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PHARMACY JUST-IN-TIME

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RSS Pharmacy Just-In-Time Training

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PHARMACY CALL-DOWN LIST
BOP/DHMH

Maryland Board of Pharmacy
Volunteer Call Down List
Based on availability
Updated July 2010

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Lack of resources (volunteer activators, Request unmanageable (100+,) Facilities no longer available
Utilities out of service

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Board Volunteer Hotline: 1-877-411-9691
MEMA: 1-877-636-2872

RSS CHECK-IN AND SETUP

Check In and Set-Up (page 1 of 2)

1. Arrival at RSS site
   A. Report at designated time/location
   B. Show IDs (photo ID, pharmacist's license, tech's registration mandatory)
   C. Report to staging area outside perimeter until cleared to enter

2. Check-in at warehouse
   A. If 1st RPh to arrive at site, show IDs, sign in, report to Incident Commander This person is designated as the pharmacy liaison until relieved by a BOP or MPVC member
   B Other pharmacists arriving are to report to pharmacy liaison.

3. Liaison Duties
   A. Check in with the Incident Commander
      i. Inquire about shifts/time frames/required functions/calculate number of pharmacy personnel desired.
   B Contact Board of Pharmacy (410-764-4755 or at (1-800-411-9691) to tell them that you have arrived at the State RSS site. Give them your contact information and inform them of:

i. The type and extent of the emergency as currently known
ii. The number of shifts requested per day by the RSS Incident Commander
iii. The anticipated number of pharmacy personnel needed per shift based on type of incident and required pharmacy functions
iv. The approximate time for the requested volunteers to report for their shifts
v. Directions to the site if unknown to BOP contact.
vi. Any information necessary for the pharmacy volunteers to gain access to the site
vii. Obtain any required personnel info from BOP to give to RSS personnel officer (i.e. pharmacist license/technician registration numbers)
viii Any other concerns of Incident Commander they should know about.
ix. Ask if there are any specific instructions from BOP

   C Provide pharmacy personnel list to RSS personnel officer
   D Identify, in conjunction with the Incident Commander, suitable work areas for use in data management and for warehouse duties, to include at least:
      i. Data entry
      ii. CDS operations
      iii. Repackaging
      iv. RSS personnel treatment

E. Work with Incident Commander to begin developing solutions to needs/concerns

F. Contact the DHMH liaison at the State RSS site (or at the State EOC site) and inquire about any immediate needs or issues. Inform the RSS Incident Commander of issues as necessary.

G. Assign Team leader(s) for each segment of pharmacy responsibility. Team leaders work with Liaison as needed for all tasks.

H. Working with team leaders, divide available pharmacy personnel and supplied manpower into teams

I. Arrange for JIT training for any supplied manpower and for subsequent shifts as they arrive (for the tasks they are assigned, and for each subsequent duty as they are assigned).

J. Track pharmacy personnel times and assigned duties via logs

K. Arrange in co-ordination with RSS Incident Commander for meals and lodging (if necessary) for pharmacy personnel

L. Keep in contact with the RSS Incident Commander throughout the emergency situation to apprise him/her of current status and potential problems and to receive additional or adjusted orders.

4. Pharmacy Team Initial Assignments

A. Set-up a suitable Operations Center for pharmacist team:

i. Limited access
ii. Temperature controlled (as much as possible)
    a. Fans
    b. Heaters
iii. Electricity access
iv. Adequate lighting
v. Furniture (tables, chairs, trash cans)
vi. Supplies (inventory & organize – see listing)

Initial Duties of Liaison/Lead Pharmacists

Initial Duties of Liaison/Lead Pharmacists (page 1 of 3)

1. **CDS Operations**:
   Pharmacist Liaison assigns a lead pharmacist to oversee CDS operations. Together they determine amount of pharmacy or other available personnel needed for this function.:

A. Sign for incoming CDS shipments
B. Obtain (create) beginning CDS inventory
C. Begin perpetual inventory system for each CDS
D. Apportion CDS as directed by DHMH EOC
E. Repackage if necessary for shipment to individual PODs
F. Label outgoing shipments with:
   a. Name(s) and strength(s) of CDS
   b. Lot numbers
   c. Expiration dates
   d. Quantity
   e. Destination
G. Work with Inventory Control to ensure that the CDS items are included with the other medications/supplies to be shipped to the correct individual PODS
H. Work with RSS Incident Commander & TARU to obtain additional medications and supplies if needed
I. Reconcile ending inventories with beginning inventories & shipments daily

2. Repackaging Operations: Pharmacist Liaison assigns a lead pharmacist to oversee the set-up and/or review completeness of a suitable area for repackaging (if necessary):

A. Temperature controlled area close to main medication staging area, but out of main traffic flow
B. Suitable access control
C. Exhaust fans
D. Electricity access
E. Access to computer & printer area
F. Furniture (tables and chairs)
G. Secure trash control
H. Supplies (inventory & organize – see listing)

3. . RSS Personnel Treatment/Dispensing: Pharmacist Liaison assigns a lead pharmacist to oversee the setting up of a suitable area for RSS personnel treatment to include:

A. Access control
B. Proximity to medications (repackaging)
C. Electricity access

D. Access to computer/printer
E. Supplies (inventory & organize – see listing)

4. Pharmacist Liaison assigns a team leader to be in charge of pharmacy supply requirements:
   A. Computer (data entry)
      i. Electricity access
      ii. Computer
      iii. Pharmacy discs (and/or flash drives) with required information
      iv. Laser Printer
      v. Tables
      vi. Chairs
      vii. Forms
      viii. Pens
      ix. Computer paper
      x. Clipboards
   B. Repackaging
      i. Temperature controlled area
      ii. Electricity access
      iii. Tables
      iv. Chairs
      v. Forms
      vi. Labels
      vii. Markers (fine & wide point)
      viii. Pens
      ix. Patient info sheets
      x. Baggies
      xi. Secure trash bins
   C. CDS Operations
      i. Perpetual inventory sheets
      ii. Labels
      iii. Markers (wide point)
      iv. Pens
      v. Folders
      vi. Clipboards
      vii. Paper clips & bulldog clamps
   D. Treatment Area
      i. Temperature controlled area
      ii. Electricity access
      iii. First aid kit
      iv. Labels
      v. Markers (fine point)
      vi. Pens
      vii. Patient info sheets

viii. Baggies
ix. Bags
x. Patient information sheets
xi. Signs for workflow and patient flow
xii. Secure trash bins
xiii. Clipboards
xiv. Paper clips & bulldog clamps

PHARMACY TEAM DUTIES

Pharmacy Team General Duties (page 1 of 1)

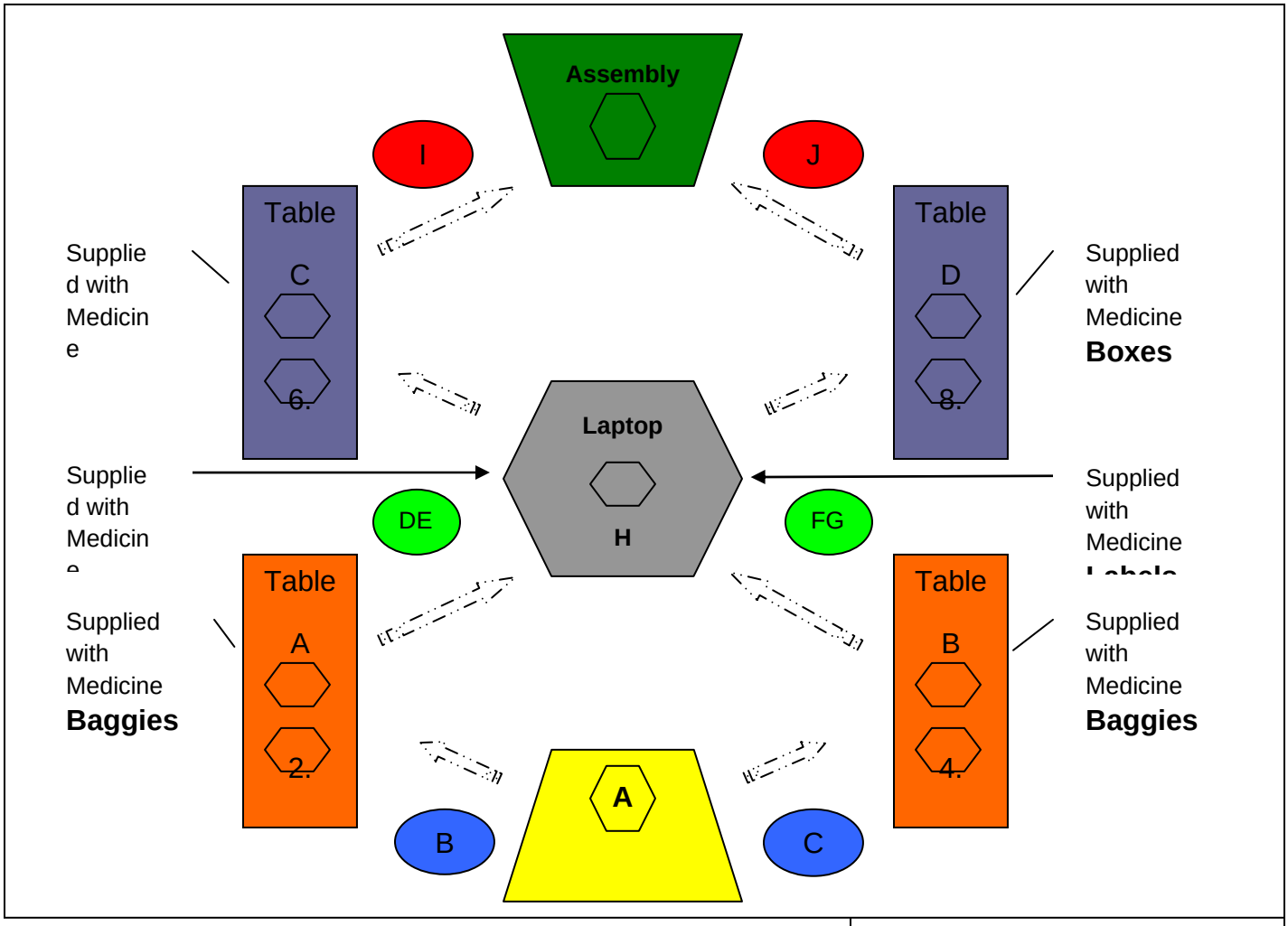
1. Team leader or designee determines available medications for defined pharmacy functions and reports need for supplying and re-supplying stock to pharmacist liaison:
    A. CDS medications
    B. Repackaging medications
    C. RSS personnel treatment medications
2. One or more pharmacists assigned to help inventory available medications/supplies.
    A. Assist Inventory Control Unit in breaking down incoming shipment totals to fill DHMH supplied apportionment lists
3. Team leaders assign pharmacy team & ancillary personnel duties & provide any necessary instructions
    A. Provide JIT training to ancillary personnel
    B. Rotate personnel/duties
    C. Assignments:
        i. Supply (materials)
        ii. Computer (data entry)
        iii. Repackaging
        iv. Labeling
        v. Inventory Control
        vi. Verify medications coming into site for quantity & accuracy
        vii. Verify medications leaving site to PODS for quantity & accuracy based on DHMH supplied apportionment lists
        viii. Provide medication counseling for RSS personnel
        ix. Record keeping:
            a. RSS Pharmacy Assignment Log (Appendix A)
            b. RSS Perpetual CDS Inventory Form (Appendix B)
            c. RSS Controlled Substance Bill of Laden (Appendix C)
            d. RSS Personnel Demographic & Health Screening Form (Appendix D)
            e. RSS Pharmacy Time & Expense Report (Appendix E)
            f. RSS Personnel Injury Form (Appendix F)
        x. Reporting issues to team leader & Liaison

REPACKAGING OPERATIONS

Repackaging Operations –(Refer to Diagram Below)

1. Pull medication from incoming shipments – Stage at staging area A
2. Verify medication is correct
3. Sort/divide medication – Persons B & C:
    A. If just one medication, divide between counting tables A & B
    B. If 2 medications, Drug X to table A & Drug Y to table B
    C. Supply tables A & B with meds & baggies
    D. Break open bulk containers
4. Counters/Baggers at stations 1 thru 4:
    A. Count into pre-determined dosage packs
    B. Bag
5. Persons at D/E and F/G:
    A. Transfer counted dosage packs to labeling tables C & D
    B. Supply labels to labeling tables C & D
    C. Remove accumulated trash
6. Person at station H oversees laptop & printer (blank labels)
7. Labelers at stations 5 thru 8:
    A. Write any additional required information on labels
    B. Affix labels to baggies
8. Persons at stations I & J:
    A. Box completed labeled dosage units
    B. Label boxes with drug name, dosage units, quantity & seal boxes
    C. Place full boxes neatly into outgoing assembly area
9. Person K moves boxes back to RSS regular staging areas, coordinating with RSS Inventory Control or designee

RSS Repackaging Process



Process Flow

1. Pull medication from incoming shipments – Stage at A
2. Verify medication is correct
3. Sort/divide medication – Persons B & C:
    a. If just one medication, divide between counting tables A & B
    b. If 2 medications, Drug X to Table A & Drug Y to Table B
    c. Supply counting tables A & B with meds & baggies
    d. Break open bulk containers
4. Counters/Baggers 1 thru 4:
    a. Count into pre-determined dosage packs
    b. Bag
5. Persons at D thru G:
    a. Transfer counted dosage packs to labeling tables C & D
    b. Supply labels to labeling tables
    c. Remove accumulated trash
6. Person H oversees laptop & printer (blank labels)
7. Labelers at 5 thru 8:
    a. Write any additional required information on labels

Flowchart

- Incoming Staging Area/Process Manager
- Sort/Divide Medication
- Counters/Baggers
- Transfer Medication to Labeling
- Laptop & Printer Operator

b. Affix labels to baggies

8. Persons I & J: (cont.)
    a. Box completed labeled dosage units
    b. Place full boxes neatly into outgoing assembly area
9. Person K moves boxes back to RSS regular staging areas

It will be imperative to rotate personnel often (at least every hour).

CHAIN OF CUSTODY REQUIREMENTS

CHAIN OF CUSTODY REQUIREMENTS FOR THE STRATEGIC NATIONAL STOCKPILE

Overview

The information below outlines standard procedures for accepting and transferring SNS assets in the state of Maryland. These standard procedures should be adhered to at all times. However, in the effort to ensure getting medication to the people is not delayed, these forms are not required to be signed on site. The Drug Enforcement Agency (DEA) does not require that any custody transfer forms including the DEA-222 Form be signed upon transfer if the transfer is occurring during a large scale public health emergency. The DEA does require that the forms be signed and delivered to all parties as soon as possible after the transfer has occurred.

1. **Taking Custody of SNS Assets at the RSS**

A. Push Package

1. Upon receipt of the Push Package at the RSS, it will be off-loaded by the RSS Staff, and checked through the Inventory Control Unit.
2. The Technical Advisory Response Unit (TARU) will provide the RSS Incident Commander a CDC Custody Transfer Form. This form will list all items that are to be transferred from the Federal level to the State level.
3. Because the Push Package contains controlled substances a DEA registrant, or designee, should also sign this form.
4. A DEA Form 222 should also be provided to and signed by the RSS DEA registrant, or designee, to transfer custody of the Schedule II substances.
5. Schedule IV substances should be signed for by the RSS DEA registrant, or designee, utilizing an appropriate custody transfer form.
6. The original signed forms should be given to the TARU Leader.
7. Copies of these forms should be provided to:
    a. The RSS Incident Commander
    b. The DEA Registrant
    c. The Inventory Control Unit
    d. The Pharmacist Liaison

B. Non-Controlled Managed Inventory

1. Upon receipt of non-controlled Managed Inventory at the RSS, it will be off-loaded by the RSS Staff.
2. The RSS Incident Commander, or designee, will sign the appropriate documents provided by the Delivery Truck Driver.
3. Signed original receipt documents will be given to the delivery truck driver.
4. After the delivery forms have been signed, invoices or merchandise listings will be provided to the RSS Inventory Control Unit for entry into the RSS Inventory Management System.
5. Copies of the invoices or merchandise listings will then be provided to the RSS Incident Commander, or his designee.

C. Controlled Managed Inventory

1. Upon the receipt of controlled substances at the RSS, they will be off-loaded by the RSS Staff.
2. The RSS DEA Registrant, or his designee will acknowledge receipt of these controlled substances by signing the appropriate delivery forms, which may include DEA Form 222s.
3. The original signed delivery form(s) will be given to the delivery truck driver.
4. Copies of the invoices or merchandise listings will be given to:
   a. The RSS Incident Commander
   b. The RSS DEA Registrant
   c. The RSS Inventory Control Unit
   d. The Pharmacist Liaison

2. **Storing Controlled Substances at the RSS**

A. Controlled substances will arrive at the RSS in hardened, DEA-approved containers.

B. Abiding to the DEA Requirements all controlled substances will be left in their container until they are ready to be picked for an order.

C. Every effort will be utilized to store the DEA approved containers in a limited access area identified by the Pharmacist Liaison in coordination with the RSS Incident Commander.

D. A padlock, or other approved method, will be required to secure the container, if no padlock, or other approved method, is present, a law enforcement officer from the DGS Police will provide security to the area.

3. Transfer of Custody from the RSS to POD Sites and/or Treatment Centers.

A. RSS Assets with No Controlled Substances

1. When the assets have been apportioned, or when re-supply requests have been approved, RSS inventory pick sheets will be generated from the RSS Inventory Management System, and the appropriate materials will be pulled, stacked on pallets and secured for shipment.
2. Orders will be verified for accuracy by the Quality Assurance Unit prior to loading on the delivery vehicle(s).
3. Four copies of the RSS Inventory Pick Sheet will be given to the RSS delivery truck driver:
   a. RSS Signature Copy
   b. Bill of Lading Copy
   c. POD/Treatment Center Record Copy.
   d. POD/ Treatment Center Return Copy.
4. The RSS delivery driver will sign all four copies of the RSS Inventory Pick Sheet and keep them with him, except for the RSS Signature Copy. This copy will be given to the RSS Distribution Chief prior to the truck’s departure from the RSS.

5. Upon arrival to the POD or Treatment Center, the RSS delivery driver will have the facility representative sign all three remaining copies (b – d above).
6. The Pod/Treatment Center will retain the POD/Treatment Center Record Copy.
7. The RSS delivery driver retains the Bill of Lading Copy for return to his/her employer.
8. The RSS delivery driver is responsible to deliver the POD/Treatment Center Return Copy to the Distribution Chief upon his arrival back to the RSS.

B. RSS Assets with Controlled Substances

1. When the assets have been apportioned, or when re-supply requests have been approved, inventory pick sheets will be generated from the Inventory Management System, and the appropriate materials will be pulled, stacked on pallets and secured for shipping.
2. In this version of the plan there are no plans to ship Schedule II controlled medications to PODs. Schedule II controlled medications would only be shipped to specified Treatment Centers. Need to verify if any Schedule medications may be shipped to certain PODs (includes lorazepam & diazepam)
3. Orders containing Controlled drugs will be given to the Controlled Substance Officer of the Re-Packaging Unit for filling. All boxes of the order that contain controlled substance will have a colored tape wrapped around them, or otherwise distinctively marked, to identify them as containing controlled medications.
4. All boxes containing controlled medications will be stacked on the top outside portion of the pallet so they are clearly visible.
5. The Controlled Substance Officer will inform the both the Quality Assurance Team and the Shipping and Receiving Unit so that they are aware of the presence of controlled substances in the order.
6. Orders should be checked for accuracy by the Quality Assurance Unit prior to being loaded onto the RSS delivery vehicle(s).
7. DEA Form 222(s) will be completed by the Controlled Substance Officer, if required, and given to the RSS truck driver, along with the four copies of the RSS inventory pick sheet.
    a. RSS Signature Copy.
    b. Bill of Lading Copy.
    c. POD/Treatment Center Record Copy.
    d. POD/Treatment Center Return Copy.
8. The RSS delivery driver will sign all four copies of the RSS Inventory Pick Sheet and keep them with him except for the RSS Signature Copy which will be given to the RSS Distribution Chief prior to the truck's departure from the RSS.

9. When the RSS delivery driver arrives at the Treatment Center he/she will have the facility representative sign all three remaining copies (b – d above) and have the DEA Registrant, or his designee, sign the DEA 222 Form(s) and for the receipt of any other controlled medications.
10. The Treatment Center will retain a copy of the DEA Form 222 and the original will be returned to the RSS by the RSS truck driver, and given to the RSS Controlled Substance Officer.
11. The Treatment Center will retain the~~ir~~ POD/Treatment Center Record Copy of the RSS Inventory Pick Sheet.
12. The RSS delivery driver will retain the Bill of Lading Copy for return to his/her employer.
13. The RSS delivery driver is responsible to deliver the POD/Treatment Center Return Copy to the Distribution Chief upon his arrival back to the RSS.

4. Recovery and Return of SNS Assets

A. RSS Assets with No Controlled Substances

1. Once notified by DHMH of the location(s) and quantities of recoverable assets, the RSS Incident Commander, or his designee, in coordination with the RSS Management Unit will prepare Pickup Forms to recover unused assets from the POD/Treatment Centers:
    a. RSS Pickup Return Signature Copy.
    b. Bill of Lading Pickup Copy.
    c. POD/Treatment Center Pickup Record Copy.
    d. POD/Treatment Center Pickup Return Copy
2. The RSS pickup driver will sign all copies of the RSS Pickup Sheet and keep them with him. The RSS Signature Pickup Copy will be signed by the RSS Distribution Chief, or his designee, upon the pickup truck's return to the RSS.
3. Upon arrival to the POD or Treatment Center, the RSS pickup driver will have the facility representative sign the three copies identified as b – e above.
4. The Pod/Treatment Center will retain the POD/Treatment Center Pickup Record Copy.
5. The RSS pickup driver retains the Bill of Lading Pickup Copy for return to his/her employer.
6. The RSS pickup driver is responsible to deliver the POD/Treatment Center Pickup Return Copy to the Distribution Chief, or his designee, upon his arrival back to the RSS.
7. Upon the receipt of the returned non-controlled Managed Inventory at the RSS, it will be off-loaded by the RSS Staff.

8. After the pickup forms have been signed, the returned supplies/medications should be checked for accuracy by the Quality Assurance Unit.
9. The supplies/medications listings will be provided to the RSS Inventory Control Unit for entry into the RSS Inventory Management System as returns.
10. Copies supplies/merchandise listings will then be provided to the RSS Incident Commander, or his designee.
11. The RSS Inventory Control Unit will prepare a list of supplies/medications for return to the SNS or for distribution as directed by TARU.
12. The Incident Commander, or his designee, will contact TARU and, if so instructed, have the Inventory Control Unit prepare 3 copies of a pick list for return to the SNS or for distribution as directed by TARU.
13. The Incident Commander, or his designee, will sign all 3 copies, have the TARU designee sign all copies and keep one copy and forward the remaining signed copy to CDC.

B. RSS Assets with Controlled Substances

1. In this version of the plan there are no plans to pickup Schedule II controlled medications.
2. Once notified by DHMH of the location(s) and quantities of recoverable assets, the RSS Incident Commander, or his designee, in coordination with the RSS Management Unit will prepare Pickup Forms to recover unused assets from the POD/Treatment Centers:
    a. RSS Pickup Return Signature Copy.
    b. Bill of Lading Pickup Copy.
    c. POD/Treatment Center Pickup Record Copy.
    d. POD/Treatment Center Pickup Return Copy
    e. Appropriate Custody Transfer Forms
3. The RSS pickup driver will sign all four copies of the RSS Pickup Sheet and keep them with him. The RSS Signature Pickup Copy will be signed by the RSS Distribution Chief, or his designee, upon the pickup truck's return to the RSS.
4. Upon arrival to the POD or Treatment Center, the RSS pickup driver will have the facility representative sign the three copies identified as b – e above.
5. The Pod/Treatment Center will retain the POD/Treatment Center Pickup Record Copy.
6. The RSS pickup driver retains the Bill of Lading Pickup Copy for return to his/her employer.

7. The RSS pickup driver is responsible to deliver the POD/Treatment Center Pickup Return Copy and the appropriate Custody Transfer Forms to the Distribution Chief, or his designee, upon his arrival back to the RSS.
8. Upon the receipt of the returned non-controlled Managed Inventory at the RSS, it will be off-loaded by the RSS Staff.
9. After the pickup forms have been signed, the returned supplies/medications should be checked for accuracy by the Quality Assurance Unit.
10. The supplies/medications listings will be provided to the RSS Inventory Control Unit for entry into the RSS Inventory Management System as returns.
11. Copies supplies/merchandise listings will then be provided to the RSS Incident Commander, or his designee.
12. The RSS Inventory Control Unit will prepare a list of supplies/medications for return to the SNS or for distribution as directed by TARU.
13. The Incident Commander, or his designee, will contact TARU and, if so instructed, have the Inventory Control Unit prepare 3 copies of a pick list for return to the SNS or for distribution as directed by TARU.
14. The Incident Commander, or his designee, will sign all 3 copies, have the TARU designee sign all copies and keep one copy and forward the remaining signed copy to CDC.

**** The SNS Coordinator maintains a list of designated DEA Form 222 signatures, and those individuals authorized by the Local Health Officer to sign for SNS Assets.

COMPOUNDING MEDICATIONS AND DOSAGES

COMPOUNDING MEDICATIONS

AND DOSAGES

INDEX

Compounding Medications And Dosage Index

1. Ciprofloxacin – Anthrax
2. Ciprofloxacin – Plague
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5. Doxycycline – Anthrax
6. Doxycycline – Plague
7. Doxycycline – Tularemia

Ciprofloxacin -Anthrax

For infants and children exposed to anthrax

Once you have been notified by your federal, state, or local authorities that you have been exposed to anthrax, it may be necessary to prepare emergency doses of ciprofloxacin for infants and children using ciprofloxacin tablets.

You will need:

One (1) 500 milligram (mg) ciprofloxacin tablet
Metal teaspoon
Measuring spoons [1 teaspoon (tsp); and ½ teaspoon (tsp)]
(NOTE measuring spoons are preferred, however if not available, use the metal spoon to grind, measure and give the medicine)
1 small bowl
One of these foods
chocolate syrup
maple syrup
caramel syrup
ketchup

Directions:

Put one (1) 500-mg ciprofloxacin tablet into a small bowl. Crush the tablet with the back of the metal spoon until no large pieces are seen.

Add four (4) level teaspoons (tsp) of a food to the ciprofloxacin and water mixture. Stir them together until the drug looks evenly mixed with the food.

3. See next page for Ciprofloxacin dosing:

Ciprofloxacin - Anthrax

How Much of the Ciprofloxacin Mixture to Give a Child

The number of teaspoons of the ciprofloxacin mixture to give a child depends on the child's weight. If child's weight is unknown, weigh child before giving the first dose. The chart tells you how much to give a child for one dose. You should give child two doses each day (one in the morning and one in the evening) for 10 days.

If the child weighs	Give the child
4 - 6.5 pounds (lbs.)	One half (1/2) teaspoon (tsp) (2.5mL) of the ciprofloxacin mixture
7 - 12.5 (lbs.)	One (1) teaspoon (5mL) of the ciprofloxacin mixture
13 - 18 (lbs.)	One and one half (1 ½) teaspoons (7.5mL) of the ciprofloxacin mixture
19 - 24 (lbs.)	Two (2) teaspoons (10mL) of the ciprofloxacin mixture
25 - 30 (lbs.)	Two and one half (2 ½) teaspoons (12.5mL) of the ciprofloxacin mixture
31 - 37 (lbs.)	Three (3) teaspoons (15mL) of the ciprofloxacin mixture
38 - 43 (lbs.)	Three and one half (3 ½) teaspoons (17.5mL) of the ciprofloxacin mixture
44 - 49 (lbs.)	Four (4) teaspoons (20mL) of the ciprofloxacin mixture
50 - 55 (lbs.)	Four and one half (4 ½) teaspoons (22.5mL) of the ciprofloxacin mixture
56 - 61 (lbs.)	Five (5) teaspoons (25mL) of the ciprofloxacin mixture
62 - 67 (lbs.)	Five and one half (5 ½) teaspoons (27.5mL) of the ciprofloxacin mixture
68 - 73 (lbs.)	Six (6) teaspoons (30mL) of the ciprofloxacin mixture (or 1 tablet)
Children heavier than 73 pounds who are exposed to anthrax should take one (1) 500-mg tablet of ciprofloxacin two times a day (at the same time each day if possible) for 10 days. If the child cannot swallow tablets, use the directions for preparing a mixture and give 6 teaspoons twice a day	

How already prepared Ciprofloxacin mixture should be stored

Prepare the Ciprofloxacin mixture daily; store mixture in covered container and refrigerate. Mixture will keep for at least 24 hours refrigerate

Ciprofloxacin – Plague

For infants and children exposed to plague

Once you have been notified by your federal, state, or local authorities that you have been exposed to plague, it may be necessary to prepare emergency doses of ciprofloxacin for infants and children using ciprofloxacin tablets.

You will need:

One (1) 500 milligram (mg) ciprofloxacin tablet
Metal teaspoon
Measuring spoons [1 teaspoon (tsp); and ½ teaspoon (tsp)]
(NOTE measuring spoons are preferred, however if not available, use the metal spoon to grind, measure and give the medicine)
1 small bowl
One of these foods
chocolate syrup
maple syrup
caramel syrup
ketchup

Directions:

Put one (1) 500-mg ciprofloxacin tablet into a small bowl. Crush the tablet with the back of the metal spoon until no large pieces are seen.

Add four (4) level teaspoons (tsp) of a food to the ciprofloxacin and water mixture. Stir them together until the drug looks evenly mixed with the food.

3. See next page for Ciprofloxacin dosing for plague:

Ciprofloxacin - Plague

How Much of the Ciprofloxacin Mixture to Give a Child

The number of teaspoons of the ciprofloxacin mixture to give a child depends on the child's weight. If child's weight is unknown, weigh child before giving the first dose. The chart tells you how much to give a child for one dose. You should give child two doses each day (one in the morning and one in the evening) for 7 days.

If the child weighs	Give the child
4 – 5 pounds (lbs.)	One half (1/2) teaspoon (tsp) (2.5mL) of the ciprofloxacin mixture
5.5 -10 (lbs.)	One (1) teaspoon (5mL) of the ciprofloxacin mixture
11 – 15 (lbs.)	One and one half (1 ½) teaspoons (7.5mL) of the ciprofloxacin mixture
16 - 20 (lbs.)	Two (2) teaspoons (10mL) of the ciprofloxacin mixture
21 – 25 (lbs.)	Two and one half (2 ½) teaspoons (12.5mL) of the ciprofloxacin mixture
26 -30 (lbs.)	Three (3) teaspoons (15mL) of the ciprofloxacin mixture
31 – 35 (lbs.)	Three and one half (3 ½) teaspoons (17.5mL) of the ciprofloxacin mixture
36 – 40 (lbs.)	Four (4) teaspoons (20mL) of the ciprofloxacin mixture
41 – 45 (lbs.)	Four and one half (4 ½) teaspoons (22.5mL) of the ciprofloxacin mixture
46 – 50 (lbs.)	Five (5) teaspoons (25mL) of the ciprofloxacin mixture
51 – 55 (lbs.)	Five and one half (5 ½) teaspoons (27.5mL) of the ciprofloxacin mixture
56 -60 (lbs.)	Six (6) teaspoons (30mL) of the ciprofloxacin mixture (or 1 tablet)
Children heavier than 60 pounds who are exposed to plague should take one (1) 500-mg tablet of ciprofloxacin two times a day (at the same time each day if possible) for 7 days. If the child cannot swallow tablets, use the directions for preparing a mixture and give 6 teaspoons twice a day	

How already prepared Ciprofloxacin mixture should be stored

Prepare the Ciprofloxacin mixture daily; store mixture in covered container and refrigerate. Mixture will keep for at least 24 hours refrigerated.
Throw away any unused portions.

Ciprofloxacin – Tularemia

For infants and children exposed to tularemia

Once you have been notified by your federal, state, or local authorities that you have been exposed to tularemia, it may be necessary to prepare emergency doses of ciprofloxacin for infants and children using ciprofloxacin tablets.

You will need:

One (1) 500 milligram (mg) ciprofloxacin tablet
Metal teaspoon
Measuring spoons [1 teaspoon (tsp); and ½ teaspoon (tsp)]
(NOTE measuring spoons are preferred, however if not available, use the metal spoon to grind, measure and give the medicine)
1 small bowl
One of these foods
chocolate syrup
maple syrup
caramel syrup
ketchup

Directions:

Put one (1) 500-mg ciprofloxacin tablet into a small bowl. Crush the tablet with the back of the metal spoon until no large pieces are seen.

Add four (4) level teaspoons (tsp) of a food to the ciprofloxacin and water mixture. Stir them together until the drug looks evenly mixed with the food.

3. See next page for Ciprofloxacin dosing for tularemia:

Ciprofloxacin – Tularemia

How Much of the Ciprofloxacin Mixture to Give a Child

The number of teaspoons of the ciprofloxacin mixture to give a child depends on the child's weight. If child's weight is unknown, weigh child before giving the first dose. The chart tells you how much to give a child for one dose. You should give the child two doses each day (one in the morning and one in the evening) for 14 days.

If the child weighs	Give the child
4 – 6.5 pounds (lbs.)	One half (1/2) teaspoon (tsp) (2.5mL) of the ciprofloxacin mixture
7 – 12.5 (lbs.)	One (1) teaspoon (5mL) of the ciprofloxacin mixture
13 – 18 (lbs.)	One and one half (1 ½) teaspoons (7.5mL) of the ciprofloxacin mixture
19 – 24 (lbs.)	Two (2) teaspoons (10mL) of the ciprofloxacin mixture
25 – 30 (lbs.)	Two and one half (2 ½) teaspoons (12.5mL) of the ciprofloxacin mixture
31 – 37 (lbs.)	Three (3) teaspoons (15mL) of the ciprofloxacin mixture
38 – 43 (lbs.)	Three and one half (3 ½) teaspoons (17.5mL) of the ciprofloxacin mixture
44 - 49 (lbs.)	Four (4) teaspoons (20mL) of the ciprofloxacin mixture
50 – 55 (lbs.)	Four and one half (4 ½) teaspoons (22.5mL) of the ciprofloxacin mixture
56 – 61 (lbs.)	Five (5) teaspoons (25mL) of the ciprofloxacin mixture
62 – 67 (lbs.)	Five and one half (5 ½) teaspoons (27.5mL) of the ciprofloxacin mixture
68 – 73 (lbs.)	Six (6) teaspoons (30mL) of the ciprofloxacin mixture (or 1 tablet)
Children heavier than 73 pounds who are exposed to tularemia should take one (1) 500-mg tablet of ciprofloxacin two times a day (at the same time each day if possible) for 14 days. If the child cannot swallow tablets, use the directions for preparing a mixture and give 6 teaspoons twice a day	

How already prepared Ciprofloxacin mixture should be stored

- Prepare the Ciprofloxacin mixture daily; store mixture in covered container and refrigerate. Mixture will keep for at least 24 hours refrigerated.
- Throw away any unused portions.

Ciprofloxacin – Kidney Disease Dosing

Special Cipro (Ciprofloxacin) Dosage Instructions for Children on Dialysis or with Decreased Kidney Function

Cipro (ciprofloxacin) should be used with caution by people on dialysis or with decreased kidney function.

For children weighing 73 pounds or less –

Give them their first dose of crushed Cipro mixture using the instructions on the next page (showing how much to give according to their weight) and contact your physician.

If you cannot contact your child's physician before the next dose is due, use the information in Table A below to reduce the amount of Cipro to give, while continuing to try to contact your physician.

If you do not know your child's creatinine clearance, give them one-half the amount for their weight every 12 hours until you are able to contact your physician.

TABLE A: Children Weighing 73 Pounds or Less	
Kidney Function	Amount of Mixture to Give Using the Cipro Mixture Instructions on the Next Page
Creatinine Clearance > 50ml/min	The full amount for their weight every 12 hours
Creatinine Clearance = 30-50 ml/min	One-half the amount for their weight every 12 hours
Creatinine Clearance = 5-29 ml/min	One-half the amount for their weight every 18 hours
On Hemodialysis or Peritoneal Dialysis	One-half the amount for their weight every 24 hours (after dialysis)

For children weighing more than 73 pounds and able to swallow tablets -

Give them their first Cipro tablet (500 mg) and contact your physician.

If you cannot contact your child's physician before the next dose is due, give them the Cipro tablets using the schedule in Table B below, while continuing to try to contact your physician.

If you do not know your child's creatinine clearance, give them one-half tablet (250 mg) every 12 hours until you are able to contact your physician.

TABLE B: Children Weighing More than 73 Pounds and Able to Swallow Tablets	
Kidney Function	Dose
Creatinine Clearance > 50ml/min	One tablet (500 mg) every 12 hours
Creatinine Clearance = 30-50 ml/min	One-half tablet (250 mg) every 12 hours
Creatinine Clearance = 5-29 ml/min	One-half tablet (250 mg) every 18 hours
On Hemodialysis or Peritoneal Dialysis	One-half tablet (250 mg) every 24 hours (after dialysis)

Doxycycline - Anthrax

For infants and children exposed to anthrax

*Once you have been notified by your federal, state, or local authorities that you have been exposed to anthrax, it may be necessary to prepare **emergency** doses of doxycycline for infants and children using doxycycline tablets.*

You will need:

One (1) 100 milligram (mg) doxycycline tablet
Metal teaspoon
Measuring spoons [1 teaspoon (tsp); and ½ teaspoon (tsp)]
(NOTE measuring spoons are preferred, however if not available, use the metal spoon to grind, measure and give the medicine)
1 small bowl
One of these foods
chocolate syrup
maple syrup
caramel syrup
applesauce

Directions:

Put one (1) 100-mg doxycycline tablet into a small bowl. Crush the tablet with the back of the metal spoon until no large pieces are seen.

Add four (4) level teaspoons (tsp) of a food to the crushed doxycycline. Stir them together until the drug looks evenly mixed with the food.

3. See next page for Doxycycline dosing for anthrax:

Doxycycline - Anthrax

How Much of the Doxycycline Mixture to Give a Child

The number of teaspoons of the doxycycline mixture to give a child depends on the child's weight. **If child's weight is unknown, weigh child before giving the first dose.** The chart tells you how much to give a
child for one dose. You should give the child **two doses** each day (one in the morning and one in the afternoon) **for 10 days**.

If the child weighs	**Give the child**
4 – 11 pounds (lbs.)	**One half (1/2) teaspoon (tsp) (2.5mL)** of the doxycycline mixture
12 – 22 (lbs.)	**One (1) teaspoon (5mL)** of the doxycycline mixture
23 – 33 (lbs.)	**One and one half (1 ½) teaspoons (7.5mL)** of the doxycycline mixture
34 - 45 (lbs.)	**Two (2) teaspoons (10mL)** of the doxycycline mixture
46 - 55 (lbs.)	**Two and one half (2 ½) teaspoons (12.5mL)** of the doxycycline mixture
56 - 65 (lbs.)	**Three (3) teaspoons (15mL)** of the doxycycline mixture
66 - 77 (lbs.)	**Three and one half (3 ½) teaspoons (17.5mL)** of the doxycycline mixture
78 - 88 (lbs.)	**Four (4) teaspoons (20mL)** of the doxycycline mixture (or 1 tablet)
Children heavier than 88 pounds who are exposed to anthrax should take one (1) 100-mg tablet of doxycycline two times a day (at the same time each day if possible) **for 10 days**. If the child cannot swallow tablets, use the directions for preparing a mixture and give 4 teaspoons twice a day.	

How already prepared Doxycycline mixture should be stored

Prepare the doxycycline mixture daily; store mixture in covered container and refrigerate.

- Doxycycline mixed with any of the recommended foods will keep for at least 24 hours.
- Throw away any unused portions.

Doxycycline – Plague

For infants and children exposed to plague

Once you have been notified by your federal, state, or local authorities that you have been exposed to plague, it may be necessary to prepare emergency doses of doxycycline for infants and children using doxycycline tablets.

You will need:

One (1) 100 milligram (mg) doxycycline tablet
Metal teaspoon
Measuring spoons [1 teaspoon (tsp); and ½ teaspoon (tsp)]
(NOTE measuring spoons are preferred, however if not available, use the metal spoon to grind, measure and give the medicine)
1 small bowl
One of these foods
chocolate syrup
maple syrup
caramel syrup
applesauce

Directions:

Put one (1) 100-mg doxycycline tablet into a small bowl. Crush the tablet with the back of the metal spoon until no large pieces are seen.

Add four (4) level teaspoons (tsp) of a food to the crushed doxycycline. Stir them together until the drug looks evenly mixed with the food.

3. See next page for Doxycycline dosing for plague:

Doxycycline - Plague

How Much of the Doxycycline Mixture to Give a Child

The number of teaspoons of the doxycycline mixture to give a child depends on the child's weight. If child's weight is unknown, weigh child before giving the first dose. The chart tells you how much to give the child for one dose. You should give the child two doses each day (one in the morning and one in the afternoon) for 7 days.

If the child weighs	Give the child
4 – 11 pounds (lbs.)	One half (1/2) teaspoon (tsp) (2.5mL) of the doxycycline mixture
12 – 22 (lbs.)	One (1) teaspoon (5mL) of the doxycycline mixture
23 – 33 (lbs.)	One and one half (1 ½) teaspoons (7.5mL) of the doxycycline mixture
34 - 45 (lbs.)	Two (2) teaspoons (10mL) of the doxycycline mixture
46 - 55 (lbs.)	Two and one half (2 ½) teaspoons (12.5mL) of the doxycycline mixture
56 - 65 (lbs.)	Three (3) teaspoons (15mL) of the doxycycline mixture
66 - 77 (lbs.)	Three and one half (3 ½) teaspoons (17.5mL) of the doxycycline mixture
78 - 88 (lbs.)	Four (4) teaspoons (20mL) of the doxycycline mixture (or 1 tablet)
Children heavier than 88 pounds who are exposed to plague should take one (1) 100-mg tablet of doxycycline two times a day (at the same time each day if possible) for 7 days. If the child cannot swallow tablets, use the directions for preparing a mixture and give 4 teaspoons twice a day.	

How already prepared Doxycycline mixture should be stored

- Prepare the doxycycline mixture daily; store in covered container and refrigerate.
- Doxcycline mixed with any of the recommended foods will keep for at least 24 hours.
- Throw away any unused portions.

Doxycyline- Tularemia

For infants and children exposed to tularemia

Once you have been notified by your federal, state, or local authorities that you have been exposed to tularemia, it may be necessary to prepare emergency doses of doxycycline for infants and children using doxycycline tablets.

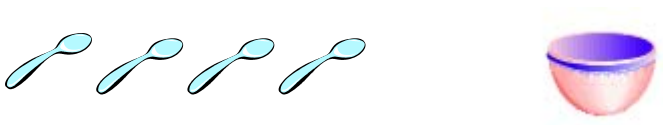
You will need:

One (1) 100 milligram (mg) doxycycline tablet
Metal teaspoon
Measuring spoons [1 teaspoon (tsp); and ½ teaspoon (tsp)]
(NOTE measuring spoons are preferred, however if not available, use the metal spoon to grind, measure and give the medicine)
1 small bowl
One of these foods
chocolate syrup
maple syrup
caramel syrup
applesauce

Directions:

Put one (1) 100-mg doxycycline tablet into a small bowl. Crush the tablet with the back of the metal spoon until no large pieces are seen.

Add four (4) level teaspoons (tsp) of a food to the crushed doxycycline. Stir them together until the drug looks evenly mixed with the food.



3. See next page for Doxycycline dosing for tularemia:

Doxyxyxline - Tularemia

How Much of the Doxycycline Mixture to Give a Child

The number of teaspoons of the doxycycline mixture to give a child depends on the child's weight. If child's weight is unknown, weigh child before giving the first dose. The chart tells you how much to give the child for one dose. You should give the child two doses each day (one in the morning and one in the afternoon) for 14 days.

If the child weighs	Give the child
4 – 11 pounds (lbs.)	One half (1/2) teaspoon (tsp) (2.5mL) of the doxycycline mixture
12 – 22 (lbs.)	One (1) teaspoon (5mL) of the doxycycline mixture
23 – 33 (lbs.)	One and one half (1 ½) teaspoons (7.5mL) of the doxycycline mixture
34 - 45 (lbs.)	Two (2) teaspoons (10mL) of the doxycycline mixture
46 - 55 (lbs.)	Two and one half (2 ½) teaspoons (12.5mL) of the doxycycline mixture
56 - 65 (lbs.)	Three (3) teaspoons (15mL) of the doxycycline mixture
66 - 77 (lbs.)	Three and one half (3 ½) teaspoons (17.5mL) of the doxycycline mixture
78 - 88 (lbs.)	Four (4) teaspoons (20mL) of the doxycycline mixture (or 1 tablet)
Children heavier than 88 pounds who are exposed to tularemia should take one (1) 100-mg tablet of doxycycline two times a day (at the same time each day if possible) for 14 days. If the child cannot swallow tablets, use the directions for preparing a mixture and give 4 teaspoons twice a day.	

How already prepared Doxycycline mixture should be stored

- Prepare the doxycycline mixture daily; store in covered container and refrigerate.
- Doxycycline mixed with any of the recommended foods will keep for at least 24 hours.
- Throw away any unused portions.

Oseltamivir

Directions for the Emergency Compounding of an Oral Suspension from TAMIFLU Capsules (Final Concentration = 15 mg/mL)
In the event that the commercially manufactured TAMIFLU Oral Suspension is not available, the pharmacist may compound a suspension (15 mg/mL) from TAMIFLU (oseltamivir phosphate) Capsules 75 mg using either of two vehicles: Cherry Syrup (Humco®)* or Ora-Sweet® SF (sugar-free). † Other vehicles have not been studied. Compounding an oral suspension with this procedure will provide one patient with enough medication for:

a 5-day course of treatment (twice–daily administration) or
a 10-day course of prophylaxis (once–daily administration)

Compounding Procedure:

First, calculate the Total Volume of oral suspension needed to be compounded and dispensed for each patient. The Total Volume required is determined by the weight of each patient. Refer to **Table 5**. *Please note that the table numbers included in these directions (Tables 5, 6, and 7) correspond to the table numbers in the TAMIFLU package insert.*

Table 5
Volume of oral suspension (15 mg/mL) needed to be compounded based upon the patient's weight

Body Weight (kg)	Body Weight (lbs)	Total Volume to Compound per patient (mL)
15 kg or less	33 lbs or less	30 mL
16 to 23 kg	34 to 51 lbs	40 mL
24 to 40 kg	52 to 88 lbs	50 mL
41 kg or more	89 lbs or more	60 mL

Next, determine the number of capsules and the amount of vehicle (Cherry Syrup or Ora-Sweet SF) that are needed to prepare the Total Volume (calculated from Table 5: 30 mL, 40 mL, 50 mL, or 60 mL) of compounded oral suspension (15 mg/mL). Refer to **Table 6**.

Table 6
Number of TAMIFLU 75 mg Capsules and Amount of Vehicle (Cherry Syrup OR Ora-Sweet SF) Needed to Prepare the Total Volume of a Compounded Oral Suspension (15 mg/mL)

Total Volume of Compounded Oral Suspension needed to be Prepared	**30 mL**	**40 mL**	**50 mL**	**60 mL**
Required number of TAMIFLU 75 mg Capsules	6 capsules (450 mg oseltamivir)	8 capsules (600 mg oseltamivir)	10 capsules (750 mg oseltamivir)	12 capsules (900 mg oseltamivir)
Required volume of vehicle				
Cherry Syrup (Humco) **OR** Ora-Sweet SF (Paddock Laboratories)	29 mL	38.5 mL	48 mL	57 mL

Then, follow the procedure below for compounding the oral suspension (15 mg/mL) from TAMIFLU Capsules 75 mg:

1. Carefully separate the capsule body and cap and transfer the contents of the required number of TAMIFLU 75 mg Capsules into a clean mortar.
2. Triturate the granules to a fine powder.
3. Add one-third (1/3) of the specified amount of vehicle to the mortar and triturate the powder until a uniform suspension is achieved.
4. Transfer the suspension to an amber glass or amber polyethyleneterephthalate (PET) bottle. A funnel may be used to eliminate any spillage.
5. Add another one-third (1/3) of the vehicle to the mortar, rinse the pestle and mortar by a triturating motion and transfer the contents into the bottle.
6. Repeat the rinsing (Step 5) with the remainder of the vehicle.
7. Close the bottle using a child-resistant cap.
8. Shake well to completely dissolve the active drug and to insure homogeneous distribution of the dissolved drug in the resulting suspension. (Note: The active drug, oseltamivir phosphate, readily dissolves in the specified vehicles. The suspension is caused by some of the inert ingredients of TAMIFLU Capsules which are insoluble in these vehicles.)

9. Put an ancillary label on the bottle indicating "Shake Gently Before Use". This compounded suspension should be gently shaken prior to administration to minimize the tendency for air entrapment, particularly with the Ora-Sweet SF preparation. *The need to shake the compounded oral suspension gently prior to administration should be reviewed with the parent or guardian when the suspension is dispensed.*
10. Instruct the parent or guardian that any remaining material following completion of therapy must be discarded by either affixing an ancillary label to the bottle or adding a statement to the pharmacy label instructions.
11. Place an appropriate expiration date label according to storage condition (see below).

STORAGE OF THE PHARMACY-COMPOUNDED SUSPENSION:
Refrigeration: Stable for 5 weeks (35 days) when stored in a refrigerator at 2° to 8°C (36° to 46°F). Room Temperature: Stable for five days (5 days) when stored at room temperature, 25°C (77°F).
Note: The storage conditions are based on stability studies of compounded oral suspensions, using the above mentioned vehicles, which were placed in amber glass and amber polyethyleneterephthalate (PET) bottles. Stability studies have not been conducted with other vehicles or bottle types.

12. Place a pharmacy label on the bottle that includes the patient's name, dosing instructions, and drug name and any other required information to be in compliance with all State and Federal Pharmacy Regulations.

Refer to Table 7 for the proper dosing instructions.

Note: This compounding procedure results in a 15 mg/mL suspension, which is different from the commercially available TAMIFLU for Oral Suspension, which has a concentration of 12 mg/mL.

Table 7
Dosing Chart for Pharmacy-Compounded Suspension from TAMIFLU Capsules 75 mg

Body Weight (kg)	**Body Weight (lbs)**	**Dose (mg)**	**Volume per Dose 15 mg/mL**	**Treatment Dose (for 5 days)**	**Prophylaxis Dose (for 10 days)**
15 kg or less	33 lbs or less	30 mg	2 mL	2 mL two times a day	2 mL once daily
16 to 23 kg	34 to 51 lbs	45 mg	3 mL	3 mL two times a day	3 mL once daily
24 to 40 kg	52 to 88 lbs	60 mg	4 mL	4 mL two times a day	4 mL once daily
41 kg or more	89 lbs or more	75 mg	5 mL	5 mL two times a day	5 mL once daily

Note: 1 teaspoon = 5 mL

Oral Dosing Device: Consider dispensing the suspension with an oral dosing device (a graduated oral syringe or spoon) suitable for measuring small amounts of suspension. If possible, mark or highlight the graduation corresponding to the appropriate dose (2 mL, 3 mL, 4 mL, or 5 mL) on the oral syringe or spoon for each patient.

The dosing device dispensed with the commercially available TAMIFLU for Oral Suspension should NOT be used with the compounded suspension since it has a different concentration (concentration = 12 mg/mL) than the suspension prepared through the emergency compounding procedure described here (concentration = 15 mg/mL).

DRUG INFORMATION SHEETS

DRUG INFORMATION SHEETS

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Drug Information Sheets Index

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9. Zanamivir

AMOXICILLIN – ADULT

Amoxicillin - Adult

Common Brand Name(s):

Amoxil, Trimox, Wymox

Uses:

Amoxicillin is a penicillin-type antibiotic used to treat a wide variety of bacterial infections. It works by stopping the growth of bacteria, therefore treats only bacterial infections. It will not work for viral infections (e.g. common cold, flu, etc.).

How To Use:

Take this medication by mouth with or without food, usually every 8 or 12 hours, or as directed by your physician. Drink plenty of fluids while using this medication unless your physician tells you otherwise. Antibiotics work best if the amount of medication in your body is kept at a constant level. Therefore, take this drug at evenly spaced intervals throughout the day and night. Continue to take this medication until the complete prescribed amount is finished even if symptoms disappear after a few days. Stopping the medication too early may allow bacteria to continue to grow, which may result in a relapse of the infection.

Side Effects:

Nausea, vomiting or diarrhea may occur. If any of these effects persist or worsen, notify your physician or pharmacist promptly. Many people using this medication do not have serious side effects. Tell your physician immediately if any of these highly unlikely but potentially very serious side effects occur: dark urine, persistent nausea or vomiting, stomach/abdominal pain, yellowing of the eyes or skin, easy bruising or bleeding, persistent sore throat or fever. This medication may rarely cause a severe intestinal condition (pseudomembranous colitis) due to resistant bacteria. This condition may occur weeks after treatment has stopped.

Do not use anti-diarrheal products or narcotic pain medications if you have the following symptoms because those products may make them worse. Tell your physician immediately if you develop: persistent diarrhea, abdominal or stomach pain/cramping, or blood/mucus in your stool.

Use of this medication for prolonged or repeated periods may result in oral thrush or a new yeast infection (oral or vaginal). Contact your physician if you notice white patches in your mouth, a change in vaginal discharge or other symptoms.

A very serious allergic reaction to this medication in unlikely, but seek immediate medical attention if it occurs. Symptoms of a serious allergic reaction may include: rash, itching, swelling, dizziness, or trouble breathing. Amoxicillin can commonly cause a mild rash that is not usually serious. However, you may not be able to tell it apart from a rare rash that could be a sign of a severe allergic reaction. Therefore, seek immediate medical attention if you develop any rash.
This is not a complete list of possible side effects. If you notice other effects not listed above, contact your physician or pharmacist.

Precautions:

Before taking amoxicillin, tell your physician or pharmacist if you are allergic to it; or to penicillin or cephalosporin antibiotics; or if you have any other allergies. Before using this medication, tell your physician or pharmacist your medical history, especially of: kidney disease or a certain type of viral infection (infectious mononucleosis). Kidney function declines as you get older. This medication is removed (excreted) by the kidneys. Therefore, elderly patients may be more sensitive to this drug.
This medication should be used only when clearly needed during pregnancy. Amoxicillin passes into breast milk. Consult your physician before breast-feeding.

Drug Interactions:

Your physician or pharmacist may already be aware of any possible drug interactions and may be monitoring them for you. Do not start, stop, or change the dosage of any medication before checking with them first. Before taking this medication, tell your physician or pharmacist of all prescription and nonprescription or herbal products you may be using, especially of: allopurinol, live bacterial vaccines, methotrexate, tetracycylines. Before taking amoxicillin, tell your physician or pharmacist if you are also taking probenecid. Probenecid slows down the removal (excretion) of amoxicillin from your body, resulting in higher levels of this antibiotic in your bloodstream. This medication may decrease the effectiveness of combination-type birth control tablets. This can result in pregnancy. You may need to use an additional form of reliable birth control while using this medication. Amoxicillin may cause false positive results with certain diabetic urine testing products (cupric sulfate-type). This medication may also affect the results of certain lab tests. Make sure that laboratory personnel and your physicians are aware that you are taking this drug. This document does not contain all possible interactions. Therefore, before using this product, tell your physician or pharmacist of all the other products you use.

Amoxicillin

Overdose:
If an overdose is suspected, contact your local poison control center or emergency room immediately. U.S. residents may call the US national poison hotline at 1-800-222-1222. Symptoms of overdose may include: severe vomiting, persistent diarrhea, a severe decrease in the amount of urine or seizures.

Notes:
Do not share this medication with others. This medication has been prescribed for your current condition only. Do not use it later for another infection unless told to do so by your physician. A different medication, or a different dose, may be necessary in those cases. With prolonged treatment, laboratory and/or medical tests (e.g., kidney and liver function, complete blood counts) should be performed periodically to monitor your progress of to check for side effects. Consult your physician for more details.

Missed Dose:
If you miss a dose, use it as soon as you remember. If it is near the time of your next dose, skip the missed dose and resume your usual dosing schedule. Do not double the dose to catch up.

Storage:
Store amoxicillin at room temperature between 59-86 degrees F away from light and moisture. Do not store in the bathroom. Keep all medicines away from children and pets. Properly discard this product when it is expired or no longer needed. Consult your pharmacist or local waste disposal company for more details about how to safely discard your product.

AMOXICILLIN SUSPENSION

Amoxicillin Suspension

Common Brand Name(s):

Amoxil, Trimox, Wymox

Uses:

Amoxicillin is a penicillin-type antibiotic used to treat a wide variety of bacterial infections. It works by stopping the growth of bacteria, therefore treats only bacterial infections. It will not work for viral infections (e.g. common cold, flu, etc.).

How To Use:

Shake the bottle well before each use. Take this medication by mouth with or without food, usually every 8 or 12 hours, or as directed by your physician. You may add this medicine to formula, milk, juice, water, or ginger ale and drink it immediately. Drink plenty of fluids while using this medication unless your physician tells you otherwise. Antibiotics work best if the amount of medication in your body is kept at a constant level. Therefore, take this drug at evenly spaced intervals throughout the day and night. Continue to take this medication until the complete prescribed amount is finished even if symptoms disappear after a few days. Stopping the medication too early may allow bacteria to continue to grow, which may result in a relapse of the infection.

Side Effects:

Nausea, vomiting or diarrhea may occur. If any of these effects persist or worsen, notify your physician or pharmacist promptly. This medicine may cause temporary staining of the teeth. Proper brushing will usually remove any staining and may prevent it from occurring. Many people using this medication do not have serious side effects. Tell your physician immediately if any of these highly unlikely but potentially very serious side effects occur: dark urine, persistent nausea or vomiting, stomach/abdominal pain, yellowing of the eyes or skin, easy bruising or bleeding, persistent sore throat or fever. This medication may rarely cause a severe intestinal condition (pseudomembranous colitis) due to resistant bacteria. This condition may occur weeks after treatment has stopped.

Do not use anti-diarrheal products or narcotic pain medications if you have the following symptoms because those products may make them worse. Tell your physician immediately if you develop: persistent diarrhea, abdominal or stomach pain/cramping, or blood/mucus in your stool.

Amoxicillin Suspension

Use of this medication for prolonged or repeated periods may result in oral thrush or a new yeast infection (oral or vaginal). Contact your physician if you notice white patches in your mouth, a change in vaginal discharge or other symptoms.
A very serious allergic reaction to this medication in unlikely, but seek immediate medical attention if it occurs. Symptoms of a serious allergic reaction may include: rash, itching, swelling, dizziness, or trouble breathing. Amoxicillin can commonly cause a mild rash that is not usually serious. However, you may not be able to tell it apart from a rare rash that could be a sign of a severe allergic reaction. Therefore, seek immediate medical attention if you develop any rash.

This is not a complete list of possible side effects. If you notice other effects not listed above, contact your physician or pharmacist.

Precautions:

Before taking amoxicillin, tell your physician or pharmacist if you are allergic to it; or to penicillin or cephalosporin antibiotics; or if you have any other allergies. Before using this medication, tell your physician or pharmacist your medical history, especially of: kidney disease or a certain type of viral infection (infectious mononucleosis). Kidney function declines as you get older. This medication is removed (excreted) by the kidneys. Therefore, elderly patients may be more sensitive to this drug.
This medication should be used only when clearly needed during pregnancy. Amoxicillin passes into breast milk. Consult your physician before breast-feeding.

Drug Interactions:

Your physician or pharmacist may already be aware of any possible drug interactions and may be monitoring them for you. Do not start, stop, or change the dosage of any medication before checking with them first. Before taking this medication, tell your physician or pharmacist of all prescription and nonprescription or herbal products you may be using, especially of: allopurinol, live bacterial vaccines, methotrexate, tetracycylines. Before taking amoxicillin, tell your physician or pharmacist if you are also taking probenecid. Probenecid slows down the removal (excretion) of amoxicillin from your body, resulting in higher levels of this antibiotic in your bloodstream. This medication may decrease the effectiveness of combination-type birth control tablets. This can result in pregnancy. You may need to use an additional form of reliable birth control while using this medication. Amoxicillin may cause false positive results with certain diabetic urine testing products (cupric sulfate-type). This medication may also affect the results of certain lab tests. Make sure that laboratory personnel and your physicians are aware that you are taking this drug. This document does not contain all possible interactions. Therefore, before using this product, tell your physician or pharmacist of all the other products you use.

Overdose:

If an overdose is suspected, contact your local poison control center or emergency room immediately. U.S. residents may call the US national poison hotline at 1-800-222-1222. Symptoms of overdose may include: severe vomiting, persistent diarrhea, a severe decrease in the amount of urine or seizures.

Notes:

Do not share this medication with others. This medication has been prescribed for your current condition only. Do not use it later for another infection unless told to do so by your physician. A different medication, or a different dose, may be necessary in those cases. With prolonged treatment, laboratory and/or medical tests (e.g., kidney and liver function, complete blood counts) should be performed periodically to monitor your progress of to check for side effects. Consult your physician for more details.

Missed Dose:

If you miss a dose, use it as soon as you remember. If it is near the time of your next dose, skip the missed dose and resume your usual dosing schedule. Do not double the dose to catch up.

Storage:

Refrigeration may improve the taste of this medicine but may not be required. Certain brands of this medication may expire earlier when stored at room temperature (59 to 86 degrees F) than when refrigerated. Check the bottle or ask your pharmacist to see if (and for how long) you can store this medication at room temperature. Store amoxicillin away from light and moisture. Do not store in the bathroom. Keep all medicines away from children and pets. Properly discard this product after 14 days, since the drug loses potency after that time, or if no longer needed. Consult your pharmacist or local waste disposal company for more details about how to safely discard your product.

AZITHROMYCIN – ADULT

Azithromycin - Adult

Common Brand Name(s):

Zithromax

Uses:

Azithromycin is a macrolide-type antibiotic used to treat a wide variety of bacterial infections. It works by stopping the growth of bacteria, therefore treats only bacterial infections. It will not work for viral infections (e.g. common cold, flu, etc.).

How To Use:

Take this medication by mouth with or without food, usually once a day, or as directed by your physician. You may take this medication with food if stomach upset occurs. Antibiotics work best if the amount of medication in your body is kept at a constant level. Therefore, take this drug at the same time each day. Continue to take this medication until the complete prescribed amount is finished even if symptoms disappear after a few days. Stopping the medication too early may allow bacteria to continue to grow, which may result in a relapse of the infection. Antacids may decrease the absorption of azithromycin. If you take an antacid, wait at least 2 hours after taking this medication.

Side Effects:

Stomach upset, diarrhea or loose stools, nausea, vomiting or stomach or abdominal pain may occur. If any of these effects persist or worsen, notify your physician or pharmacist promptly. Many people using this medication do not have serious side effects. Tell your physician immediately if any of these highly unlikely but potentially very serious side effects occur: hearing loss. Tell your physician immediately if any of these highly unlikely but potentially very serious side effects occur: dark urine, persistent nausea or vomiting, severe stomach/abdominal pain, yellowing of the eyes or skin. Seek immediate medical attention if any of these rare but very serious side effects occur: severe dizziness, fainting, fast, slow or irregular heartbeat. This medication may rarely cause a severe intestinal condition (pseudomembranous colitis) due to resistant bacteria. This condition may occur weeks after treatment has stopped.

Do not use anti-diarrheal products or narcotic pain medications if you have the following symptoms because those products may make them worse. Tell your physician immediately if you develop: persistent diarrhea, abdominal or stomach pain/cramping, or blood/mucus in your stool.

Azithromycin - Adult

Use of this medication for prolonged or repeated periods may result in oral thrush or a new yeast infection (oral or vaginal). Contact your physician if you notice white patches in your mouth, a change in vaginal discharge or other symptoms.

A very serious allergic reaction to this medication in unlikely, but seek immediate medical attention if it occurs. Symptoms of a serious allergic reaction may include: rash, itching, swelling, dizziness, or trouble breathing. An allergic reaction to this medication may return even if you stop taking the drug. If you have an allergic reaction, continue to watch for any of the above symptoms for several days after taking your last dose.
This is not a complete list of possible side effects. If you notice other effects not listed above, contact your physician or pharmacist.

Precautions:

Before taking azithromycin, tell your physician or pharmacist if you are allergic to it or to other macrolide antibiotics such as erythromycin or clarithromycin; or to ketolide antibiotics such as telithromycin; or if you have any other allergies. Before taking this medication, tell your physician or pharmacist your medical history, especially of: liver disease, kidney disease, a certain heart problem (QT prolongation in a past EKG).
This medication should be used only when clearly needed during pregnancy.
Azithromycin passes into breast milk. Consult your physician before breast-feeding.

Drug Interactions:

Your physician or pharmacist may already be aware of any possible drug interactions and may be monitoring them for you. Do not start, stop, or change the dosage of any medication before checking with them first. Before taking this medication, tell your physician or pharmacist of all prescription and nonprescription or herbal products you may be using, especially of: aluminum-and magnesium- containing antacids, digoxin, live bacterial vaccines, lovastatin, nelfinavir, warfarin. This medication may decrease the effectiveness of combination-type birth control tablets. This can result in pregnancy. You may need to use an additional form of reliable birth control while using this medication.
Other drugs besides azithromycin which may affect the heart rhythm (QT prolongation in the EKG) include amiodarone, dofetilide, pimozide, procainamide, quinidine, sotalol, propafenone, and sparfloxacin among others. QT prolongation can infrequently result in serious, rarely fatal, fast/irregular heartbeats and other symptoms that require immediate medical attention. Consult your physician for more details, and for instructions on how you may reduce your risk of this effect. This document does not contain all possible interactions. Therefore, before using this product, tell your physician or pharmacist of all the other products you use.

Azithromycin -Adult

Overdose:
If an overdose is suspected, contact your local poison control center or emergency room immediately. U.S. residents may call the US national poison hotline at 1-800-222-1222. Symptoms of overdose may include: severe or persistent diarrhea.

Notes:
Do not share this medication with others. This medication has been prescribed for your current condition only. Do not use it later for another infection unless told to do so by your physician. A different medication, or a different dose, may be necessary in those cases.

Missed Dose:
If you miss a dose, use it as soon as you remember. If it is near the time of your next dose, skip the missed dose and resume your usual dosing schedule. Do not double the dose to catch up.

Storage:
Store azithromycin at room temperature between 59-86 degrees F away from light and moisture. Do not store in the bathroom. Keep all medicines away from children and pets. Properly discard this product when it is expired or no longer needed. Consult your pharmacist or local waste disposal company for more details about how to safely discard your product.

AZITHROMYCIN SUSPENSION

Azithromycin Suspension

Common Brand Name(s):
Zithromax

Uses:
Azithromycin is a macrolide-type antibiotic used to treat a wide variety of bacterial infections. It works by stopping the growth of bacteria, therefore treats only bacterial infections. It will not work for viral infections (e.g. common cold, flu, etc.).

How To Use:
Shake the medication well before each dose. Take this medication by mouth with or without food, usually once a day, or as directed by your physician. You may take this medication with food if stomach upset occurs. The correct dosage is based on your child's weight. Antibiotics work best if the amount of medication in your body is kept at a constant level. Therefore, take this drug at the same time each day. Continue to take this medication until the complete prescribed amount is finished even if symptoms disappear after a few days. Stopping the medication too early may allow bacteria to continue to grow, which may result in a relapse of the infection. Antacids may decrease the absorption of azithromycin. If you take an antacid, wait at least 2 hours after taking this medication.

Side Effects:
Stomach upset, diarrhea or loose stools, nausea, vomiting or stomach or abdominal pain may occur. If any of these effects persist or worsen, notify your physician or pharmacist promptly. Many people using this medication do not have serious side effects. Tell your physician immediately if any of these highly unlikely but potentially very serious side effects occur: hearing loss. Tell your physician immediately if any of these highly unlikely but potentially very serious side effects occur: dark urine, persistent nausea or vomiting, severe stomach/abdominal pain, yellowing of the eyes or skin. Seek immediate medical attention if any of these rare but very serious side effects occur: severe dizziness, fainting, fast, slow or irregular heartbeat. This medication may rarely cause a severe intestinal condition (pseudomembranous colitis) due to resistant bacteria. This condition may occur weeks after treatment has stopped.
Do not use anti-diarrheal products or narcotic pain medications if you have the following symptoms because those products may make them worse. Tell your physician immediately if you develop: persistent diarrhea, abdominal or stomach pain/cramping, or blood/mucus in your stool.

Azithromycin Suspension

Use of this medication for prolonged or repeated periods may result in oral thrush or a new yeast infection (oral or vaginal). Contact your physician if you notice white patches in your mouth, a change in vaginal discharge or other symptoms.
A very serious allergic reaction to this medication in unlikely, but seek immediate medical attention if it occurs. Symptoms of a serious allergic reaction may include: rash, itching, swelling, dizziness, or trouble breathing. An allergic reaction to this medication may return even if you stop taking the drug. If you have an allergic reaction, continue to watch for any of the above symptoms for several days after taking your last dose.
This is not a complete list of possible side effects. If you notice other effects not listed above, contact your physician or pharmacist.

Precautions:

Before taking azithromycin, tell your physician or pharmacist if you are allergic to it or to other macrolide antibiotics such as erythromycin or clarithromycin; or to ketolide antibiotics such as telithromycin; or if you have any other allergies. Before taking this medication, tell your physician or pharmacist your medical history, especially of: liver disease, kidney disease, a certain heart problem (QT prolongation in a past EKG).
This medication should be used only when clearly needed during pregnancy.
Azithromycin passes into breast milk. Consult your physician before breast-feeding.

Drug Interactions:

Your physician or pharmacist may already be aware of any possible drug interactions and may be monitoring them for you. Do not start, stop, or change the dosage of any medication before checking with them first. Before taking this medication, tell your physician or pharmacist of all prescription and nonprescription or herbal products you may be using, especially of: aluminum-and magnesium- containing antacids, digoxin, live bacterial vaccines, lovastatin, nelfinavir, warfarin. This medication may decrease the effectiveness of combination-type birth control tablets. This can result in pregnancy. You may need to use an additional form of reliable birth control while using this medication.
Other drugs besides azithromycin which may affect the heart rhythm (QT prolongation in the EKG) include amiodarone, dofetilide, pimozide, procainamide, quinidine, sotalol, propafenone, and sparfloxacin among others. QT prolongation can infrequently result in serious, rarely fatal, fast/irregular heartbeats and other symptoms that require immediate medical attention. Consult your physician for more details, and for instructions on how you may reduce your risk of this effect. This document does not contain all possible interactions. Therefore, before using this product, tell your physician or pharmacist of all the other products you use.

Azithromycin Suspension

Overdose:

If an overdose is suspected, contact your local poison control center or emergency room immediately. U.S. residents may call the US national poison hotline at 1-800-222-1222. Symptoms of overdose may include: severe or persistent diarrhea.

Notes:

Do not share this medication with others. This medication has been prescribed for your current condition only. Do not use it later for another infection unless told to do so by your physician. A different medication, or a different dose, may be necessary in those cases.

Missed Dose:

If you miss a dose, use it as soon as you remember. If it is near the time of your next dose, skip the missed dose and resume your usual dosing schedule. Do not double the dose to catch up.

Storage:

Store azithromycin between 41 to 86 degrees F away from light and moisture. Do not store in the bathroom. Discard any remaining medication after 10 days. Keep all medicines away from children and pets. Properly discard this product when it is expired or no longer needed. Consult your pharmacist or local waste disposal company for more details about how to safely discard your product.

CIPROFLOXACIN –ADULT

Ciprofloxacin -Adult

Common Brand Name(s):

Cipro

Uses:

Ciprofloxacin is a quinolone-type antibiotic used to treat a wide variety of bacterial infections. It works by stopping the growth of bacteria, therefore treats only bacterial infections. It will not work for viral infections (e.g. common cold, flu, etc.).

How To Use:

Take this medication by mouth with or without food, usually every twice a day in the morning and evening, or as directed by your physician. The dosage and length of treatment is based on your medical condition and response to treatment. Drink plenty of fluids while using this medication unless your physician tells you otherwise. Take this medication 2 hours before or 6 hours after taking any medications or antacids containing magnesium, aluminum, or calcium. Some examples include quinapril, certain forms of didanosine (chewable/dispersible buffered tablets or pediatric oral solution), vitamins with minerals, antacids, dairy products (e.g. milk, yogurt), calcium-enriched juices, and sucralfate. Other products include bismuth subsalicylate, iron, and zinc. These medications/products bind with ciprofloxacin and prevent its full absorption you're your bloodstream. However, this medication may be taken with dairy products or calcium-enriched juices as part of a meal because food helps prevent this effect. Ask your physician or pharmacist about safely using nutritional supplements/replacements with this medication. Antibiotics work best if the amount of medication in your body is kept at a constant level. Therefore, take this drug at evenly spaced intervals throughout the day and night. Continue to take this medication until the complete prescribed amount is finished even if symptoms disappear after a few days. Stopping the medication too early may allow bacteria to continue to grow, which may result in a relapse of the infection.

Side Effects:

Nausea, diarrhea, dizziness, lightheadedness, headache, or trouble sleeping may occur.

If any of these effects persist or worsen, notify your physician or pharmacist promptly. Many people using this medication do not have serious side effects. Tell your physician immediately if any of these highly unlikely but potentially very serious side effects occur: mental/mood changes (e.g. anxiety, confusion, hallucinations, depression, rarely thoughts of suicide), shaking (tremors), skin that sunburns more easily (sun sensitivity). Ciprofloxacin may rarely cause serious nerve problems that may be reversible if identified and treated early.

Ciprofloxacin - Adult

Seek immediate medical attention if you develop any of the following symptoms: pain/numbness/burning/tingling/weakness in any part of the body, changes in how you sense touch/pain/temperature/body position/vibration. Tell your physician immediately if any of these rare but very serious side effects occur: unusual bruising/bleeding, severe/persistent headache, signs of a new infection (e.g. new/persistent fever, persistent sore throat), unusual change in the amount of urine, change in color of urine (red/pink urine), signs of liver problems (e.g. unusual tiredness, stomach or abdominal pain, persistent nausea or vomiting, yellowish eyes or skin, dark urine), vision changes .
Seek immediate medical attention if any of these rare but potentially very serious effects occur: severe dizziness, fainting, fast/irregular heartbeat, seizures. This medication may rarely cause tendon damage (e.g. tendonitis, tendon rupture) during or after treatment. Stop exercise, rest, and seek immediate medical attention if you develop joint/muscle/tendon pain or swelling. This medication may rarely cause a severe intestinal condition (pseudomembranous colitis) due to resistant bacteria. This condition may occur weeks to months after treatment has stopped.

Do not use anti-diarrheal products or narcotic pain medications if you have the following symptoms because those products may make them worse. Tell your physician immediately if you develop: persistent diarrhea, abdominal or stomach pain/cramping, or blood/mucus in your stool.

Use of this medication for prolonged or repeated periods may result in oral thrush or a new yeast infection (oral or vaginal). Contact your physician if you notice white patches in your mouth, a change in vaginal discharge or other symptoms.
A very serious allergic reaction to this medication in unlikely, but seek immediate medical attention if it occurs. Symptoms of a serious allergic reaction may include: rash, itching, swelling, dizziness, or trouble breathing.

This is not a complete list of possible side effects. If you notice other effects not listed above, contact your physician or pharmacist.

This is not a complete list of possible side effects. If you notice other effects not listed above, contact your physician or pharmacist.

Ciprofloxacin - Adult

Precautions:

Before taking ciprofloxacin, tell your physician or pharmacist if you are allergic to it; or to other quinolone antibiotics such as norfloxacin, gemifloxacin, levofloxacin, moxifloxacin, or ofloxacin; or if you have any other allergies. Before using this medication, tell your physician or pharmacist your medical history, especially of: diabetes, certain heart problem (QT prolongation in past EKG), family history of a certain heart problem (QT prolongation in the EKG), heart problems (e.g. slow/fast/irregular heartbeat, heart failure, recent heart attach), joint or tendon problems (e.g. tendonitis, bursitis), kidney disease, liver damage, nervous system disorder (e.g. peripheral neuropathy), seizure disorder, conditions that increase your risk of seizures (e.g. brain or head injury, brain tumors, cerebral atherosclerosis), untreated low levels of potassium or magnesium in the blood. This medication may rarely cause serious changes in blood sugar levels, especially if you have diabetes. Watch for symptoms of high blood sugar including increased thirst and urination. Also, watch for symptoms of low blood sugar such as nervousness, shakiness, fast heartbeat, sweating, or hunger. Check your blood sugar regularly as directed by your physician and report any changes promptly. If you experience symptoms of low blood sugar, you may raise your blood sugar by using glucose tablets/gel or by eating a quick source of sugar such as table sugar, honey, candy,or by drinking fruit juice or non-diet soda. Tell your physician immediately about the reaction and the use of this product. To help prevent low blood sugar, eat meals on aregular schedule and do not skip meals.

This drug may make you dizzy or lightheaded. Use caution while driving, using machinery, or taking part in any activity that requires alertness. Limit alcoholic beverages while on this medication. This medication may make you more sensitive to the sun. Avoid prolonged sun exposure, tanning booths, and sunlamps. Use a sunscreen and wear protective clothing when outdoors.

Caution is advised when using this drug in children because they may be more sensitive to its possible side effects (e.g. joint or tendon problems).

Kidney function declines as you grow older. This medication is removed (excreted) by the kidneys. Therefore, older adults may be more sensitive to its side effects such as tendon problems (especially if also taking corticosteroids such as prednisone or hydrocortisone), or heart problems.

During pregnancy, this medication should be used only when clearly needed. Ciprofloxacin passes into breast milk. Breastfeeding is not recommended while taking this drug. Consult your physician before breastfeeding.

Ciprofloxacin –Adult

Drug Interactions:

Your physician or pharmacist may already be aware of any possible drug interactions and may be monitoring them for you. Do not start, stop, or change the dosage of any medication before checking with them first. This drug should not be used with the following medications because very serious interactions may occur: strontium, tizanidine, certain drugs that affect the heart rhythm (anti-arrhythmics that may cause QT prolongation such as amiodarone, dofetilide, quinidine, procainamide, sotalol). If you are currently using any of the medication listed above, tell your physician or pharmacist before starting ciprofloxacin. Other drugs besides ciprofloxacin and those listed above that may affect the heart rhythm (QT prolohation in the EKG) include certain macrolide antibiotics (e.g. erythromycin, clarithromycin), and certain antipsychotic medications (e.g. pimozide, thioridazine, ziprasidone), among others. QT prolongation can infrequently result in serious, rarely fatal, fast/irregular heartbeats and other symptoms (e.g. severe dizziness, fainting) that require immediate medical attention. Consult your physician for more details, and for instructions on how you may reduce your risk of this effect. Before taking this medication, tell your physician or pharmacist of all prescription and nonprescription or herbal products you may be using, especially of: live bacterial vaccines (e.g. Typhoid, BCG), blood thinners (e.g. warfarin, heparin), corticosteroids (e.g. prednisone, hydrocortisone), cyclosporine, drugs removed from your body be certain liver enzymes (e.g. clozapine, duloxetine, phenytoin, ropinirole, tacrine), drugs for diabetes (e.g. glyburide, insulin), methotrexate, NSAIDs (e.g. ibuprofen, naproxen), certain diuretics (e.g. furosemide, hydrochlorothiazide), probenecid, sevelamer, theophylline, urinary alkalinizers (e.g. potassium/sodium citrate). Also, report the use of drugs that might increase seizure risk when combined with ciprofloxacin such s isoniazid, phenothiazines (e.g. chlorpromazine), or tricyclic antidepressants (e.g. amitriptyline), among others. Consult your physician or pharmacist for details.

Avoid drinking large amounts of beverages containing caffeine (e.g. coffee, tea, colas), eating large amounts of chocolate, or taking OTC products that contain caffeine to keep you awake and alert. This document does not contain all possible interactions. Therefore, before using this product, tell your physician or pharmacist of all the other products you use.

Overdose:

If an overdose is suspected, contact your local poison control center or emergency room immediately. U.S. residents may call the US national poison hotline at 1-800-222-1222. Symptoms of overdose may include: severe or persistent diarrhea.

Ciprofloxacin - Adult

Notes:

Do not share this medication with others. This medication has been prescribed for your current condition only. Do not use it later for another infection unless told to do so by your physician. A different medication, or a different dose, may be necessary in those cases. Laboratory and/or medical test (e.g. kidney function, blood counts, cultures) should be performed periodically to monitor your progress or check for side effects. Consult your physician for more details.

Missed Dose:

If you miss a dose, use it as soon as you remember. If it is near the time of your next dose, skip the missed dose and resume your usual dosing schedule. Do not double the dose to catch up.

Storage:

Store ciprofloxacin at room temperature between 59-86 degrees F away from light and moisture. Do not store in the bathroom. Keep all medicines away from children and pets. Properly discard this product when it is expired or no longer needed. Consult your pharmacist or local waste disposal company for more details about how to safely discard your product.

CIPROFLOXACIN SUSPENSION

Ciprofloxacin Suspension

Common Brand Name(s):

Cipro

Uses:

Ciprofloxacin is a quinolone-type antibiotic used to treat a wide variety of bacterial infections. It works by stopping the growth of bacteria, therefore treats only bacterial infections. It will not work for viral infections (e.g. common cold, flu, etc.).

How To Use:

Take this medication by mouth with or without food, usually every twice a day in the morning and evening, or as directed by your physician. Shake the container well for 15 seconds before pouring each dose. Measure each dose carefully using a special measuring device or spoon. Do not use a household spoon because you may not get the correct dose. Do not chew the contents of the suspension. Do not use the suspension with feeding tubes because the suspension may clog the tube. The dosage and length of treatment is based on your medical condition and response to treatment. Drink plenty of fluids while using this medication unless your physician tells you otherwise. Take this medication 2 hours before or 6 hours after taking any medications or antacids containing magnesium, aluminum, or calcium. Some examples include quinapril, certain forms of didanosine (chewable/dispersible buffered tablets or pediatric oral solution), vitamins with minerals, antacids, dairy products (e.g. milk, yogurt), calcium-enriched juices, and sucralfate. Other products include bismuth subsalicylate, iron, and zinc. These medications/products bind with ciprofloxacin and prevent its full absorption you're your bloodstream. However, this medication may be taken with dairy products or calcium-enriched juices as part of a meal because food helps prevent this effect. Ask your physician or pharmacist about safely using nutritional supplements/replacements with this medication. Antibiotics work best if the amount of medication in your body is kept at a constant level. Therefore, take this drug at evenly spaced intervals throughout the day and night. Continue to take this medication until the complete prescribed amount is finished even if symptoms disappear after a few days. Stopping the medication too early may allow bacteria to continue to grow, which may result in a relapse of the infection.

Side Effects:

Nausea, diarrhea, dizziness, lightheadedness, headache, or trouble sleeping may occur.

If any of these effects persist or worsen, notify your physician or pharmacist promptly. Many people using this medication do not have serious side effects. Tell your physician immediately if any of these highly unlikely but potentially very serious side effects occur: mental/mood changes (e.g. anxiety, confusion, hallucinations, depression, rarely thoughts of suicide), shaking (tremors), skin that sunburns more easily (sun sensitivity).

Ciprofloxacin Suspension

Ciprofloxacin may rarely cause serious nerve problems that may be reversible if identified and treated early.

Seek immediate medical attention if you develop any of the following symptoms: pain/numbness/burning/tingling/weakness in any part of the body, changes in how you sense touch/pain/temperature/body position/vibration. Tell your physician immediately if any of these rare but very serious side effects occur: unusual bruising/bleeding, severe/persistent headache, signs of a new infection (e.g. new/persistent fever, persistent sore throat), unusual change in the amount of urine, change in color of urine (red/pink urine), signs of liver problems (e.g. unusual tiredness, stomach or abdominal pain, persistent nausea or vomiting, yellowish eyes or skin, dark urine), vision changes. Seek immediate medical attention if any of these rare but potentially very serious effects occur: severe dizziness, fainting, fast/irregular heartbeat, seizures. This medication may rarely cause tendon damage (e.g. tendonitis, tendon rupture) during or after treatment. Stop exercise, rest, and seek immediate medical attention if you develop joint/muscle/tendon pain or swelling. This medication may rarely cause a severe intestinal condition (pseudomembranous colitis) due to resistant bacteria. This condition may occur weeks to months after treatment has stopped.

Do not use anti-diarrheal products or narcotic pain medications if you have the following symptoms because those products may make them worse. Tell your physician immediately if you develop: persistent diarrhea, abdominal or stomach pain/cramping, or blood/mucus in your stool.

Use of this medication for prolonged or repeated periods may result in oral thrush or a new yeast infection (oral or vaginal). Contact your physician if you notice white patches in your mouth, a change in vaginal discharge or other symptoms.

A very serious allergic reaction to this medication in unlikely, but seek immediate medical attention if it occurs. Symptoms of a serious allergic reaction may include: rash, itching, swelling, dizziness, or trouble breathing.

This is not a complete list of possible side effects. If you notice other effects not listed above, contact your physician or pharmacist.

This is not a complete list of possible side effects. If you notice other effects not listed above, contact your physician or pharmacist.

Ciprofloxacin Suspension

Precautions:

Before taking ciprofloxacin, tell your physician or pharmacist if you are allergic to it; or to other quinolone antibiotics such as norfloxacin, gemifloxacin, levofloxacin, moxifloxacin, or ofloxacin; or if you have any other allergies. Before using this medication, tell your physician or pharmacist your medical history, especially of: diabetes, certain heart problem (QT prolongation in past EKG), family history of a certain heart problem (QT prolongation in the EKG), heart problems (e.g. slow/fast/irregular heartbeat, heart failure, recent heart attach), joint or tendon problems (e.g. tendonitis, bursitis), kidney disease, liver damage, nervous system disorder (e.g. peripheral neuropathy), seizure disorder, conditions that increase your risk of seizures (e.g. brain or head injury, brain tumors, cerebral atherosclerosis), untreated low levels of potassium or magnesium in the blood. This medication may rarely cause serious changes in blood sugar levels, especially if you have diabetes.

The liquid form of this medication may contain sugar. If you have diabetes, ask your physician or pharmacist about how to use this product safely. Watch for symptoms of high blood sugar including increased thirst and urination. Also, watch for symptoms of low blood sugar such as nervousness, shakiness, fast heartbeat, sweating, or hunger. Check your blood sugar regularly as directed by your physician and report any changes promptly. If you experience symptoms of low blood sugar, you may raise your blood sugar by using glucose tablets/gel or by eating a quick source of sugar such as table sugar, honey, candy, or by drinking fruit juice or non-diet soda. Tell your physician immediately about the reaction and the use of this product. To help prevent low blood sugar, eat meals on a regular schedule and do not skip meals. This drug may make you dizzy or lightheaded. Use caution while driving, using machinery, or taking part in any activity that requires alertness. Limit alcoholic beverages while on this medication. This medication may make you more sensitive to the sun. Avoid prolonged sun exposure, tanning booths, and sunlamps. Use a sunscreen and wear protective clothing when outdoors.

Caution is advised when using this drug in children because they may be more sensitive to its possible side effects (e.g. joint or tendon problems).

Kidney function declines as you grow older. This medication is removed (excreted) by the kidneys. Therefore, older adults may be more sensitive to its side effects such as tendon problems (especially if also taking corticosteroids such as prednisone or hydrocortisone), or heart problems.

Ciprofloxacin Suspension

During pregnancy, this medication should be used only when clearly needed. Ciprofloxacin passes into breast milk. Breastfeeding is not recommended while taking this drug. Consult your physician before breastfeeding.

Drug Interactions:

Your physician or pharmacist may already be aware of any possible drug interactions and may be monitoring them for you. Do not start, stop, or change the dosage of any medication before checking with them first. This drug should not be used with the following medications because very serious interactions may occur: strontium, tizanidine, certain drugs that affect the heart rhythm (anti-arrhythmics that may cause QT prolongation such as amiodarone, dofetilide, quinidine, procainamide, sotalol). If you are currently using any of the medication listed above, tell your physician or pharmacist before starting ciprofloxacin. Other drugs besides ciprofloxacin and those listed above that may affect the heart rhythm (QT prolohation in the EKG) include certain macrolide (page 4 of 4)antibiotics (e.g. erythromycin, clarithromycin), and certain antipsychotic medications (e.g. pimozide, thioridazine, ziprasidone), among others. QT prolongation can infrequently result in serious, rarely fatal, fast/irregular heartbeats and other symptoms (e.g. severe dizziness, fainting) that require immediate medical attention. Consult your physician for more details, and for instructions on how you may reduce your risk of this effect. Before taking this medication, tell your physician or pharmacist of all prescription and nonprescription or herbal products you may be using, especially of: live bacterial vaccines (e.g. Typhoid, BCG), blood thinners (e.g. warfarin, heparin), corticosteroids (e.g. prednisone, hydrocortisone), cyclosporine, drugs removed from your body be certain liver enzymes (e.g. clozapine, duloxetine, phenytoin, ropinirole, tacrine), drugs for diabetes (e.g. glyburide, insulin), methotrexate, NSAIDs (e.g. ibuprofen, naproxen), certain diuretics (e.g. furosemide, hydrochlorothiazide), probenecid, sevelamer, theophylline, urinary alkalinizers (e.g. potassium/sodium citrate). Also, report the use of drugs that might increase seizure risk when combined with ciprofloxacin such s isoniazid, phenothiazines (e.g. chlorpromazine), or tricyclic antidepressants (e.g. amitriptyline), among others. Consult your physician or pharmacist for details.

Avoid drinking large amounts of beverages containing caffeine (e.g. coffee, tea, colas), eating large amounts of chocolate, or taking OTC products that contain caffeine to keep you awake and alert. This document does not contain all possible interactions. Therefore, before using this product, tell your physician or pharmacist of all the other products you use.

Ciprofloxacin Suspension

Overdose:

If an overdose is suspected, contact your local poison control center or emergency room immediately. U.S. residents may call the US national poison hotline at 1-800-222-1222. Symptoms of overdose may include: severe or persistent diarrhea.

Notes:

Do not share this medication with others. This medication has been prescribed for your current condition only. Do not use it later for another infection unless told to do so by your physician. A different medication, or a different dose, may be necessary in those cases. Laboratory and/or medical test (e.g. kidney function, blood counts, cultures) should be performed periodically to monitor your progress or check for side effects. Consult your physician for more details.

Missed Dose:

If you miss a dose, use it as soon as you remember. If it is near the time of your next dose, skip the missed dose and resume your usual dosing schedule. Do not double the dose to catch up.

Storage:

Before mixing, store the dry powder and mixing solution below 77 degrees F away from light and moisture. Once mixed, the suspension may be stored in the refrigerator or at room temperature below 86 degrees F. Discard any remaining suspension 14 days after mixing at it loses its potency after that. Do not freeze. Do not store in the bathroom. Keep all medicines away from children and pets. Properly discard this product when it is expired or no longer needed. Consult your pharmacist or local waste disposal company for more details about how to safely discard your product.

DOXYCYCLINE

Doxycycline

Common Brand Name(s):

Vibramycin, Vibra-Tabs

Uses:

Doxycyline is a tetracycline antibiotic used to treat a wide variety of bacterial infections, including those that cause acne. It works by stopping the growth of bacteria, therefore treats only bacterial infections. It will not work for viral infections (e.g. common cold, flu, etc.). This medication is also used to prevent malaria.

Other Uses:

This section contains uses of this drug that are not listed in the approved professional labeling for the drug, but may be prescribed by your health care professional. Use this drug for a condition that is listed in this section only if it has been so prescribed by your health care professional. This drug may also be used to treat a certain skin infection (rosacea).

How To Use:

Take this medication by mouth as directed (usually once to twice a day). Doxycyline is best taken on an empty stomach with a full glass of water (8 ounces or 240 milliliters), 1 hour before or 2 hours after meals. Some manufacturers state that it can be taken with food or milk if you develop an upset stomach, however doxycycline might be less effective if taken with food or milk (or other products high in calcium). Do not lie down for 30 minutes after taking this medication. If you are taking the delayed-release capsules, swallow them whole. Do not crush or chew the capsules. If you have difficulty swallowing the capsule, the capsule may be opened and the contents sprinkled onto cool applesauce and taken immediately as directed. Do not prepare a supply in advance. Do not chew the food/medication mixture because doing so may cause the drug to be released too quickly, increasing possible side effects. Drink a glass of cool water after each dose to ensure complete swallowing of the medication. The liquid form of this medication must be shaken well before using. For liquid products, use a medication measuring device to carefully measure the prescribed dose. Do not use a household spoon because you may not get the correct dose. Take this medication 2-3 hours before or after taking any medications containing magnesium, calcium, iron, or zinc. Some examples include quinapril, certain forms of didanosine (chewable/dispersible buffered tablets or pediatric oral solution), vitamins with minerals, antacids, sucralfate, and bismuth subsalicylate. These medications react with doxycycline, preventing its full absorption into your bloodstream.

Doxycycline

Antibiotics work best if the amount of medication in your body is kept at a constant level. Therefore, take this drug at evenly spaced intervals throughout the day and night. Continue to take this medication until the complete prescribed amount is finished even if symptoms disappear after a few days. Stopping the medication too early may allow bacteria to continue to grow, which may result in a relapse of the infection

When using to prevent malaria, this medication is usually taken once daily. Take the first dose of this medication 1 to 2 days prior to travel to an area where you may be exposed to malaria, or take as directed by your doctor. Continue to take this medication daily while in the malarial area. Upon returning home, you should keep taking this medication for 4 more weeks. If you are unable to finish the full course of doxycycline, contact your physician. If this medication is being used to prevent malaria, it is important to understand that it is still possible to get the disease even if you have used this medication. Tell your physician immediately if you develop a fever. It is best to start treating malaria early.

Side Effects:

Stomach upset, mild diarrhea, headache, or vomiting may occur. If any of these effects persist or worsen, notify your physician or pharmacist promptly. Many people using this medication do not have serious side effects. Tell your physician immediately if any of these highly unlikely but potentially very serious side effects occur: stomach pain, yellowing of the eyes or skin, vision changes, mental or mood changes. Doxycyline may make you more sensitive to sunlight (photosensitive) while you are taking it and for 1 to 2 days after you finish it. Avoid prolonged/direct sun exposure, tanning booths, and sunlamps during this time. Use sunscreen and wear protective clothing if you must be out in the sun. Symptoms of photosensitivity include sunburn that is much quicker/more severe than usual and tingling of the hands/feet/nose. This medication may rarely cause a severe intestinal condition (pseudomembranous colitis) due to resistant bacteria. This condition may occur weeks after treatment has stopped.

Do not use anti-diarrheal products or narcotic pain medications if you have the following symptoms because those products may make them worse. Tell your physician immediately if you develop: persistent diarrhea, abdominal or stomach pain/cramping, or blood/mucus in your stool.

Use of this medication for prolonged or repeated periods may result in oral thrush or a new yeast infection (oral or vaginal). Contact your physician if you notice white patches in your mouth, a change in vaginal discharge or other symptoms.

Doxycycline

A very serious allergic reaction to this medication in unlikely, but seek immediate medical attention if it occurs. Symptoms of a serious allergic reaction may include: rash, itching, swelling, dizziness, or trouble breathing.

This is not a complete list of possible side effects. If you notice other effects not listed above, contact your physician or pharmacist.

Precautions:

Before taking doxycycline, tell your physician or pharmacist if you are allergic to it; or to any other tetracycline; or if you have any other allergies. . Before using this medication, tell your physician or pharmacist your medical history, especially of: liver problems, kidney problems, trouble swallowing, esophagus problems (e.g. hiatal hernia, GERD). This drug should not be used by children under 8 because treatment may lead to permanently discolored teeth or other problems. Caution is also advised in older children for similar reasons.

This drug is not recommended for use during pregnancy. Consult your physician before using this medication.
Doxycycline passes into breast milk and has had undesirable effects on nursing infants. Therefore, taking this medication while breast-feeding is not recommended. Consult your physician before breast-feeding.

Drug Interactions:

Your physician or pharmacist may already be aware of any possible drug interactions and may be monitoring them for you. Do not start, stop, or change the dosage of any medication before checking with them first. This drug should not be used with the following medications because very serious interactions may occur: strontium, acitretin, tretinoin taken by mouth. If you are currently using either of the medications listed above, tell your physician or pharmacist before starting doxycycline. Before taking this medication, tell your physician or pharmacist of all prescription and nonprescription or herbal products you may be using, especially of: anti-seizure medications (e.g. carbamazepine, phenytoin), barbiturates (e.g. Phenobarbital), digoxin, isotretinoin, other antibiotics, warfarin, live bacterial vaccines. This medication may decrease the effectiveness of combination-type birth control tablets. This can result in pregnancy. You may need to use an additional form of reliable birth control while using this medication. This document does not contain all possible interactions. Therefore, before using this product, tell your physician or pharmacist of all the other products you use.

Doxycycline

Overdose:

If an overdose is suspected, contact your local poison control center or emergency room immediately. U.S. residents may call the US national poison hotline at 1-800-222-1222.

Notes:

Do not share this medication with others. It is important to avoid being bitten by mosquitoes when trying to prevent malaria. Avoid contact with mosquitoes, especially from dusk to dawn, by staying in well-screened areas, wearing protective clothing, and using insect repellent and bed nets. This medication has been prescribed for your current condition only. Do not use it later for another infection unless told to do so by your physician. A different medication, or a different dose, may be necessary in those cases.

Missed Dose:

If you miss a dose, use it as soon as you remember. If it is near the time of your next dose, skip the missed dose and resume your usual dosing schedule. Do not double the dose to catch up.

Storage:

Store doxycycline at room temperature between 59-86 degrees F away from light and moisture. Different brands or strengths of this medication may have different storage requirements. Read the package labeling or ask your pharmacist for the storage requirements for the product you are using. Do not store in the bathroom. Keep all medicines away from children and pets. Properly discard this product when it is expired or no longer needed. Consult your pharmacist or local waste disposal company for more details about how to safely discard your product.

OSELTAMIVIR

Oseltamivir

Common Brand Name(s):

Tamiflu

Uses:

Oseltamivir is used to treat symptoms causes by the flu virus (influenza). It helps make the symptoms (e.g. stuffy nose, cough, sore throat, fever/chills, aches, tiredness) less severe and shortens the recovery time by 1 to 2 days. This medication is also used to prevent the flu of you have been exposed to someone who already has the flu (e.g. sick household member, co-worker). This medication works by stopping the fly virus from growing. It is not a substitute for the flu vaccine. Oseltamivir should not be used in infants younger than 1 year of age.

How To Use:

Take this medication by mouth as directed by your physician. You may take it with food or milk to minimize stomach upset. Take this medication as soon as flu-like symptoms appear or as soon as possible after you have been exposed to the flu. Oseltamivir works best if you start taking it within 2 days of either of these events. If you have the flu, take oseltamivir usually twice a day for 5 days, or as directed by your physician. To prevent the flu, take oseltamivir usually once a day for at least 10 days, or as directed by your physician. Follow your physician's instructions for how long to take this medication. This medication works best when the amount of medicine in your body is kept at a constant level. Therefore, take this drug at evenly spaced intervals at the same time(s) every day. Continue to take it for the full time prescribed. Stopping the medication too early may allow the virus to continue to grow, which may result in a relapse of the infection or failure to protect you from the flu. Inform your physician if your condition persists or worsens or if new symptoms appear.

Side Effects:

Nausea and vomiting may occur as your body adjusts to this medication and usually go away after 1 to 2 days. Dizziness may also occur. If any of these effects persist or worsen, notify your physician promptly. Many people using this medication do not have serious side effects. Oseltamivir may rarely cause serious mental/mood changes. This effect may be more likely in children. Tell your physician immediately of any signs of unusual behavior including confusion, agitation, or self-injury. Tell your physician immediately if this rare but very serious side effect occurs: chest pain. A very serious allergic reaction to this drug in unlikely, but seek immediate medical attention if it occurs. Symptoms of a serious allergic reaction may include: rash, itching, swelling, severe dizziness, trouble breathing.

This is not a complete list of possible side effects. If you notice other effects not listed above, contact your physician or pharmacist.

Oseltamivir

Precautions:

Before taking oseltamivir, tell your physician or pharmacist if you are allergic to it; or if you have other allergies. Before using this medication, tell your physician or pharmacist your medical history, especially of: kidney disease. This drug may make you dizzy; use caution engaging in activities requiring alertness such as driving or using machinery. Limit alcoholic beverages.

This medication should be used only when clearly needed during pregnancy. Discuss the risks and benefits with your physician.

It is not know if this drug passes into breast milk. Consult your physician before breast-feeding.

Drug Interactions:

Your physician or pharmacist may already be aware of any possible drug interactions and may be monitoring them for you. Do not start, stop, or change the dosage of any medication before checking with them first. Before taking this medication, tell your physician or pharmacist of all prescription and nonprescription or herbal products you may be using, especially of: clopidogrel. Tell your physician if you have received the flu vaccine in the nose within 2 weeks before treatment with this medication. This medication may lower your protection from flu vaccine given in the nose. Wait at least 2 days after ending treatment with oseltamivir before receiving flu vaccine given in the nose. This document does not contain all possible interactions. Therefore, before using this product, tell your physician or pharmacist of all the other products you use.

Overdose:

If an overdose is suspected, contact your local poison control center or emergency room immediately. U.S. residents may call the US national poison hotline at 1-800-222-1222.

Notes:

Do not share this medication with others. This medication is not a substitute for the flu vaccine. Consult with your physician about the risks and important benefits of receiving a yearly flu shot to lower your chances of getting the flu.

Oseltamivir

Missed Dose:

If you miss a dose, use it as soon as you remember. If it is within 2 hours of your next dose, skip the missed dose and resume your usual dosing schedule. Do not double the dose to catch up.

Storage:

Store at room temperature (77 degrees F) away from light or moisture. Brief storage between 59-86 degrees F is permitted. Do not store in the bathroom. Keep all medicines away from children and pets. Properly discard this product when it is expired or no longer needed. Consult your pharmacist or local waste disposal company for more details about how to safely discard your product.

ZANAMIVIR

Zanamivir

Common Name Brand(s):

Relenza

Uses:

Zanamivir is used to treat symptoms causes by the flu virus (influenza) in adults and children 7 or older. It helps make the symptoms (e.g. stuffy nose, cough, sore throat, fever/chills, aches, tiredness) less severe and shortens the recovery time by about 1 day. This medication works by stopping the fly virus from growing. It is not a substitute for the flu vaccine.

Other Uses:

This section contains uses of this drug that are not listed in the approved professional labeling for the drug, but may be prescribed by your health care professional. Use this drug for a condition that is listed in this section only if it has been so prescribed by your health care professional. Zanamivir may also be used to prevent the flu (e.g. in household members exposed to a flu sufferer.

How To Use:

Inhale the medication through the mouth, generally 2 inhalations twice daily (about 12 hours apart) for 5 days or as directed by your physician. When possible, take 2 doses (2 inhalations each) on the first day of treatment, waiting at least 2 hours between doses. Remove the cover on the disk inhaler. Before use, check the mouthpiece to be sure that it is clean and free of particles. Load the medication disk into the disk inhaler. Puncture one medication blister. Keep disk inhaler level so that the medication will not spill. Breathe out through the mouth, put the mouthpiece into your mouth, and breathe in deeply. Hold your breath for a few seconds so that the medication will stay in your lungs. If you have been instructed to inhale a second time, advance to the next medication blister and repeat the process. Once you have taken the number of inhalations prescribed, replace the cover of the disk inhaler. If a child is taking this medication, a parent or other responsible adult should supervise the child to make sure the zanamivir is taken properly. This medication works best when the amount of medicine in your body is kept at a constant level. Take the drug at evenly spaced intervals (e.g. every 12 hours). Continue to take this medication until the full prescribed dose is finished, even if symptoms improve. Stopping the medication too early may allow the virus to continue to grow, which may result in a relapse of the infection or failure to protect you from the flu. Inform your physician if your condition persists or worsens or if new symptoms appear.

Zanamivir

It is recommended that this medication be started within 48 hours of the beginning of flu symptoms. If you have breathing problems (e.g. asthma, chronic obstructive pulmonary disease –COPD) and are scheduled to use inhaled bronchodilators (e.g. albuterol) at the same time as zanamivir, use the asthma medication before using zanamivir. Ask your physician or pharmacist for more details.

Side Effects:

Nausea, diarrhea, dizziness, or headache may occur. Because this mediation is an inhaled powder, you may experience increased cough after using this medication. If cough or any of these other effects persist or worsen, notify your physician or pharmacist promptly. Many people using this medication do not have serious side effects. This mediation can cause breathing problems (e.g. bronchospasm), which in rare cases can be fatal. If you have lung or breathing problems and are using this medication, have a fast-acting inhaled bronchodilator (e.g. albuterol) readily available. If you experience breathing problems such as wheezing or shortness of breath, stop using zanamivir and contact your physician immediately. A very serious allergic reaction to this drug is unlikely, but seek immediate medical attention if it occurs. Symptoms of a serious allergic reaction may include: rash, itching, swelling, trouble breathing.

This is not a complete list of possible side effects. If you notice other effects not listed above, contact your physician or pharmacist.

Precautions:

Before taking zanamivir, tell your physician or pharmacist if you are allergic to it; or to milk proteins (not lactose intolerance); or if you have any other allergies. Before using this medication, tell your physician or pharmacist your medical history, especially of: lung or breathing problems (e.g. asthma, COPD), heart disease, or kidney problems. This drug may make you dizzy; use caution engaging in activities requiring alertness such as driving or using machinery. Limit alcoholic beverages. This drug may have less effect on children because they are less likely to inhale this medication correctly.
This medication should be used only when clearly needed during pregnancy. Discuss the risks and benefits with your physician.
It is not know if this drug passes into breast milk. Consult your physician before breast-feeding.

Zanamivir

Drug Interactions:

Your physician or pharmacist may already be aware of any possible drug interactions and may be monitoring them for you. Do not start, stop, or change the dosage of any medication before checking with them first. Before taking this medication, tell your physician or pharmacist of all prescription and nonprescription or herbal products you may be using, especially of: inhaled medications (e.g. albuterol). This document does not contain all possible interactions. Therefore, before using this product, tell your physician or pharmacist of all the other products you use.

Overdose:

If an overdose is suspected, contact your local poison control center or emergency room immediately. U.S. residents may call the US national poison hotline at 1-800-222-1222.

Notes:

Do not share this medication with others. This medication is not a substitute for the flu vaccine. Consult with your physician about the risks and important benefits of receiving a yearly flu shot to lower your chances of getting the flu.

Missed Dose:

If you miss a dose, use it as soon as you remember. If it is within 2 hours of your next dose, skip the missed dose and resume your usual dosing schedule. Do not double the dose to catch up.

Storage:

Store at room temperature (77 degrees F) away from light or moisture. Brief storage between 59-86 degrees F is permitted. Do not puncture the foil blister until just before your dose is to be used. Do not store in the bathroom. Keep all medicines away from children and pets. Properly discard this product when it is expired or no longer needed. Consult your pharmacist or local waste disposal company for more details about how to safely discard your product.

CONTROLLED SUBSTANCES PROCEDURES

Controlled Substance Procedures

1. RSS Inventory Crew unloads from truck(s)
2. RSS Inventory Crew delivers to the Pharmacy Staging Area
3. Pharmacist Liaison, or designee, inventories medications and starts a Perpetual Inventory Sheet for each Controlled Substance
    - A. Schedule III – Schedule V Substances
        - i. Log starting inventory on a Perpetual Inventory Sheet
        - ii. Follow DHMH apportionments (or reduce proportionately if supply is inadequate to fill orders completely)
        - iii. Pick Controlled Substances
        - iv. Box and label picked Controlled Substances
        - v. Fill out RSS Controlled Drug Shipment Form (make copies)
            - a. Pharmacy Liaison Copy
            - b. Incident Commander Copy
            - c. Destination Copy
            - d. RSS Inventory Control Copy
            - e. TARU Copy (if supplies by CDC)
            - f. DEA Copy
        - vi. Have second pharmacist verify the picked order
        - vii. Second pharmacist seals box and attaches shipping label (box should be clearly marked as containing Controlled Substances)
        - vii. Completed order is transferred to RSS staging area with rest of the POD's, hospital's or clinic's order (to be placed in a top, outside area of pallet prior to the pallet being shrink-wrapped)
    - B. Schedule II Substances
        - i. Request a DEA Form-222 from hospital or treatment site for requested Schedule II substances
            - a. Pharmacist Liaison, or designee, may fill out form for hospital or treatment site from list of requested medications supplied byDHMH via the hospital or treatment site
            - b. DEA Form-222 must be filled out completely in accordance with DEA requirements (make sufficient copies as required)
        - ii. Log starting inventory on a Perpetual Inventory Sheet
        - iii. Follow DHMH apportionments (or reduce proportionately if supply is inadequate to fill orders completely)
        - iv. Pick Controlled Substances
        - v. Box and label picked Controlled Substances

Controlled Substance Procedures

vi. Fill out RSS Controlled Drug Shipment Form (make copies)
   a. Pharmacy Liaison Copy
   b. Incident Commander Copy
   c. Destination Copy
   d. RSS Inventory Control Copy
   e. TARU Copy (if supplies by CDC)
   f. DEA Copy
      U.S. Department of Justice
      Drug Enforcement Administration
      PO Box 28083
      Central Station
      Washington, DC 20038-8083

vii. Have second pharmacist verify the picked order

viii. Second pharmacist seals box and attaches shipping label (box should be clearly marked as containing Controlled Substances)

ix. Completed order is transferred to RSS staging area with rest of the POD's, hospital's or clinic's order (to be placed in a top, outside area of pallet prior to the pallet being shrink-wrapped)

AFTER EVENT REQUIREMENTS

After Event Requirements

(Liaison, or Pharmacist Designee)

1. Controlled Substances
    - A. Inventory remaining controlled substances (if any)
    - B. Reconcile with Perpetual Inventory Sheets
    - C. Return any unused controlled substances, in a locked or securely sealed container, to Incident Commander or Inventory Control Officer

2. Paperwork
    - A. Pharmacist Assignment Logs
    - B. Pharmacist Time Sheets
    - C. Pharmacist Expense Forms with receipts
    - D. Perpetual Inventory Sheets
    - E. Controlled Drug Shipment Forms
    - F. CII Forms (both used & unused-if any)
    - G. Injury Forms
    - H. Other

3. Computer(s)/Printers
    - A. Make copies of any forms or information needed
    - B. Pack up with cords, etc for return
    - C. Inventory toners used (re-imbursement & replacement)

4. Clean-up
    - A. Regular trash (box or bag securely)
    - B. Computer paperwork that contains any personal information (pack & label for shredding or incineration)
    - C. Biomedical trash (if any) – arrange for transportation & proper destruction
    - D. Supplies
        - i. Inventory remaining supplies and pack-up
        - ii. List used supplies (re-imbursement & replacement)

After Event Requirements

(Liaison, or Pharmacist Designee)

5. Recovery of unused medications/supplies from hospitals, treatment sites, or PODs
    - A. DHMH notifies RSS of location(s), types of unused medications/supplies and quantities to be recovered for return
    - B. Under this plan, Schedule II medications are not recoverable
    - C. RSS Incident Commander, in coordination with DHMH determines the location to be used as a return center (should be a secure site)
    - D. RSS Incident Commander arranges a truck schedule for pickup
    - E. RSS Incident Commander notifies Pharmacist Liaison of date, time, and location where the merchandise will be returned
    - F. Pharmacist Liaison, or designee, will assist in the inventory of any returned medications or supplies
    - G. Pharmacist liaison, or designee, will sign off on any required inventory accounting form before its return to CDC or other supplier

RECORD KEEPING FORMS

Record Keeping Forms Index

1. RSS Pharmacy Personnel Assignment Log Appendix A
2. RSS Perpetual CDS Inventory Form Appendix B
3. RSS Controlled Substance Bill Of Laden Appendix C
4. RSS Personnel Demographic & Health Screening Form Appendix D
5. RSS Pharmacy Personnel Time & Expense Report Appendix E
6. RSS Pharmacy Personnel Injury Form Appendix F
7. RSS Acronyms Appendix H

RSS Pharmacy Personnel Assignment Log
(Appendix A)

			RSS Pharmacy Personnel Assignment Log (Appendix A)		
Date	**Name (Last, First)**	**License Registration Number**	**Assignment**	**Start Time**	**End Time**

RSS CDS PERPETUAL INVENTORY FORM (APPENDIX B)

RSS CDS PERPETUAL INVENTORY FORM (APPENDIX B)

Drug **Name/Str/Start Inv # _____**

Date	Beginning/Additional Inventory	Hospital/POD/Treatment Site	Quantity Shipped	Time Shipped	Ending Inventory	Pharmacist Initials

RSS CONTROLLED SUBSTANCE
BILL OF LADEN
APPENDIX C

		RSS Controlled Substance Bill of Laden (Appendix C)				
DATE	DRUG/STRENGTH/DOSAGE FORM	SHIPPING DESTINATION	QUANTITY ORDERED	QUANTITY SHIPPED	TRUCK-DEPARTURE TIME	RPh INITALS

RSS PERSONNEL DEMOGRAPHIC
& HEALTH SCREENING FORM
SEE APPENDIX D

RSS PHARMACY TIME
& EXPENSE REPORT
SEE APPENDIX E

RSS PHARMACY PERSONNEL
INJURY FORM
SEE APPENDIX F

RSS ACRONYMS
SEE APPENDIX H