FOREWORD

In pursuit of its goal of improving health status, the Ministry of Health is critically reviewing its policies and systems for ensuring the delivery of quality care to the population of Trinidad and Tobago in an affordable and sustainable manner.

A regular and reliable supply of safe and efficacious drugs is an important element of the health care system. Through a consultative and participatory approach we have developed a National Drug Policy which recognises the strengths of the existing public/private sector mix and seeks to ensure common standards and expectations consistent with the delivery of quality drugs to the members of the population.

I am very grateful to the several members of the private and commercial sector organizations as well as to officers of the Ministries and Government Agencies who partnered us throughout the challenging and ultimately rewarding exercise of policy development. We anticipate their continued support in the immediate task of implementing the policy and in subsequent activities to monitor, review and improve it.

Honourable Hamza Rafeeq
Minister of Health

December 1998
1.0 PREAMBLE

The Government of Trinidad and Tobago, having endorsed the Alma Ata Declaration, is committed to the primary health care approach. The Ministry of Health, as the arm of Government with responsibility for improving the health status of the population, has consciously adopted and iterated in its Mission Statement the basic tenets of Alma Ata which speak to promoting wellness, preventing and controlling diseases and ensuring availability of safe, effective and appropriate care and treatment for illnesses.

The Health Sector Reform Programme has decentralised the government health sector, placing responsibility for service delivery with five Regional Health Authorities. The Ministry is therefore in a better position to focus on its policy formulating, standard-setting, monitoring and evaluation roles in pursuit of its stated goal.

Convinced of the importance of quality as an integral element of all aspects of governance and operations in the health arena, the Ministry of Health has formally adopted the Total Quality Management/Continuous Quality Improvement approach with the full intention of fostering it throughout the health sector, public and private.

The provision of quality drugs based on health needs is rightly perceived as contributing to the quality outcomes expected from care rendered to persons. Such provision of quality drugs depends in great measure on the introduction and use of robust management systems by all those actively involved.

This document outlines broad policies for the several areas related to drugs, drug use, drug supply and its management in Trinidad and Tobago.

Through the development of any needed operational guidelines based on these policies, the Ministry will provide guidance to all those whose activities impact on the quality, availability and safe use of drugs.

Key stakeholders in this important area of drug regulation for safety and improved health and well-being are:

- Ministry of Health and Regional Health Authorities
- The Drug Inspectorate and the Chemistry Food and Drugs Division of the Ministry of Health
- National Insurance Property Development Company (NIPDEC)
- The Customs and Excise Division of the Ministry of Finance
- The private sector - importers, drug detail personnel and manufacturers
- Physicians, pharmacists & other health care providers
- The public and particularly those who use drugs whether regularly or intermittently
- The Ministry of Agriculture
1.1 OBJECTIVES OF THE NATIONAL DRUG POLICY

- To ensure the continuous, equitable supply of safe, effective drugs to the population through the development and monitoring of a robust drug system.

- To ensure that the health sector obtains value for money and to minimise any financial barrier to compliance, particularly among those who need to use drugs on a regular basis.

- To promote rational use of drugs through sound prescribing, good dispensing practices and appropriate use.

- To support the attainment of the goal of "Health For All" based on the primary health care approach.

1.2 DEFINITION

Drug

A drug includes any substance or mixture of substances in a synthetic and/or natural product, prepared, sold, or represented for use in the diagnosis, treatment, mitigation or prevention of a disease, disorder, abnormal physical state or the symptoms thereof, in man or animal; for restoring, exploring, correcting or modifying organic functions in man or animal.
2.0 QUALITY

The TQM/CQI approach, as formally adopted by the Ministry, will inform the implementation of this National Drug Policy. This is seen as necessary to achieve the stated objectives.

2.0.1 The Ministry shall ensure the adoption of the TQM/CQI approach in all Agencies/Bodies of the public health sector involved in the drug supply systems including any Agent/Body acting on its behalf.

2.0.2 It is the responsibility of the Ministry of Health to ensure that standards for the several elements of the system are developed, published and updated as necessary.
3.0 DRUG SUPPLY MANAGEMENT

A fundamental requirement for the provision of regular supplies of safe and efficacious drugs is a supply management system. Such a system will have as its end the continuous supply of safe and efficacious drugs in quantities and at times required at all the agreed locations. It will utilise the TQM/CQI principles.

3.0.1 It is the responsibility of all relevant stakeholders to develop, implement, monitor and evaluate on a regular basis, their management systems in respect of each part of the drug supply chain, from selection to distribution.

3.0.2 With respect to the public sector, the Ministry of Health shall actively pursue the improvement of the existing systems.
4.0 SELECTION

The selection of drugs shall be done with due regard to relevant epidemiologic, economic and therapeutic information.

4.0.1 All drugs selected must be registered as approved drugs in accordance with:-

- The Food and Drugs Act Chapter 30:01
- The Antibiotic Act 30:02
- The Dangerous Drugs Act No. 38 of 1991
- Any other laws subsequently brought into being save and except for those situations provided for under the Food and Drug Act.

4.0.2 The Ministry of Health shall ensure that the List of Registered Drugs is updated annually and available for use.

4.0.3 When several drugs are available with the same indication or when two or more drugs are therapeutically equivalent, the aim shall be to select the drug and dosage which provide the most favourable benefit/risk ratio.

4.0.4 Prescribers and dispensers of drugs shall be provided with information on the criteria for selection of drugs.

4.1 DRUG SELECTION IN THE PUBLIC SECTOR

4.1.1 The selection of drugs should be based on the following additional criteria:

- Best price for best quality
- Dependability of source
- Safety
- Efficacy
- International Non-proprietary Name (INN)
- Storage requirements and availability of same
- Shelf life in relation to known or anticipated rate of use

- Population needs based on sound epidemiological and service activity data

4.1.2 Building on its Essential Drug Policy, the Ministry of Health shall devise suitable and effective means to ensure compliance with the criteria stated above.

4.1.3 These provisions and mechanisms shall be documented and compliance monitored at regular intervals. Evaluation of the system(s) shall be undertaken at defined times to facilitate improvement.

4.1.4 The updated list of Registered Drugs and the Vital, Essential and Necessary (VEN) list shall be used in the selection process. The Ministry shall furnish these lists to all the relevant Agencies/Bodies of the public health sector.
5.0 PROCUREMENT

Procurement is the process of acquiring supplies. Drugs can enter the system through purchase or donation. It is necessary to have structures, systems, procedures and resources dedicated to procurement.

5.0.1 All those involved in drug procurement must estimate drug needs to minimise stock outs and overages thereby negating their adverse impact on health.

5.1 PROCUREMENT IN THE PUBLIC SECTOR

5.1.1 Estimates shall be prepared by the Regional Health Authorities, indicating products and quantities required on an annual, bi-annual or quarterly basis, to satisfy the needs of the health service. These estimates must be based on the criteria outlined for selection and on information from suitable inventory management systems.

5.1.2 In the interest of cost-efficiency and cost-benefit, the procurement of drugs will remain a function of the Central Ministry.

5.1.3 The Ministry shall ensure that the start and end dates for the several steps in The Drug Procurement Cycle are determined with a view to preventing gaps in supply.

5.1.4 Efforts shall be made to reconcile pharmaceutical requirements with available funds.

5.1.5 The Ministry shall use approved system(s) to invite tenders for the quantum of products selected.

5.1.6 The Ministry shall consider the track record of suppliers when determining award of tenders.

5.1.7 The Ministry can procure through direct purchase. It shall prepare suitable guidelines for direct purchases and conditions under which this can be done.

5.1.8 Necessary information shall be maintained on all required drugs, their utilization patterns and their producers/suppliers to enable effective procurement.
5.1.9 The updated list of Registered Drugs, National Drug Formulary and the VEN List shall be used in the tendering process.

6.0 STORAGE

The efficacy and safety of drugs are dependent on many factors among which are conditions of storage. It is imperative that those with responsibility for the storing of drugs are informed on the particular and special needs of the several drugs in stock and conscientiously maintain systems which do not compromise quality.

6.0.1 Adequate storage facilities must be available wherever needed to allow effective operation of the drug supply system. Such facilities must be designed to provide safe, secure storage under required environmental conditions.

6.0.2 The Ministry of Health shall be responsible for setting standards for bulk drug storage facilities and shall make such standards known.

6.0.3 The Ministry shall also register all bulk drug storage facilities. All relevant authorities (e.g. Fire Services, Customs & Excise), must give approval before such facilities are registered.

6.0.4 Information pertaining to storage requirements for all drugs at a storage facility must be clearly displayed.

6.0.5 A monitoring system shall be developed and operated by the Ministry of Health to ensure that all storage facilities maintain approved standards.
7.0 DISTRIBUTION

This is an important step in the process of making drugs available at the point of need. It requires careful planning and smooth implementation. Storage capacity at the peripheral locations, usage patterns and transport schedules are some of the critical factors involved in assuring a constant supply of quality drugs to clients.

7.0.1 Secured vehicles shall be used in the transport of drugs in order to eliminate loss and risk occurring through theft and illegal distribution.

7.0.2 The distributor shall ensure that suitable arrangements are made for maintenance of environmental temperatures as stipulated by the manufacturers, during transport.

7.0.3 The Ministry shall cooperate with other National Agencies and Organizations in managing drug distribution in times of emergency. This includes the provision of necessary training.

7.1 DISTRIBUTION IN THE PUBLIC SECTOR

7.1.1 The Ministry of Health and the Regional Health Authorities shall develop systems, processes and procedures to ensure equitable distribution of drugs to meet client needs and also to minimize waste.

7.1.2 Special arrangements shall be made and communicated to the relevant persons for the distribution of drugs during emergency situations.
8.0 MARKETING & SALE OF DRUGS

The sale of drugs constitutes a legitimate element of the economy. It is however of prime importance that advertising/marketing and sale of drugs do not adversely affect the health of the population. Marketing shall therefore be subject to internationally accepted ethical standards. Information provided must be factual and relevant to the Health situation in the country. The sale of all drugs shall conform to the laws of Trinidad and Tobago.

8.0.1 The Ministry shall seek to inform widely on the matter of marketing of drugs and shall work collaboratively with relevant partners to monitor compliance.

8.0.2 Drugs shall be sold in accordance with the laws and regulations relating to packaging, dispensing and providing information to the consumer.
9.0 DESTRUCTION OF DRUGS

Quality and safety principles demand clearly documented and understood arrangements for the destruction of drugs deemed unfit for use. Several pieces of legislation and legally appointed officers are involved in this aspect of the drug supply system.

9.0.1 No drug shall be accepted, distributed/dispensed beyond its expiry date, except in prescribed circumstances and with the official approval of the Ministry of Health.

9.0.2 The Ministry shall define the prescribed circumstances and issue the necessary guidelines for obtaining approval.

9.0.3 The removal and destruction of all expired Antibiotics, Narcotics and Controlled drugs or drugs deemed unsafe for use for whatever reason, shall be carried out under the supervision of officers mandated to do so and in accordance with approved guidelines.

9.0.3 The Ministry shall prepare Guidelines outlining the responsibilities of individuals to adhere to environmental safety when disposing of drugs.
10.0 RATIONAL DRUG USE

The benefits of the entire drug system will accrue to the client in so far as there is awareness and use of rational prescribing and use of needed drugs. It is incumbent on all persons in the system to be conscious of this reality and act appropriately.

10.0.1 The Ministry of Health shall use all appropriate strategies and methods to encourage rational drug use by emphasising sound prescribing practices and the informed use of drugs by patients.
11.0 MONITORING AND EVALUATION

Monitoring and evaluation of the policy, its implementation and impact are vital to the achievement of the stated objectives. Consonant with its stated enhanced role, the Ministry of Health must lead in this area.

11.0.1 All Agencies/Organizations involved in the supply of drugs must develop, document, monitor and evaluate their systems and seek to identify and use sensitive process and outcome indicators where applicable.

11.1 MONITORING AND EVALUATION IN THE PUBLIC SECTOR

11.1.1 The Ministry of Health shall ensure that the entire public sector drug system is monitored and evaluated. The Ministry shall therefore ensure the development and use of suitable process and outcome indicators in respect of the drug supply system. The entire monitoring and evaluation system shall be reviewed and updated at stated intervals.
12.0 RESEARCH AND DEVELOPMENT

Research of a practical applied nature is necessary for continued improvement in the drug supply system and constitutes a valid area for inclusion in the Essential National Health Research Programme. All stakeholders will benefit from such systematic research.

12.0.1 The Ministry of Health shall foster the environment for such research. It shall initiate and support research in drug use and outcome where such research is deemed desirable or necessary for the development of policy and operational guidelines. All research shall be done in accordance with established ethical and scientific standards.

12.0.2 The Ministry shall seek resources to contribute to such research.
13.0 LEGISLATION

All drugs manufactured, imported, stored and sold are subject to law.

13.0.1 The Ministry of Health shall ensure that these laws are reviewed and updated as necessary and communicated to all stakeholders.

13.0.2 The Ministry shall remain alert to the need for new laws and regulations and shall seek to have these developed and implemented by suitable administrative arrangements.
14.0 INFORMATION SYSTEMS

Reliable and timely information on drugs as well as on the various elements of the system is important to the effective and efficient implementation of this policy. There are many sources of such relevant information and these must be identified and linked.

14.0.1 The Ministry of Health shall promote and support the development and maintenance of an information system at all levels of the drug supply system.

i. To facilitate the safe and effective use of drugs.

ii. For prompt treatment of drug overdose/adverse effects.

iii. For the management of the drug supply system.

14.0.2 Appropriate technology shall be used, with necessary training provided to the users.

14.0.3 Access to publications, journals and other sources of information shall be facilitated.
15.0 DONATIONS

It is now becoming the norm for governments of and officially recognised groups in the more developed countries to make offers of drugs to countries in the developing world. It is important that clear guidelines be developed and followed to deal with such offers.

15.0.1 Donations may not be accepted into the country unless the drugs comply with regulations/legislation on quality, safety and efficacy and appear on the list of Registered Drugs in Trinidad and Tobago.

15.0.2 The Ministry of Health shall ensure the development and communication of suitable guidelines for the acceptance of drugs. Any such guidelines shall take cognisance of what is accepted internationally and shall be subject to review and update at stated periods.
16.0 COMPLEMENTARY MEDICINE

Trinidad and Tobago, like other countries world-wide, is seeing an increase in interest in "natural" products as being better for health. Many such products are imported but there are also those which form part of the cultural heritage of the islands. Many have not been subjected to rigorous scientific research and are not regulated in any way.

16.0.1 The Ministry of Health shall recognise this resurgence of interest in herbal products and generally in complementary medicine and shall provide useful information to the public in so far as this is possible.

16.0.2 The Ministry shall regulate Herbal Medicines (HM) in the same way as are the allopathic (conventional) drugs used in "orthodox" medicine.

16.0.3 The Ministry shall monitor the growth in importance of practitioners of traditional (folkloric) medicines (FM).
17.0 CUSTOMS & EXCISE DIVISION

The Customs & Excise Division of the Ministry of Finance plays an important role in the drug supply system. Its officers are key partners who provide a frontline service in the entry of drugs into the country.

17.0.1 The Ministry of Health shall actively foster a partnership with the Customs & Excise Division and shall initiate/participate in regular updates and other training sessions for its personnel.

17.0.2 Systems shall be established to advise the Customs & Excise Division on the following:

- List of Drugs approved for entry into the country
- Notification of Ministry of Health as needed

17.0.3 Both the Ministry of Health and the Customs & Excise Division shall ensure the development and implementation of clear communication links and shall agree on and document procedures for addressing issues such as:

- disposal/destruction of unclassified shipments of drugs
- drug donations
- traders

December 1998
18.0 HUMAN RESOURCES DEVELOPMENT

Development, implementation, monitoring, review and upgrade of the several areas pertinent to drug management and safe drug use will require the identification of additional skills - technical and administrative.

18.0.1 All Organizations and Agencies involved in any aspect of the drug procurement and management system in Trinidad shall develop its human resources for a safe, effective and efficient system in accordance with TQM/CQI.

18.0.2 The Ministry shall ensure that a Human Resource Plan for this area is developed and integrated into the public health sector Human Resource Plan.
19.0 CO-OPERATION

Co-operation is needed to strengthen national and regional policies and drug management systems.

19.0.1 The Ministry of Health shall foster action between

- public and private sectors in Trinidad and Tobago
- countries

19.1 TECHNICAL CO-OPERATION

19.1.1 The Ministry of Health shall identify areas in which it can provide and benefit from technical assistance.
20.0 FINANCING

The continuous provision of safe, efficacious drugs is dependent on the adequacy of funding. There are at present several financing sources, prime among which are the annual government allocations to the Ministry of health and the Regional Health Authorities and the "out-of-the pocket" expenditure by the population.

Other possibilities exist. These are:

- grants from international sources
- local extra-government sources
- revolving funds
- Health Insurance

20.0.1 To give effect to the policy adequate funds must be allocated for drug supply, and development and operating costs of the drug supply system.

20.0.2 Recognising the reality of limited resources, priority in purchasing should be given to those drugs on the VEN list since these are determined on the basis of health needs.

An adequate portion of the National Budget must be allocated for the supply of drugs in quality and quantity.
**LIST OF ABBREVIATIONS**

<table>
<thead>
<tr>
<th>Abbreviation</th>
<th>Description</th>
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<tr>
<td>INN</td>
<td>International Non-Proprietary Name</td>
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<tr>
<td>NIPDEC</td>
<td>National Insurance Property Development Company</td>
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<td>PAHO</td>
<td>Pan American Health Organization</td>
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<td>RHA</td>
<td>Regional Health Authority</td>
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<td>TQM/CQI</td>
<td>Total Quality Management/Continuous Quality Improvement</td>
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<td>VEN</td>
<td>Vital, Essential and Necessary</td>
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## GLOSSARY OF TERMS

<table>
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<tr>
<th>Term</th>
<th>Definition</th>
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<tr>
<td>Adverse Reaction</td>
<td>Abnormal reaction (psychological and physiological to a drug).</td>
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<td>Benefit/Risk Ratio</td>
<td>A quantitative or qualitative measure indicating the benefits over the risk of taking a course of medication.</td>
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<td>Bioavailability</td>
<td>The rate and extent of absorption of a drug from its specific dosage form.</td>
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<td>Bulk</td>
<td>Bulk product: Any product that has completed all processing stages up to but not including, final packaging.</td>
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<td>Compliance</td>
<td>The degree to which patients adhere to medical advice and take medicines as directed.</td>
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<td>Efficacy</td>
<td>The ability of a drug to produce the purported effect as determined by scientific methods.</td>
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<td>Effectiveness</td>
<td>The degree to which a drug supply system provides the required services.</td>
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<td>Herbal Medicine</td>
<td>A botanical drug which is finished and labelled and contains as active ingredients the aerial or underground parts of plants, whether in crude state or as plant extractives.</td>
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<td>Traders</td>
<td>Potential source of importation and sale of unregistered drugs by &quot;jobbers&quot;.</td>
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<tr>
<td>TQM/CQI</td>
<td>Total Quality Management/Continuous Quality Improvements. The management activities required to assure that the drug which reaches the patient is safe, effective and acceptable to the patient.</td>
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<tr>
<td>Traditional</td>
<td>Not usually processed for general usage as much as for individual use.</td>
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<tr>
<td>Folkloric</td>
<td>May be herbal or non-herbal in content and is derived from the particular cultural beliefs and medical systems of its practitioners.</td>
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VEN

Vital, Essential, Necessary. These are the classifications used for the list of drugs which may be purchased by the Ministry of Health.
REFERENCES


Ministry of Health - "De La Grenade Committee" T&T (1991) Report on Material Distribution in Health Sector, Ministry of Health, Trinidad and Tobago


LIST OF PARTICIPANTS IN NATIONAL DRUG POLICY WORKSHOP

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Chamber of Commerce
Diabetic Association of Trinidad & Tobago
Ministry of Consumer Affairs
Ministry of Finance (Customs & Excise Division)
Ministry of Health
Faculty of Medicine (UWI)
General Practitioners Association of Trinidad & Tobago
Medical Board of Trinidad & Tobago
National Insurance Property Development Company (NIPDEC)
Nursing Council of Trinidad & Tobago
Pharmacy Board of Trinidad and Tobago
Pharmaceutical Society of Trinidad & Tobago

Trinidad & Tobago Registered Nurses Association

Soroptomist International

Veterinary Public Health (UWI)

Other Non-Governmental Organization (NGO's)
MINISTRY OF HEALTH

NATIONAL DRUG POLICY

DRUG DONATIONS

SELECTION AND PROCUREMENT
1. All drug donations must be based on an expressed need and be relevant to the disease pattern in Trinidad and Tobago. Drugs must not be sent without the written prior consent of the recipient.

2. All donated drugs or their generic equivalents must be approved for use in Trinidad and Tobago and should therefore appear on the National List of Approved Drugs. In the case of there being particular need for a drug not on the list, such need must be certified by a physician. The procedure permitted by the relevant Act will then be followed to permit the entry of the drug into Trinidad and Tobago.

3. The presentation, strength and formulation of donated drugs must match as far as possible, those in use in Trinidad and Tobago.

4. All donated drugs must be obtained from a reliable source and must comply with quality standards in both donor and recipient countries. THE WHO Certification Scheme on the Quality of Pharmaceutical Products Moving in International Commerce must be used.

5. Drugs issued to patients and then returned to a pharmacy or elsewhere, or drugs provided as free samples to health professionals must not be accepted as donations.

6. All donated drugs must have a remaining shelf-life of at least one year, after arrival in Trinidad and Tobago.

7. All packages/containers must be labelled in English. The label on each individual container must carry, as a minimum, the International Nonproprietary Name (INN, or generic name), batch number, dosage form, strength, name of manufacturer, quantity in the container, storage conditions and expiry date.

8. As far as possible, donated drugs should be presented in larger quantity units and hospital packs.
9. All drug donations must be packed in accordance with international shipping regulations and be accompanied by a detailed packing list which specifies the content of each numbered carton by INN, dosage form, quantity, batch number, expiry date, volume, weight and any special storage conditions. The weight per carton should not exceed fifty (50) kilograms. Drugs must not be packed in the same carton with other products/supplies.

10. Recipients must be informed of all donations being considered so that necessary inputs are made, when the shipments are being prepared and when they are being dispatched.

11. In Trinidad and Tobago, the declared value of a drug donation must be based on the wholesale price of its generic equivalent in Trinidad and Tobago, or if such information is not available, on the wholesale world-market price for the generic equivalent.

12. The cost of international and local transport, warehousing, port clearance and appropriate storage and handling should be paid by the donor, unless specifically agreed to by the recipient in advance.

13. Import and withdrawal permits must be obtained before donations are brought into the country.

**STORAGE**

14. On arrival in Trinidad and Tobago, all donated drugs are to be
   - stored in accordance with the conditions set out in the relevant laws of the Republic of Trinidad and Tobago, namely
     The Dangerous Drugs Act No 38 of 1991
     The Antibiotic Ordinance Chapter 30:02
     The Food and Drugs Act Chapter 30:01
   - subject to inspection by the Drug Inspectorate of the Ministry of Health

**DISTRIBUTION**

15. All donated drugs shall be issued in accordance with the following laws of the Republic of Trinidad and Tobago, namely
     The Dangerous Drugs Act No 38 of 1991
     The Antibiotic Ordinance, Chapter 30:02
     The Food and Drugs Act, Chapter 30:01

16. No donated drugs shall be used for any purpose other than that for which they were intended.

January 2000
Donations - List of Essential Drugs

**Analgesics**

Non-opioids
Tabs Acetyl salicylic Acid 300mg
Paracetamol Tabs. 500mg
Paracetamol Syr. 125mg/5ml

**Antiallergics**

Chlorpheniramine Maleate 4mg
Hydrocortisone Ung 0.5%

**Anthelmintics**

Albendazole chewable tablets 200mg
Levamisole tablets. 500mg, 150mg
Mebendazole chewable tablets 100mg
Piperazine tablets 500mg
Piperazine Syrup 500mg/5ml

**Antibacterials**

Amoxicillin Caps. 250mg or 500mg
Amoxicillin Syrup 125mg/5ml or 250mg/5ml
Ampicillin Caps. 250mg or 500mg
Ampicillin Syrup 125mg/5ml or 250mg/5ml
Penicillin V or G 250 Tabs
Penicillin V or G Syrup 125mg/5ml
Tabs. Metronidazole 200mg or 500mg
Trimethoprim/
Sulfamethoxazole Tablets 80/400mg
Trimethoprim/
Sulfamethoxazole Susp. 40/200mg/5ml
Hormones

Prednisolone tablets  5mg

Antianaemic

Ferrous salt  tablets equivalent to 60mg iron
Ferrous salt & Folic acid tablets equivalent to 60mg iron &
Folic Acid tablets  250 (ug) mcg folic acid  5mg

Antianginal

Glyceryl trinitrate tablets sublingual  500mg
Propanolol tablets  10mg & 40mg
Tabs. Atenolol  50mg, 100mg
Cap. Nifedipine  10mg
Tab. Captopril  25mg
Tab. Methyldopa  250mg
Tab. Reserpine  0.25mg
Tab. Digitalis  0.25mg

Antifungal

Griseofulvin Tablets  125mg or 500mg
Benzoic Acid & Salicylic Acid Ointment or Cream  6% & 3%
Miconazole Nitrate Ointment or Cream  2%
Sodium Thiosulphate Solution  20% or 25%
Selenium Sulfide  2%
Silver Sulfadiazine Cream  1%
Calamine Lotion

Scabicides and Pediculicides

Benzylbenzoate Lotion  25%
Permethrin Cream  5%
Permethrin Lotion  1%
**Disinfectants**

Chlorhexidine Solution 5% for dilution  
Hydrogen Peroxide Solution 3%  
Polyvidone Iodine Solution 10%

**Diuretics**

Frusemide tabs. 40mg  
Hydrochlorothiazide tabs 25mg, 50mg

**Antacids**

Aluminum Hydroxide Susp. 320mg/5ml  
Magnesium Hydroxide Susp 8% of hydrated magnesium oxide  
Metoclopramide tablets 10mg

**Anti Haemorrhoidal Drugs**

Local anaesthetics, astringent  
and anti inflammatory drugs ointment or suppository

**Drugs used in Diarrhoea**

Oral Rehydration Salts

**Antidiabetic Agents**

Gliclazide 80mg  
Glibenclamide 5mg

**Ophthalmological Preparations**

Gentamicin Eye Drops 3%  
Timolol Maleate Eye Drops 0.25%  
Timolol Maleate Eye Drops 0.5%  
Pilocarpine Eye Drops 2% & 4%  
Acetazolamide 250mg
**Antiasthmatics**

Salbutamol tablets 2mg, 4mg (as sulfate)
Salbutamol Aerosol 100mg/dose
Salbutamol Syrup 2mg/5ml (as sulfate)

**Vitamins and Minerals**

Tabs Multivitamin without mineral
Tabs multivitamin with minerals
Tabs Calcium Gluconate 600mg
Tabs Ascorbic Acid
Tabs Vitamin BCo.
Tabs Pyridoxine 25mg