPRAZOLE MAGNESIUM	PROTON PUMP INHIBITORS
02339102	ESOMEPRAZOLE MAGNESIUM	PROTON PUMP INHIBITORS
02379171	ESOMEPRAZOLE MAGNESIUM	PROTON PUMP INHIBITORS
02383039	ESOMEPRAZOLE MAGNESIUM	PROTON PUMP INHIBITORS
02383047	ESOMEPRAZOLE MAGNESIUM	PROTON PUMP INHIBITORS
02394839	ESOMEPRAZOLE MAGNESIUM	PROTON PUMP INHIBITORS
02394847	ESOMEPRAZOLE MAGNESIUM	PROTON PUMP INHIBITORS
02423855	ESOMEPRAZOLE MAGNESIUM	PROTON PUMP INHIBITORS
02423863	ESOMEPRAZOLE MAGNESIUM	PROTON PUMP INHIBITORS
02423979	ESOMEPRAZOLE MAGNESIUM	PROTON PUMP INHIBITORS
02423987	ESOMEPRAZOLE MAGNESIUM	PROTON PUMP INHIBITORS
02431173	ESOMEPRAZOLE MAGNESIUM	PROTON PUMP INHIBITORS
02442493	ESOMEPRAZOLE MAGNESIUM	PROTON PUMP INHIBITORS
02442507	ESOMEPRAZOLE MAGNESIUM	PROTON PUMP INHIBITORS
02444712	ESOMEPRAZOLE MAGNESIUM	PROTON PUMP INHIBITORS
02460920	ESOMEPRAZOLE MAGNESIUM	PROTON PUMP INHIBITORS
02460939	ESOMEPRAZOLE MAGNESIUM	PROTON PUMP INHIBITORS
82244522	ESOMEPRAZOLE MAGNESIUM	PROTON PUMP INHIBITORS
99503002	EXTEMPORANEOUS MIXTURE	PROTON PUMP INHIBITORS
00728128	FAMOTIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
01953842	FAMOTIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02024195	FAMOTIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02022133	FAMOTIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02196018	FAMOTIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
00710121	FAMOTIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST

02237148	FAMOTIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02240622	FAMOTIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02242327	FAMOTIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02351102	FAMOTIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02351110	FAMOTIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02237149	FAMOTIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02242328	FAMOTIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02240623	FAMOTIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
00710113	FAMOTIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02022141	FAMOTIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02024209	FAMOTIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
01953834	FAMOTIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02196026	FAMOTIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
00728101	FAMOTIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
01953824	FAMOTIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02100541	FAMOTIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02100568	FAMOTIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02185911	FAMOTIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02185938	FAMOTIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02229995	FAMOTIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02229996	FAMOTIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02231104	FAMOTIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02231119	FAMOTIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02231400	FAMOTIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02231567	FAMOTIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02232293	FAMOTIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02235133	FAMOTIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST

02237004	FAMOTIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02237150	FAMOTIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02237223	FAMOTIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02238212	FAMOTIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02238342	FAMOTIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02238343	FAMOTIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02240414	FAMOTIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02241322	FAMOTIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02241372	FAMOTIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02241373	FAMOTIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02242154	FAMOTIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02242155	FAMOTIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02242326	FAMOTIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02242357	FAMOTIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02243053	FAMOTIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02244133	FAMOTIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02244795	FAMOTIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02244796	FAMOTIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02244888	FAMOTIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02244998	FAMOTIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02246364	FAMOTIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02247735	FAMOTIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02247745	FAMOTIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02247799	FAMOTIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02247800	FAMOTIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02248222	FAMOTIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02248223	FAMOTIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST

02252902	FAMOTIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02252910	FAMOTIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02257645	FAMOTIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02257653	FAMOTIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02259443	FAMOTIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02259451	FAMOTIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02273357	FAMOTIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02296098	FAMOTIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02347636	FAMOTIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02347644	FAMOTIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02373920	FAMOTIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02373939	FAMOTIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
99304725	FAMOTIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02231119	FAMOTIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02244888	FAMOTIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02244998	FAMOTIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
01953842	FAMOTIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
01953834	FAMOTIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02257645	FAMOTIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02257653	FAMOTIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02238212	FAMOTIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02244133	FAMOTIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02246364	FAMOTIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02383071	FAMOTIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02383098	FAMOTIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02247799	FAMOTIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02247800	FAMOTIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST

02247745	FAMOTIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02247735	FAMOTIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02248222	FAMOTIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02248223	FAMOTIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02351102	FAMOTIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02351110	FAMOTIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02241372	FAMOTIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02241373	FAMOTIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02196018	FAMOTIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02196026	FAMOTIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02347636	FAMOTIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02347644	FAMOTIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02024195	FAMOTIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02024209	FAMOTIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02238342	FAMOTIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02238343	FAMOTIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02242327	FAMOTIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02242328	FAMOTIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02240622	FAMOTIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02240623	FAMOTIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02242154	FAMOTIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02242155	FAMOTIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02022133	FAMOTIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02022141	FAMOTIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02433001	LANSOPRAZOLE	PROTON PUMP INHIBITORS
02402610	LANSOPRAZOLE	PROTON PUMP INHIBITORS
02357682	LANSOPRAZOLE	PROTON PUMP INHIBITORS
02353830	LANSOPRAZOLE	PROTON PUMP INHIBITORS
02385643	LANSOPRAZOLE	PROTON PUMP INHIBITORS

02293811	LANSOPRAZOLE	PROTON PUMP INHIBITORS
02280515	LANSOPRAZOLE	PROTON PUMP INHIBITORS
02165503	LANSOPRAZOLE	PROTON PUMP INHIBITORS
02395258	LANSOPRAZOLE	PROTON PUMP INHIBITORS
02353849	LANSOPRAZOLE	PROTON PUMP INHIBITORS
02402629	LANSOPRAZOLE	PROTON PUMP INHIBITORS
02357690	LANSOPRAZOLE	PROTON PUMP INHIBITORS
02385651	LANSOPRAZOLE	PROTON PUMP INHIBITORS
02293838	LANSOPRAZOLE	PROTON PUMP INHIBITORS
02280523	LANSOPRAZOLE	PROTON PUMP INHIBITORS
02165511	LANSOPRAZOLE	PROTON PUMP INHIBITORS
02433028	LANSOPRAZOLE	PROTON PUMP INHIBITORS
02395266	LANSOPRAZOLE	PROTON PUMP INHIBITORS
00000100	LANSOPRAZOLE	PROTON PUMP INHIBITORS
02249472	LANSOPRAZOLE	PROTON PUMP INHIBITORS
02249464	LANSOPRAZOLE	PROTON PUMP INHIBITORS
02258609	LANSOPRAZOLE	PROTON PUMP INHIBITORS
02258617	LANSOPRAZOLE	PROTON PUMP INHIBITORS
02354756	LANSOPRAZOLE	PROTON PUMP INHIBITORS
02354764	LANSOPRAZOLE	PROTON PUMP INHIBITORS
02366274	LANSOPRAZOLE	PROTON PUMP INHIBITORS
02366282	LANSOPRAZOLE	PROTON PUMP INHIBITORS
02367815	LANSOPRAZOLE	PROTON PUMP INHIBITORS
02367823	LANSOPRAZOLE	PROTON PUMP INHIBITORS
02369001	LANSOPRAZOLE	PROTON PUMP INHIBITORS
02369028	LANSOPRAZOLE	PROTON PUMP INHIBITORS
02385767	LANSOPRAZOLE	PROTON PUMP INHIBITORS
02385775	LANSOPRAZOLE	PROTON PUMP INHIBITORS
02410370	LANSOPRAZOLE	PROTON PUMP INHIBITORS
02410389	LANSOPRAZOLE	PROTON PUMP INHIBITORS
02414775	LANSOPRAZOLE	PROTON PUMP INHIBITORS
02422808	LANSOPRAZOLE	PROTON PUMP INHIBITORS
02422816	LANSOPRAZOLE	PROTON PUMP INHIBITORS
02433672	LANSOPRAZOLE	PROTON PUMP INHIBITORS
09991289	LANSOPRAZOLE	PROTON PUMP INHIBITORS
99503010	LANSOPRAZOLE	PROTON PUMP INHIBITORS
02470780	LANSOPRAZOLE	PROTON PUMP INHIBITORS
02293811	LANSOPRAZOLE	PROTON PUMP INHIBITORS

02293838	LANSOPRAZOLE	PROTON PUMP INHIBITORS
02414767	LANSOPRAZOLE	PROTON PUMP INHIBITORS
02414775	LANSOPRAZOLE	PROTON PUMP INHIBITORS
02357682	LANSOPRAZOLE	PROTON PUMP INHIBITORS
02357690	LANSOPRAZOLE	PROTON PUMP INHIBITORS
02366282	LANSOPRAZOLE	PROTON PUMP INHIBITORS
02385767	LANSOPRAZOLE	PROTON PUMP INHIBITORS
02410389	LANSOPRAZOLE	PROTON PUMP INHIBITORS
02433001	LANSOPRAZOLE	PROTON PUMP INHIBITORS
02433028	LANSOPRAZOLE	PROTON PUMP INHIBITORS
02433672	LANSOPRAZOLE	PROTON PUMP INHIBITORS
02410370	LANSOPRAZOLE	PROTON PUMP INHIBITORS
02385775	LANSOPRAZOLE	PROTON PUMP INHIBITORS
02489805	LANSOPRAZOLE	PROTON PUMP INHIBITORS
02489813	LANSOPRAZOLE	PROTON PUMP INHIBITORS
02353830	LANSOPRAZOLE	PROTON PUMP INHIBITORS
02353849	LANSOPRAZOLE	PROTON PUMP INHIBITORS
02392402	LANSOPRAZOLE	PROTON PUMP INHIBITORS
02392410	LANSOPRAZOLE	PROTON PUMP INHIBITORS
02354756	LANSOPRAZOLE	PROTON PUMP INHIBITORS
02354764	LANSOPRAZOLE	PROTON PUMP INHIBITORS
02395258	LANSOPRAZOLE	PROTON PUMP INHIBITORS
02395266	LANSOPRAZOLE	PROTON PUMP INHIBITORS
02369001	LANSOPRAZOLE	PROTON PUMP INHIBITORS
02369028	LANSOPRAZOLE	PROTON PUMP INHIBITORS
02402610	LANSOPRAZOLE	PROTON PUMP INHIBITORS
02402629	LANSOPRAZOLE	PROTON PUMP INHIBITORS
02422808	LANSOPRAZOLE	PROTON PUMP INHIBITORS
02422816	LANSOPRAZOLE	PROTON PUMP INHIBITORS
02385643	LANSOPRAZOLE	PROTON PUMP INHIBITORS
02385651	LANSOPRAZOLE	PROTON PUMP INHIBITORS
02280515	LANSOPRAZOLE	PROTON PUMP INHIBITORS
02280523	LANSOPRAZOLE	PROTON PUMP INHIBITORS
02258080	LANSOPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02443449	NAPROXEN	
02458608	NAPROXEN	
02361701	NAPROXEN	
02361728	NAPROXEN	
00778338	NIZATIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST

02177714	NIZATIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02220156	NIZATIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02240457	NIZATIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02246046	NIZATIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02240458	NIZATIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02246047	NIZATIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
00778346	NIZATIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02220164	NIZATIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02177722	NIZATIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
00220156	NIZATIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02128888	NIZATIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02128896	NIZATIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02155737	NIZATIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02155745	NIZATIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02185814	NIZATIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02185822	NIZATIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02230976	NIZATIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02238194	NIZATIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02238195	NIZATIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02239558	NIZATIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02239559	NIZATIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02247051	NIZATIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02247052	NIZATIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02220156	NIZATIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02220164	NIZATIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02185814	NIZATIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02246046	NIZATIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST

02246047	NIZATIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02239558	NIZATIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02239559	NIZATIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02240457	NIZATIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02240458	NIZATIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02247051	NIZATIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02247052	NIZATIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02238194	NIZATIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02238195	NIZATIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02177722	NIZATIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02177714	NIZATIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02119579	OMEPRAZOLE	PROTON PUMP INHIBITORS
02230737	OMEPRAZOLE	PROTON PUMP INHIBITORS
02245058	OMEPRAZOLE	PROTON PUMP INHIBITORS
00846503	OMEPRAZOLE	PROTON PUMP INHIBITORS
09857285	OMEPRAZOLE	PROTON PUMP INHIBITORS
09857343	OMEPRAZOLE	PROTON PUMP INHIBITORS
09857342	OMEPRAZOLE	PROTON PUMP INHIBITORS
09857341	OMEPRAZOLE	PROTON PUMP INHIBITORS
02348691	OMEPRAZOLE	PROTON PUMP INHIBITORS
02403617	OMEPRAZOLE	PROTON PUMP INHIBITORS
02329433	OMEPRAZOLE	PROTON PUMP INHIBITORS
02320851	OMEPRAZOLE	PROTON PUMP INHIBITORS
02296446	OMEPRAZOLE	PROTON PUMP INHIBITORS
09857314	OMEPRAZOLE	PROTON PUMP INHIBITORS
09857530	OMEPRAZOLE	PROTON PUMP INHIBITORS
09857464	OMEPRAZOLE	PROTON PUMP INHIBITORS
02416549	OMEPRAZOLE	PROTON PUMP INHIBITORS
02374870	OMEPRAZOLE	PROTON PUMP INHIBITORS
02295415	OMEPRAZOLE	PROTON PUMP INHIBITORS
09857500	OMEPRAZOLE	PROTON PUMP INHIBITORS
09857267	OMEPRAZOLE	PROTON PUMP INHIBITORS
09857195	OMEPRAZOLE	PROTON PUMP INHIBITORS
02190915	OMEPRAZOLE	PROTON PUMP INHIBITORS
02260867	OMEPRAZOLE	PROTON PUMP INHIBITORS
02242462	OMEPRAZOLE	PROTON PUMP INHIBITORS

02245059	OMEPRAZOLE	PROTON PUMP INHIBITORS
02260859	OMEPRAZOLE	PROTON PUMP INHIBITORS
02295407	OMEPRAZOLE	PROTON PUMP INHIBITORS
02296438	OMEPRAZOLE	PROTON PUMP INHIBITORS
02310252	OMEPRAZOLE	PROTON PUMP INHIBITORS
02320843	OMEPRAZOLE	PROTON PUMP INHIBITORS
02329425	OMEPRAZOLE	PROTON PUMP INHIBITORS
02331764	OMEPRAZOLE	PROTON PUMP INHIBITORS
02331772	OMEPRAZOLE	PROTON PUMP INHIBITORS
02333430	OMEPRAZOLE	PROTON PUMP INHIBITORS
02335220	OMEPRAZOLE	PROTON PUMP INHIBITORS
02339927	OMEPRAZOLE	PROTON PUMP INHIBITORS
02340100	OMEPRAZOLE	PROTON PUMP INHIBITORS
02340119	OMEPRAZOLE	PROTON PUMP INHIBITORS
02358050	OMEPRAZOLE	PROTON PUMP INHIBITORS
02358069	OMEPRAZOLE	PROTON PUMP INHIBITORS
02364352	OMEPRAZOLE	PROTON PUMP INHIBITORS
02372258	OMEPRAZOLE	PROTON PUMP INHIBITORS
02372274	OMEPRAZOLE	PROTON PUMP INHIBITORS
02385384	OMEPRAZOLE	PROTON PUMP INHIBITORS
02402416	OMEPRAZOLE	PROTON PUMP INHIBITORS
02411857	OMEPRAZOLE	PROTON PUMP INHIBITORS
02422212	OMEPRAZOLE	PROTON PUMP INHIBITORS
02422220	OMEPRAZOLE	PROTON PUMP INHIBITORS
02435683	OMEPRAZOLE	PROTON PUMP INHIBITORS
02438968	OMEPRAZOLE	PROTON PUMP INHIBITORS
02439018	OMEPRAZOLE	PROTON PUMP INHIBITORS
09093299	OMEPRAZOLE	PROTON PUMP INHIBITORS
09857350	OMEPRAZOLE	PROTON PUMP INHIBITORS
09857391	OMEPRAZOLE	PROTON PUMP INHIBITORS
09857467	OMEPRAZOLE	PROTON PUMP INHIBITORS
09991011	OMEPRAZOLE	PROTON PUMP INHIBITORS
22123268	OMEPRAZOLE	PROTON PUMP INHIBITORS
66123550	OMEPRAZOLE	PROTON PUMP INHIBITORS
02245058	OMEPRAZOLE	PROTON PUMP INHIBITORS
02245059	OMEPRAZOLE	PROTON PUMP INHIBITORS
02422212	OMEPRAZOLE	PROTON PUMP INHIBITORS
02422220	OMEPRAZOLE	PROTON PUMP INHIBITORS
02364352	OMEPRAZOLE	PROTON PUMP INHIBITORS
02329425	OMEPRAZOLE	PROTON PUMP INHIBITORS

02329433	OMEPRAZOLE	PROTON PUMP INHIBITORS
02339927	OMEPRAZOLE	PROTON PUMP INHIBITORS
02348691	OMEPRAZOLE	PROTON PUMP INHIBITORS
02385376	OMEPRAZOLE	PROTON PUMP INHIBITORS
02385384	OMEPRAZOLE	PROTON PUMP INHIBITORS
02411857	OMEPRAZOLE	PROTON PUMP INHIBITORS
02320843	OMEPRAZOLE	PROTON PUMP INHIBITORS
02320851	OMEPRAZOLE	PROTON PUMP INHIBITORS
02372258	OMEPRAZOLE	PROTON PUMP INHIBITORS
02372274	OMEPRAZOLE	PROTON PUMP INHIBITORS
02403617	OMEPRAZOLE	PROTON PUMP INHIBITORS
02296438	OMEPRAZOLE	PROTON PUMP INHIBITORS
02296446	OMEPRAZOLE	PROTON PUMP INHIBITORS
02432765	OMEPRAZOLE (OMEPRAZOLE MAGNESIUM)	PROTON PUMP INHIBITORS
02484617	OMEPRAZOLE (OMEPRAZOLE MAGNESIUM)	PROTON PUMP INHIBITORS
02436728	OMEPRAZOLE (OMEPRAZOLE MAGNESIUM)	PROTON PUMP INHIBITORS
02449927	OMEPRAZOLE (OMEPRAZOLE MAGNESIUM)	PROTON PUMP INHIBITORS
02333422	OMEPRAZOLE (OMEPRAZOLE MAGNESIUM)	PROTON PUMP INHIBITORS
02333430	OMEPRAZOLE (OMEPRAZOLE MAGNESIUM)	PROTON PUMP INHIBITORS
02420198	OMEPRAZOLE (OMEPRAZOLE MAGNESIUM)	PROTON PUMP INHIBITORS
02439549	OMEPRAZOLE (OMEPRAZOLE MAGNESIUM)	PROTON PUMP INHIBITORS
02435748	OMEPRAZOLE (OMEPRAZOLE MAGNESIUM)	PROTON PUMP INHIBITORS
02432765	OMEPRAZOLE (OMEPRAZOLE MAGNESIUM)	PROTON PUMP INHIBITORS
02439018	OMEPRAZOLE (OMEPRAZOLE MAGNESIUM)	PROTON PUMP INHIBITORS
02490692	OMEPRAZOLE (OMEPRAZOLE MAGNESIUM)	PROTON PUMP INHIBITORS
02436213	OMEPRAZOLE (OMEPRAZOLE MAGNESIUM)	PROTON PUMP INHIBITORS
02416549	OMEPRAZOLE (OMEPRAZOLE MAGNESIUM)	PROTON PUMP INHIBITORS
02433281	OMEPRAZOLE (OMEPRAZOLE MAGNESIUM)	PROTON PUMP INHIBITORS
02310252	OMEPRAZOLE (OMEPRAZOLE MAGNESIUM)	PROTON PUMP INHIBITORS
02310260	OMEPRAZOLE (OMEPRAZOLE MAGNESIUM)	PROTON PUMP INHIBITORS
02449919	OMEPRAZOLE (OMEPRAZOLE MAGNESIUM)	PROTON PUMP INHIBITORS
02374870	OMEPRAZOLE (OMEPRAZOLE MAGNESIUM)	PROTON PUMP INHIBITORS
02260859	OMEPRAZOLE (OMEPRAZOLE MAGNESIUM)	PROTON PUMP INHIBITORS
02260867	OMEPRAZOLE (OMEPRAZOLE MAGNESIUM)	PROTON PUMP INHIBITORS
02402416	OMEPRAZOLE (OMEPRAZOLE MAGNESIUM)	PROTON PUMP INHIBITORS
02331764	OMEPRAZOLE (OMEPRAZOLE MAGNESIUM)	PROTON PUMP INHIBITORS
02331772	OMEPRAZOLE (OMEPRAZOLE MAGNESIUM)	PROTON PUMP INHIBITORS
02295407	OMEPRAZOLE (OMEPRAZOLE MAGNESIUM)	PROTON PUMP INHIBITORS
02295415	OMEPRAZOLE (OMEPRAZOLE MAGNESIUM)	PROTON PUMP INHIBITORS
02432404	OMEPRAZOLE (OMEPRAZOLE MAGNESIUM)	PROTON PUMP INHIBITORS
09857536	OMEPRAZOLE MAGNESIUM	PROTON PUMP INHIBITORS

02432404	OMEPRAZOLE MAGNESIUM	PROTON PUMP INHIBITORS
02420198	OMEPRAZOLE MAGNESIUM	PROTON PUMP INHIBITORS
02439549	OMEPRAZOLE MAGNESIUM	PROTON PUMP INHIBITORS
02310260	OMEPRAZOLE MAGNESIUM	PROTON PUMP INHIBITORS
02365677	OMEPRAZOLE MAGNESIUM	PROTON PUMP INHIBITORS
02449919	OMEPRAZOLE MAGNESIUM	PROTON PUMP INHIBITORS
02449927	OMEPRAZOLE MAGNESIUM	PROTON PUMP INHIBITORS
02441853	PANTOPRAZOLE (PANTOPRAZOLE MAGNESIUM)	PROTON PUMP INHIBITORS
02440628	PANTOPRAZOLE (PANTOPRAZOLE MAGNESIUM)	PROTON PUMP INHIBITORS
02386747	PANTOPRAZOLE (PANTOPRAZOLE SODIUM SESQUIHYDRATE)	PROTON PUMP INHIBITORS
02453401	PANTOPRAZOLE (PANTOPRAZOLE SODIUM SESQUIHYDRATE)	PROTON PUMP INHIBITORS
02392615	PANTOPRAZOLE (PANTOPRAZOLE SODIUM SESQUIHYDRATE)	PROTON PUMP INHIBITORS
02392623	PANTOPRAZOLE (PANTOPRAZOLE SODIUM SESQUIHYDRATE)	PROTON PUMP INHIBITORS
02481561	PANTOPRAZOLE (PANTOPRAZOLE SODIUM SESQUIHYDRATE)	PROTON PUMP INHIBITORS
02481588	PANTOPRAZOLE (PANTOPRAZOLE SODIUM SESQUIHYDRATE)	PROTON PUMP INHIBITORS
02306727	PANTOPRAZOLE (PANTOPRAZOLE SODIUM)	PROTON PUMP INHIBITORS
02441527	PANTOPRAZOLE (PANTOPRAZOLE SODIUM)	PROTON PUMP INHIBITORS
02408570	PANTOPRAZOLE MAGNESIUM	PROTON PUMP INHIBITORS
02440628	PANTOPRAZOLE MAGNESIUM	PROTON PUMP INHIBITORS
02441853	PANTOPRAZOLE MAGNESIUM	PROTON PUMP INHIBITORS
02267233	PANTOPRAZOLE MAGNESIUM	PROTON PUMP INHIBITORS
02466147	PANTOPRAZOLE MAGNESIUM	PROTON PUMP INHIBITORS
02428164	PANTOPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02417448	PANTOPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02416565	PANTOPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02415208	PANTOPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02412969	PANTOPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02357054	PANTOPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02437945	PANTOPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02239616	PANTOPRAZOLE SODIUM	PROTON PUMP INHIBITORS
00239616	PANTOPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02308703	PANTOPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02307871	PANTOPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02309866	PANTOPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02301083	PANTOPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02300486	PANTOPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02299585	PANTOPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02292920	PANTOPRAZOLE SODIUM	PROTON PUMP INHIBITORS

02285487	PANTOPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02229453	PANTOPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02305046	PANTOPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02244730	PANTOPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02285479	PANTOPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02291665	PANTOPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02292912	PANTOPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02294656	PANTOPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02294672	PANTOPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02301075	PANTOPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02305038	PANTOPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02306727	PANTOPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02307863	PANTOPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02308681	PANTOPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02309858	PANTOPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02309998	PANTOPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02310007	PANTOPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02310198	PANTOPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02310201	PANTOPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02316455	PANTOPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02316463	PANTOPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02318687	PANTOPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02318695	PANTOPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02328704	PANTOPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02330709	PANTOPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02334658	PANTOPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02334666	PANTOPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02336308	PANTOPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02339072	PANTOPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02340097	PANTOPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02343789	PANTOPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02352214	PANTOPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02354179	PANTOPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02358867	PANTOPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02358875	PANTOPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02363410	PANTOPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02363429	PANTOPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02370808	PANTOPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02385740	PANTOPRAZOLE SODIUM	PROTON PUMP INHIBITORS

02385759	PANTOPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02408414	PANTOPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02416557	PANTOPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02425378	PANTOPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02428172	PANTOPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02428180	PANTOPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02431327	PANTOPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02439107	PANTOPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02441527	PANTOPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02445867	PANTOPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02458969	PANTOPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02467372	PANTOPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02469138	PANTOPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02471825	PANTOPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02478781	PANTOPRAZOLE SODIUM	PROTON PUMP INHIBITORS
82229453	PANTOPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02422638	RABEPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02320614	RABEPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02298074	RABEPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02296632	RABEPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02408392	RABEPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02345579	RABEPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02356511	RABEPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02381737	RABEPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02314177	RABEPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02310805	RABEPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02243796	RABEPRAZOLE SODIUM	PROTON PUMP INHIBITORS

02422646	RABEPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02320622	RABEPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02298082	RABEPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02296640	RABEPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02408406	RABEPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02345587	RABEPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02356538	RABEPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02381745	RABEPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02314185	RABEPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02310813	RABEPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02243797	RABEPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02315181	RABEPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02315203	RABEPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02320452	RABEPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02320460	RABEPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02320592	RABEPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02320606	RABEPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02330083	RABEPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02330091	RABEPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02335166	RABEPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02335174	RABEPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02345994	RABEPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02346001	RABEPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02370719	RABEPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02370727	RABEPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02385449	RABEPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02385457	RABEPRAZOLE SODIUM	PROTON PUMP INHIBITORS
03205920	RABEPRAZOLE SODIUM	PROTON PUMP INHIBITORS
24084060	RABEPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02422638	RABEPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02422646	RABEPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02484161	RABEPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02484188	RABEPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02345579	RABEPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02345587	RABEPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02320452	RABEPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02320460	RABEPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02415283	RABEPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02415291	RABEPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02408392	RABEPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02408406	RABEPRAZOLE SODIUM	PROTON PUMP INHIBITORS

02345994	RABEPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02346001	RABEPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02243796	RABEPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02243797	RABEPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02381737	RABEPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02381745	RABEPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02310805	RABEPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02310813	RABEPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02315181	RABEPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02315203	RABEPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02385449	RABEPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02385457	RABEPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02320614	RABEPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02320622	RABEPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02356511	RABEPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02356538	RABEPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02298074	RABEPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02298082	RABEPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02419785	RABEPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02419793	RABEPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02330083	RABEPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02330091	RABEPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02314177	RABEPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02314185	RABEPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02296632	RABEPRAZOLE SODIUM	PROTON PUMP INHIBITORS
02296640	RABEPRAZOLE SODIUM	PROTON PUMP INHIBITORS
00740756	RANITIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02385961	RANITIDINE	HISTAMINE H2 RECEPTOR ANTAGONIST
02407523	RANITIDINE (RANITIDINE HCL)	HISTAMINE H2 RECEPTOR ANTAGONIST
02452464	RANITIDINE (RANITIDINE HCL)	HISTAMINE H2 RECEPTOR ANTAGONIST
02248570	RANITIDINE (RANITIDINE HYDROCHLORIDE)	HISTAMINE H2 RECEPTOR ANTAGONIST
02248571	RANITIDINE (RANITIDINE HYDROCHLORIDE)	HISTAMINE H2 RECEPTOR ANTAGONIST
02484501	RANITIDINE (RANITIDINE HYDROCHLORIDE)	HISTAMINE H2 RECEPTOR ANTAGONIST
02484528	RANITIDINE (RANITIDINE HYDROCHLORIDE)	HISTAMINE H2 RECEPTOR ANTAGONIST
02280833	RANITIDINE (RANITIDINE HYDROCHLORIDE)	HISTAMINE H2 RECEPTOR ANTAGONIST
00733059	RANITIDINE (RANITIDINE HYDROCHLORIDE)	HISTAMINE H2 RECEPTOR ANTAGONIST

00733067	RANITIDINE (RANITIDINE HYDROCHLORIDE)	HISTAMINE H2 RECEPTOR ANTAGONIST
02265591	RANITIDINE (RANITIDINE HYDROCHLORIDE)	HISTAMINE H2 RECEPTOR ANTAGONIST
02265605	RANITIDINE (RANITIDINE HYDROCHLORIDE)	HISTAMINE H2 RECEPTOR ANTAGONIST
02243038	RANITIDINE (RANITIDINE HYDROCHLORIDE)	HISTAMINE H2 RECEPTOR ANTAGONIST
02243039	RANITIDINE (RANITIDINE HYDROCHLORIDE)	HISTAMINE H2 RECEPTOR ANTAGONIST
02463717	RANITIDINE (RANITIDINE HYDROCHLORIDE)	HISTAMINE H2 RECEPTOR ANTAGONIST
02463725	RANITIDINE (RANITIDINE HYDROCHLORIDE)	HISTAMINE H2 RECEPTOR ANTAGONIST
02473534	RANITIDINE (RANITIDINE HYDROCHLORIDE)	HISTAMINE H2 RECEPTOR ANTAGONIST
02473542	RANITIDINE (RANITIDINE HYDROCHLORIDE)	HISTAMINE H2 RECEPTOR ANTAGONIST
02443708	RANITIDINE (RANITIDINE HYDROCHLORIDE)	HISTAMINE H2 RECEPTOR ANTAGONIST
02443716	RANITIDINE (RANITIDINE HYDROCHLORIDE)	HISTAMINE H2 RECEPTOR ANTAGONIST
02367378	RANITIDINE (RANITIDINE HYDROCHLORIDE)	HISTAMINE H2 RECEPTOR ANTAGONIST
02367386	RANITIDINE (RANITIDINE HYDROCHLORIDE)	HISTAMINE H2 RECEPTOR ANTAGONIST
02207761	RANITIDINE (RANITIDINE HYDROCHLORIDE)	HISTAMINE H2 RECEPTOR ANTAGONIST
02207788	RANITIDINE (RANITIDINE HYDROCHLORIDE)	HISTAMINE H2 RECEPTOR ANTAGONIST
02245782	RANITIDINE (RANITIDINE HYDROCHLORIDE)	HISTAMINE H2 RECEPTOR ANTAGONIST
02245783	RANITIDINE (RANITIDINE HYDROCHLORIDE)	HISTAMINE H2 RECEPTOR ANTAGONIST
02242453	RANITIDINE (RANITIDINE HYDROCHLORIDE)	HISTAMINE H2 RECEPTOR ANTAGONIST
02242454	RANITIDINE (RANITIDINE HYDROCHLORIDE)	HISTAMINE H2 RECEPTOR ANTAGONIST
02336480	RANITIDINE (RANITIDINE HYDROCHLORIDE)	HISTAMINE H2 RECEPTOR ANTAGONIST
02336502	RANITIDINE (RANITIDINE HYDROCHLORIDE)	HISTAMINE H2 RECEPTOR ANTAGONIST
02245615	RANITIDINE (RANITIDINE HYDROCHLORIDE)	HISTAMINE H2 RECEPTOR ANTAGONIST
02286106	RANITIDINE (RANITIDINE HYDROCHLORIDE)	HISTAMINE H2 RECEPTOR ANTAGONIST
02286114	RANITIDINE (RANITIDINE HYDROCHLORIDE)	HISTAMINE H2 RECEPTOR ANTAGONIST
02303353	RANITIDINE (RANITIDINE HYDROCHLORIDE)	HISTAMINE H2 RECEPTOR ANTAGONIST
02303388	RANITIDINE (RANITIDINE HYDROCHLORIDE)	HISTAMINE H2 RECEPTOR ANTAGONIST
02343436	RANITIDINE (RANITIDINE HYDROCHLORIDE)	HISTAMINE H2 RECEPTOR ANTAGONIST

02343444	RANITIDINE (RANITIDINE HYDROCHLORIDE)	HISTAMINE H2 RECEPTOR ANTAGONIST
02353016	RANITIDINE (RANITIDINE HYDROCHLORIDE)	HISTAMINE H2 RECEPTOR ANTAGONIST
02353024	RANITIDINE (RANITIDINE HYDROCHLORIDE)	HISTAMINE H2 RECEPTOR ANTAGONIST
02385953	RANITIDINE (RANITIDINE HYDROCHLORIDE)	HISTAMINE H2 RECEPTOR ANTAGONIST
02385961	RANITIDINE (RANITIDINE HYDROCHLORIDE)	HISTAMINE H2 RECEPTOR ANTAGONIST
00740748	RANITIDINE (RANITIDINE HYDROCHLORIDE)	HISTAMINE H2 RECEPTOR ANTAGONIST
00740756	RANITIDINE (RANITIDINE HYDROCHLORIDE)	HISTAMINE H2 RECEPTOR ANTAGONIST
02256711	RANITIDINE (RANITIDINE HYDROCHLORIDE)	HISTAMINE H2 RECEPTOR ANTAGONIST
02368005	RANITIDINE (RANITIDINE HYDROCHLORIDE)	HISTAMINE H2 RECEPTOR ANTAGONIST
02350203	RANITIDINE (RANITIDINE HYDROCHLORIDE)	HISTAMINE H2 RECEPTOR ANTAGONIST
02350211	RANITIDINE (RANITIDINE HYDROCHLORIDE)	HISTAMINE H2 RECEPTOR ANTAGONIST
02230003	RANITIDINE (RANITIDINE HYDROCHLORIDE)	HISTAMINE H2 RECEPTOR ANTAGONIST
02230004	RANITIDINE (RANITIDINE HYDROCHLORIDE)	HISTAMINE H2 RECEPTOR ANTAGONIST
00828688	RANITIDINE (RANITIDINE HYDROCHLORIDE)	HISTAMINE H2 RECEPTOR ANTAGONIST
00828823	RANITIDINE (RANITIDINE HYDROCHLORIDE)	HISTAMINE H2 RECEPTOR ANTAGONIST
02247814	RANITIDINE (RANITIDINE HYDROCHLORIDE)	HISTAMINE H2 RECEPTOR ANTAGONIST
02247815	RANITIDINE (RANITIDINE HYDROCHLORIDE)	HISTAMINE H2 RECEPTOR ANTAGONIST
02238579	RANITIDINE (RANITIDINE HYDROCHLORIDE)	HISTAMINE H2 RECEPTOR ANTAGONIST
02243229	RANITIDINE (RANITIDINE HYDROCHLORIDE)	HISTAMINE H2 RECEPTOR ANTAGONIST
02243230	RANITIDINE (RANITIDINE HYDROCHLORIDE)	HISTAMINE H2 RECEPTOR ANTAGONIST
02241598	RANITIDINE (RANITIDINE HYDROCHLORIDE)	HISTAMINE H2 RECEPTOR ANTAGONIST
02241599	RANITIDINE (RANITIDINE HYDROCHLORIDE)	HISTAMINE H2 RECEPTOR ANTAGONIST
00828556	RANITIDINE (RANITIDINE HYDROCHLORIDE)	HISTAMINE H2 RECEPTOR ANTAGONIST
00828564	RANITIDINE (RANITIDINE HYDROCHLORIDE)	HISTAMINE H2 RECEPTOR ANTAGONIST
02231487	RANITIDINE (RANITIDINE HYDROCHLORIDE)	HISTAMINE H2 RECEPTOR ANTAGONIST
02242940	RANITIDINE (RANITIDINE HYDROCHLORIDE)	HISTAMINE H2 RECEPTOR ANTAGONIST
02229562	RANITIDINE (RANITIDINE HYDROCHLORIDE)	HISTAMINE H2 RECEPTOR ANTAGONIST

02229563	RANITIDINE (RANITIDINE HYDROCHLORIDE)	HISTAMINE H2 RECEPTOR ANTAGONIST
02367378	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
02336480	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
02243229	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
02242453	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
02241598	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
02248570	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
02230003	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
00865737	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
00828823	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
00828564	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
00733059	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
02212331	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
02207761	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
00553379	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
00905992	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
02212374	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
00782386	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
02242940	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
02280833	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
02212366	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
00603791	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
02256711	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
02243230	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
02242454	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
02241599	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
02248571	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST

02230004	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
02367386	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
02336502	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
00641790	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
00865745	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
00828688	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
00828556	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
00733067	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
02212358	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
02207788	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
00191213	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
00740748	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
00849421	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
00849448	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
00990230	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
01951823	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
01951831	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
02076284	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
02076292	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
02212382	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
02213397	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
02213494	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
02213508	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
02213516	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
02213524	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
02219077	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
02219085	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST

02229562	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
02229563	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
02230287	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
02230507	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
02231487	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
02237829	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
02238579	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
02238893	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
02241208	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
02241422	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
02241597	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
02242056	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
02242057	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
02242058	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
02243038	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
02243039	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
02245615	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
02245782	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
02245783	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
02246167	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
02246168	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
02247551	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
02247814	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
02247815	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
02265591	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
02265605	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
02266806	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST

02277301	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
02284022	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
02286106	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
02286114	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
02291282	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
02293471	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
02296160	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
02298740	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
02298902	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
02303221	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
02303353	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
02303388	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
02323699	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
02323702	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
02327244	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
02327252	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
02342871	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
02342898	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
02343436	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
02343444	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
02350203	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
02350211	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
02353016	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
02353024	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
02363526	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
02368005	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
02385953	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST

02400103	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
02443708	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
02443716	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
02463717	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
02463725	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
09991036	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
22123159	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
49828564	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
80000219	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
99100771	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
99100772	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
99101171	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
99101172	RANITIDINE HCL	HISTAMINE H2 RECEPTOR ANTAGONIST
02219077	RANITIDINE HYDROCHLORIDE	HISTAMINE H2 RECEPTOR ANTAGONIST
66123562	UNCLASSED THERAPEUTIC	PROTON PUMP INHIBITORS
66123574	UNCLASSED THERAPEUTIC	PROTON PUMP INHIBITORS
66123586	UNCLASSED THERAPEUTIC	PROTON PUMP INHIBITORS
66123598	UNCLASSED THERAPEUTIC	PROTON PUMP INHIBITORS

Appendix D- Exclusion diagnoses for cohort build

Covariate	Codes	Source	Category (MH or GI)
Schizophrenia	F062, F200, F201, F202, F203, F205, F206, F208, F209, F230, F231, F232,	ICD-10	MH
	295, spec19	OHIP dx	
Major Depressive Disorder	F063, F321, F322, F323, F328, F329, F330, F331, F332, F333, F334, F338, F339	ICD-10	MH
	296, 300, 311, spec19	OHIP dx	
Bipolar Disorder	F313, F314, F315, F310, F311, F312, F316, F317, F318, F319	ICD-10	MH
	296, spec19	OHIP dx	

Anxiety Disorder	F064, F410, F411, F412, F413, F418, F419, F400, F401, F402, F408, F409	ICD-10	MH
	300, spec 19	OHIP dx	
Gastrointestinal Bleeding	K922	ICD-10	GI
Gastroduodenal Ulcer	K260, K261, K262, K263, K264, K265, K266, K267, K269	ICD-10	GI
	532	OHIP dx	
Gastroesophageal Reflux	K210, K219	ICD-10	GI
Dementia	F000, F001, F002, F009, F010, F011, F012, F013, F018, F019, F020, F021, F022, F023, F024, F028, F03, F04	ICD-10	MH
	290, spec19	OHIP dx	
Esophagitis	K20	ICD-10	GI
	530	OHIP dx	
Gastrinoma	81531, 81533	ICD-10	GI
Mental and behavioural disorders due to substance use/withdrawal	F100, F101, F102, F103, F104, F105, F106, F107, F108, F109, F130, F131, F132, F133, F134, F135, F136, F137, F138, F139, F190, F191, F192, F193, F194, F195, F196, F197, F198, F199	ICD-10	MH
Psychotic disorders	F230, F231, F232, F233, F238, F239, F28, F29,	ICD-10	MH
	298	OHIP dx	
Induced delusional disorders	F24	ICD-10	MH
Schizoaffective disorders	F250, F251, F252, F258, F259,	ICD-10	MH
Obsessive-Compulsive disorders	F420, F421, F422, F428, F429	ICD-10	MH
	300	OHIP dx	
Reaction to severe stress and adjustment disorders	F430, F431, F432, F438, F439	ICD-10	MH
	309	OHIP dx	
Dissociative disorders	F440, F441, F442, f443, F444,F445, F446, F447, F448, F449	ICD-10	MH
Somatoform disorders	F450, F451, F452, F453, F454, F458, F459	ICD-10	MH
Other neurotic disorders	F480, F481, F488, F489	ICD-10	MH
Delirium	F050, F051, F059	ICD-10	MH

Other mental disorders	F060	ICD-10	MH
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Note: MH=mental health diagnoses, GI=gastrointestinal diagnoses

Explanation of codes

Code	Source	Full-Digit ICD10 Code Description	Sub Category/Description (for OHIP dx)
F062	ICD-10	Organic delusional [schizophrenia-like] disorder	
F200	ICD-10	Paranoid schizophrenia	
F201	ICD-10	Hebephrenic schizophrenia	
F202	ICD-10	Catatonic schizophrenia	
F203	ICD-10	Undifferentiated schizophrenia	
F205	ICD-10	Residual schizophrenia	
F206	ICD-10	Simple schizophrenia	
F208	ICD-10	Other schizophrenia	
F231	ICD-10	Acute polymorphic psychotic disorder with symptoms of schizophrenia	
F232	ICD-10	Acute schizophrenia-like psychotic disorder	
295	OHIP dx		Schizophrenia
spec19	OHIP dx		Variable: identifies psychiatrist visit
F063	ICD-10	Organic mood [affective] disorders	
F321	ICD-10	Moderate depressive episode	
F322	ICD-10	Severe depressive episode without psychotic symptoms	
F323	ICD-10	Severe depressive episode with psychotic symptoms	
F329	ICD-10	Depressive episode, unspecified	
F330	ICD-10	Recurrent depressive disorder, current episode mild	

F331	ICD-10	Recurrent depressive disorder, current episode moderate	
F332	ICD-10	Recurrent depressive disorder, current episode severe without psychotic symptoms	
F333	ICD-10	Recurrent depressive disorder, current episode severe with psychotic symptoms	
F338	ICD-10	Other recurrent depressive disorders	
F339	ICD-10	Recurrent depressive disorder, unspecified	
296	OHIP dx		Manic depressive psychosis, involuntal melancholia
311	OHIP dx		Depressive or other non-psychotic disorders, not elsewhere classified
F310	ICD-10	Bipolar affective disorder, current episode hypomanic	
F311	ICD-10	Bipolar affective disorder, current episode manic without psychotic symptoms	
F312	ICD-10	Bipolar affective disorder, current episode manic with psychotic symptoms	
F313	ICD-10	Bipolar affective disorder, current episode mild or moderate depression	
F314	ICD-10	Bipolar affective disorder, current episode severe depression without psychotic symptoms	
F315	ICD-10	Bipolar affective disorder, current episode severe depression with psychotic symptoms	
F316		Bipolar affective disorder, current episode mixed	
F317	ICD-10	Bipolar affective disorder, currently in remission	
F318	ICD-10	Other bipolar affective disorder	
F319	ICD-10	Bipolar affective disorders, unspecified	
F064	ICD-10	Organic anxiety disorder	
F411	ICD-10	Generalized anxiety disorder	

F412	ICD-10	Mixed anxiety and depressive disorder	
F413	ICD-10	Other mixed anxiety disorders	
F418	ICD-10	Other specified anxiety disorders	
F419	ICD-10	Anxiety disorder, unspecified	
303	OHIP dx		Neuroses and personality disorders/Alcoholism
K922	ICD-10	Gastrointestinal haemorrhage, unspecified	
K260	ICD-10	Duodenal ulcer, acute with haemorrhage	
K261	ICD-10	Duodenal ulcer, acute with perforation	
K262	ICD-10	Duodenal ulcer, acute with both haemorrhage and perforation	
K263	ICD-10	Duodenal ulcer, acute without haemorrhage or perforation	
K264	ICD-10	Duodenal ulcer, chronic or unspecified with haemorrhage	
K265	ICD-10	Duodenal ulcer, chronic or unspecified with perforation	
K266	ICD-10	Duodenal ulcer, chronic or unspecified with both haemorrhage and perforation	
K267	ICD-10	Duodenal ulcer, chronic without haemorrhage or perforation	
K269	ICD-10	Duodenal ulcer, unspecified as acute or chronic, without haemorrhage or perforation	
532	OHIP dx		Diseases of the digestive system/Duodenal ulcer, with or without haemorrhage or perforation
K210	ICD-10	Gastro-oesophageal reflux disease with oesophagitis	
K219	ICD-10	Gastro-oesophageal reflux disease without oesophagitis	
F000	ICD-10	Dementia in Alzheimer's disease with early onset	
F001	ICD-10	Dementia in Alzheimer's disease with late onset	
F002	ICD-10	Dementia in Alzheimer's disease with late onset	
F009	ICD-10	Dementia in Alzheimer's disease, unspecified	
F010	ICD-10	Vascular dementia of acute onset	
F011	ICD-10	Vascular dementia	

F012	ICD-10	Subcortical vascular dementia	
F013	ICD-10	Mixed cortical and subcortical vascular dementia	
F018	ICD-10	Other vascular dementia	
F019	ICD-10	Vascular dementia, unspecified	
F020	ICD-10	Dementia in Pick's disease	
F021	ICD-10	Dementia in Creutzfeldt-Jakob disease	
F022	ICD-10	Dementia in Huntington's disease	
F023	ICD-10	Dementia in Parkinson's disease	
F024	ICD-10	Dementia in human immunodeficiency virus [HIV] disease	
F028	ICD-10	Dementia in other specified diseases classified elsewhere	
F03	ICD-10	Unspecified dementia	
F04	ICD-10	Organic amnesic syndrome, not induced by alcohol and other psychoactive substances	
290	OHIP dx		Senile dementia, presenile dementia
K20	ICD-10	Oesophagitis	
530	OHIP dx		Esophagitis, cardiospasm, ulcer of esophagus; stricture, stenosis, or obstruction of esophagus
81531	ICD-10	Gastrinoma, NOS	
81533	ICD-10	Gastrinoma, malignant	
F232	ICD-10	Acute schizophrenia-like psychotic disorder	
F233	ICD-10	Other acute predominantly delusional psychotic disorders	
F238	ICD-10	Other acute and transient psychotic disorders	
F239	ICD-10	Acute and transient psychotic disorder, unspecified	
F24	ICD-10	Induced delusional disorder	
F250	ICD-10	Schizoaffective disorder, manic type	
F251	ICD-10	Schizoaffective disorder, depressive type	
F252	ICD-10	Schizoaffective disorder, mixed type	
F258	ICD-10	Other schizoaffective disorders	
F259	ICD-10	Schizoaffective disorder, unspecified	
F28	ICD-10	Other nonorganic psychotic disorders	
F29	ICD-10	Unspecified nonorganic psychosis	
292	OHIP dx		psychoses/ drug psychosis

F050	ICD-10	Delirium not superimposed on dementia, so described	
F051	ICD-10	Delirium superimposed on dementia	
F059	ICD-10	Delirium, unspecified	
F060	ICD-10	Organic hallucinosis	
F100	ICD-10	Mental and behavioural disorders due to use of alcohol, acute intoxication	
F101	ICD-10	Mental and behavioural disorders due to use of alcohol, harmful use	
F102	ICD-10	Mental and behavioural disorders due to use of alcohol, dependence syndrome	
F103	ICD-10	Mental and behavioural disorders due to use of alcohol, withdrawal state	
F104	ICD-10	Mental and behavioural disorders due to use of alcohol, withdrawal state with delirium	
F105	ICD-10	Mental and behavioural disorders due to use of alcohol, psychotic disorder	
F106	ICD-10	Mental and behavioural disorders due to use of alcohol, amnesic syndrome	
F107	ICD-10	Mental and behavioural disorders due to use of alcohol, residual and late-onset psychotic disorder	
F108	ICD-10	Mental and behavioural disorders due to use of alcohol, other mental and behavioural disorders	
F109	ICD-10	Mental and behavioural disorders due to use of alcohol, unspecified mental and behavioural disorder	
F130	ICD-10	Mental and behavioural disorders due to use of sedatives or hypnotics, acute intoxication	
F131	ICD-10	Mental and behavioural disorders due to use of sedatives or hypnotics, harmful use	
F132	ICD-10	Mental and behavioural disorders due to use of sedatives or hypnotics, dependence syndrome	
F133	ICD-10	Mental and behavioural disorders due to use of sedatives or hypnotics, withdrawal state	
F134	ICD-10	Mental and behavioural disorders due to use of sedatives or hypnotics, withdrawal state with delirium	
F135	ICD-10	Mental and behavioural disorders due to use of sedatives or hypnotics, psychotic disorder	

F136	ICD-10	Mental and behavioural disorders due to use of sedatives or hypnotics, amnesic syndrome	
F137	ICD-10	Mental and behavioural disorders due to use of sedatives or hypnotics, residual and late-onset psychotic disorder	
F138	ICD-10	Mental and behavioural disorders due to use of sedatives or hypnotics, other mental and behavioural disorders	
F139	ICD-10	Mental and behavioural disorders due to use of sedatives or hypnotics, unspecified mental and behavioural disorder	
F190	ICD-10	Mental and behavioural disorders due to multiple drug use and use of psychoactive substances, acute intoxication	
F191	ICD-10	Mental and behavioural disorders due to multiple drug use and use of psychoactive substances, harmful use	
F192	ICD-10	Mental and behavioural disorders due to multiple drug use and use of psychoactive substances, dependence syndrome	
F193	ICD-10	Mental and behavioural disorders due to multiple drug use and use of psychoactive substances, withdrawal state	
F194	ICD-10	Mental and behavioural disorders due to multiple drug use and use of psychoactive substances, withdrawal state with delirium	
F195	ICD-10	Mental and behavioural disorders due to multiple drug use and use of psychoactive substances, psychotic disorder	
F196	ICD-10	Mental and behavioural disorders due to multiple drug use and use of psychoactive substances, amnesic syndrome	
F197	ICD-10	Mental and behavioural disorders due to multiple drug use and use of psychoactive substances, residual and late-onset psychotic disorder	
F198	ICD-10	Mental and behavioural disorders due to multiple drug use and use of psychoactive substances, other mental and behavioural disorders	

F199	ICD-10	Mental and behavioural disorders due to multiple drug use and use of psychoactive substances, unspecified mental and behavioural disorder	
291	OHIP dx		Alcoholic psychosis, delirium tremens, Korsakov's psychosis
292	OHIP dx		Drug psychosis
304	OHIP dx		Drug dependence, drug addiction
F230	ICD-10	Acute polymorphic psychotic disorder without symptoms of schizophrenia	
F231	ICD-10	Acute polymorphic psychotic disorder with symptoms of schizophrenia	
F400	ICD-10	Agoraphobia	
F401	ICD-10	Social phobias	
F402	ICD-10	Specific (isolated) phobias	
F408	ICD-10	Other phobic anxiety disorders	
F409	ICD-10	Phobic anxiety disorder, unspecified	
F410	ICD-10	Panic disorder [episodic paroxysmal anxiety]	
F420	ICD-10	Predominantly obsessional thoughts or ruminations	
F421	ICD-10	Predominantly compulsive acts [obsessional rituals]	
F422	ICD-10	Mixed obsessional thoughts and acts	
F428	ICD-10	Other obsessive-compulsive disorders	
F429	ICD-10	Obsessive-compulsive disorder, unspecified	
F430	ICD-10	Acute stress reaction	
F431	ICD-10	Post-traumatic stress disorder	
F432	ICD-10	Adjustment disorders	
F438	ICD-10	Other reactions to severe stress	
F439	ICD-10	Reaction to severe stress, unspecified	
F440	ICD-10	Dissociative amnesia	
F441	ICD-10	Dissociative fugue	
F442	ICD-10	Dissociative stupor	
F443	ICD-10	Trance and possession disorders	
F444	ICD-10	Dissociative motor disorders	
F445	ICD-10	Dissociative convulsions	
F446	ICD-10	Dissociative anaesthesia and sensory loss	
F447	ICD-10	Mixed dissociative [conversion] disorders	

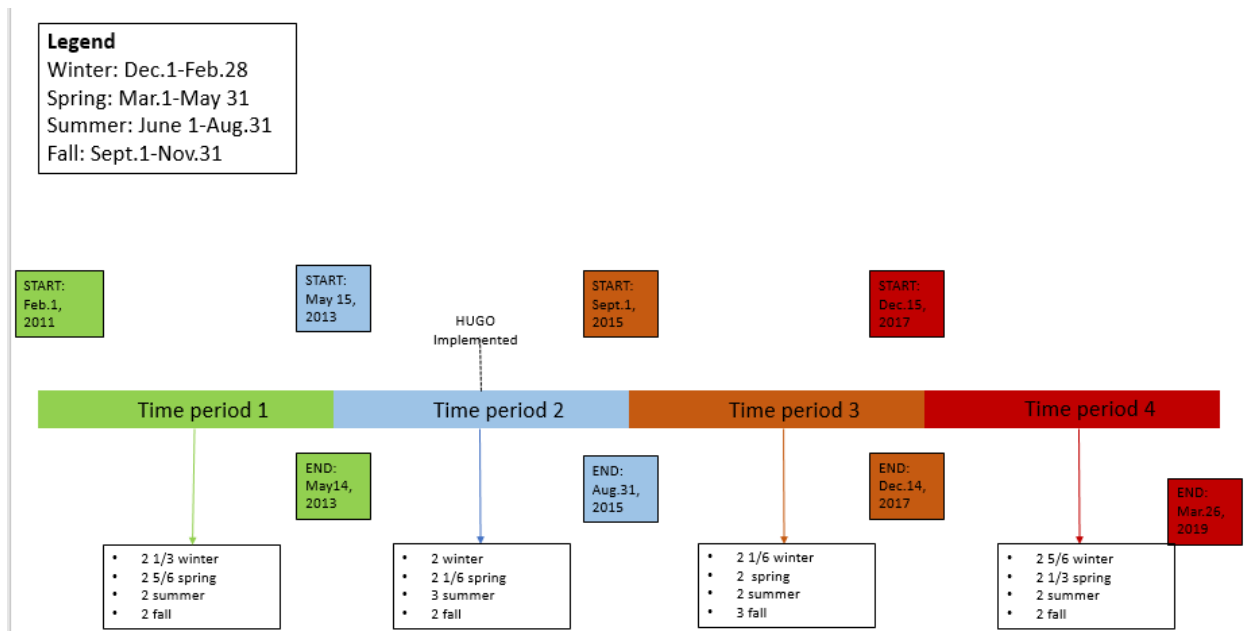
F448	ICD-10	Other dissociative [conversion] disorders	
F449	ICD-10	Dissociative [conversion] disorder, unspecified	
F450	ICD-10	Somatization disorder	
F451	ICD-10	Undifferentiated somatoform disorder	
F452	ICD-10	Hypochondriacal disorder	
F453	ICD-10	Somatoform autonomic dysfunction	
F454	ICD-10	Persistent somatoform pain disorder	
F458	ICD-10	Other somatoform disorders	
F459	ICD-10	Somatoform disorder, unspecified	
F480	ICD-10	Neurasthenia	
F481	ICD-10	Depersonalization-derealization syndrome	
F488	ICD-10	Other specified neurotic disorders	
F489	ICD-10	Neurotic disorder, unspecified	
298	OHIP-dx		Other psychoses
309	OHIP-dx		Adjustment reaction

Appendix E- Cohort inclusion/exclusion steps with ICES databases

Step	Description	Database
1	Include hospitalizations from CERNER dataset where patients that were prescribed one of the medications of interest. Align Cerner records with DAD based on discharge dates (CERNER, dischargedate=DAD ddate), IKN's, and institutions .	CERNER, DAD
2	Data cleaning: exclude hospitalizations with an invalid IKN, age <66 yo or >105 yo, non-Ontario residents, or who were not discharged from University hospital, Victoria hospital, or SJHC	DAD, RPDB, INST
3	Exclude hospitalizations where death date<= discharge date +5 days	DAD
4	Exclude hospitalizations who were discharged from a psychiatric institution [insttype institution not equal to 'AT' or 'AP' (non-psych patients)]	DAD

5	Exclude hospitalizations who were readmitted within 5 days of discharge	DAD
6	Exclude hospitalizations with a mental health or gastrointestinal diagnosis in the 6mo prior to admission and/or during hospital stay	DAD, OHIP
7	Exclude hospitalizations with prior medication use (6mo prior to admission)	ODB
8	Exclude hospitalizations who returned to ED within 5 days of discharge	NACRS
9	Exclude hospitalizations who were discharged before Jan. 31, 2011	DAD

Appendix F-Seasonal makeup of the four time segments used for measuring patient characteristics



Appendix G-Coding for patient characteristics

Covariate	Codes/variables	Source	Notes
Charlson comorbidity score	%CHARLSON macro	DAD	
Hospital los	LOS	DAD	
Primary care visits in past year	A001, A003-A006, A008, A901, A905, A912, C912, K024, K025, Q525, W872, W912	OHIP feecodes	
	spec= '00'	OHIP	
Specialist care visits in past year	spec= '13', '41', '47', '48', '60', '61', '07', '15', '16', '46', '18'	OHIP	
Type of inpatient service (medical vs. surgical vs. geriatric vs. other vs. unknown)		CERNER	
Number of medications in previous year		ODB	
ED to inpatient transfer	TO_TYPE='I'	NACRS	
Age		RPDB	
Sex		RPDB	
SES(Income)	INCQUINT	RPDB	Nearest Census Based Neighbourhood Income Quintile(within CMA/CA)
Long term care resident	RESIDENT_CODE and absence of DISCHARGE_FLAG_IND	CCRS	Long term care resident in 3 months prior to admission or admitted from a long-term care facility
	INSTFTYP values=4, 9	DAD	Institution from type
Prior COPD	%COPD (ICES derived cohort)	OHIP, DAD, SDS	
Prior diabetes	%ODD (ICES derived cohort)	OHIP, DAD, ODB	
Prior hypertension	%HYPER (ICES derived cohort)	OHIP, DAD, SDS	
Prior ischemic heart disease	ICD-10: I20-I25	DAD	Definition for ischemic heart disease sources from paper by Griffith et al. Also included patients with two physician billings within a one-year period with one of the billings by a specialist or a family physician in a hospital or emergency room setting or a hospital

			discharge abstract. Look back period of 5 years
	CCP:4802, 4803, 4809, 481	DAD	
	CCI: 1IJ50, 1IJ57GQxx, 1IJ76	DAD	
	410, 412, 413, R742, R743, Z434, G298	OHIP	
Prior liver disease			Definition of liver disease sources from paper by Griffith et al. 5 year lookback period
	Mild: ICD-10 codes B180, B181, B182, B188, B189, K700-K703, K709, K713-K715, K717, K73, K74, K760, K762-K764, K768, K769, Z944	DAD/SDS	
	Moderate/Severe: ICD-10 codes I850, I859, I864, I982, K704, K711, K721, K729, K765, K766, K767	DAD/SDS	
Prior inflammatory bowel disease			Definition of inflammatory bowel disease sources from paper by Griffith et al. 5 year lookback window
	ICD10: K500, K501, K508-K515, K518, K519, M074, M075, M091, M092, K52	DAD/NACRS	
	555, 556, 564	OHIP	Definition of renal disease sources from paper by Griffith et al. Any 2 codes within 90 days of each other. 5 year lookback period
Prior renal disease	R849, R850, G323, G325, G326, G330, G331, G860, G333, G083, G091, G085, G295, G082, G090, G092, G093, G094, G861, G862, G863, G864, G865, G866, G294, G095, G096	OHIP	With chronic dialysis
	CCP: 51.95, 66.98	DAD	With chronic dialysis
	CCI: 1PZ21HQBR, 1PZ21HPD4	DAD	With chronic dialysis
	E102, E112, E132, E142, I12, I13, N08, N18, N19	DAD	Without chronic dialysis; any of these codes
	403, 585	OHIP	Without chronic dialysis; any of these codes
Prior arthritis	%ORAD (ICES derived cohort)	DAD, OHIP	

Prior stroke			Definition of stroke sources from paper by Griffith et al. At least one hospitalization (DAD) for stroke-in-ant diagnosis field
	G45 (excl. G45.4), H34.0, H34.1, I60 (excl. I60.8), I61, I63 (excl. I63.6), I64	DAD	
Prior cerebrovascular disease (not stroke)	G45, G46, H340, I60-I69	DAD/SDS	Definition of cerebrovascular disease sources from paper by Griffith et al. 5 year look back window.
Prior congestive heart failure			Definition of congestive heart failure sources from paper by Griffith et al. 5 year lookback window
	I50	CIHI-DAD (icd-10)	
		428 OHIP (dxcode)	
Discharged to nursing home	INSTTYPE	DAD	
ICU admission	SCU	DAD	Admission to special care unit
Polypharmacy at admission		ODB	>=10 prescription medications
Surgery/procedure performed	PRCODE1-10	CIHI-DAD	
Main diagnoses for patient admission	DX10CODE with dxtype=M	DAD	M=most responsible diagnosis
Prior dementia	F000, F001, F002, F009, F010, F011, F012, F013, F018, F019, F020, F021, F022, F023, F024, F028, F03, F04	DAD	
	290, spec19	OHIP (dxcode)	

Description of codes

Description of baseline characteristics codes		
Code	Description	Source
spec='13'	internal medicine	OHIP
spec= '41'	gastroenterology	OHIP
spec='47'	respiratory disease	OHIP
spec= '48'	rheumatology	OHIP

spec= '60'	cardiology	OHIP
spec='61'	haematology	OHIP
spec='07'	geriatrics	OHIP
spec='18'	neurology	OHIP
spec='46'	Infectious diseases	OHIP
spec='16'	Nephrology	OHIP
spec= '15'	endocrinology	OHIP
medical service=1	surgery	CERNER
medical service=2	medicine	CERNER
medical service=3	geriatrics	CERNER
medical service=4	other	CERNER
medical service=5	unknown	CERNER
I	Current NACRS record was transferred to inpatient care	NACRS
I200	Unstable angina	DAD/ICD-10
I2080	Atypical angina	DAD/ICD-10
I2088	Other forms of angina pectoris	DAD/ICD-10
I209	Angina pectoris, unspecified	DAD/ICD-10

I210	Acute transmural myocardial infarction of anterior wall	DAD/ICD-10
I211	Acute transmural myocardial infarction of inferior wall	DAD/ICD-10
I212	Acute transmural myocardial infarction of other sites	DAD/ICD-10
I213	Acute transmural myocardial infarction of unspecified site	DAD/ICD-10
I214	Acute subendocardial myocardial infarction	DAD/ICD-10
I2140	Acute subendocardial myocardial infarction of anterior wall	DAD/ICD-10
I2141	Acute subendocardial myocardial infarction of inferior wall	DAD/ICD-10
I2142	Acute subendocardial myocardial infarction of other sites	DAD/ICD-10
I2149	Acute subendocardial myocardial infarction, unspecified site	DAD/ICD-10
I219	Acute myocardial infarction, unspecified	DAD/ICD-10
I220	Subsequent myocardial infarction of anterior wall	DAD/ICD-10
I221	Subsequent myocardial infarction of inferior wall	DAD/ICD-10
I228	Subsequent myocardial infarction of other sites	DAD/ICD-10
I229	Subsequent myocardial infarction of unspecified site	DAD/ICD-10

I230	Haemopericardium as current complication following acute myocardial infarction	DAD/ICD-10
I231	Atrial septal defect as current complication following acute myocardial infarction	DAD/ICD-10
I232	Ventricular septal defect as current complication following acute myocardial infarction	DAD/ICD-10
I233	Rupture of cardiac wall without haemopericardium as current complication following acute myocardial infarction	DAD/ICD-10
I234	Rupture of chordae tendineae as current complication following acute myocardial infarction	DAD/ICD-10
I235	Rupture of papillary muscle as current complication following acute myocardial infarction	DAD/ICD-10
I236	Thrombosis of atrium, auricular appendage, and ventricle as current complications following acute myocardial infarction	DAD/ICD-10
I2380	Papillary muscle dysfunction as current complication following acute myocardial infarction	DAD/ICD-10
I2381	Pericarditis as current complication following acute myocardial infarction	DAD/ICD-10
I2382	Postmyocardial infarction angina as current complication following acute myocardial infarction	DAD/ICD-10
I2388	Other current complications following acute myocardial infarction	DAD/ICD-10
I2389	Current complications following acute myocardial infarction, unspecified	DAD/ICD-10
I240	Coronary thrombosis not resulting in myocardial infarction	DAD/ICD-10
I241	Dressler's syndrome	DAD/ICD-10
I248	Other forms of acute ischaemic heart disease	DAD/ICD-10
I249	Acute ischaemic heart disease, unspecified	DAD/ICD-10
I250	Atherosclerotic cardiovascular disease, so described	DAD/ICD-10
4802	MICROSCOPIC EXAMINATION OF SPECIMEN FROM LOWER GASTROINTESTINAL TRACT AND OF STOOL	DAD/CCP
4803	MICROSCOPIC EXAMINATION OF SPECIMEN FROM LOWER GASTROINTESTINAL TRACT AND OF STOOL	DAD/CCP
4809	MICROSCOPIC EXAMINATION OF SPECIMEN FROM LOWER GASTROINTESTINAL TRACT AND OF STOOL	DAD/CCP
481	MICROSCOPIC EXAMINATION OF SPECIMEN FROM LOWER GASTROINTESTINAL TRACT AND OF STOOL, BACTERIAL SMEAR	DAD/CCP
1IJ50QBD	Dilation, coronary arteries, without stent insertion percutaneous transluminal approach [e.g. with angioplasty alone] using balloon or cutting balloon dilator	DAD/CCI

1IJ50QBF	Dilation, coronary arteries, without stent insertion percutaneous transluminal approach [e.g. with angioplasty alone] using laser (and balloon) dilator	DAD/CCI
1IJ50QNR	Dilation, coronary arteries, with (endovascular) stent insertion percutaneous transluminal approach [e.g. with angioplasty alone] using (endovascular) stent only	DAD/CCI
1IJ50QOA	Dilation, coronary arteries, with (endovascular) stent insertion percutaneous transluminal approach [e.g. with angioplasty alone] using balloon or cutting balloon dilator with (endovascular) stent	DAD/CCI
1IJ50QOB	Dilation, coronary arteries, with (endovascular) stent insertion percutaneous transluminal approach [e.g. with angioplasty alone] using laser (and balloon) dilator with (endovascular) stent	DAD/CCI
1IJ50QOD	Dilation, coronary arteries, without stent insertion percutaneous transluminal approach [e.g. with angioplasty alone] using ultrasound (and balloon) dilator	DAD/CCI
1IJ50QOE	Dilation, coronary arteries, with (endovascular) stent insertion percutaneous transluminal approach [e.g. with angioplasty alone] using ultrasound (and balloon) dilator with (endovascular) stent	DAD/CCI
1IJ50GSBD	Dilation, coronary arteries using percutaneous transluminal approach with placement/implant of stent and mechanical balloon dilator	DAD/CCI
1IJ50GTBD	Dilation, coronary arteries, without stent insertion percutaneous transluminal approach with atherectomy [e.g. rotational, directional, extraction catheter, laser] using balloon or cutting balloon dilator	DAD/CCI
1IJ50GTBF	Dilation, coronary arteries, without stent insertion percutaneous transluminal approach with atherectomy [e.g. rotational, directional, extraction catheter, laser] using laser (and balloon) dilator	DAD/CCI
1IJ50GTOA	Dilation, coronary arteries, with (endovascular) stent insertion percutaneous transluminal approach with atherectomy [e.g. rotational, directional, extraction catheter, laser] using balloon or cutting balloon dilator with (endovascular) stent	DAD/CCI
1IJ50GTOB	Dilation, coronary arteries, with (endovascular) stent insertion percutaneous transluminal approach with atherectomy [e.g. rotational, directional, extraction catheter, laser] using laser (and balloon) dilator with (endovascular) stent	DAD/CCI
1IJ50GTOD	Dilation, coronary arteries, without stent insertion percutaneous transluminal approach with atherectomy [e.g. rotational, directional, extraction catheter, laser] using ultrasound (and balloon) dilator	DAD/CCI
1IJ50GTOE	Dilation, coronary arteries, with (endovascular) stent insertion percutaneous transluminal approach with atherectomy [e.g. rotational, directional, extraction catheter, laser] using ultrasound (and balloon) dilator with (endovascular) stent	DAD/CCI

1IJ50GUBD	Dilation, coronary arteries, without stent insertion percutaneous transluminal approach with thrombectomy using balloon or cutting balloon dilator	DAD/CCI
1IJ50GUBF	Dilation, coronary arteries, without stent insertion percutaneous transluminal approach with thrombectomy using laser (and balloon) dilator	DAD/CCI
1IJ50GUOA	Dilation, coronary arteries, with (endovascular) stent insertion percutaneous transluminal approach with thrombectomy using balloon or cutting balloon dilator with (endovascular) stent	DAD/CCI
1IJ50GUOB	Dilation, coronary arteries, with (endovascular) stent insertion percutaneous transluminal approach with thrombectomy using laser (and balloon) dilator with (endovascular) stent	DAD/CCI
1IJ50GUOD	Dilation, coronary arteries, without stent insertion percutaneous transluminal approach with thrombectomy using ultrasound (and balloon) dilator	DAD/CCI
1IJ50GUE	Dilation, coronary arteries, with (endovascular) stent insertion percutaneous transluminal approach with thrombectomy using ultrasound (and balloon) dilator with (endovascular) stent	DAD/CCI
1IJ57GQAG	Extraction, coronary arteries percutaneous transluminal approach no tissue used using laser	DAD/CCI
1IJ57GQAGA	Extraction, coronary arteries percutaneous transluminal approach using autograft using laser	DAD/CCI
1IJ57GQAGK	Extraction, coronary arteries percutaneous transluminal approach using homograft using laser	DAD/CCI
1IJ57GQAGN	Extraction, coronary arteries percutaneous transluminal approach using synthetic material using laser	DAD/CCI
1IJ57GQBD	Extraction, coronary arteries using percutaneous transluminal approach and balloon dilator	DAD/CCI
1IJ57GQFV	Extraction, coronary arteries percutaneous transluminal approach using atherectomy device (e.g. transluminal, extractor catheter, rotoablator, laser)	DAD/CCI
1IJ57GQFVA	Extraction, coronary arteries percutaneous transluminal approach using autograft using atherectomy device (e.g. transluminal extractor catheter)	DAD/CCI
1IJ57GQFVK	Extraction, coronary arteries percutaneous transluminal approach using homograft using atherectomy device (e.g. transluminal extractor)	DAD/CCI
1IJ57GQFVN	Extraction, coronary arteries percutaneous transluminal approach using synthetic material using atherectomy device (e.g. transluminal extractor catheter)	DAD/CCI
1IJ57GQGX	Extraction, coronary arteries percutaneous transluminal approach using device NEC [e.g. thrombectomy device]	DAD/CCI
1IJ57GQGXA	Extraction, coronary arteries percutaneous transluminal approach using autograft using device NEC	DAD/CCI
1IJ57GQG XK	Extraction, coronary arteries percutaneous transluminal approach using homograft using device NEC	DAD/CCI
1IJ57GQG XN	Extraction, coronary arteries percutaneous transluminal approach using synthetic material using device NEC	DAD/CCI

1IJ57GQOA	Extraction, coronary arteries percutaneous transluminal approach balloon dilator with (endovascular) stent (insertion)	DAD/CCI
1IJ57GQOB	Extraction, coronary arteries percutaneous transluminal approach and laser with (endovascular) stent (insertion)	DAD/CCI
1IJ57GQOBA	Extraction, coronary arteries percutaneous transluminal approach and laser with (endovascular) stent (insertion) and autograft	DAD/CCI
1IJ57GQOBK	Extraction, coronary arteries percutaneous transluminal approach and laser with (endovascular) stent (insertion) and homograft	DAD/CCI
1IJ57GQOBN	Extraction, coronary arteries percutaneous transluminal approach and laser with (endovascular) stent (insertion) and synthetic material	DAD/CCI
1IJ57GQOC	Extraction, coronary arteries percutaneous transluminal approach and atherectomy device with (endovascular) stent (insertion)	DAD/CCI
1IJ57GQOCA	Extraction, coronary arteries percutaneous transluminal approach and atherectomy device with (endovascular) stent (insertion) and autograft	DAD/CCI
1IJ57GQOCK	Extraction, coronary arteries percutaneous transluminal approach and atherectomy device with (endovascular) stent (insertion) and homograft	DAD/CCI
1IJ57GQOCN	Extraction, coronary arteries percutaneous transluminal approach and atherectomy device with (endovascular) stent (insertion) and synthetic material	DAD/CCI
1IJ76BQXXA	Bypass, coronary arteries endoscopic approach with robotic telemanipulation of tools using autograft [e.g. saphenous]	DAD/CCI
1IJ76DAXXA	Bypass, coronary arteries endoscopic approach using autograft [e.g. saphenous]	DAD/CCI
1IJ76DAXXG	Bypass, coronary arteries endoscopic approach using pedicled flap [e.g. internal mammary, thoracic]	DAD/CCI
1IJ76DAXXN	Bypass, coronary arteries endoscopic approach using synthetic tissue (graft)	DAD/CCI
1IJ76DAXXQ	Bypass, coronary arteries endoscopic approach using combined sources of tissue (e.g. graft/pedicled flap)	DAD/CCI
1IJ76LAXXA	Bypass, coronary arteries open approach [sternotomy] using autograft [e.g. saphenous]	DAD/CCI
1IJ76LAXXG	Bypass, coronary arteries open approach [sternotomy] using pedicled flap [e.g. internal mammary, thoracic]	DAD/CCI
1IJ76LAXXN	Bypass, coronary arteries open approach [sternotomy] using synthetic tissue (graft)	DAD/CCI
1IJ76LAXXQ	Bypass, coronary arteries open approach [sternotomy] using combined sources of tissue (e.g. graft/pedicled flap)	DAD/CCI
1IJ76WKXXA	Bypass, coronary arteries minimal (beating heart keyhole) incisional technique [e.g. MIDCAB] using autograft [e.g. saphenous]	DAD/CCI

1IJ76WKXXG	Bypass, coronary arteries minimal (beating heart keyhole) incisional technique [e.g. MIDCAB] using pedicled flap [e.g. internal mammary, thoracic]	DAD/CCI
1IJ76WKXXN	Bypass, coronary arteries minimal (beating heart keyhole) incisional technique [e.g. MIDCAB] using synthetic tissue (graft)	DAD/CCI
1IJ76WKXXQ	Bypass, coronary arteries minimal (beating heart keyhole) incisional technique [e.g. MIDCAB] using combined sources of tissue [e.g. graft/pedicled flap]	DAD/CCI
410	Acute myocardial infarction	OHIP dx-code
412	Old myocardial infarction, chronic coronary artery disease of arteriosclerotic heart disease, without symptoms	OHIP dx-code
413	Acute coronary insufficiency, angina pectoris, acute ischaemic heart disease	OHIP dx-code
R742	HEART PERI.-CORONARY ARTERY REPAIR-SINGLE	OHIP fee code
R743	HEART PERI.-CORONARY ARTERY REPAIR-DOUBLE	OHIP fee code
R434	JOINT-EXC.-BAKER'S CYST-EXTENSIVE	OHIP fee code
G298	CORONARY ANGIOPLAST STENT	OHIP fee code
B180	Chronic viral hepatitis B with delta-agent	DAD/ICD-10
B181	Chronic viral hepatitis B without delta-agent	DAD/ICD-10
B182	Chronic viral hepatitis C	DAD/ICD-10
B188	Other chronic viral hepatitis	DAD/ICD-10
B189	Chronic viral hepatitis, unspecified	DAD/ICD-10
K700	Alcoholic fatty liver	DAD/ICD-10
K701	Alcoholic hepatitis	DAD/ICD-10
K702	Alcoholic fibrosis and sclerosis of liver	DAD/ICD-10
K703	Alcoholic cirrhosis of liver	DAD/ICD-10
K709	Alcoholic liver disease, unspecified	DAD/ICD-10
K713	Toxic liver disease with chronic persistent hepatitis	DAD/ICD-10
K714	Toxic liver disease with chronic lobular hepatitis	DAD/ICD-10
K715	Toxic liver disease with chronic active hepatitis	DAD/ICD-10
K717	Toxic liver disease with fibrosis and cirrhosis of liver	DAD/ICD-10
K730	Chronic persistent hepatitis, not elsewhere classified	DAD/ICD-10
K731	Chronic lobular hepatitis, not elsewhere classified	DAD/ICD-10
K732	Chronic active hepatitis, not elsewhere classified	DAD/ICD-10
K738	Other chronic hepatitis, not elsewhere classified	DAD/ICD-10
K739	Chronic hepatitis, unspecified	DAD/ICD-10
K740	Hepatic fibrosis	DAD/ICD-10
K741	Hepatic sclerosis	DAD/ICD-10
K742	Hepatic fibrosis with hepatic sclerosis	DAD/ICD-10
K743	Primary biliary cirrhosis	DAD/ICD-10
K744	Secondary biliary cirrhosis	DAD/ICD-10

K745	Biliary cirrhosis, unspecified	DAD/ICD-10
K746	Other and unspecified cirrhosis of liver	DAD/ICD-10
K760	Fatty (change of) liver, not elsewhere classified	DAD/ICD-10
K762	Central haemorrhagic necrosis of liver	DAD/ICD-10
K763	Infarction of liver	DAD/ICD-10
K764	Peliosis hepatis	DAD/ICD-10
K768	Other specified diseases of liver	DAD/ICD-10
K769	Liver disease, unspecified	DAD/ICD-10
Z944	Liver transplant status	DAD/ICD-10
I850	Oesophageal varices with bleeding	DAD/ICD-10
I859	Oesophageal varices without bleeding	DAD/ICD-10
I864	Gastric varices	DAD/ICD-10
I982	Oesophageal varices without bleeding in diseases classified elsewhere	DAD/ICD-10
K704	Alcoholic hepatic failure	DAD/ICD-10
K711	Toxic liver disease with hepatic necrosis	DAD/ICD-10
K721	Chronic hepatic failure	DAD/ICD-10
K729	Hepatic failure, unspecified	DAD/ICD-10
K765	Hepatic veno-occlusive disease	DAD/ICD-10
K766	Portal hypertension	DAD/ICD-10
K767	Hepatorenal syndrome	DAD/ICD-10
K500	Crohn's disease of small intestine	DAD/ICD-10
K501	Crohn's disease of large intestine	DAD/ICD-10
K508	Other Crohn's disease	DAD/ICD-10
K509	Crohn's disease, unspecified	DAD/ICD-10
K510	Ulcerative (chronic) pancolitis	DAD/ICD-10
K511	Ulcerative (chronic) ileocolitis	DAD/ICD-10
K512	Ulcerative (chronic) proctitis	DAD/ICD-10
K513	Ulcerative (chronic) rectosigmoiditis	DAD/ICD-10
K514	Inflammatory polyps	DAD/ICD-10
K515	Left sided colitis	DAD/ICD-10
K518	Other ulcerative colitis	DAD/ICD-10
K519	Ulcerative colitis, unspecified	DAD/ICD-10
M074	Arthropathy in Crohn's disease [regional enteritis]	DAD/ICD-10
M091	Juvenile arthritis in Crohn's disease [regional enteritis]	DAD/ICD-10
M092	Juvenile arthritis in ulcerative colitis	DAD/ICD-10
K520	Gastroenteritis and colitis due to radiation	DAD/ICD-10
K521	Toxic gastroenteritis and colitis	DAD/ICD-10
K522	Allergic and dietetic gastroenteritis and colitis	DAD/ICD-10
K523	Indeterminate colitis	DAD/ICD-10
K528	Other specified noninfective gastroenteritis and colitis	DAD/ICD-10
K529	Noninfective gastroenteritis and colitis, unspecified	DAD/ICD-10

555	Regional enteritis, Crohn's disease	OHIP dx-code
556	Ulcerative colitis	OHIP dx-code
564	Spastic colon, irritable colon, mucous colitis, constipation	OHIP dx-code
R849	D./T. PROC.-DIALYSIS-HEMO-INITIAL AND ACUTE	OHIP fee code
R850	D/T.PROC.DIALYSIS-HAEMODIALYSIS-INSERT SCRIBNER SHUNT	OHIP fee code
G323	D./T. PROC.-DIALYSIS-HAEMODIALYSIS-ACUTE,REPEAT	OHIP fee code
G325	D./T. PROC.-DIALYSIS-HAEMODIALYSIS-MEDICAL COMPONENT	OHIP fee code
G326	Dialysis - Chronic, contin. haemodialysis or haemofiltration each	OHIP fee code
G330	D./T. PROC.-DIALYSIS-PERITONEAL-ACUTE (UP TO 48 HRS)	OHIP fee code
G331	D./T. PROC.-DIALYSIS-PERITONEAL-REPEAT ACUTE (UP TO 48 HRS)	OHIP fee code
G860	HOSPITAL HEMODIALYSIS	OHIP fee code
G333	Home/self-care dialysis -	OHIP fee code
G083	CONT. VENOVENOUS HAEMODIALYSIS - INIT. & AC. (MAX 3)	OHIP fee code
G091	CONT. ARTERIOVENOUS HAEMODIALYSIS - INIT. & AC. (MAX 3)	OHIP fee code
G085	CONT. VENOVENOUS HAEMOFILTRAT'N - INIT. & AC. (MAX 3)	OHIP fee code
G295	CONT. ARTERIOVENOUS HAEMOFILTRAT'N - INIT. & AC. (MAX 3)	OHIP fee code
G082	CONT. VENOVENOUS HAEMODIAFILTRAT'N - INIT. & AC. (MAX 3)	OHIP fee code
G090	VENOVENOUS SLOW CONT. ULTRAFILTRAT'N-INIT.& AC. (MAX 3)	OHIP fee code
G093	Haemodiafiltration - Contin. Init & Acute (repeatx3)	OHIP fee code
G094	HAEMODIALFILTRATION-CONTIN.CHRONIC	OHIP fee code
G861	HOSPITAL PERITONEAL DIALYSIS	OHIP fee code
G862	HOSPITAL SELF CARE OR SATELLITE HEMODIALYSIS	OHIP fee code
G863	INDEPENDENT HEALTH CARE FACILITY HEMODIALYSIS	OHIP fee code
G864	HOME PERITONEAL DIALYSIS	OHIP fee code
G865	HOME HEMODIALYSIS	OHIP fee code
G866	INTERMITTENT HEMODIAL AUX TREAT CTRE(PER TREAT)	OHIP fee code
G294	ARTERIOVENOUS SLOW CONT. ULTRAFILTRATN-INIT& ACUTE	OHIP fee code
G095	Slow Continuous Ultra Filtration - Initial & Acute (repeat)	OHIP fee code
G096	SLOW CONTINUOUS ULTRA FILTRATION-CHRONIC	OHIP fee code
51.95	HEMODIALYSIS	DAD/CCP

66.98	PERITONEAL DIALYSIS	DAD/CCP
1PZ21HQBR	Dialysis, urinary system NEC hemodialysis	DAD/CCI
1PZ21HPD4	Dialysis, urinary system NEC peritoneal dialysis using dialysate	DAD/CCI
E1020	Type 1 diabetes mellitus with incipient diabetic nephropathy	DAD/ICD-10
E10200	Type 1 diabetes mellitus with incipient diabetic nephropathy, adequately controlled with diet or oral agent	DAD/ICD-10
E10201	Type 1 diabetes mellitus with incipient diabetic nephropathy, adequately controlled with insulin	DAD/ICD-10
E10202	Type 1 diabetes mellitus with incipient diabetic nephropathy, inadequately controlled with diet or oral agents (and insulin not used to stabilize)	DAD/ICD-10
E10203	Type 1 diabetes mellitus with incipient diabetic nephropathy, inadequately controlled with diet or oral agents but adequately controlled with insulin	DAD/ICD-10
E10204	Type 1 diabetes mellitus with incipient diabetic nephropathy, inadequately controlled with insulin	DAD/ICD-10
E10209	Type 1 diabetes mellitus with incipient diabetic nephropathy, level of control unspecified	DAD/ICD-10
E1021	Type 1 diabetes mellitus with established diabetic nephropathy	DAD/ICD-10
E10210	Type 1 diabetes mellitus with established diabetic nephropathy, adequately controlled with diet or oral agent	DAD/ICD-10
E10211	Type 1 diabetes mellitus with established diabetic nephropathy, adequately controlled with insulin	DAD/ICD-10
E10212	Type 1 diabetes mellitus with established diabetic nephropathy, inadequately controlled with diet or oral agents (and insulin not used to stabilize)	DAD/ICD-10
E10213	Type 1 diabetes mellitus with established diabetic nephropathy, inadequately controlled with diet or oral agents but adequately controlled with insulin	DAD/ICD-10
E10214	Type 1 diabetes mellitus with established diabetic nephropathy, inadequately controlled with insulin	DAD/ICD-10
E10219	Type 1 diabetes mellitus with established diabetic nephropathy, level of control unspecified	DAD/ICD-10
E1022	Type 1 diabetes mellitus with end-stage renal disease [ESRD]	DAD/ICD-10
E10220	Type 1 diabetes mellitus with end-stage renal disease [ESRD], adequately controlled with diet or oral agents	DAD/ICD-10
E10221	Type 1 diabetes mellitus with end-stage renal disease [ESRD], adequately controlled with insulin	DAD/ICD-10
E10222	Type 1 diabetes mellitus with end stage renal disease [ESRD], inadequately controlled with diet or oral agents (and insulin not used to stabilize)	DAD/ICD-10
E10223	Type 1 diabetes mellitus with end stage renal disease [ESRD], inadequately controlled with diet or oral agents but adequately controlled with insulin	DAD/ICD-10
E10224	Type 1 diabetes mellitus with end stage renal disease [ESRD], inadequately controlled with insulin	DAD/ICD-10

E10229	Type 1 diabetes mellitus with end stage renal disease [ESRD], level of control unspecified	DAD/ICD-10
E1023	Type 1 diabetes mellitus with established or advanced kidney disease	DAD/ICD-10
E1028	Type 1 diabetes mellitus with other specified kidney complication not elsewhere classified	DAD/ICD-10
E10280	Type 1 diabetes mellitus with other specified renal complication, adequately controlled with diet or oral agents	DAD/ICD-10
E10281	Type 1 diabetes mellitus with other specified renal complication, adequately controlled with insulin	DAD/ICD-10
E10282	Type 1 diabetes mellitus with other specified renal complication, inadequately controlled with diet or oral agents (and insulin not used to stabilize)	DAD/ICD-10
E10283	Type 1 diabetes mellitus with other specified renal complication, inadequately controlled with diet or oral agents but adequately controlled with insulin	DAD/ICD-10
E10284	Type 1 diabetes mellitus with other specified renal complication, inadequately controlled with insulin	DAD/ICD-10
E10289	Type 1 diabetes mellitus with other specified renal complication, level of control unspecified	DAD/ICD-10
E10290	Type 1 diabetes mellitus with renal complication unspecified, adequately controlled with diet or oral agents	DAD/ICD-10
E10291	Type 1 diabetes mellitus with renal complication unspecified, adequately controlled with insulin	DAD/ICD-10
E10292	Type 1 diabetes mellitus with renal complication unspecified, inadequately controlled with diet or oral agents (and insulin not used to stabilize)	DAD/ICD-10
E10293	Type 1 diabetes mellitus with renal complication unspecified, inadequately controlled with diet or oral agents but adequately controlled with insulin	DAD/ICD-10
E10294	Type 1 diabetes mellitus with renal complication unspecified, inadequately controlled with insulin	DAD/ICD-10
E10299	Type 1 diabetes mellitus with renal complication unspecified, level of control unspecified	DAD/ICD-10
E11200	Type 2 diabetes mellitus with incipient diabetic nephropathy, adequately controlled with diet or oral agents	DAD/ICD-10
E11201	Type 2 diabetes mellitus with incipient diabetic nephropathy, adequately controlled with insulin	DAD/ICD-10
E11202	Type 2 diabetes mellitus with incipient diabetic nephropathy, inadequately controlled with diet or oral agents (and insulin not used to stabilize)	DAD/ICD-10
E11203	Type 2 diabetes mellitus with incipient diabetic nephropathy, inadequately controlled with diet or oral agents but adequately controlled with insulin	DAD/ICD-10
E11204	Type 2 diabetes mellitus with incipient diabetics nephropathy, inadequately controlled with insulin	DAD/ICD-10
E11209	Type 2 diabetes mellitus with incipient diabetics nephropathy, level of control unspecified	DAD/ICD-10

E1121	Type 2 diabetes mellitus with established diabetic nephropathy	DAD/ICD-10
E11210	Type 2 diabetes mellitus with established diabetic nephropathy, adequately controlled with diet or oral agents	DAD/ICD-10
E11211	Type 2 diabetes mellitus with established diabetic nephropathy, adequately controlled with insulin	DAD/ICD-10
E11212	Type 2 diabetes mellitus with established diabetic nephropathy, inadequately controlled with diet or oral agents (and insulin not used to stabilize)	DAD/ICD-10
E11213	Type 2 diabetes mellitus with established diabetic nephropathy, inadequately controlled with diet or oral agents but adequately controlled with insulin	DAD/ICD-10
E11214	Type 2 diabetes mellitus with established diabetic nephropathy, inadequately controlled with insulin	DAD/ICD-10
E11219	Type 2 diabetes mellitus with established diabetic nephropathy, level of control unspecified	DAD/ICD-10
E1122	Type 2 diabetes mellitus with end-stage renal disease [ESRD]	DAD/ICD-10
E11220	Type 2 diabetes mellitus with end-stage renal disease [ESRD], adequately controlled with diet or oral agents	DAD/ICD-10
E11221	Type 2 diabetes mellitus with end-stage renal disease [ESRD], adequately controlled with insulin	DAD/ICD-10
E11222	Type 2 diabetes mellitus with end-stage renal disease [ESRD], inadequately controlled with diet or oral agents (and insulin not used to stabilize)	DAD/ICD-10
E11223	Type 2 diabetes mellitus with end-stage renal disease [ESRD], inadequately controlled with diet or oral agents but adequately controlled with insulin	DAD/ICD-10
E11224	Type 2 diabetes mellitus with end-stage renal disease [ESRD], inadequately controlled with insulin	DAD/ICD-10
E11229	Type 2 diabetes mellitus with end-stage renal disease [ESRD] ,level of control unspecified	DAD/ICD-10
E1123	Type 2 diabetes mellitus with established or advanced kidney disease	DAD/ICD-10
E1128	Type 2 diabetes mellitus with other specified kidney complication not elsewhere classified	DAD/ICD-10
E11280	Type 2 diabetes mellitus with other specified renal complication, adequately controlled with diet or oral agents	DAD/ICD-10
E11281	Type 2 diabetes mellitus with other specified renal complication, adequately controlled with insulin	DAD/ICD-10
E11282	Type 2 diabetes mellitus with other specified renal complication, inadequately controlled with diet or oral agents (and insulin not used to stabilize)	DAD/ICD-10
E11283	Type 2 diabetes mellitus with other specified renal complication, inadequately controlled with diet or oral agents but adequately controlled with insulin	DAD/ICD-10
E11284	Type 2 diabetes mellitus with other specified renal complication, inadequately controlled with insulin	DAD/ICD-10
E11289	Type 2 diabetes mellitus with other specified renal complication, level of control unspecified	DAD/ICD-10

E11290	Type 2 diabetes mellitus with renal complication unspecified, adequately controlled with diet or oral agents	DAD/ICD-10
E11291	Type 2 diabetes mellitus with renal complication unspecified, adequately controlled with insulin	DAD/ICD-10
E11292	Type 2 diabetes mellitus with renal complication unspecified, inadequately controlled with diet or oral agents (and insulin not used to stabilize)	DAD/ICD-10
E11293	Type 2 diabetes mellitus with renal complication unspecified, inadequately controlled with diet or oral agents but adequately controlled with insulin	DAD/ICD-10
E11294	Type 2 diabetes mellitus with renal complication unspecified, inadequately controlled with insulin	DAD/ICD-10
E11299	Type 2 diabetes mellitus with renal complication unspecified, level of control unspecified	DAD/ICD-10
E1320	Other specified diabetes mellitus with incipient diabetic nephropathy	DAD/ICD-10
E13200	Other specified diabetes mellitus with incipient diabetic nephropathy, adequately controlled with diet or oral agents	DAD/ICD-10
E13201	Other specified diabetes mellitus with incipient diabetic nephropathy, adequately controlled with insulin	DAD/ICD-10
E13202	Other specified diabetes mellitus with incipient diabetic nephropathy, inadequately controlled with diet or oral agents (and insulin not used to stabilize)	DAD/ICD-10
E13203	Other specified diabetes mellitus with incipient diabetic nephropathy, inadequately controlled with diet or oral agents but adequately controlled with insulin	DAD/ICD-10
E13204	Other specified diabetes mellitus with incipient diabetic nephropathy, inadequately controlled with insulin	DAD/ICD-10
E13209	Other specified diabetes mellitus with incipient diabetic nephropathy, level of control unspecified	DAD/ICD-10
E1321	Other specified diabetes mellitus with established diabetic nephropathy	DAD/ICD-10
E13210	Other specified diabetes mellitus with established diabetic nephropathy, adequately controlled with diet or oral agents	DAD/ICD-10
E13211	Other specified diabetes mellitus with established diabetic nephropathy, adequately controlled with insulin	DAD/ICD-10
E13212	Other specified diabetes mellitus with established diabetic nephropathy, inadequately controlled with diet or oral agents (and insulin not used to stabilize)	DAD/ICD-10
E13213	Other specified diabetes mellitus with established diabetic nephropathy, inadequately controlled with diet or oral agents but adequately controlled with insulin	DAD/ICD-10
E13214	Other specified diabetes mellitus with established diabetic nephropathy, inadequately controlled with insulin	DAD/ICD-10
E13219	Other specified diabetes mellitus with established diabetic nephropathy, level of control unspecified	DAD/ICD-10
E1322	Other specified diabetes mellitus with end-stage renal disease [ESRD]	DAD/ICD-10

E13220	Other specified diabetes mellitus with end-stage renal disease [ESRD], adequately controlled with diet or oral agents	DAD/ICD-10
E13221	Other specified diabetes mellitus with end-stage renal disease [ESRD], adequately controlled with insulin	DAD/ICD-10
E13222	Other specified diabetes mellitus with end-stage renal disease [ESRD], inadequately controlled with diet or oral agents (and insulin not used to stabilize)	DAD/ICD-10
E13223	Other specified diabetes mellitus with end-stage renal disease [ESRD], inadequately controlled with diet or oral agents but adequately controlled with insulin	DAD/ICD-10
E13224	Other specified diabetes mellitus with end-stage renal disease [ESRD], inadequately controlled with insulin	DAD/ICD-10
E13229	Other specified diabetes mellitus with end-stage renal disease [ESRD] ,level of control unspecified	DAD/ICD-10
E1323	Other specified diabetes mellitus with established or advanced kidney disease	DAD/ICD-10
E1328	Other specified diabetes mellitus with other specified kidney complication not elsewhere classified	DAD/ICD-10
E13280	Other specified diabetes mellitus with other specified renal complication, adequately controlled with diet or oral agents	DAD/ICD-10
E13281	Other specified diabetes mellitus with other specified renal complication, adequately controlled with insulin	DAD/ICD-10
E13282	Other specified diabetes mellitus with other specified renal complication, inadequately controlled with diet or oral agents (and insulin not used to stabilize)	DAD/ICD-10
E13283	Other specified diabetes mellitus with other specified renal complication, inadequately controlled with diet or oral agents but adequately controlled with insulin	DAD/ICD-10
E13284	Other specified diabetes mellitus with other specified renal complication, inadequately controlled with insulin	DAD/ICD-10
E13289	Other specified diabetes mellitus with other specified renal complication, level of control unspecified	DAD/ICD-10
E13290	Other specified diabetes mellitus with renal complication unspecified, adequately controlled with diet or oral agents	DAD/ICD-10
E13291	Other specified diabetes mellitus with renal complication unspecified, adequately controlled with insulin	DAD/ICD-10
E13292	Other specified diabetes mellitus with renal complication unspecified, inadequately controlled with diet or oral agents (and insulin not used to stabilize)	DAD/ICD-10
E13293	Other specified diabetes mellitus with renal complication unspecified, inadequately controlled with diet or oral agents but adequately controlled with insulin	DAD/ICD-10
E13294	Other specified diabetes mellitus with renal complication unspecified, inadequately controlled with insulin	DAD/ICD-10
E13299	Other specified diabetes mellitus with renal complication unspecified, level of control unspecified	DAD/ICD-10
E1420	Unspecified diabetes mellitus with incipient diabetic nephropathy	DAD/ICD-10

E14200	Unspecified diabetes mellitus with incipient diabetic nephropathy, adequately controlled with diet or oral agents	DAD/ICD-10
E14201	Unspecified diabetes mellitus with incipient diabetic nephropathy, adequately controlled with insulin	DAD/ICD-10
E14202	Unspecified diabetes mellitus with incipient diabetic nephropathy, inadequately controlled with diet or oral agents (and insulin not used to stabilize)	DAD/ICD-10
E14203	Unspecified diabetes mellitus with incipient diabetic nephropathy, inadequately controlled with diet or oral agents but adequately controlled with insulin	DAD/ICD-10
E14204	Unspecified diabetes mellitus with incipient diabetic nephropathy, inadequately controlled with insulin	DAD/ICD-10
E14209	Unspecified diabetes mellitus with incipient diabetic nephropathy, level of control unspecified	DAD/ICD-10
E1421	Unspecified diabetes mellitus with established diabetic nephropathy	DAD/ICD-10
E14210	Unspecified diabetes mellitus with established diabetic nephropathy, adequately controlled with diet or oral agents	DAD/ICD-10
E14211	Unspecified diabetes mellitus with established diabetic nephropathy, adequately controlled with insulin	DAD/ICD-10
E14212	Unspecified diabetes mellitus with established diabetic nephropathy, inadequately controlled with diet or oral agents (and insulin not used to stabilize)	DAD/ICD-10
E14213	Unspecified diabetes mellitus with established diabetic nephropathy, inadequately controlled with diet or oral agents but adequately controlled with insulin	DAD/ICD-10
E14214	Unspecified diabetes mellitus with established diabetic nephropathy, inadequately controlled with insulin	DAD/ICD-10
E14219	Unspecified diabetes mellitus with established diabetic nephropathy, level of control unspecified	DAD/ICD-10
E1422	Unspecified diabetes mellitus with end-stage renal disease [ESRD]	DAD/ICD-10
E14220	Unspecified diabetes mellitus with end-stage renal disease [ESRD], adequately controlled with diet or oral agents	DAD/ICD-10
E14221	Unspecified diabetes mellitus with end-stage renal disease [ESRD], adequately controlled with insulin	DAD/ICD-10
E14222	Unspecified diabetes mellitus with end-stage renal disease [ESRD], inadequately controlled with diet or oral agents (and insulin not used to stabilize)	DAD/ICD-10
E14223	Unspecified diabetes mellitus with end-stage renal disease [ESRD], inadequately controlled with diet or oral agents but adequately controlled with insulin	DAD/ICD-10
E14224	Unspecified diabetes mellitus with end-stage renal disease [ESRD], inadequately controlled with insulin	DAD/ICD-10
E14229	Unspecified diabetes mellitus with end-stage renal disease [ESRD], level of control unspecified	DAD/ICD-10
E1423	Unspecified diabetes mellitus with established or advanced kidney disease	DAD/ICD-10

E1428	Unspecified diabetes mellitus with other specified kidney complication not elsewhere classified	DAD/ICD-10
E14280	Unspecified diabetes mellitus with other specified renal complication ,adequately controlled with diet or oral agents	DAD/ICD-10
E14281	Unspecified diabetes mellitus with other specified renal complication ,adequately controlled with insulin	DAD/ICD-10
E14282	Unspecified diabetes mellitus with other specified renal complication, inadequately controlled with diet or oral agents (and insulin not used to stabilize)	DAD/ICD-10
E14283	Unspecified diabetes mellitus with other specified renal complication, inadequately controlled with diet or oral agents but adequately controlled with insulin	DAD/ICD-10
E14284	Unspecified diabetes mellitus with other specified renal complication, inadequately controlled with insulin	DAD/ICD-10
E14289	Unspecified diabetes mellitus with other specified renal complication, level of control unspecified	DAD/ICD-10
E14290	Unspecified diabetes mellitus with renal complication unspecified, adequately controlled with diet or oral agents	DAD/ICD-10
E14291	Unspecified diabetes mellitus with renal complication unspecified, adequately controlled with insulin	DAD/ICD-10
E14292	Unspecified diabetes mellitus with renal complication unspecified, inadequately controlled with diet or oral agents (and insulin not used to stabilize)	DAD/ICD-10
E14293	Unspecified diabetes mellitus with renal complication unspecified, inadequately controlled with diet or oral agents but adequately controlled with insulin	DAD/ICD-10
E14294	Unspecified diabetes mellitus with renal complication unspecified, inadequately controlled with insulin	DAD/ICD-10
E14299	Unspecified diabetes mellitus with renal complication unspecified, level of control unspecified	DAD/ICD-10
I12	Hypertensive renal disease	DAD/ICD-10
I13	Hypertensive heart and renal disease	DAD/ICD-10
N080	Glomerular disorders in infectious and parasitic diseases classified elsewhere	DAD/ICD-10
N081	Glomerular disorders in neoplastic diseases	DAD/ICD-10
N082	Glomerular disorders in blood diseases and disorders involving the immune mechanism	DAD/ICD-10
N0831	Glomerular disorders in diabetes mellitus, chronic kidney disease, stage 1	DAD/ICD-10
N0832	Glomerular disorders in diabetes mellitus, chronic kidney disease, stage 2	DAD/ICD-10
N0833	Glomerular disorders in diabetes mellitus, chronic kidney disease, stage 3	DAD/ICD-10
N084	Glomerular disorders in other endocrine, nutritional and metabolic diseases	DAD/ICD-10
N0835	Glomerular disorders in diabetes mellitus, chronic kidney disease, stage 5	DAD/ICD-10
N0838	Other glomerular disorders in diabetes mellitus	DAD/ICD-10

N0839	Unspecified glomerular disorders in diabetes mellitus	DAD/ICD-10
N085	Glomerular disorders in systemic connective tissue disorders	DAD/ICD-10
N088	Glomerular disorders in other diseases classified elsewhere	DAD/ICD-10
N180	End-stage renal disease	DAD/ICD-10
N181	Chronic kidney disease, stage 1	DAD/ICD-10
N182	Chronic kidney disease, stage 2	DAD/ICD-10
N183	Chronic kidney disease, stage 3	DAD/ICD-10
N184	Chronic kidney disease, stage 4	DAD/ICD-10
N185	Chronic kidney disease, stage 5	DAD/ICD-10
N188	Other chronic renal failure	DAD/ICD-10
N189	Chronic kidney disease, unspecified	DAD/ICD-10
N19	Unspecified kidney failure	DAD/ICD-10
	403 Hypertensive renal disease	OHIP dx-code
	585 Chronic renal failure, uremia	OHIP dx-code
G450	Vertebro-basilar artery syndrome	DAD/ICD-10
G451	Carotid artery syndrome (hemispheric)	DAD/ICD-10
G452	Multiple and bilateral precerebral artery syndromes	DAD/ICD-10
G453	Amaurosis fugax	DAD/ICD-10
G458	Other transient cerebral ischaemic attacks and related syndromes	DAD/ICD-10
G459	Transient cerebral ischaemic attack, unspecified	DAD/ICD-10
H340	Transient retinal artery occlusion	DAD/ICD-10
H341	Central retinal artery occlusion	DAD/ICD-10
I600	Subarachnoid haemorrhage from carotid siphon and bifurcation	DAD/ICD-10
I601	Subarachnoid haemorrhage from middle cerebral artery	DAD/ICD-10
I602	Subarachnoid haemorrhage from anterior communicating artery	DAD/ICD-10
I603	Subarachnoid haemorrhage from posterior communicating artery	DAD/ICD-10
I604	Subarachnoid haemorrhage from basilar artery	DAD/ICD-10
I605	Subarachnoid haemorrhage from vertebral artery	DAD/ICD-10
I606	Subarachnoid haemorrhage from other intracranial arteries	DAD/ICD-10
I607	Subarachnoid haemorrhage from intracranial artery, unspecified	DAD/ICD-10
I609	Subarachnoid haemorrhage, unspecified	DAD/ICD-10
I610	Intracerebral haemorrhage in hemisphere, subcortical	DAD/ICD-10
I611	Intracerebral haemorrhage in hemisphere, cortical	DAD/ICD-10
I612	Intracerebral haemorrhage in hemisphere, unspecified	DAD/ICD-10
I613	Intracerebral haemorrhage in brain stem	DAD/ICD-10
I614	Intracerebral haemorrhage in cerebellum	DAD/ICD-10
I615	Intracerebral haemorrhage, intraventricular	DAD/ICD-10
I616	Intracerebral haemorrhage, multiple localized	DAD/ICD-10
I618	Other intracerebral haemorrhage	DAD/ICD-10
I619	Intracerebral haemorrhage, unspecified	DAD/ICD-10

I631	Cerebral infarction due to embolism of precerebral arteries	DAD/ICD-10
I632	Cerebral infarction due to unspecified occlusion or stenosis of precerebral arteries	DAD/ICD-10
I633	Cerebral infarction due to thrombosis of cerebral arteries	DAD/ICD-10
I634	Cerebral infarction due to embolism of cerebral arteries	DAD/ICD-10
I635	Cerebral infarction due to unspecified occlusion or stenosis of cerebral arteries	DAD/ICD-10
I638	Other cerebral infarction	DAD/ICD-10
I639	Cerebral infarction, unspecified	DAD/ICD-10
I64	Stroke, not specified as haemorrhage or infarction	DAD/ICD-10
G454	Transient global amnesia	DAD/SDS
G460	Middle cerebral artery syndrome	DAD/SDS
G461	Anterior cerebral artery syndrome	DAD/SDS
G462	Posterior cerebral artery syndrome	DAD/SDS
G463	Brain stem stroke syndrome	DAD/SDS
G464	Cerebellar stroke syndrome	DAD/SDS
G465	Pure motor lacunar syndrome	DAD/SDS
G466	Pure sensory lacunar syndrome	DAD/SDS
G467	Other lacunar syndromes	DAD/SDS
G468	Other vascular syndromes of brain in cerebrovascular diseases	DAD/SDS
I608	Other subarachnoid haemorrhage	DAD/SDS
I620	Subdural haemorrhage (acute)(nontraumatic)	DAD/SDS
I621	Nontraumatic extradural haemorrhage	DAD/SDS
I629	Intracranial haemorrhage (nontraumatic), unspecified	DAD/SDS
I630	Cerebral infarction due to thrombosis of precerebral arteries	DAD/SDS
I636	Cerebral infarction due to cerebral venous thrombosis, nonpyrogenic	DAD/SDS
I650	Occlusion and stenosis of vertebral artery	DAD/SDS
I651	Occlusion and stenosis of basilar artery	DAD/SDS
I652	Occlusion and stenosis of carotid artery	DAD/SDS
I653	Occlusion and stenosis of multiple and bilateral precerebral arteries	DAD/SDS
I658	Occlusion and stenosis of other precerebral artery	DAD/SDS
I659	Occlusion and stenosis of unspecified precerebral artery	DAD/SDS
I660	Occlusion and stenosis of middle cerebral artery	DAD/SDS
I661	Occlusion and stenosis of anterior cerebral artery	DAD/SDS
I662	Occlusion and stenosis of posterior cerebral artery	DAD/SDS
I663	Occlusion and stenosis of cerebellar arteries	DAD/SDS
I664	Occlusion and stenosis of multiple and bilateral cerebral arteries	DAD/SDS
I668	Occlusion and stenosis of other cerebral artery	DAD/SDS
I669	Occlusion and stenosis of unspecified cerebral artery	DAD/SDS
I670	Dissection of cerebral arteries, nonruptured	DAD/SDS

I671	Cerebral aneurysm, nonruptured	DAD/SDS
I672	Cerebral atherosclerosis	DAD/SDS
I673	Progressive vascular leukoencephalopathy	DAD/SDS
I674	Hypertensive encephalopathy	DAD/SDS
I675	Moyamoya disease	DAD/SDS
I676	Nonpyogenic thrombosis of intracranial venous system	DAD/SDS
I677	Cerebral arteritis, not elsewhere classified	DAD/SDS
I678	Other specified cerebrovascular diseases	DAD/SDS
I679	Cerebrovascular disease, unspecified	DAD/SDS
I680	Cerebral amyloid angiopathy	DAD/SDS
I681	Cerebral arteritis in infectious and parasitic diseases classified elsewhere	DAD/SDS
I682	Cerebral arteritis in other diseases classified elsewhere	DAD/SDS
I688	Other cerebrovascular disorders in diseases classified elsewhere	DAD/SDS
I690	Sequelae of subarachnoid haemorrhage	DAD/SDS
I691	Sequelae of intracerebral haemorrhage	DAD/SDS
I692	Sequelae of other nontraumatic intracranial haemorrhage	DAD/SDS
I693	Sequelae of cerebral infarction	DAD/SDS
I694	Sequelae of stroke, not specified as haemorrhage or infarction	DAD/SDS
I698	Sequelae of other and unspecified cerebrovascular diseases	DAD/SDS
I500	Congestive heart failure	DAD/ICD-10
I501	Left ventricular failure	DAD/ICD-10
I509	Heart failure, unspecified	DAD/ICD-10
I510	Cardiac septal defect, acquired	DAD/ICD-10
I511	Rupture of chordae tendineae, not elsewhere classified	DAD/ICD-10
I512	Rupture of papillary muscle, not elsewhere classified	DAD/ICD-10
I513	Intracardiac thrombosis, not elsewhere classified	DAD/ICD-10
I514	Myocarditis, unspecified	DAD/ICD-10
I515	Myocardial degeneration	DAD/ICD-10
I516	Cardiovascular disease, unspecified	DAD/ICD-10
I517	Cardiomegaly	DAD/ICD-10
I518	Other ill-defined heart diseases	DAD/ICD-10
I519	Heart disease, unspecified	DAD/ICD-10
428	Congestive heart failure	OHIP dx-code
INSTFTYP=4	admitted from nursing home	DAD
INSTFTYP=9	admitted from home for aged	DAD
INSTTYP=4	discharged to nursing home	DAD
INSTTYPE=9	discharged to home for aged	DAD
SCU=10	Medical intensive care nursing unit	DAD
SCU=20	Surgical intensive care nursing unit	DAD
SCU=25	Trauma intensive care nursing unit	DAD

SCU=30	Combined medical/surgical intensive care nursing unit	DAD
SCU=35	Burn intensive care nursing unit	DAD
SCU=40	Cardiac intensive care nursing unit surgery	DAD
SCU=45	Coronary intensive care nursing unit medical	DAD
SCU=60	Neurosurgery intensive care nursing unit	DAD
SCU=80	Respirology intensive care nursing unit	DAD
F000	Dementia in Alzheimer's disease with early onset	DAD/ICD-10
F001	Dementia in Alzheimer's disease with late onset	DAD/ICD-10
F002	Dementia in Alzheimer's disease with late onset	DAD/ICD-10
F009	Dementia in Alzheimer's disease, unspecified	DAD/ICD-10
F010	Vascular dementia of acute onset	DAD/ICD-10
F011	Vascular dementia	DAD/ICD-10
F012	Subcortical vascular dementia	DAD/ICD-10
F013	Mixed cortical and subcortical vascular dementia	DAD/ICD-10
F018	Other vascular dementia	DAD/ICD-10
F019	Vascular dementia, unspecified	DAD/ICD-10
F020	Dementia in Pick's disease	DAD/ICD-10
F021	Dementia in Creutzfeldt-Jakob disease	DAD/ICD-10
F022	Dementia in Huntington's disease	DAD/ICD-10
F023	Dementia in Parkinson's disease	DAD/ICD-10
F024	Dementia in human immunodeficiency virus [HIV] disease	DAD/ICD-10
F028	Dementia in other specified diseases classified elsewhere	DAD/ICD-10
F03	Unspecified dementia	DAD/ICD-10
F04	Organic amnesic syndrome, not induced by alcohol and other psychoactive substances	DAD/ICD-10
290	Senile dementia, presenile dementia	OHIP dx code

Appendix H-Linear regression model assessment

i. Assessing goodness of fit

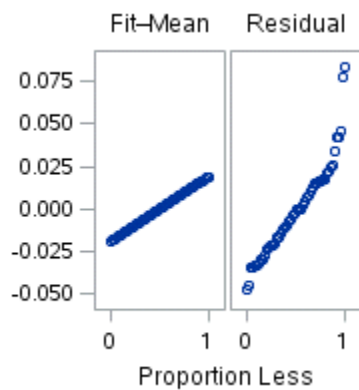
- 1) We checked the R^2 value and F value to assess goodness of fit (see table below). The F value was statistically significant ($p < 0.05$) which would indicate that that independent variable is able to predict the dependent variable. However, the R^2 value is quite low ($R^2 = 0.1365$, adjusted $R^2 = 0.1186$). This R^2 value indicates that only 13.65% of the variation in the dependent variable can be explained by the independent variable. This could indicate that a simple linear regression model is not a good fit.

Analysis of Variance					
Source	DF	Sum of Squares	Mean Square	F Value	Pr > F
Model	1	0.00631	0.00631	7.59	0.0083
Error	48	0.03993	0.00083179		
Corrected Total	49	0.04624			

Root MSE	0.02884	R-Square	0.1365
Dependent Mean	0.17052	Adj R-Sq	0.1186
Coeff Var	16.91368		

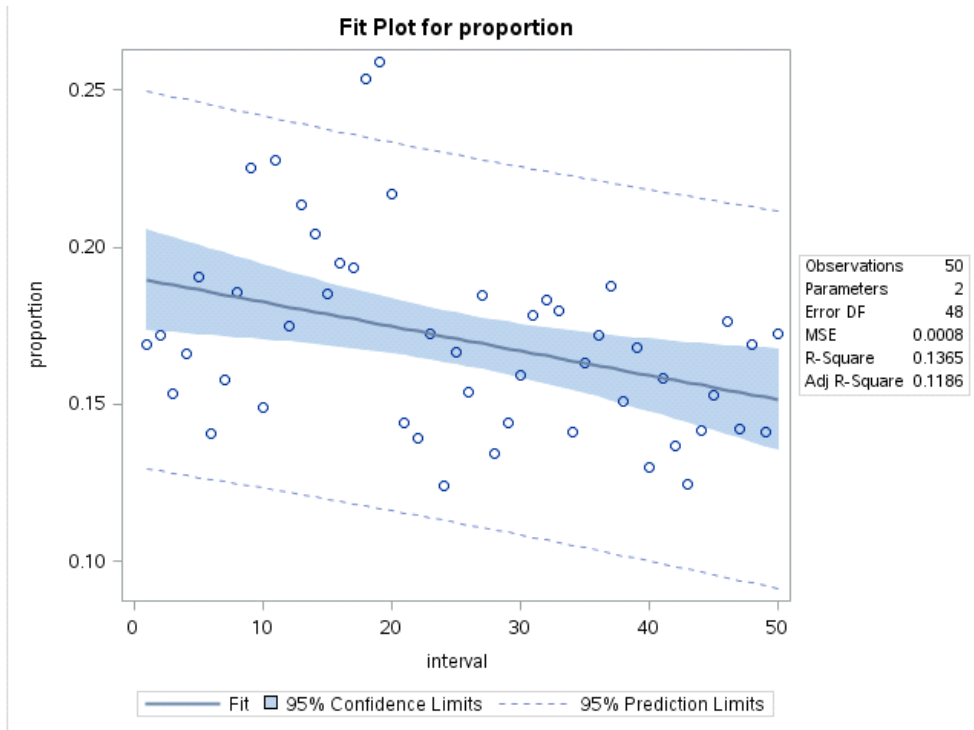
Parameter Estimates					
Variable	DF	Parameter Estimate	Standard Error	t Value	Pr > t
Intercept	1	0.19037	0.00828	22.99	<.0001
interval	1	-0.00077868	0.00028264	-2.76	0.0083

2)



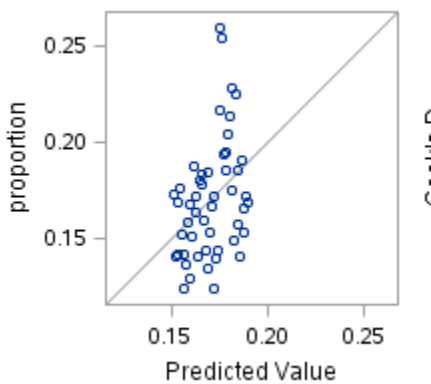
The above figure (residual-fit spread plot) indicates that there is residual variance that cannot be explained by variability in our x variable (shown by the increase in spread of the residuals as compared to the fit-mean). Also, there are some outliers in the residuals but not the plotted values, indicating there is an error in the model not an outlier in the actual data.

3)



We would expect the data points in the above figure to fall within the 95% confidence limits if the model were a good fit, and to hug the fitted line. We do not observe this indicating that our model is not a good fit.

4)

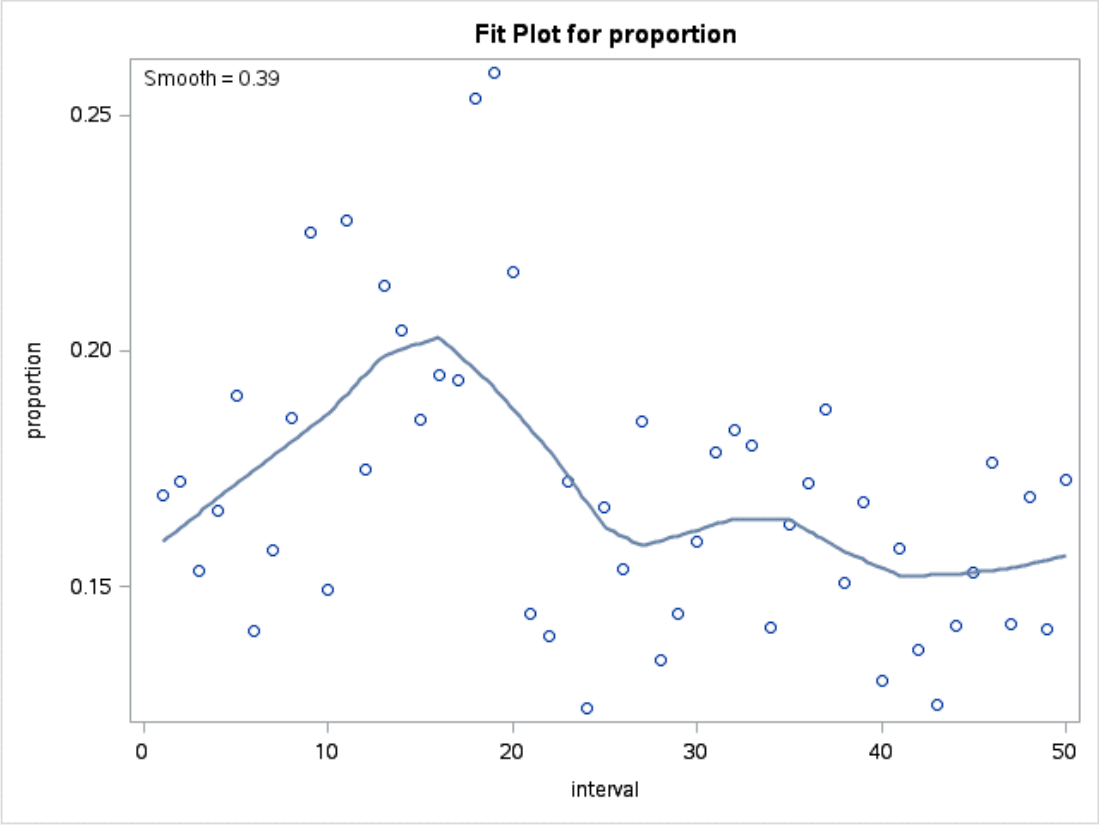


We would expect the predicted values in the above figure to lie on the 45° line if the model were a good fit (i.e. the model correctly predicted the behavior of the dependent variable).

ii. Assessing the assumption of linearity

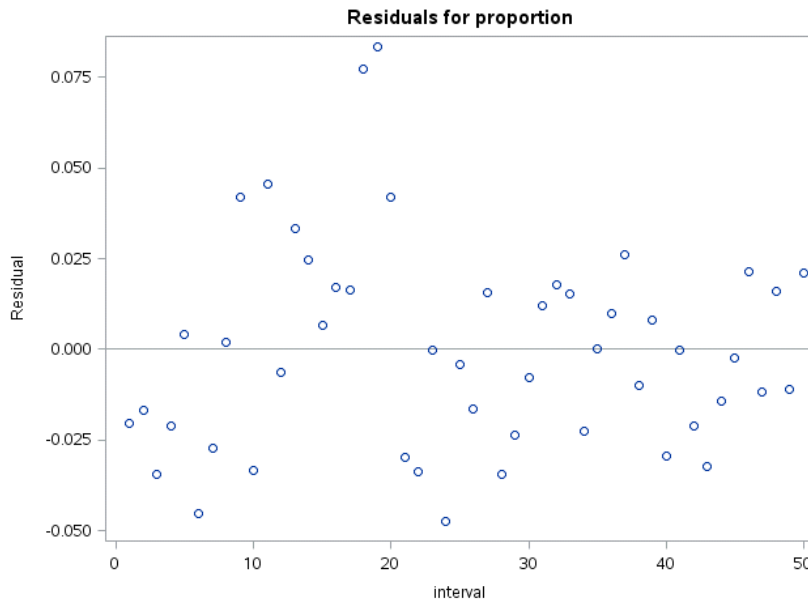
1)

We used the proc loess to smooth feature to the fit between the dependent and independent variables in order to assess for a linear or polynomial relationship. As is evident in the figure below we found no evidence of a linear relationship.

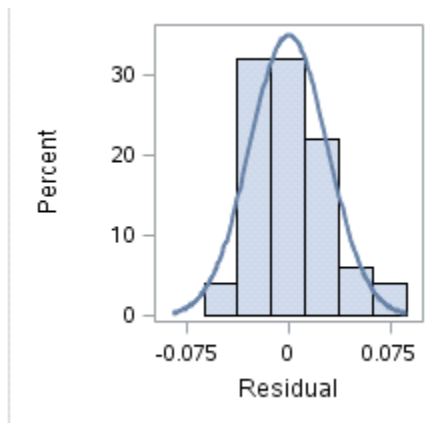


iii. Assessing the assumption of constant variance and normality

1)

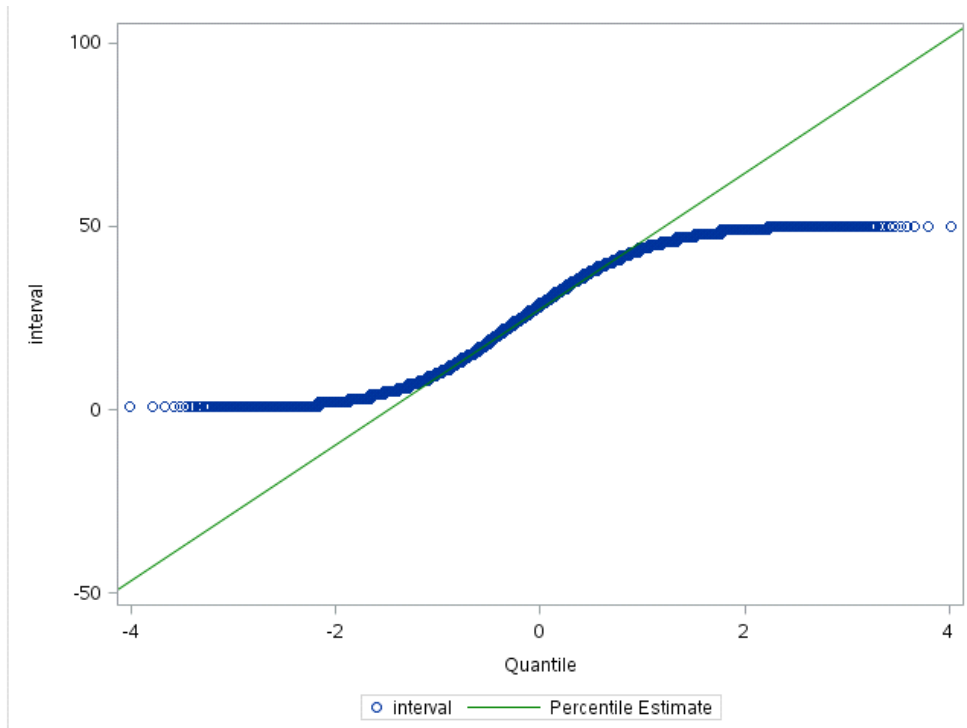


In the above figure we can check to see if the assumption of constant variance is met. We see that the distribution of the residuals is widespread which indicates evidence of non-constant variance. We can also check if the residuals are normally distributed and the residuals are symmetric around zero (as this would indicate the model is a good fit). Here we see that the residuals are not completely symmetric or normally distributed.



2) The above is a histogram of residuals density. We see that the data is slightly right skewed, indicating the assumption of normality may not be met.

3)



The above is a Q-Q plot used to assess for normality. If the data points fell on the diagonal, we would say that the assumption of normality had been met, however this is not the case. We also see a lack of a linear relationship. Explored modeling the data with an exponential and lognormal distribution but this was an even poorer fit for the data.

Appendix I-CERNER and ICES cohort build

i. CERNER

Table 1.1 Cohort inclusion/exclusion-CERNER				
Step	Description	#Excluded	#Encounters	#Patients
1	All Patients discharged from LHSC or St.Joseph's Health Care London between January 1 2011 and March 31 2018		14,954,198	896,999
2	Total BEFORE exclusions			
3	Length of stay(LOS)<1	14,244,921	709,277	337,285
4	Age <55 at registration	398,528	310,749	128,389
5	Encounter type not equal to 'Inpatient' or 'One Day S	90,844	219,905	110,145
6	Total AFTER exclusions		219,899	110,136

Note: Total number of hospitalizations after exclusion is greater than that after step 5 as CERNER continuously updates. The total number of hospitalizations was measured a few days after step 5.

ii. ICES

Table 1.2 Cohort inclusion/exclusion-ICES				
Step	Description	#Excluded	#Encounters	#Patients
1	All patients in Cerner dataset where patients that were prescribed one of the medications of interest. Align Cerner records with DAD based on discharge dates (Cerner, dischargedate=DAD ddate), IKN's, and institutions .		148,808	85,232
2	Total BEFORE exclusions			
3	Data cleaning: Invalid IKN, Age <66 yo or >105 yo, non-Ontario residents, site names not equal to 'UH', 'VH', 'St. Joseph's Campus'	45,692	103,116	58,508
4	Death date<= discharge date +5 days	10,073	93,043	53,357
5	Insttype not equal to 'AT' or 'AP' (non-psych patient)	0	93,043	53,357
6	Readmitted within 5 days of discharge	4,116	88,927	52,520
7	Total AFTER exclusions		88,927	52,520

Appendix J-Standardized differences for baseline conditions pre- vs. post-HUGO

	Total (N=)	Pre-HUGO (N=6,063)	Post-HUGO(N=12,342)	Standardized difference btw pre- and post-HUGO
Demographics				
Age				
Mean(SD)	75.22 ± 7.13	75.43 ± 7.10	75.12 ± 7.14	0.04
Median(IQR)	74 (69-80)	74 (69-80)	74 (69-80)	0.05
Sex				
Female(%N)	8,202 (44.6%)	2,669 (44.0%)	5,533 (44.8%)	
Male(%N)	10,203 (55.4%)	3,394 (56.0%)	6,809 (55.2%)	
Income				
Q1 (%N)	3,404 (18.5%)	1,072 (17.7%)	2,332 (18.9%)	0.03
Q2 (%N)	3,712 (20.2%)	1,206 (19.9%)	2,506 (20.3%)	0.01

Q3 (%N)	3,561 (19.3%)	1,164 (19.2%)	2,397 (19.4%)	0.01
Q4 (%N)	3,751 (20.4%)	1,219 (20.1%)	2,532 (20.5%)	0.01
Q5(%N)	3,878 (21.1%)	1,356 (22.4%)	2,522 (20.4%)	0.05
Long Term Care resident(%N)	132 (0.7%)	41 (0.7%)	91 (0.7%)	0.01
Comorbidities				
Charlson Comorbidity score				
Mean(SD)	0.80 ± 1.59	0.79 ± 1.55	0.81 ± 1.60	0.01
Median(IQR)	0 (0-1)	0 (0-1)	0 (0-1)	0
Prior conditions				
COPD (%N)	1,324 (7.2%)	450 (7.4%)	874 (7.1%)	0.01
Diabetes (%N)	1,230 (6.7%)	492 (8.1%)	738 (6.0%)	0.08
Hypertension (%N)	2,001 (10.9%)	774 (12.8%)	1,227 (9.9%)	0.09
Ischemic heart disease (%N)	3,922 (21.3%)	1,484 (24.5%)	2,438 (19.8%)	0.11
Liver disease (%N)	256 (1.4%)	65 (1.1%)	191 (1.5%)	0.04
Inflammatory bowel disease (%N)	2,166 (11.8%)	716 (11.8%)	1,450 (11.7%)	0
Renal disease (%N)	1,317 (7.2%)	401 (6.6%)	916 (7.4%)	0.03
Arthritis (%N)	133 (0.7%)	38 (0.6%)	95 (0.8%)	0.02
Stroke (%N)	523 (2.8%)	162 (2.7%)	361 (2.9%)	0.02
Cerebrovascular disease (%N)	678 (3.7%)	216 (3.6%)	462 (3.7%)	0.01
Dementia (%N)	85 (0.5%)	25 (0.4%)	60 (0.5%)	0.01
Congestive heart failure (%N)	2,990 (16.2%)	965 (15.9%)	2,025 (16.4%)	0.01
Admission characteristics				
Hospital los				

Mean(SD)	9.53 ± 12.57	10.51 ± 14.38	9.04 ± 11.55	0.11
Median(IQR)	6 (4-11)	7 (4-12)	6 (3-10)	0.21
Type of inpatient service				
Medical(%N)		39.67%	41.85%	
Surgical(%N)		56.08%	53.86%	
Geriatric(%N)		2.98%	2.53%	
Other(%N)		1.27%	1.76%	
ED to inpatient transfer(%N)	7,102 (38.6%)	2,433 (40.1%)	4,669 (37.8%)	0.05
ICU admission(%N)	5,016 (27.3%)	1,745 (28.8%)	3,271 (26.5%)	0.05
Surgery/procedure performed (Yes%N)	16,501 (89.7%)	5,329 (87.9%)	11,172 (90.5%)	0.08
Discharged to nursing home(%N)	433 (2.4%)	188 (3.1%)	245 (2.0%)	0.07
Prior healthcare utilization				
Primary care visits in previous year				
Mean (SD)	0.81 ± 1.45	0.99 ± 1.71	0.72 ± 1.29	0.18
Median(IQR)	0 (0-1)	0 (0-1)	0 (0-1)	0.21
Specialist care visits in previous year				
Mean(SD)	6.99 ± 12.45	7.15 ± 13.42	6.91 ± 11.94	0.02
Median(IQR)	3 (1-8)	3 (1-8)	3 (1-8)	0.01
Medication utilization				
Number of medication is previous year				
Mean(SD)	8.07 ± 5.17	8.06 ± 5.25	8.07 ± 5.14	0
Median(IQR)	7 (4-11)	7 (4-11)	7 (4-11)	0.01
Polypharmacy at admission (>=10 prescription medications)(%N)	6,324 (34.4%)	2,114 (34.9%)	4,210 (34.1%)	0.02

Note: Highlighted significant standardized differences

Appendix K-Assessment of segmented regression model

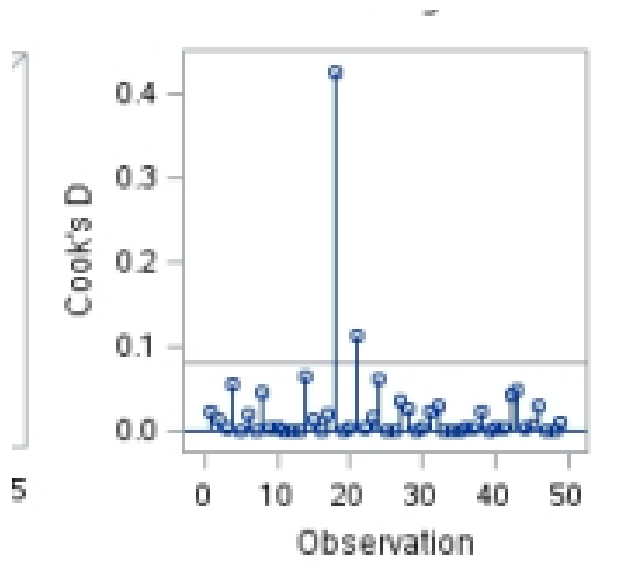
ii. Assessing autocorrelation (for independence)

1) Durbin-Watson stat

The Durban-Watson statistic ($DW=1.9005$) indicated no evidence of positive autocorrelation ($Pr < DW = 0.2112$) or negative autocorrelation ($Pr > 0.7888$).

ii. Assessing for presence of outliers and influential points

iv) Cook's D



As shown in the above figure there are two potential influential points- interval 18,21.

iii. Assessing goodness of fit

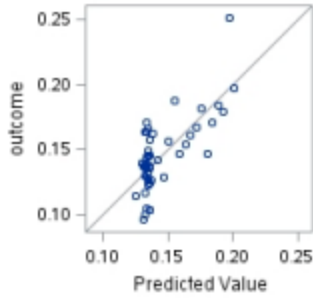
1) F statistic

F value is statistically significant ($F=16.03$, $p < 0.0001$) which would indicate that that independent variable is able to predict the independent variable.

2) R-sq statistic

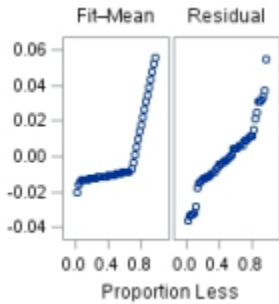
The R-sq and adjusted R-sq stat are neither high nor low ($R\text{-sq}=0.5166$, $\text{adj } R\text{-sq}=0.4843$). This R^2 value indicates that 48.43% of the variation in the dependent variable can be explained by the independent variable.

3) outcome vs. predicted value



We would expect the predicted values to lie on the 45° line if the model were a good fit (i.e. the model correctly predicted the behavior of the dependent variable). Here we see a much better fit as compared to the simple linear regression model (see appendix H).

4) fit-mean vs. proportion less, residual vs. proportion less

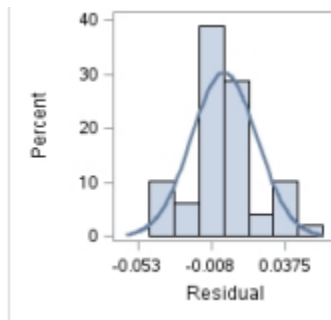


Here we see that the right-hand plot is slightly taller than the left-hand plot showing there is some variation not explained by the model, but overall a better fit than the simple linear regression model. The residuals roughly follow a diagonal and the distribution does not appear to be skewed.

ii. Assessing the assumption of linearity

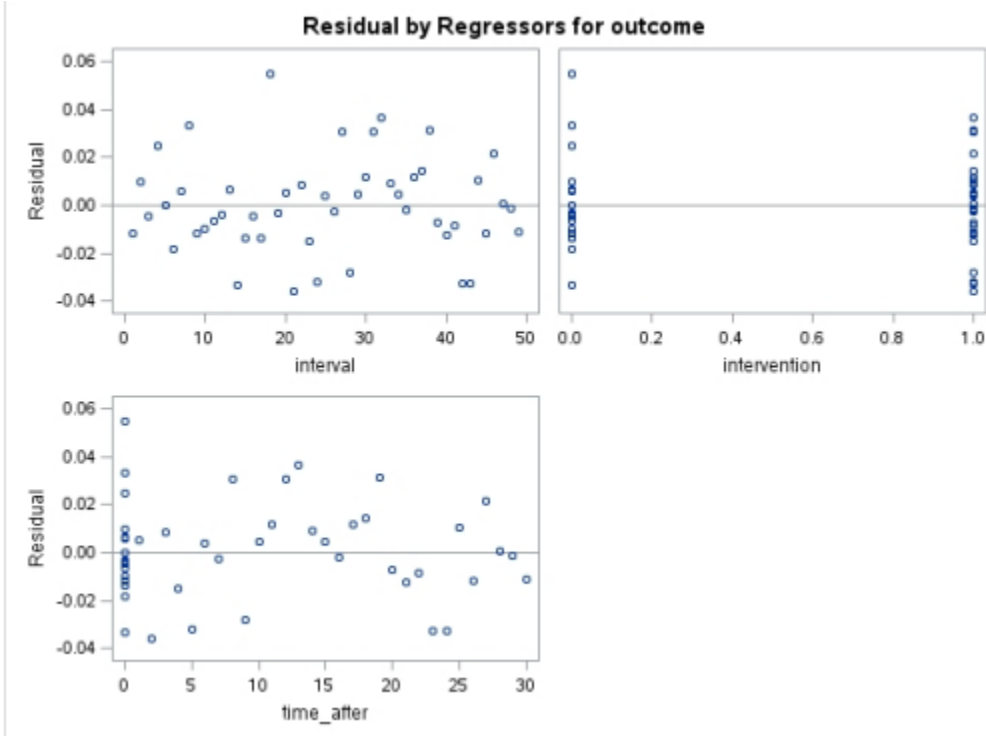
iii. Assessing the assumption of constant variance and normality

1) residual percent



The above is a histogram of residual density. The distribution indicated that the assumption of normality is met.

2) residuals by regressors for outcome (interval, intervention, time_after)



In the residual vs. intervention-what we observe a bimodal distribution, which is would expect given intervention is a binary outcome. In the residual vs. interval we observe a fairly random distribution, and in the residual vs. time_after we observe a fairly random distribution and the grouping at time zero is what we would expect to observe. Overall, this indicates that the residuals do not violate the assumption of homoscedasticity.

Appendix L-Sensitivity analyses

A) Remove interval 18 and 21 from analysis

i) Assessing autocorrelation

1) Durbin-Watson stat

The Durban-Watson statistic (DW=1.7552) indicated no evidence of positive autocorrelation ($Pr < DW = 0.0953$) or negative autocorrelation ($Pr > 0.9047$).

ii) interpretation of coefficients

$$\text{model: Proportion}(t) = 0.12687 + 0.00328 * \text{interval}(t) - 0.05572 * \text{intervention}(t) - 0.00337 * \text{time_after}(t)$$

$B_0 = 0.12687$; Just before the beginning of the observation period 12.69% of medications of interest were filled.

$B_1 = 0.00328$; There was significant interval to interval change in the proportion of medications of interest filled before HUGO's implementation ($p = 0.0002$).

$B_2 = -0.05572$; The proportion of medication of interest filled dropped abruptly by 5.57% after HUGO's implementation ($p < 0.0001$).

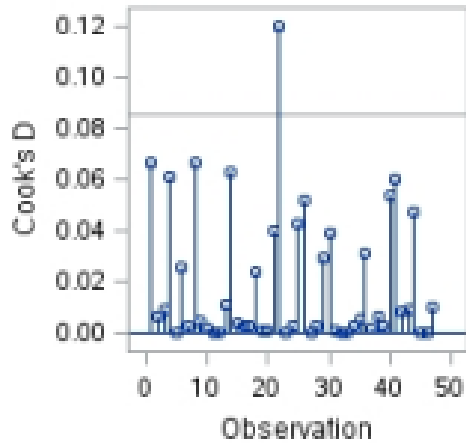
Note that this is a smaller level change (B_2) than in original analysis, however both are still significant

$B_3 = -0.00337$; There was significant interval to interval change in the proportion of hospitalizations with medications of interest filled after HUGO's implementation as compared to the interval to interval change in the proportion of hospitalizations with medications of interest filled before HUGO's implementation (i.e. there is a significant difference the slope of the pre- and post-HUGO segments) ($p = 0.0005$).

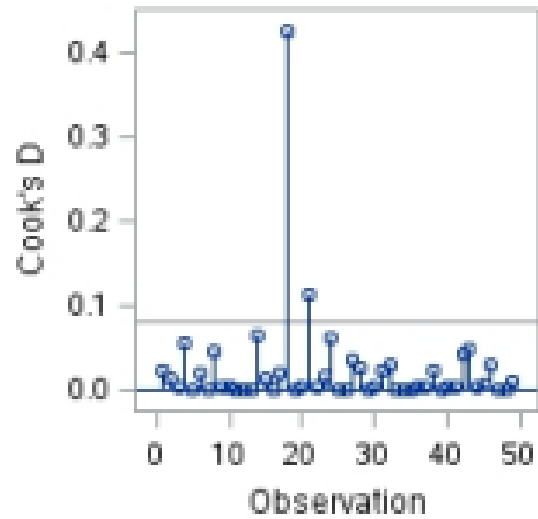
Note that this is a slightly smaller change in slope (between pre and post HUGO) vs. original the original analysis ($B_3 = -0.004032$)

iii) assessing outliers and influential points

1) Cook's D



vs.



The plot on left is from sensitivity analysis and plot on right is from original analysis. Potential leverage point at 23, which has a greater Cook's D than the potential influential points in the original model.

iv) Assessing goodness of fit

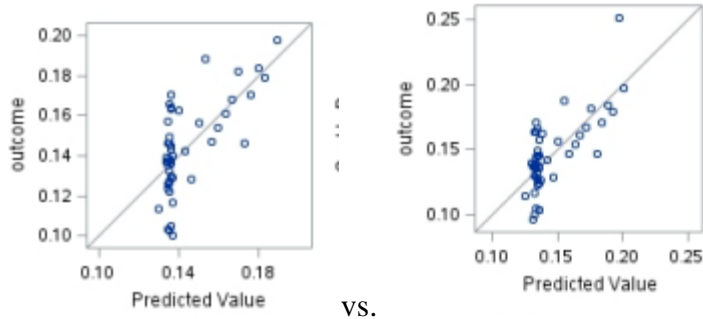
1) F stat

F value is statistically significant ($F=11.75$, $p<0.0001$) which would indicate that that independent variable is able to predict the independent variable. Similarly, the F value from the original analysis ($F=16.03$, $P<0.0001$) is statistically significant.

2) R-sq stat

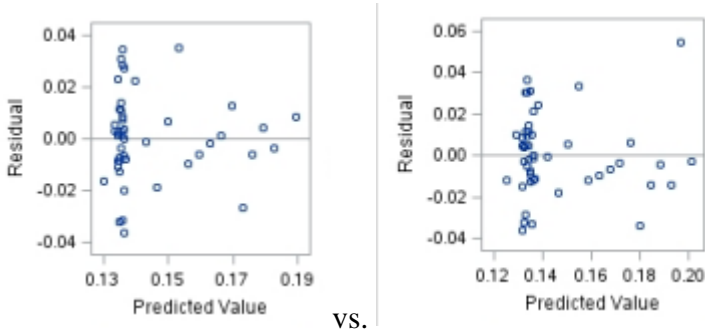
The R-sq and adjusted R-sq stat are neither high nor low ($R\text{-sq}=0.4506$, $\text{adj } R\text{-sq}=0.4122$). This R^2 value indicates that 41.22% of the variation in the dependent variable can be explained by the independent variable. This R-sq value is lower than the value from the original analysis ($R\text{-sq}=0.5166$, $\text{adj } R\text{-sq}=0.4843$), indicating the model may be a better fit with datapoints 18 and 21 included.

3) outcome vs. predicted value



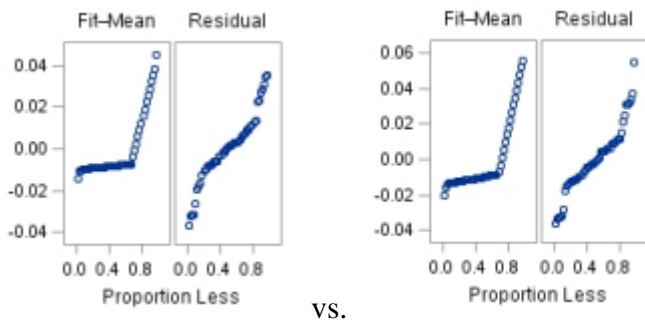
The plot on the left is from the sensitivity analysis, the plot of the right is from the original analysis. We see that clustering of data still present and the fit is essentially the same minus the outlier at 0.25 (outcome for plot on right).

4) residual vs. predicted



The plot on the left is from the sensitivity analysis, the plot of the right is from the original analysis. See that clustering of data still present. Fit essentially the same minus the outlier at 0.20,0.06 (predicted value, residual for plot on right).

5) fit-mean vs. proportion less, residual vs. proportion less



The plot on the left is from the sensitivity analysis, the plot of the right is from the original analysis. We see that the clustering of data is still present. The fit is essentially the same but the right plot extends to values of 0.06 for the fit-mean and residual.

Overall conclusion: Removing intervals 18 and 21 does not appear to generate a better fitting model than the original primary analysis.

B) excluding interval 19

i) Assessing for autocorrelation

1) Durbin-Watson stat

The Durbin-Watson statistic (DW=1.8465) indicated no evidence of positive autocorrelation (Pr<DW=0.1603) or negative autocorrelation (Pr>0.8397).

ii) interpretation of coefficients

$$\text{model: Proportion}(t) = 0.1206 + 0.004273 * \text{interval}(t) - 0.0705 * \text{intervention}(t) - 0.004093 * \text{time_after}(t)$$

$B_0=0.1206$; Just before the beginning of the observation period 12.06% of hospitalizations had a medication of interest filled.

$B_1=0.004273$; There was significant interval to interval change in the proportion of hospitalizations with a medication of interest filled before HUGO's implementation ($p<0.001$).

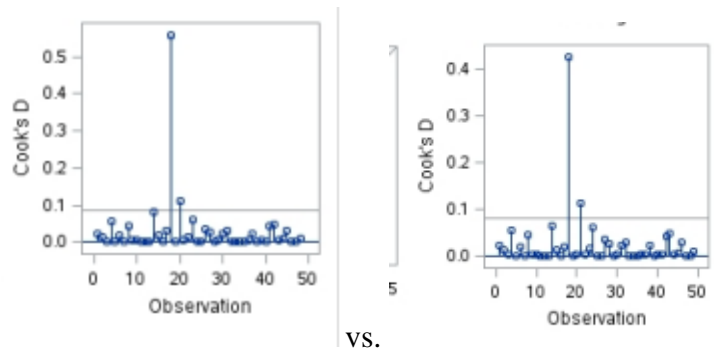
$B_2=-0.0705$; The proportion of hospitalizations with a medication of interest filled dropped abruptly by 7.05%% after HUGO's implementation ($p<0.0001$).

Note this is a slightly larger level change (B_2) than in original analysis ($B_2=-0.0698$) and both are significant.

$B_3=-0.004093$; There was significant interval to interval change in the proportion of hospitalizations with a medication of interest filled after HUGO's implementation as compared to the interval to interval change in the proportion of medications of interest filled before HUGO's implementation (i.e. there is a significant difference the slope of the pre- and post-HUGO segments) ($p=0.0003$).

iii) Assessing outliers and influential points

1) Cook's D



Plot on left is from sensitivity analysis and plot on right is from original analysis. Potential influential point at interval 18 and 21, with Cook's distance being greater at interval 18 in the left plot vs. the right plot.

iv) Assessing goodness of fit

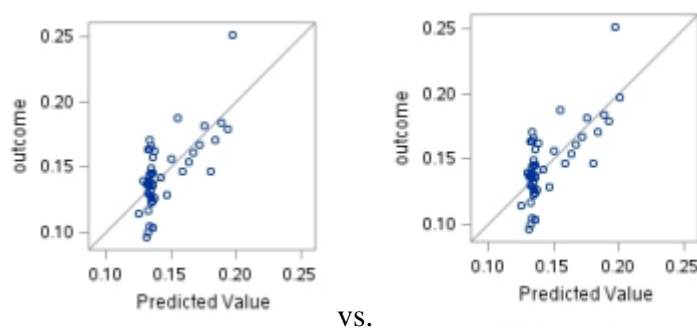
1) F stat

F value is statistically significant ($F=13.48$, $p<0.0001$) which would indicate that that independent variable is able to predict the independent variable.

2) R-sq stat

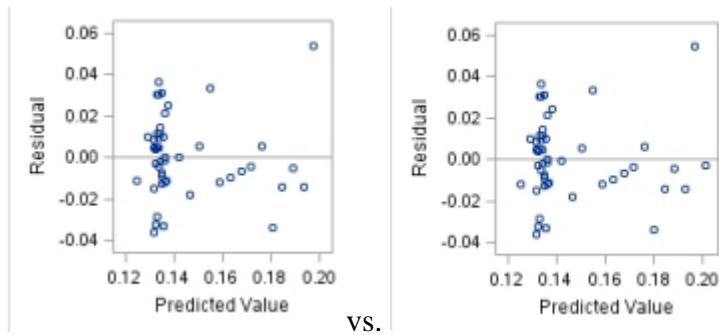
The R-sq and adjusted R-sq stat are neither high nor low ($R\text{-sq}=0.4789$, $\text{adj } R\text{-sq}=0.4434$). This R^2 value indicates that 44.34% of the variation in the dependent variable can be explained by the independent variable. This R-sq value is lower than the value from the original analysis ($R\text{-sq}=0.5166$, $\text{adj } R\text{-sq}=0.4843$), indicating the model may be a better fit with datapoint 19 included.

3) outcome vs. predicted value



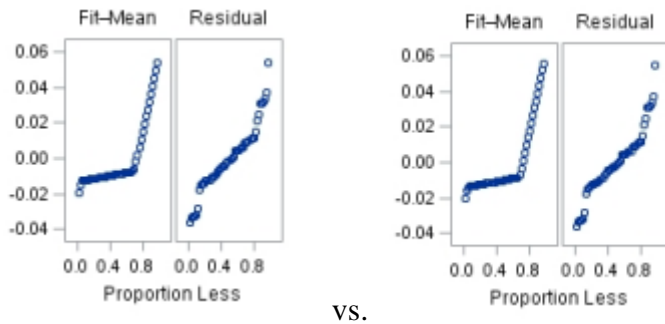
The plot on the left is from sensitivity analysis and plot on right is from original analysis. We see that clustering of data still present and the fit is essentially the same.

4) residual vs. predicted



The plot on left is from sensitivity analysis and plot on right is from original analysis. See that clustering of data still present. We observed no major differences in the plots.

5) fit-mean vs. proportion less, residual vs. proportion less



Plot on left is from sensitivity analysis and plot on right is from original analysis. No observed major differences in the plots.

Overall conclusion: We do not believe this sensitivity analysis conveys a better model fit than the original primary analysis.

Appendix M- Interpretation of the regression coefficients for the segmented linear regression model of our data with washout period

Variable	Parameter Estimate	P-value	Interpretation
Intercept	0.1206	<.0001	Just before the beginning of the observation period 12.1% of hospitalizations had medications of interest filled.
Baseline Trend	0.0043	<.0001	Baseline slope; there was significant interval to interval change in the proportion of hospitalizations with medications of interest filled before HUGO's implementation
Level Change after intervention	-0.0613	<.0001	The proportion of hospitalizations with a medication of interest filled decreased abruptly by 6.1% after HUGO's implementation
Trend Change after intervention	-0.0043	<.0001	There was a significant change in slope (decreasing) after implementation of HUGO

