



# **Step Therapy Requirements**

**Effective: 02/01/2026**

# ANTIGOUT AGENTS

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## Products Affected

### Step 2:

- *febuxostat 40 mg tablet*
- *febuxostat 80 mg tablet*

## Details

<b>Criteria</b>	PRIOR CLAIM FOR FORMULARY VERSION OF ALLOPURINOL TABLETS WITHIN THE PAST 120 DAYS.
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# ANTIULCER AGENTS

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## Products Affected

### Step 2:

- *esomeprazole magnesium dr 10 mg granules delayed release for susp*
- *esomeprazole magnesium dr 20 mg granules delayed release for susp*
- *esomeprazole magnesium dr 40 mg granules delayed release for susp*

## Details

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<b>Criteria</b>	PRIOR CLAIM FOR GENERIC FEDERAL LEGEND FORMULARY VERSION OF ORAL LANSOPRAZOLE CAPSULES, ESOMEPRAZOLE MAG CAPSULES, RABEPRAZOLE, OMEPRAZOLE, OR PANTOPRAZOLE WITHIN THE PAST 120 DAYS.
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# ARIPIPIRAZOLE FILM

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## Products Affected

### Step 2:

- OPIPZA 10 MG ORAL FILM
- OPIPZA 2 MG ORAL FILM
- OPIPZA 5 MG ORAL FILM

## Details

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<b>Criteria</b>	TRIAL OF GENERIC ARIPIPIRAZOLE TABLETS IN THE PAST 120 DAYS
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# ARIPIPIRAZOLE ODT

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## Products Affected

### Step 2:

- *aripiprazole 10 mg disintegrating tablet*
- *aripiprazole 15 mg disintegrating tablet*

## Details

<b>Criteria</b>	PRIOR CLAIM FOR ONE FORMULARY ORAL ANTIPSYCHOTIC: RISPERIDONE, CLOZAPINE TABLET, OLANZAPINE, IMMEDIATE RELEASE QUETIAPINE FUMARATE, ZIPRASIDONE, ARIPIPIRAZOLE (TAB, FILM, SOLN) ASENAPINE, PALIPERIDONE, LURASIDONE WITHIN THE PAST 120 DAYS.
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# ASENAPINE PATCH

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## Products Affected

### Step 2:

- SECUADO 3.8 MG/24 HOUR  
TRANSDERMAL 24 HOUR PATCH
- SECUADO 5.7 MG/24 HOUR  
TRANSDERMAL 24 HOUR PATCH
- SECUADO 7.6 MG/24 HOUR  
TRANSDERMAL 24 HOUR PATCH

## Details

<b>Criteria</b>	CLAIM FOR 2 FORMULARY ORAL GENERIC ANTIPSYCHOTICS: LURASIDONE, RISPERIDONE, CLOZAPINE TAB, OLANZAPINE, IR QUETIAPINE FUMARATE, ZIPRASIDONE, ARIPIPRAZOLE, ASENAPINE, PALIPERIDONE WITHIN PAST 365 DAYS
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# B VERSUS D ADMINISTRATIVE STEP

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## Products Affected

### Step 2:

- *cyclophosphamide 25 mg capsule*
- *cyclophosphamide 25 mg tablet*
- *cyclophosphamide 50 mg capsule*
- *cyclophosphamide 50 mg tablet*
- JYLAMVO 2 MG/ML ORAL SOLUTION
- *methotrexate sodium 2.5 mg tablet*
- XATMEP 2.5 MG/ML ORAL SOLUTION

## Details

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<b>Criteria</b>	IN ORDER TO ASSIST IN A PART B VS. D PAYMENT DETERMINATION, A PRIOR CLAIM SEEN FOR A RHEUMATOID ARTHRITIS, PSORIASIS OR ACTIVE POLYARTICULAR JUVENILE IDIOPATHIC ARTHRITIS DRUG WITHIN THE PAST 120 DAYS WILL QUALIFY FOR PART D PAYMENT. ALL OTHER INDICATIONS WILL HAVE A PART B VS. D PAYMENT DETERMINATION MADE THROUGH THE FORMULARY EXCEPTION PROCESS PRIOR TO THE APPROVAL OF THE DRUG.
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# CARIPRAZINE

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## Products Affected

### Step 2:

- VRAYLAR 1.5 MG (1)-3 MG (6) CAPSULES IN A DOSE PACK
- VRAYLAR 1.5 MG CAPSULE
- VRAYLAR 3 MG CAPSULE
- VRAYLAR 4.5 MG CAPSULE
- VRAYLAR 6 MG CAPSULE

## Details

<b>Criteria</b>	CLAIM FOR 2 FORMULARY ORAL GENERIC ANTIPSYCHOTICS: LURASIDONE, RISPERIDONE, OLANZAPINE, IMMEDIATE RELEASE QUETIAPINE FUMARATE, ZIPRASIDONE, ARIPIPRAZOLE, ASENAPINE WITHIN THE PAST 365 DAYS
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# CLOZAPINE

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## Products Affected

### Step 2:

- *clozapine 100 mg disintegrating tablet*
- *clozapine 12.5 mg disintegrating tablet*
- *clozapine 150 mg disintegrating tablet*
- *clozapine 200 mg disintegrating tablet*
- *clozapine 25 mg disintegrating tablet*
- VERSACLOZ 50 MG/ML ORAL SUSPENSION

## Details

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<b>Criteria</b>	PRIOR CLAIM FOR ONE FORMULARY ORAL ANTIPSYCHOTIC: RISPERIDONE, CLOZAPINE TABLET, OLANZAPINE, IMMEDIATE RELEASE QUETIAPINE FUMARATE, ZIPRASIDONE, ARIPIPRAZOLE, ASENAPINE, PALIPERIDONE, LURASIDONE WITHIN THE PAST 120 DAYS.
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# DEXTROMETHORPHAN HBR/BUPROPION

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## Products Affected

### Step 2:

- AUVELITY 45 MG-105 MG TABLET, EXTENDED RELEASE

## Details

<b>Criteria</b>	PRIOR CLAIM FOR TRINTELLIX AND ONE GENERIC ANTIDEPRESSANT (CITALOPRAM, ESCITALOPRAM, FLUOXETINE, PAROXETINE, SERTRALINE, DESVENLAFAXINE, DULOXETINE, VENLAFAXINE, MIRTAZAPINE, BUPROPION IR/SR/XL, OR VILAZODONE) WITHIN THE PAST 365 DAYS
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# DIHYDROERGOTAMINE MESYLATE

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## Products Affected

### Step 2:

- *dihydroergotamine 0.5 mg/pump act. (4 mg/ml) nasal spray*

## Details

<b>Criteria</b>	PRIOR CLAIM FOR 2 FORMULARY GENERIC TRIPTANS (e.g. SUMATRIPTAN and RIZATRIPTAN) WITHIN THE PAST 365 DAYS
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# DRIZALMA SPRINKLE

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## Products Affected

### Step 2:

- DRIZALMA SPRINKLE 20 MG CAPSULE,DELAYED RELEASE
- DRIZALMA SPRINKLE 30 MG CAPSULE,DELAYED RELEASE
- DRIZALMA SPRINKLE 40 MG CAPSULE,DELAYED RELEASE
- DRIZALMA SPRINKLE 60 MG CAPSULE,DELAYED RELEASE

## Details

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<b>Criteria</b>	PRIOR CLAIM FOR FORMULARY GENERIC DULOXETINE CAPSULE WITHIN THE PAST 120 DAYS.
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# ELEPSIA XR

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## Products Affected

### Step 2:

- ELEPSIA XR 1,000 MG  
TABLET,EXTENDED RELEASE
- ELEPSIA XR 1,500 MG  
TABLET,EXTENDED RELEASE

## Details

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<b>Criteria</b>	TRIAL OF GENERIC LEVETIRACETAM ER TABLETS WITHIN THE PAST 120 DAYS
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# EPRONTIA

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## Products Affected

### Step 2:

- *topiramate 25 mg/ml oral solution*

## Details

<b>Criteria</b>	PRIOR CLAIM FOR GENERIC TOPIRAMATE (TABLETS OR CAPSULES) WITHIN THE PAST 120 DAYS.
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# ESLICARBAZEPINE ACETATE

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## Products Affected

### Step 2:

- *eslicarbazepine 200 mg tablet*
- *eslicarbazepine 400 mg tablet*
- *eslicarbazepine 600 mg tablet*
- *eslicarbazepine 800 mg tablet*

## Details

<b>Criteria</b>	PRIOR CLAIM FOR 2 GENERIC ANTICONVULSANT AGENTS (CARBAMAZEPINE, DIVALPROEX SODIUM, GABAPENTIN, LAMOTRIGINE, LEVETIRACETAM, OXCARBAZEPINE, TIAGABINE, TOPIRAMATE, VALPROIC ACID, ZONISAMIDE OR LACOSAMIDE), WITHIN THE PAST 365 DAYS.
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# FIBRATES

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## Products Affected

### Step 2:

- *omega-3 acid ethyl esters 1 gram capsule*

## Details

<b>Criteria</b>	PRIOR CLAIM FOR GENERIC FENOFIBRATE IN THE LAST 120 DAY
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# HIGH INTENSITY STATIN

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## Products Affected

### Step 2:

- NEXLETOL 180 MG TABLET
- NEXLIZET 180 MG-10 MG TABLET
- REPATHA PUSHTRONEX 420 MG/3.5 ML SUBCUTANEOUS WEARABLE INJECTOR
- REPATHA SURECLICK 140 MG/ML SUBCUTANEOUS PEN INJECTOR
- REPATHA SYRINGE 140 MG/ML SUBCUTANEOUS SYRINGE

## Details

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<b>Criteria</b>	PRIOR 25 DAY TRIAL OF GENERIC HIGH INTENSITY STATIN: FORMULARY VERSION OF ATORVASTATIN (40 MG or 80 MG) OR ROSUVASTATIN (20 MG or 40 MG) WITHIN THE PAST 120 DAYS. OTHERWISE, A STEP EXCEPTION REQUEST IS REQUIRED IF PATIENT CANNOT TOLERATE A STATIN.
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# ILOPERIDONE

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## Products Affected

### Step 2:

- FANAPT 1 MG TABLET
- FANAPT 10 MG TABLET
- FANAPT 12 MG TABLET
- FANAPT 2 MG TABLET
- FANAPT 4 MG TABLET
- FANAPT 6 MG TABLET
- FANAPT 8 MG TABLET
- FANAPT TITRATION PACK A 1 MG (2)-2 MG (2)-4 MG (2)-6 MG (2) TABLETS
- FANAPT TITRATION PACK B 1 MG (6)-2 MG (2)-6 MG (2)-8 MG (2) TABLETS
- FANAPT TITRATION PACK C 1 MG (4)-2 MG (2)-6 MG (2) TABLETS

## Details

<b>Criteria</b>	CLAIM FOR 2 FORMULARY ORAL GENERIC ANTIPSYCHOTICS: LURASIDONE, RISPERIDONE, CLOZAPINE TAB, OLANZAPINE, IR QUETIAPINE FUMARATE, ZIPRASIDONE, ARIPIPRAZOLE, ASENAPINE, PALIPERIDONE WITHIN THE PAST 365 DAYS.
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# INSULIN SUPPLY PAYMENT DETERMINATION ST

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## Products Affected

### Step 2:

- 1ST TIER UNIFINE PENTIPS 31 GAUGE X 1/4" NEEDLE
- 1ST TIER UNIFINE PENTIPS 31 GAUGE X 3/16" NEEDLE
- 1ST TIER UNIFINE PENTIPS 31 GAUGE X 5/16" NEEDLE
- 1ST TIER UNIFINE PENTIPS 32 GAUGE X 5/32" NEEDLE
- 1ST TIER UNIFINE PENTIPS PLUS 29 GAUGE X 1/2" NEEDLE
- 1ST TIER UNIFINE PENTIPS PLUS 31 GAUGE X 3/16" NEEDLE
- 1ST TIER UNIFINE PENTIPS PLUS 32 GAUGE X 5/32" NEEDLE
- ABOUTTIME PEN NEEDLE 30 GAUGE X 5/16"
- ABOUTTIME PEN NEEDLE 31 GAUGE X 3/16"
- ABOUTTIME PEN NEEDLE 31 GAUGE X 5/16"
- ABOUTTIME PEN NEEDLE 32 GAUGE X 5/32"
- ADVOCATE PEN NEEDLE 29 GAUGE X 1/2"
- ADVOCATE PEN NEEDLE 31 GAUGE X 3/16"
- ADVOCATE PEN NEEDLE 31 GAUGE X 5/16"
- ADVOCATE PEN NEEDLE 32 GAUGE X 5/32"
- ADVOCATE PEN NEEDLE 33 GAUGE X 5/32"
- ADVOCATE SYRINGES 0.3 ML 29 GAUGE X 1/2"
- ADVOCATE SYRINGES 0.3 ML 30 GAUGE X 5/16"
- ADVOCATE SYRINGES 0.3 ML 31 GAUGE X 5/16"
- ADVOCATE SYRINGES 0.5 ML 29 GAUGE X 1/2"
- ADVOCATE SYRINGES 0.5 ML 30 GAUGE X 5/16"
- ADVOCATE SYRINGES 0.5 ML 31 GAUGE X 5/16"
- ADVOCATE SYRINGES 1 ML 29 GAUGE X 1/2"
- ADVOCATE SYRINGES 1 ML 30 GAUGE X 5/16"
- ADVOCATE SYRINGES 1 ML 31 GAUGE X 5/16"
- ALCOHOL PADS
- ALCOHOL PREP PADS
- ALCOHOL PREP SWABS
- ALCOHOL SWABS
- ALCOHOL WIPES
- AQINJECT PEN NEEDLE 31 GAUGE X 3/16"
- AQINJECT PEN NEEDLE 32 GAUGE X 5/32"
- ASSURE ID DUO PRO SAFETY PEN NEEDLE 31 GAUGE X 3/16"
- ASSURE ID DUO-SHIELD 30 GAUGE X 3/16" NEEDLE
- ASSURE ID DUO-SHIELD 30 GAUGE X 5/16" NEEDLE
- ASSURE ID INSULIN SAFETY 0.5 ML 31 GAUGE X 15/64" SYRINGE
- ASSURE ID INSULIN SAFETY 1 ML 29 GAUGE X 1/2" SYRINGE
- ASSURE ID INSULIN SAFETY 1 ML 31 GAUGE X 15/64" SYRINGE
- ASSURE ID PEN NEEDLE 30 GAUGE X 3/16"
- ASSURE ID PEN NEEDLE 30 GAUGE X 5/16"
- ASSURE ID PEN NEEDLE 31 GAUGE X 3/16"

- ASSURE ID PRO PEN NEEDLE 30 GAUGE X 3/16"
- AUTOSHIELD DUO PEN NEEDLE 30 GAUGE X 3/16"
- BD ALCOHOL SWABS
- BD AUTOSHIELD DUO PEN NEEDLE 30 GAUGE X 3/16"
- BD ECLIPSE LUER-LOK 1 ML 30 GAUGE X 1/2" SYRINGE
- BD ECLIPSE LUER-LOK 30 X 1/2" NEEDLE
- BD INSULIN SYRINGE 1 ML 27 GAUGE X 1/2"
- BD INSULIN SYRINGE ULTRA-FINE (HALF UNIT) 0.3 ML 31 GAUGE X 5/16"
- BD INSULIN SYRINGE ULTRA-FINE 0.3 ML 30 GAUGE X 1/2"
- BD INSULIN SYRINGE ULTRA-FINE 0.5 ML 30 GAUGE X 1/2"
- BD LO-DOSE ULTRA-FINE 0.5 ML 29 GAUGE X 1/2" SYRINGE
- BD NANO 2ND GEN PEN NEEDLE 32 GAUGE X 5/32"
- BD SAFETYGLIDE INSULIN SYRINGE 0.3 ML 29 GAUGE X 1/2"
- BD SAFETYGLIDE INSULIN SYRINGE 0.3 ML 31 GAUGE X 15/64"
- BD SAFETYGLIDE INSULIN SYRINGE 0.3 ML 31 GAUGE X 5/16"
- BD SAFETYGLIDE INSULIN SYRINGE 0.5 ML 29 GAUGE X 1/2"
- BD SAFETYGLIDE INSULIN SYRINGE 0.5 ML 30 GAUGE X 5/16"
- BD SAFETYGLIDE INSULIN SYRINGE 0.5 ML 31 GAUGE X 15/64"
- BD SAFETYGLIDE INSULIN SYRINGE 1 ML 29 GAUGE X 1/2"
- BD SAFETYGLIDE INSULIN SYRINGE 1 ML 31 GAUGE X 15/64"
- BD SAFETYGLIDE SYRINGE 1 ML 27 GAUGE X 5/8"
- BD ULTRA-FINE MICRO PEN NEEDLE 32 GAUGE X 1/4"
- BD ULTRA-FINE MINI PEN NEEDLE 31 GAUGE X 3/16"
- BD ULTRA-FINE NANO PEN NEEDLE 32 GAUGE X 5/32"
- BD ULTRA-FINE ORIGINAL PEN NEEDLE 29 GAUGE X 1/2"
- BD ULTRA-FINE SHORT PEN NEEDLE 31 GAUGE X 5/16"
- BD VEO INSULIN SYRINGE ULTRA-FINE (HALF UNIT) 0.3 ML 31 GAUGE X 15/64"
- BD VEO INSULIN SYRINGE ULTRA-FINE 0.3 ML 31 GAUGE X 15/64"
- BD VEO INSULIN SYRINGE ULTRA-FINE 1 ML 31 GAUGE X 15/64"
- BD VEO INSULIN SYRINGE ULTRA-FINE 1/2 ML 31 GAUGE X 15/64"
- BORDERED GAUZE 2" X 2" BANDAGE
- CAREFINE PEN NEEDLE 29 GAUGE X 1/2"
- CAREFINE PEN NEEDLE 30 GAUGE X 5/16"
- CAREFINE PEN NEEDLE 31 GAUGE X 1/4"
- CAREFINE PEN NEEDLE 31 GAUGE X 5/16"
- CAREFINE PEN NEEDLE 32 GAUGE X 1/4"
- CAREFINE PEN NEEDLE 32 GAUGE X 3/16"
- CAREFINE PEN NEEDLE 32 GAUGE X 5/32"
- CARETOUCH ALCOHOL PREP PAD TOPICAL PADS
- CARETOUCH INSULIN SYRINGE 0.3 ML 31 GAUGE X 5/16"
- CARETOUCH INSULIN SYRINGE 0.5 ML 30 GAUGE X 5/16"
- CARETOUCH INSULIN SYRINGE 0.5 ML 31 GAUGE X 5/16"
- CARETOUCH INSULIN SYRINGE 1 ML 28 GAUGE X 5/16"
- CARETOUCH INSULIN SYRINGE 1 ML 29 GAUGE X 5/16"
- CARETOUCH INSULIN SYRINGE 1 ML 30 GAUGE X 5/16"

- CARETOUCH INSULIN SYRINGE 1 ML 31 GAUGE X 5/16"
- CARETOUCH PEN NEEDLE 29 GAUGE X 1/2"
- CARETOUCH PEN NEEDLE 31 GAUGE X 1/4"
- CARETOUCH PEN NEEDLE 31 GAUGE X 3/16"
- CARETOUCH PEN NEEDLE 31 GAUGE X 5/16"
- CARETOUCH PEN NEEDLE 32 GAUGE X 3/16"
- CARETOUCH PEN NEEDLE 32 GAUGE X 5/32"
- CLICKFINE PEN NEEDLE 31 GAUGE X 1/4"
- CLICKFINE PEN NEEDLE 31 GAUGE X 5/16"
- CLICKFINE PEN NEEDLE 32 GAUGE X 5/32"
- COMFORT EZ INSULIN SYRINGE 0.3 ML 29 GAUGE X 1/2"
- COMFORT EZ INSULIN SYRINGE 0.3 ML 30 GAUGE X 1/2"
- COMFORT EZ INSULIN SYRINGE 0.3 ML 30 GAUGE X 5/16"
- COMFORT EZ INSULIN SYRINGE 0.3 ML 31 GAUGE X 15/64"
- COMFORT EZ INSULIN SYRINGE 0.3 ML 31 GAUGE X 5/16"
- COMFORT EZ INSULIN SYRINGE 0.5 ML 29 GAUGE X 1/2"
- COMFORT EZ INSULIN SYRINGE 0.5 ML 30 GAUGE X 1/2"
- COMFORT EZ INSULIN SYRINGE 0.5 ML 30 GAUGE X 5/16"
- COMFORT EZ INSULIN SYRINGE 0.5 ML 31 GAUGE X 5/16"
- COMFORT EZ INSULIN SYRINGE 1 ML 27 GAUGE X 1/2"
- COMFORT EZ INSULIN SYRINGE 1 ML 28 GAUGE X 1/2"
- COMFORT EZ INSULIN SYRINGE 1 ML 29 GAUGE X 1/2"
- COMFORT EZ INSULIN SYRINGE 1 ML 30 GAUGE X 1/2"
- COMFORT EZ INSULIN SYRINGE 1 ML 30 GAUGE X 5/16"
- COMFORT EZ INSULIN SYRINGE 1 ML 31 GAUGE X 15/64"
- COMFORT EZ INSULIN SYRINGE 1 ML 31 GAUGE X 5/16"
- COMFORT EZ INSULIN SYRINGE 1/2 ML 28 GAUGE X 1/2"
- COMFORT EZ INSULIN SYRINGE 1/2 ML 31 GAUGE X 15/64"
- COMFORT EZ PEN NEEDLES 29 GAUGE X 1/2"
- COMFORT EZ PEN NEEDLES 31 GAUGE X 1/4"
- COMFORT EZ PEN NEEDLES 31 GAUGE X 3/16"
- COMFORT EZ PEN NEEDLES 31 GAUGE X 5/16"
- COMFORT EZ PEN NEEDLES 32 GAUGE X 1/4"
- COMFORT EZ PEN NEEDLES 32 GAUGE X 3/16"
- COMFORT EZ PEN NEEDLES 32 GAUGE X 5/16"
- COMFORT EZ PEN NEEDLES 32 GAUGE X 5/32"
- COMFORT EZ PEN NEEDLES 33 GAUGE X 1/4"
- COMFORT EZ PEN NEEDLES 33 GAUGE X 3/16"
- COMFORT EZ PEN NEEDLES 33 GAUGE X 5/16"
- COMFORT EZ PEN NEEDLES 33 GAUGE X 5/32"
- COMFORT EZ PRO SAFETY PEN NEEDLE 30 GAUGE X 5/16"
- COMFORT EZ PRO SAFETY PEN NEEDLE 31 GAUGE X 3/16"
- COMFORT EZ PRO SAFETY PEN NEEDLE 31 GAUGE X 5/32"
- COMFORT TOUCH PEN NEEDLE 31 GAUGE X 1/4"
- COMFORT TOUCH PEN NEEDLE 31 GAUGE X 3/16"
- COMFORT TOUCH PEN NEEDLE 31 GAUGE X 5/16"



- DROPLET PEN NEEDLE 31 GAUGE X 3/16"
- DROPLET PEN NEEDLE 31 GAUGE X 5/16"
- DROPLET PEN NEEDLE 32 GAUGE X 1/4"
- DROPLET PEN NEEDLE 32 GAUGE X 3/16"
- DROPLET PEN NEEDLE 32 GAUGE X 5/16"
- DROPLET PEN NEEDLE 32 GAUGE X 5/32"
- DROPSAFE ALCOHOL PREP PADS
- DROPSAFE INSULIN SYRINGE 0.3 ML 31 GAUGE X 15/64"
- DROPSAFE INSULIN SYRINGE 0.3 ML 31 GAUGE X 5/16"
- DROPSAFE INSULIN SYRINGE 0.5 ML 31 GAUGE X 15/64"
- DROPSAFE INSULIN SYRINGE 0.5 ML 31 GAUGE X 5/16"
- DROPSAFE INSULIN SYRINGE 1 ML 29 GAUGE X 1/2"
- DROPSAFE INSULIN SYRINGE 1 ML 31 GAUGE X 15/64"
- DROPSAFE INSULIN SYRINGE 1 ML 31 GAUGE X 5/16"
- DROPSAFE PEN NEEDLE 31 GAUGE X 1/4"
- DROPSAFE PEN NEEDLE 31 GAUGE X 3/16"
- DROPSAFE PEN NEEDLE 31 GAUGE X 5/16"
- EASY COMFORT ALCOHOL PAD TOPICAL PADS
- EASY COMFORT INSULIN SYRINGE 0.3 ML 30 GAUGE X 5/16"
- EASY COMFORT INSULIN SYRINGE 0.3 ML 31 GAUGE X 5/16"
- EASY COMFORT INSULIN SYRINGE 0.3 ML 31 X 1/2"
- EASY COMFORT INSULIN SYRINGE 0.5 ML 30 GAUGE X 1/2"
- EASY COMFORT INSULIN SYRINGE 0.5 ML 30 GAUGE X 5/16"
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- EASY COMFORT INSULIN SYRINGE 1 ML 29 GAUGE X 5/16"
- EASY COMFORT INSULIN SYRINGE 1 ML 30 GAUGE X 1/2"
- EASY COMFORT INSULIN SYRINGE 1 ML 30 GAUGE X 5/16"
- EASY COMFORT INSULIN SYRINGE 1 ML 31 GAUGE X 5/16"
- EASY COMFORT INSULIN SYRINGE 1 ML 32 GAUGE X 5/16"
- EASY COMFORT INSULIN SYRINGE 1/2 ML 29 X 5/16"
- EASY COMFORT INSULIN SYRINGE 1/2 ML 32 GAUGE X 5/16"
- EASY COMFORT PEN NEEDLES 29 GAUGE X 3/16"
- EASY COMFORT PEN NEEDLES 29 GAUGE X 5/32"
- EASY COMFORT PEN NEEDLES 31 GAUGE X 1/4"
- EASY COMFORT PEN NEEDLES 31 GAUGE X 3/16"
- EASY COMFORT PEN NEEDLES 31 GAUGE X 5/16"
- EASY COMFORT PEN NEEDLES 32 GAUGE X 5/32"
- EASY COMFORT PEN NEEDLES 33 GAUGE X 1/4"
- EASY COMFORT PEN NEEDLES 33 GAUGE X 3/16"
- EASY COMFORT PEN NEEDLES 33 GAUGE X 5/32"
- EASY COMFORT SAFETY PEN NEEDLE 31 GAUGE X 1/4"
- EASY COMFORT SAFETY PEN NEEDLE 31 GAUGE X 3/16"
- EASY COMFORT SAFETY PEN NEEDLE 32 GAUGE X 5/32"
- EASY GLIDE INSULIN SYRINGE 0.3 ML 31 GAUGE X 15/64"
- EASY GLIDE INSULIN SYRINGE 1 ML 31 GAUGE X 15/64"
- EASY GLIDE INSULIN SYRINGE 1/2 ML 31 GAUGE X 15/64"

- EASY GLIDE PEN NEEDLE 33 GAUGE X 5/32"
- EASY TOUCH 29 GAUGE X 1/2" NEEDLE
- EASY TOUCH 31 GAUGE X 1/4" NEEDLE
- EASY TOUCH 31 GAUGE X 3/16" NEEDLE
- EASY TOUCH 31 GAUGE X 5/16" NEEDLE
- EASY TOUCH 32 GAUGE X 1/4" NEEDLE
- EASY TOUCH 32 GAUGE X 3/16" NEEDLE
- EASY TOUCH 32 GAUGE X 5/32" NEEDLE
- EASY TOUCH ALCOHOL PREP PADS
- EASY TOUCH FLIPLOCK INSULIN 1 ML 29 GAUGE X 1/2" SYRINGE
- EASY TOUCH FLIPLOCK INSULIN 1 ML 31 GAUGE X 5/16" SYRINGE
- EASY TOUCH FLIPLOCK INSULIN SYRINGE 1 ML 30 GAUGE X 1/2"
- EASY TOUCH FLIPLOCK INSULIN SYRINGE 1 ML 30 GAUGE X 5/16"
- EASY TOUCH FLIPLOCK SYRINGE 1 ML 27 GAUGE X 1/2"
- EASY TOUCH INSULIN SAFETY SYRINGE 0.5 ML 29 GAUGE X 1/2"
- EASY TOUCH INSULIN SAFETY SYRINGE 0.5 ML 30 GAUGE X 5/16"
- EASY TOUCH INSULIN SAFETY SYRINGE 1 ML 29 GAUGE X 1/2"
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- EASY TOUCH INSULIN SYRINGE 0.5 ML 30 GAUGE X 1/2"
- EASY TOUCH INSULIN SYRINGE 0.5 ML 30 GAUGE X 5/16"
- EASY TOUCH INSULIN SYRINGE 1 ML 27 GAUGE X 1/2"
- EASY TOUCH INSULIN SYRINGE 1 ML 27 GAUGE X 5/8"
- EASY TOUCH INSULIN SYRINGE 1 ML 28 GAUGE X 1/2"
- EASY TOUCH INSULIN SYRINGE 1 ML 29 GAUGE X 1/2"
- EASY TOUCH INSULIN SYRINGE 1 ML 30 GAUGE X 1/2"
- EASY TOUCH INSULIN SYRINGE 1 ML 30 GAUGE X 5/16"
- EASY TOUCH INSULIN SYRINGE 1 ML 31 GAUGE X 5/16"
- EASY TOUCH INSULIN SYRINGE 1/2 ML 27 GAUGE X 1/2"
- EASY TOUCH INSULIN SYRINGE 1/2 ML 28 GAUGE X 1/2"
- EASY TOUCH LUER LOCK INSULIN 1 ML SYRINGE
- EASY TOUCH PEN NEEDLE 30 GAUGE X 5/16"
- EASY TOUCH SAFETY PEN NEEDLE 29 GAUGE X 3/16"
- EASY TOUCH SAFETY PEN NEEDLE 29 GAUGE X 5/16"
- EASY TOUCH SAFETY PEN NEEDLE 30 GAUGE X 1/4"
- EASY TOUCH SAFETY PEN NEEDLE 30 GAUGE X 3/16"
- EASY TOUCH SAFETY PEN NEEDLE 30 GAUGE X 5/16"
- EASY TOUCH SHEATHLOCK INSULIN 1 ML 29 GAUGE X 1/2" SYRINGE
- EASY TOUCH SHEATHLOCK INSULIN 1 ML 30 GAUGE X 5/16" SYRINGE
- EASY TOUCH SHEATHLOCK INSULIN 1 ML 31 GAUGE X 5/16" SYRINGE

- EASY TOUCH SHEATHLOCK INSULIN SYRINGE 1 ML 30 GAUGE X 1/2"
- EASY TOUCH UNI-SLIP 1 ML SYRINGE
- EMBRACE PEN NEEDLE 29 GAUGE X 1/2"
- EMBRACE PEN NEEDLE 30 GAUGE X 3/16"
- EMBRACE PEN NEEDLE 30 GAUGE X 5/16"
- EMBRACE PEN NEEDLE 31 GAUGE X 1/4"
- EMBRACE PEN NEEDLE 31 GAUGE X 3/16"
- EMBRACE PEN NEEDLE 31 GAUGE X 5/16"
- EMBRACE PEN NEEDLE 32 GAUGE X 5/32"
- EXEL INSULIN 0.3 ML 29 GAUGE X 1/2" SYRINGE
- FREESTYLE PRECISION 0.5 ML 30 GAUGE X 5/16" SYRINGE
- FREESTYLE PRECISION 0.5 ML 31 GAUGE X 5/16" SYRINGE
- FREESTYLE PRECISION 1 ML 30 GAUGE X 5/16" SYRINGE
- FREESTYLE PRECISION 1 ML 31 GAUGE X 5/16" SYRINGE
- GAUZE BANDAGE 2" X 2"
- GAUZE PAD 2" X 2" BANDAGE
- HEALTHWISE INSULIN SYRINGE 0.3 ML 30 GAUGE X 5/16"
- HEALTHWISE INSULIN SYRINGE 0.3 ML 31 GAUGE X 5/16"
- HEALTHWISE INSULIN SYRINGE 0.5 ML 30 GAUGE X 5/16"
- HEALTHWISE INSULIN SYRINGE 0.5 ML 31 GAUGE X 5/16"
- HEALTHWISE INSULIN SYRINGE 1 ML 30 GAUGE X 5/16"
- HEALTHWISE INSULIN SYRINGE 1 ML 31 GAUGE X 5/16"
- HEALTHWISE PEN NEEDLE 31 GAUGE X 3/16"
- HEALTHWISE PEN NEEDLE 31 GAUGE X 5/16"
- HEALTHWISE PEN NEEDLE 32 GAUGE X 5/32"
- HEALTHY ACCENTS UNIFINE PENTIP 29 GAUGE X 1/2" NEEDLE
- HEALTHY ACCENTS UNIFINE PENTIP 31 GAUGE X 1/4" NEEDLE
- HEALTHY ACCENTS UNIFINE PENTIP 31 GAUGE X 3/16" NEEDLE
- HEALTHY ACCENTS UNIFINE PENTIP 31 GAUGE X 5/16" NEEDLE
- HEALTHY ACCENTS UNIFINE PENTIP 32 GAUGE X 5/32" NEEDLE
- INCONTROL ALCOHOL PADS
- INCONTROL PEN NEEDLE 29 GAUGE X 1/2"
- INCONTROL PEN NEEDLE 31 GAUGE X 1/4"
- INCONTROL PEN NEEDLE 31 GAUGE X 3/16"
- INCONTROL PEN NEEDLE 31 GAUGE X 5/16"
- INCONTROL PEN NEEDLE 32 GAUGE X 5/32"
- INSULIN SYRINGE MICROFINE 1 ML 27 GAUGE X 5/8"
- INSULIN SYRINGE NEEDLELESS 1 ML
- INSULIN SYRINGE U-100 WITH NEEDLE 0.3 ML 29 GAUGE
- INSULIN SYRINGE U-100 WITH NEEDLE 0.3 ML 29 GAUGE X 1/2"
- INSULIN SYRINGE U-100 WITH NEEDLE 0.3 ML 30
- INSULIN SYRINGE U-100 WITH NEEDLE 0.3 ML 30 GAUGE X 5/16"
- INSULIN SYRINGE U-100 WITH NEEDLE 0.3 ML 31 GAUGE X 1/4"
- INSULIN SYRINGE U-100 WITH NEEDLE 0.3 ML 31 GAUGE X 15/64"
- INSULIN SYRINGE U-100 WITH NEEDLE 0.3 ML 31 GAUGE X 5/16"
- INSULIN SYRINGE U-100 WITH NEEDLE 0.5 ML 29 GAUGE X 1/2"

- INSULIN SYRINGE U-100 WITH NEEDLE 0.5 ML 30 GAUGE X 1/2"
- INSULIN SYRINGE U-100 WITH NEEDLE 0.5 ML 30 GAUGE X 5/16"
- INSULIN SYRINGE U-100 WITH NEEDLE 0.5 ML 31 GAUGE X 5/16"
- INSULIN SYRINGE U-100 WITH NEEDLE 1 ML 27 GAUGE X 1/2"
- INSULIN SYRINGE U-100 WITH NEEDLE 1 ML 27 GAUGE X 5/8"
- INSULIN SYRINGE U-100 WITH NEEDLE 1 ML 28 GAUGE
- INSULIN SYRINGE U-100 WITH NEEDLE 1 ML 28 GAUGE X 1/2"
- INSULIN SYRINGE U-100 WITH NEEDLE 1 ML 29 GAUGE X 1/2"
- INSULIN SYRINGE U-100 WITH NEEDLE 1 ML 29 GAUGE X 7/16"
- INSULIN SYRINGE U-100 WITH NEEDLE 1 ML 30 GAUGE X 1/2"
- INSULIN SYRINGE U-100 WITH NEEDLE 1 ML 30 GAUGE X 3/8"
- INSULIN SYRINGE U-100 WITH NEEDLE 1 ML 30 GAUGE X 5/16"
- INSULIN SYRINGE U-100 WITH NEEDLE 1 ML 30 GAUGE X 7/16"
- INSULIN SYRINGE U-100 WITH NEEDLE 1 ML 31 GAUGE X 1/4"
- INSULIN SYRINGE U-100 WITH NEEDLE 1 ML 31 GAUGE X 15/64"
- INSULIN SYRINGE U-100 WITH NEEDLE 1 ML 31 GAUGE X 5/16"
- INSULIN SYRINGE U-100 WITH NEEDLE 1/2 ML 27 GAUGE X 1/2"
- INSULIN SYRINGE U-100 WITH NEEDLE 1/2 ML 28 GAUGE
- INSULIN SYRINGE U-100 WITH NEEDLE 1/2 ML 28 GAUGE X 1/2"
- INSULIN SYRINGE U-100 WITH NEEDLE 1/2 ML 29
- INSULIN SYRINGE U-100 WITH NEEDLE 1/2 ML 30 GAUGE
- INSULIN SYRINGE U-100 WITH NEEDLE 1/2 ML 31 GAUGE X 1/4"
- INSULIN SYRINGE U-100 WITH NEEDLE 1/2 ML 31 GAUGE X 15/64"
- INSULIN SYRINGE-NEEDLE U-100 HALF UNIT MARKING 0.3 ML 31 GAUGE X 1/4"
- INSULIN U-500 SYRINGE-NEEDLE 1/2 ML 31 GAUGE X 15/64"
- INSUPEN PEN NEEDLE 29 GAUGE X 1/2"
- INSUPEN PEN NEEDLE 30 GAUGE X 5/16"
- INSUPEN PEN NEEDLE 31 GAUGE X 1/4"
- INSUPEN PEN NEEDLE 31 GAUGE X 3/16"
- INSUPEN PEN NEEDLE 31 GAUGE X 5/16"
- INSUPEN PEN NEEDLE 32 GAUGE X 1/4"
- INSUPEN PEN NEEDLE 32 GAUGE X 5/16"
- INSUPEN PEN NEEDLE 32 GAUGE X 5/32"
- INSUPEN PEN NEEDLE 33 GAUGE X 5/32"
- IV PREP WIPES MEDICATED
- LISCO 2" X 2" SPONGE
- LITE TOUCH INSULIN PEN NEEDLES 29 GAUGE X 1/2"
- LITE TOUCH INSULIN PEN NEEDLES 31 GAUGE X 1/4"
- LITE TOUCH INSULIN PEN NEEDLES 31 GAUGE X 3/16"
- LITE TOUCH INSULIN PEN NEEDLES 31 GAUGE X 5/16"
- LITE TOUCH INSULIN SYRINGE 0.3 ML 29 GAUGE X 1/2"
- LITE TOUCH INSULIN SYRINGE 0.3 ML 30 GAUGE X 5/16"
- LITE TOUCH INSULIN SYRINGE 0.3 ML 31 GAUGE X 5/16"
- LITE TOUCH INSULIN SYRINGE 0.5 ML 29 GAUGE X 1/2"
- LITE TOUCH INSULIN SYRINGE 0.5 ML 30 GAUGE X 5/16"
- LITE TOUCH INSULIN SYRINGE 0.5 ML 31 GAUGE X 5/16"

- LITE TOUCH INSULIN SYRINGE 1 ML 28 GAUGE
- LITE TOUCH INSULIN SYRINGE 1 ML 28 GAUGE X 1/2"
- LITE TOUCH INSULIN SYRINGE 1 ML 29 GAUGE
- LITE TOUCH INSULIN SYRINGE 1 ML 29 GAUGE X 1/2"
- LITE TOUCH INSULIN SYRINGE 1 ML 30 GAUGE X 5/16"
- LITE TOUCH INSULIN SYRINGE 1 ML 30 GAUGE X 7/16"
- LITE TOUCH INSULIN SYRINGE 1 ML 31 GAUGE X 5/16"
- LITE TOUCH INSULIN SYRINGE 1/2 ML 28 GAUGE
- LITE TOUCH INSULIN SYRINGE 1/2 ML 28 GAUGE X 1/2"
- LITE TOUCH INSULIN SYRINGE 1/2 ML 29
- LITE TOUCH INSULIN SYRINGE 1/2 ML 30 GAUGE
- MAGELLAN INSULIN SAFETY SYRINGE 0.3 ML 29 GAUGE X 1/2"
- MAGELLAN INSULIN SAFETY SYRINGE 0.5 ML 29 GAUGE X 1/2"
- MAGELLAN INSULIN SAFETY SYRINGE 1 ML 29 GAUGE X 1/2"
- MAGELLAN INSULIN SAFETY SYRINGE 1 ML 30 GAUGE X 5/16"
- MAGELLAN SYRINGE 0.3 ML 30 X 5/16"
- MAGELLAN SYRINGE 0.5 ML 30 GAUGE X 5/16"
- MAXICOMFORT II PEN NEEDLE 31 GAUGE X 1/4"
- MAXICOMFORT INSULIN SYRINGE 1 ML 27 GAUGE X 1/2"
- MAXI-COMFORT INSULIN SYRINGE 1 ML 28 GAUGE X 1/2"
- MAXICOMFORT INSULIN SYRINGE 1/2 ML 27 GAUGE X 1/2"
- MAXI-COMFORT INSULIN SYRINGE 1/2 ML 28 GAUGE X 1/2"
- MAXICOMFORT SAFETY PEN NEEDLE 29 GAUGE X 3/16"
- MAXICOMFORT SAFETY PEN NEEDLE 29 GAUGE X 5/16"
- MICRODOT INSULIN PEN NEEDLE 31 GAUGE X 1/4"
- MICRODOT INSULIN PEN NEEDLE 32 GAUGE X 5/32"
- MICRODOT INSULIN PEN NEEDLE 33 GAUGE X 5/32"
- MICRODOT READYGARD PEN NEEDLE 31 GAUGE X 3/16"
- MINI ULTRA-THIN II 31 GAUGE X 3/16" NEEDLE
- MONOJECT INSULIN SAFETY SYRINGE 0.3 ML 30 GAUGE X 5/16"
- MONOJECT INSULIN SAFETY SYRINGE 0.5 ML 29 GAUGE X 1/2"
- MONOJECT INSULIN SAFETY SYRINGE 0.5 ML 30 GAUGE X 5/16"
- MONOJECT INSULIN SAFETY SYRINGE 1 ML 29 GAUGE X 1/2"
- MONOJECT INSULIN SYRINGE 0.3 ML 29 GAUGE X 1/2"
- MONOJECT INSULIN SYRINGE 0.3 ML 30 GAUGE X 5/16"
- MONOJECT INSULIN SYRINGE 0.3 ML 31 GAUGE X 5/16"
- MONOJECT INSULIN SYRINGE 0.5 ML 29 GAUGE X 1/2"
- MONOJECT INSULIN SYRINGE 0.5 ML 30 GAUGE X 5/16"
- MONOJECT INSULIN SYRINGE 0.5 ML 31 GAUGE X 5/16"
- MONOJECT INSULIN SYRINGE 1 ML
- MONOJECT INSULIN SYRINGE 1 ML 25 GAUGE X 5/8"
- MONOJECT INSULIN SYRINGE 1 ML 27 GAUGE X 1/2"
- MONOJECT INSULIN SYRINGE 1 ML 28 GAUGE X 1/2"
- MONOJECT INSULIN SYRINGE 1 ML 29 GAUGE X 1/2"
- MONOJECT INSULIN SYRINGE 1 ML 30 GAUGE X 5/16"
- MONOJECT INSULIN SYRINGE 1 ML 31 GAUGE X 5/16"

- MONOJECT INSULIN SYRINGE 1/2 ML 28 GAUGE X 1/2"
- MONOJECT SYRINGE 1/2 ML 28 GAUGE
- MONOJECT ULTRA COMFORT INSULIN 1/2 ML 28 GAUGE SYRINGE
- NANO 2ND GEN PEN NEEDLE 32 GAUGE X 5/32"
- NANO PEN NEEDLE 32 GAUGE X 5/32"
- NOVOFINE 30 NEEDLE
- NOVOFINE 32 32 GAUGE X 1/4" NEEDLE
- NOVOFINE PLUS 32 GAUGE X 1/6" NEEDLE
- NOVOTWIST 32 GAUGE X 1/5" NEEDLE
- PEN NEEDLE 29 GAUGE X 1/2"
- PEN NEEDLE 30 GAUGE X 5/16"
- PEN NEEDLE 31 GAUGE X 1/4"
- PEN NEEDLE 31 GAUGE X 3/16"
- PEN NEEDLE 31 GAUGE X 5/16"
- PEN NEEDLE 32 GAUGE X 5/32"
- PEN NEEDLE, DIABETIC 29 GAUGE X 1/2"
- PEN NEEDLE, DIABETIC 29 GAUGE X 15/32"
- PEN NEEDLE, DIABETIC 30 GAUGE X 3/16"
- PEN NEEDLE, DIABETIC 30 GAUGE X 5/16"
- PEN NEEDLE, DIABETIC 31 GAUGE X 1/3"
- PEN NEEDLE, DIABETIC 31 GAUGE X 1/4"
- PEN NEEDLE, DIABETIC 31 GAUGE X 1/6"
- PEN NEEDLE, DIABETIC 31 GAUGE X 13/64"
- PEN NEEDLE, DIABETIC 31 GAUGE X 15/64"
- PEN NEEDLE, DIABETIC 31 GAUGE X 3/16"
- PEN NEEDLE, DIABETIC 31 GAUGE X 5/16"
- PEN NEEDLE, DIABETIC 31 GAUGE X 5/32"
- PEN NEEDLE, DIABETIC 32 GAUGE X 1/4"
- PEN NEEDLE, DIABETIC 32 GAUGE X 3/16"
- PEN NEEDLE, DIABETIC 32 GAUGE X 5/16"
- PEN NEEDLE, DIABETIC 32 GAUGE X 5/32"
- PEN NEEDLE, DIABETIC 33 GAUGE X 1/4"
- PEN NEEDLE, DIABETIC 33 GAUGE X 3/16"
- PEN NEEDLE, DIABETIC 33 GAUGE X 5/32"
- PEN NEEDLE, DIABETIC, SAFETY 31 GAUGE X 5/32"
- PENTIPS PEN NEEDLE 29 GAUGE X 1/2"
- PENTIPS PEN NEEDLE 31 GAUGE X 1/4"
- PENTIPS PEN NEEDLE 31 GAUGE X 3/16"
- PENTIPS PEN NEEDLE 31 GAUGE X 5/16"
- PENTIPS PEN NEEDLE 32 GAUGE X 1/4"
- PENTIPS PEN NEEDLE 32 GAUGE X 5/32"
- PIP PEN NEEDLE 31 GAUGE X 3/16"
- PIP PEN NEEDLE 32 GAUGE X 5/32"
- PREVENT DROPSAFE PEN NEEDLE 31 GAUGE X 1/4"
- PREVENT DROPSAFE PEN NEEDLE 31 GAUGE X 5/16"
- PRO COMFORT ALCOHOL PADS
- PRO COMFORT INSULIN SYRINGE 0.5 ML 30 GAUGE X 1/2"
- PRO COMFORT INSULIN SYRINGE 0.5 ML 30 GAUGE X 5/16"
- PRO COMFORT INSULIN SYRINGE 0.5 ML 31 GAUGE X 5/16"
- PRO COMFORT INSULIN SYRINGE 1 ML 30 GAUGE X 1/2"

- PRO COMFORT INSULIN SYRINGE 1 ML 30 GAUGE X 5/16"
- PRO COMFORT INSULIN SYRINGE 1 ML 31 GAUGE X 5/16"
- PRO COMFORT PEN NEEDLE 32 GAUGE X 1/4"
- PRO COMFORT PEN NEEDLE 32 GAUGE X 3/16"
- PRO COMFORT PEN NEEDLE 32 GAUGE X 5/16"
- PRO COMFORT PEN NEEDLE 32 GAUGE X 5/32"
- PRODIGY INSULIN SYRINGE 0.3 ML 31 GAUGE X 5/16"
- PRODIGY INSULIN SYRINGE 0.5 ML 31 GAUGE X 5/16"
- PRODIGY INSULIN SYRINGE 1 ML 28 GAUGE X 1/2"
- PURE COMFORT ALCOHOL PADS
- PURE COMFORT PEN NEEDLE 32 GAUGE X 1/4"
- PURE COMFORT PEN NEEDLE 32 GAUGE X 3/16"
- PURE COMFORT PEN NEEDLE 32 GAUGE X 5/16"
- PURE COMFORT PEN NEEDLE 32 GAUGE X 5/32"
- PURE COMFORT SAFETY PEN NEEDLE 31 GAUGE X 1/4"
- PURE COMFORT SAFETY PEN NEEDLE 31 GAUGE X 3/16"
- PURE COMFORT SAFETY PEN NEEDLE 32 GAUGE X 5/32"
- SAFESNAP INSULIN SYRINGE 0.3 ML 30 GAUGE X 5/16"
- SAFESNAP INSULIN SYRINGE 0.5 ML 29 GAUGE X 1/2"
- SAFESNAP INSULIN SYRINGE 0.5 ML 30 GAUGE X 5/16"
- SAFESNAP INSULIN SYRINGE 1 ML 28 GAUGE X 1/2"
- SAFESNAP INSULIN SYRINGE 1 ML 29 GAUGE X 1/2"
- SAFETY PEN NEEDLE 31 GAUGE X 3/16"
- SECURESAFE INSULIN SYRINGE 0.5 ML 29 GAUGE X 1/2"
- SECURESAFE INSULIN SYRINGE 1 ML 29 GAUGE X 1/2"
- SECURESAFE PEN NEEDLE 30 GAUGE X 5/16"
- SIMPLI PEN NEEDLE 32 GAUGE X 5/32"
- SKY SAFETY PEN NEEDLE 30 GAUGE X 3/16"
- SKY SAFETY PEN NEEDLE 30 GAUGE X 5/16"
- STERILE PADS 2" X 2" BANDAGE
- SURE COMFORT ALCOHOL PREP PADS
- SURE COMFORT INSULIN SYRINGE 0.3 ML 29 GAUGE X 1/2"
- SURE COMFORT INSULIN SYRINGE 0.3 ML 30 GAUGE X 1/2"
- SURE COMFORT INSULIN SYRINGE 0.3 ML 30 GAUGE X 5/16"
- SURE COMFORT INSULIN SYRINGE 0.3 ML 31 GAUGE X 1/4"
- SURE COMFORT INSULIN SYRINGE 0.3 ML 31 GAUGE X 5/16"
- SURE COMFORT INSULIN SYRINGE 0.5 ML 30 GAUGE X 1/2"
- SURE COMFORT INSULIN SYRINGE 0.5 ML 30 GAUGE X 5/16"
- SURE COMFORT INSULIN SYRINGE 0.5 ML 31 GAUGE X 5/16"
- SURE COMFORT INSULIN SYRINGE 1 ML 28 GAUGE X 1/2"
- SURE COMFORT INSULIN SYRINGE 1 ML 29 GAUGE X 1/2"
- SURE COMFORT INSULIN SYRINGE 1 ML 30 GAUGE X 1/2"
- SURE COMFORT INSULIN SYRINGE 1 ML 30 GAUGE X 5/16"
- SURE COMFORT INSULIN SYRINGE 1 ML 31 GAUGE X 1/4"
- SURE COMFORT INSULIN SYRINGE 1 ML 31 GAUGE X 5/16"
- SURE COMFORT INSULIN SYRINGE 1/2 ML 28 GAUGE X 1/2"

- SURE COMFORT INSULIN SYRINGE 1/2 ML 31 GAUGE X 1/4"
- SURE COMFORT INSULIN SYRINGE U-100 0.5 ML 29 GAUGE X 1/2"
- SURE COMFORT PEN NEEDLE 29 GAUGE X 1/2"
- SURE COMFORT PEN NEEDLE 30 GAUGE X 5/16"
- SURE COMFORT PEN NEEDLE 31 GAUGE X 3/16"
- SURE COMFORT PEN NEEDLE 31 GAUGE X 5/16"
- SURE COMFORT PEN NEEDLE 32 GAUGE X 1/4"
- SURE COMFORT PEN NEEDLE 32 GAUGE X 5/32"
- SURE COMFORT SAFETY PEN NEEDLE 31 GAUGE X 1/4"
- SURE COMFORT SAFETY PEN NEEDLE 32 GAUGE X 5/32"
- SURE-FINE PEN NEEDLES 29 GAUGE X 1/2"
- SURE-FINE PEN NEEDLES 31 GAUGE X 3/16"
- SURE-FINE PEN NEEDLES 31 GAUGE X 5/16"
- SURE-JECT INSULIN SYRINGE 0.3 ML 29 GAUGE X 1/2"
- SURE-JECT INSULIN SYRINGE 0.3 ML 30 GAUGE X 5/16"
- SURE-JECT INSULIN SYRINGE 0.5 ML 29 GAUGE X 1/2"
- SURE-JECT INSULIN SYRINGE 0.5 ML 30 GAUGE X 5/16"
- SURE-JECT INSULIN SYRINGE 1 ML 28 GAUGE X 1/2"
- SURE-JECT INSULIN SYRINGE 1 ML 29 GAUGE X 1/2"
- SURE-JECT INSULIN SYRINGE 1 ML 30 GAUGE X 5/16"
- SURE-JECT INSULIN SYRINGE 1 ML 31 GAUGE X 5/16"
- SURE-JECT INSULIN SYRINGE 1/2 ML 28 GAUGE X 1/2"
- SURE-PREP ALCOHOL PREP PADS
- SYRINGE WITH NEEDLE, SAFETY 0.5 ML 30 GAUGE X 1/2"
- TECHLITE INSULIN SYRINGE (HALF UNIT) 0.3 ML 29 GAUGE X 1/2"
- TECHLITE INSULIN SYRINGE (HALF UNIT) 0.3 ML 30 GAUGE X 5/16"
- TECHLITE INSULIN SYRINGE (HALF UNIT) 0.3 ML 31 GAUGE X 15/64"
- TECHLITE INSULIN SYRINGE (HALF UNIT) 0.3 ML 31 GAUGE X 5/16"
- TECHLITE INSULIN SYRINGE (HALF UNIT) 0.5 ML 30 GAUGE X 1/2"
- TECHLITE INSULIN SYRINGE (HALF UNIT) 0.5 ML 30 GAUGE X 5/16"
- TECHLITE INSULIN SYRINGE (HALF UNIT) 0.5 ML 31 GAUGE X 15/64"
- TECHLITE INSULIN SYRINGE (HALF UNIT) 0.5 ML 31 GAUGE X 5/16"
- TECHLITE INSULIN SYRINGE 1 ML 29 GAUGE X 1/2"
- TECHLITE INSULIN SYRINGE 1 ML 30 GAUGE X 1/2"
- TECHLITE INSULIN SYRINGE 1 ML 31 GAUGE X 15/64"
- TECHLITE INSULIN SYRINGE 1 ML 31 GAUGE X 5/16"
- TECHLITE PEN NEEDLE 29 GAUGE X 1/2"
- TECHLITE PEN NEEDLE 29 GAUGE X 3/8"
- TECHLITE PEN NEEDLE 31 GAUGE X 1/4"
- TECHLITE PEN NEEDLE 31 GAUGE X 3/16"
- TECHLITE PEN NEEDLE 31 GAUGE X 5/16"
- TECHLITE PEN NEEDLE 32 GAUGE X 1/4"
- TECHLITE PEN NEEDLE 32 GAUGE X 5/16"
- TECHLITE PEN NEEDLE 32 GAUGE X 5/32"
- TECHLITE PLUS PEN NEEDLE 32 GAUGE X 5/32"
- TERUMO INSULIN SYRINGE 0.3 ML 30 X 3/8"

- TERUMO INSULIN SYRINGE 0.5 ML 29 GAUGE X 1/2"
- TERUMO INSULIN SYRINGE 1 ML 27 GAUGE X 1/2"
- TERUMO INSULIN SYRINGE 1 ML 28 GAUGE X 1/2"
- TERUMO INSULIN SYRINGE 1 ML 29 GAUGE X 1/2"
- TERUMO INSULIN SYRINGE 1/2 ML 27 GAUGE X 1/2"
- TERUMO INSULIN SYRINGE 1/2 ML 28 GAUGE X 1/2"
- TERUMO INSULIN SYRINGE 1/2 ML 30 X 3/8"
- THINPRO INSULIN SYRINGE 0.3 ML 29 GAUGE X 1/2"
- THINPRO INSULIN SYRINGE 0.3 ML 30 X 3/8"
- THINPRO INSULIN SYRINGE 0.3 ML 31 X 3/8"
- THINPRO INSULIN SYRINGE 0.5 ML 29 GAUGE X 1/2"
- THINPRO INSULIN SYRINGE 0.5 ML 31 X 3/8"
- THINPRO INSULIN SYRINGE 1 ML 28 GAUGE X 1/2"
- THINPRO INSULIN SYRINGE 1 ML 29 GAUGE X 1/2"
- THINPRO INSULIN SYRINGE 1 ML 30 GAUGE X 3/8"
- THINPRO INSULIN SYRINGE 1 ML 31 X 3/8"
- THINPRO INSULIN SYRINGE 1/2 ML 28 GAUGE X 1/2"
- THINPRO INSULIN SYRINGE 1/2 ML 30 X 3/8"
- TOPCARE CLICKFINE 31 GAUGE X 1/4" NEEDLE
- TOPCARE CLICKFINE 31 GAUGE X 5/16" NEEDLE
- TOPCARE ULTRA COMFORT 0.3 ML 29 GAUGE X 1/2" SYRINGE
- TOPCARE ULTRA COMFORT 0.3 ML 30 GAUGE X 5/16" SYRINGE
- TOPCARE ULTRA COMFORT 0.3 ML 31 GAUGE X 5/16" SYRINGE
- TOPCARE ULTRA COMFORT 0.5 ML 29 GAUGE X 1/2" SYRINGE
- TOPCARE ULTRA COMFORT 0.5 ML 30 GAUGE X 5/16" SYRINGE
- TOPCARE ULTRA COMFORT 0.5 ML 31 GAUGE X 5/16" SYRINGE
- TOPCARE ULTRA COMFORT 1 ML 29 GAUGE X 1/2" SYRINGE
- TOPCARE ULTRA COMFORT 1 ML 30 GAUGE X 5/16" SYRINGE
- TOPCARE ULTRA COMFORT 1 ML 31 GAUGE X 5/16" SYRINGE
- TRUE COMFORT ALCOHOL PADS
- TRUE COMFORT INSULIN SYRINGE 0.5 ML 31 GAUGE X 5/16"
- TRUE COMFORT INSULIN SYRINGE 1 ML 31 GAUGE X 5/16"
- TRUE COMFORT PEN NEEDLE 31 GAUGE X 1/4"
- TRUE COMFORT PEN NEEDLE 31 GAUGE X 3/16"
- TRUE COMFORT PEN NEEDLE 31 GAUGE X 5/16"
- TRUE COMFORT PEN NEEDLE 32 GAUGE X 1/4"
- TRUE COMFORT PEN NEEDLE 32 GAUGE X 3/16"
- TRUE COMFORT PEN NEEDLE 32 GAUGE X 5/32"
- TRUE COMFORT PEN NEEDLE 33 GAUGE X 1/4"
- TRUE COMFORT PEN NEEDLE 33 GAUGE X 3/16"
- TRUE COMFORT PEN NEEDLE 33 GAUGE X 5/32"
- TRUE COMFORT PRO ALCOHOL PADS
- TRUE COMFORT PRO INS SYRINGE 0.5 ML 30 GAUGE X 1/2"
- TRUE COMFORT PRO INS SYRINGE 0.5 ML 30 GAUGE X 5/16"
- TRUE COMFORT PRO INS SYRINGE 0.5 ML 31 GAUGE X 5/16"
- TRUE COMFORT PRO INS SYRINGE 1 ML 30 GAUGE X 1/2"

- TRUE COMFORT PRO INS SYRINGE 1 ML 30 GAUGE X 5/16"
- TRUE COMFORT PRO INS SYRINGE 1 ML 31 GAUGE X 5/16"
- TRUE COMFORT PRO INS SYRINGE 1 ML 32 GAUGE X 5/16"
- TRUE COMFORT PRO INS SYRINGE 1/2 ML 32 GAUGE X 5/16"
- TRUE COMFORT SAFETY INSULIN SYRINGE 0.5 ML 30 GAUGE X 1/2"
- TRUE COMFORT SAFETY INSULIN SYRINGE 0.5 ML 30 GAUGE X 5/16"
- TRUE COMFORT SAFETY INSULIN SYRINGE 0.5 ML 31 GAUGE X 5/16"
- TRUE COMFORT SAFETY INSULIN SYRINGE 1 ML 30 GAUGE X 1/2"
- TRUE COMFORT SAFETY INSULIN SYRINGE 1 ML 30 GAUGE X 5/16"
- TRUE COMFORT SAFETY INSULIN SYRINGE 1 ML 31 GAUGE X 5/16"
- TRUE COMFORT SAFETY INSULIN SYRINGE 1 ML 32 GAUGE X 5/16"
- TRUE COMFORT SAFETY PEN NEEDLE 31 GAUGE X 1/4"
- TRUE COMFORT SAFETY PEN NEEDLE 31 GAUGE X 3/16"
- TRUE COMFORT SAFETY PEN NEEDLE 32 GAUGE X 5/32"
- TRUEPLUS INSULIN 0.3 ML 29 GAUGE X 1/2" SYRINGE
- TRUEPLUS INSULIN 0.3 ML 30 GAUGE X 5/16" SYRINGE
- TRUEPLUS INSULIN 0.3 ML 31 GAUGE X 5/16" SYRINGE
- TRUEPLUS INSULIN 0.5 ML 29 GAUGE X 1/2" SYRINGE
- TRUEPLUS INSULIN 0.5 ML 30 GAUGE X 5/16" SYRINGE
- TRUEPLUS INSULIN 0.5 ML 31 GAUGE X 5/16" SYRINGE
- TRUEPLUS INSULIN 1 ML 28 GAUGE X 1/2" SYRINGE
- TRUEPLUS INSULIN 1 ML 29 GAUGE X 1/2" SYRINGE
- TRUEPLUS INSULIN 1 ML 30 GAUGE X 5/16" SYRINGE
- TRUEPLUS INSULIN 1 ML 31 GAUGE X 5/16" SYRINGE
- TRUEPLUS INSULIN 1/2 ML 28 GAUGE X 1/2" SYRINGE
- TRUEPLUS PEN NEEDLE 29 GAUGE X 1/2"
- TRUEPLUS PEN NEEDLE 31 GAUGE X 1/4"
- TRUEPLUS PEN NEEDLE 31 GAUGE X 3/16"
- TRUEPLUS PEN NEEDLE 31 GAUGE X 5/16"
- TRUEPLUS PEN NEEDLE 32 GAUGE X 5/32"
- ULTICARE 0.3 ML 30 GAUGE X 1/2" SYRINGE
- ULTICARE 0.3 ML 31 GAUGE X 5/16" SYRINGE
- ULTICARE 0.5 ML 30 GAUGE X 1/2" SYRINGE
- ULTICARE 0.5 ML 31 GAUGE X 5/16" SYRINGE
- ULTICARE 1 ML 30 GAUGE X 1/2" SYRINGE
- ULTICARE 1 ML 31 GAUGE X 5/16" SYRINGE
- ULTICARE INSULIN SYRINGE (HALF UNIT) 0.3 ML 31 GAUGE X 1/4"
- ULTICARE INSULIN SYRINGE 0.3 ML 31 GAUGE X 1/4"
- ULTICARE INSULIN SYRINGE 1 ML 31 GAUGE X 1/4"
- ULTICARE INSULIN SYRINGE 1/2 ML 31 GAUGE X 1/4"
- ULTICARE PEN NEEDLE 29 GAUGE X 1/2"
- ULTICARE PEN NEEDLE 31 GAUGE X 1/4"
- ULTICARE PEN NEEDLE 31 GAUGE X 3/16"
- ULTICARE PEN NEEDLE 31 GAUGE X 5/16"
- ULTICARE PEN NEEDLE 32 GAUGE X 1/4"
- ULTICARE PEN NEEDLE 32 GAUGE X 5/32"

- ULTICARE SAFETY PEN NEEDLE 30 GAUGE X 3/16"
- ULTICARE SAFETY PEN NEEDLE 30 GAUGE X 5/16"
- ULTIGUARD SAFEPACK-INSULIN SYRINGE 0.3 ML 30 X 1/2"
- ULTIGUARD SAFEPACK-INSULIN SYRINGE 0.3 ML 31 X 5/16"
- ULTIGUARD SAFEPACK-INSULIN SYRINGE 1 ML 30 X 1/2"
- ULTIGUARD SAFEPACK-INSULIN SYRINGE 1 ML 31 X 5/16"
- ULTIGUARD SAFEPACK-INSULIN SYRINGE 1/2 ML 30 X 1/2"
- ULTIGUARD SAFEPACK-INSULIN SYRINGE 1/2 ML 31 X 5/16"
- ULTIGUARD SAFEPACK-PEN NEEDLE 29 GAUGE X 1/2"
- ULTIGUARD SAFEPACK-PEN NEEDLE 31 GAUGE X 1/4"
- ULTIGUARD SAFEPACK-PEN NEEDLE 31 GAUGE X 3/16"
- ULTIGUARD SAFEPACK-PEN NEEDLE 31 GAUGE X 5/16"
- ULTIGUARD SAFEPACK-PEN NEEDLE 32 GAUGE X 1/4"
- ULTIGUARD SAFEPACK-PEN NEEDLE 32 GAUGE X 5/32"
- ULTILET ALCOHOL SWAB
- ULTILET INSULIN SYRINGE 0.3 ML 29 GAUGE
- ULTILET INSULIN SYRINGE 0.3 ML 29 GAUGE X 1/2"
- ULTILET INSULIN SYRINGE 0.3 ML 30 GAUGE X 5/16"
- ULTILET INSULIN SYRINGE 0.3 ML 31 GAUGE X 5/16"
- ULTILET INSULIN SYRINGE 0.5 ML 29 GAUGE X 1/2"
- ULTILET INSULIN SYRINGE 0.5 ML 30 GAUGE X 5/16"
- ULTILET INSULIN SYRINGE 0.5 ML 31 GAUGE X 5/16"
- ULTILET INSULIN SYRINGE 1 ML 29 GAUGE
- ULTILET INSULIN SYRINGE 1 ML 29 GAUGE X 1/2"
- ULTILET INSULIN SYRINGE 1 ML 29 GAUGE X 1/2"
- ULTILET INSULIN SYRINGE 1 ML 30 GAUGE X 5/16"
- ULTILET INSULIN SYRINGE 1 ML 30 GAUGE X 7/16"
- ULTILET INSULIN SYRINGE 1 ML 31 GAUGE X 5/16"
- ULTILET INSULIN SYRINGE 1 ML 29 GAUGE X 1/2"
- ULTILET INSULIN SYRINGE 1 ML 29 GAUGE
- ULTILET INSULIN SYRINGE 1 ML 30 GAUGE X 5/16"
- ULTILET INSULIN SYRINGE 1 ML 30 GAUGE X 7/16"
- ULTILET INSULIN SYRINGE 1 ML 31 GAUGE X 5/16"
- ULTILET INSULIN SYRINGE 1/2 ML 29 GAUGE X 1/2"
- ULTILET INSULIN SYRINGE 1 ML 29 GAUGE X 1/2"
- ULTILET INSULIN SYRINGE 1 ML 30 GAUGE X 5/16"
- ULTILET INSULIN SYRINGE 1 ML 31 GAUGE X 5/16"
- ULTILET INSULIN SYRINGE 1/2 ML 29
- ULTILET PEN NEEDLE 29 GAUGE
- ULTILET PEN NEEDLE 32 GAUGE X 5/32"
- ULTRA COMFORT INSULIN SYRINGE (HALF UNIT) 0.3 ML 29 GAUGE X 1/2"
- ULTRA COMFORT INSULIN SYRINGE (HALF UNIT) 0.3 ML 31 GAUGE X 5/16"
- ULTRA COMFORT INSULIN SYRINGE 0.3 ML 29 GAUGE X 1/2"
- ULTRA COMFORT INSULIN SYRINGE 0.3 ML 30
- ULTRA COMFORT INSULIN SYRINGE 0.3 ML 30 GAUGE X 5/16"
- ULTRA COMFORT INSULIN SYRINGE 0.3 ML 31 GAUGE X 5/16"
- ULTRA COMFORT INSULIN SYRINGE 0.5 ML 29 GAUGE X 1/2"
- ULTRA COMFORT INSULIN SYRINGE 0.5 ML 30 GAUGE X 5/16"
- ULTRA COMFORT INSULIN SYRINGE 0.5 ML 31 GAUGE X 5/16"
- ULTRA COMFORT INSULIN SYRINGE 1 ML 28 GAUGE X 1/2"
- ULTRA COMFORT INSULIN SYRINGE 1 ML 29 GAUGE
- ULTRA COMFORT INSULIN SYRINGE 1 ML 29 GAUGE X 1/2"
- ULTRA COMFORT INSULIN SYRINGE 1 ML 30 GAUGE X 5/16"
- ULTRA COMFORT INSULIN SYRINGE 1 ML 30 GAUGE X 7/16"
- ULTRA COMFORT INSULIN SYRINGE 1 ML 31 GAUGE X 5/16"
- ULTRA COMFORT INSULIN SYRINGE 1/2 ML 28 GAUGE X 1/2"



- ULTRA-THIN II (SHORT) INSULIN SYRINGE 0.3 ML 30 GAUGE X 5/16"
- ULTRA-THIN II (SHORT) INSULIN SYRINGE 0.3 ML 31 GAUGE X 5/16"
- ULTRA-THIN II (SHORT) INSULIN SYRINGE 0.5 ML 30 GAUGE X 5/16"
- ULTRA-THIN II (SHORT) INSULIN SYRINGE 0.5 ML 31 GAUGE X 5/16"
- ULTRA-THIN II (SHORT) INSULIN SYRINGE 1 ML 30 GAUGE X 5/16"
- ULTRA-THIN II (SHORT) INSULIN SYRINGE 1 ML 31 GAUGE X 5/16"
- ULTRA-THIN II (SHORT) PEN NDL 31 GAUGE X 5/16" NEEDLE
- ULTRA-THIN II INSULIN PEN NEEDLES 29 GAUGE X 1/2"
- ULTRA-THIN II INSULIN SYRINGE 0.5 ML 29 GAUGE X 1/2"
- ULTRA-THIN II INSULIN SYRINGE 1 ML 29 GAUGE X 1/2"
- UNIFINE OTC PEN NEEDLE 31 GAUGE X 3/16"
- UNIFINE OTC PEN NEEDLE 32 GAUGE X 5/32"
- UNIFINE PEN NEEDLE 32 GAUGE X 5/32"
- UNIFINE PENTIPS 29 GAUGE NEEDLE
- UNIFINE PENTIPS 29 GAUGE X 1/2" NEEDLE
- UNIFINE PENTIPS 31 GAUGE X 1/4" NEEDLE
- UNIFINE PENTIPS 31 GAUGE X 3/16" NEEDLE
- UNIFINE PENTIPS 31 GAUGE X 5/16" NEEDLE
- UNIFINE PENTIPS 32 GAUGE X 1/4" NEEDLE
- UNIFINE PENTIPS 32 GAUGE X 5/32" NEEDLE
- UNIFINE PENTIPS 33 GAUGE X 5/32" NEEDLE
- UNIFINE PENTIPS MAXFLOW 30 GAUGE X 3/16" NEEDLE
- UNIFINE PENTIPS PLUS 29 GAUGE X 1/2" NEEDLE
- UNIFINE PENTIPS PLUS 31 GAUGE X 1/4" NEEDLE
- UNIFINE PENTIPS PLUS 31 GAUGE X 3/16" NEEDLE
- UNIFINE PENTIPS PLUS 31 GAUGE X 5/16" NEEDLE
- UNIFINE PENTIPS PLUS 32 GAUGE X 5/32" NEEDLE
- UNIFINE PENTIPS PLUS 33 GAUGE X 5/32" NEEDLE
- UNIFINE PENTIPS PLUS MAXFLOW 30 GAUGE X 3/16" NEEDLE
- UNIFINE PROTECT 30 GAUGE X 3/16" NEEDLE
- UNIFINE PROTECT 30 GAUGE X 5/16" NEEDLE
- UNIFINE PROTECT 32 GAUGE X 5/32" NEEDLE
- UNIFINE SAFECONTROL PEN NEEDLE 30 GAUGE X 3/16"
- UNIFINE SAFECONTROL PEN NEEDLE 30 GAUGE X 5/16"
- UNIFINE SAFECONTROL PEN NEEDLE 31 GAUGE X 1/4"
- UNIFINE SAFECONTROL PEN NEEDLE 31 GAUGE X 3/16"
- UNIFINE SAFECONTROL PEN NEEDLE 31 GAUGE X 5/16"
- UNIFINE SAFECONTROL PEN NEEDLE 32 GAUGE X 5/32"
- UNIFINE ULTRA PEN NEEDLE 31 GAUGE X 1/4"
- UNIFINE ULTRA PEN NEEDLE 31 GAUGE X 3/16"
- UNIFINE ULTRA PEN NEEDLE 31 GAUGE X 5/16"
- UNIFINE ULTRA PEN NEEDLE 32 GAUGE X 5/32"
- VANISHPOINT INSULIN SYRINGE 1 ML 30 GAUGE X 3/16"
- VANISHPOINT SYRINGE 0.5 ML 30 GAUGE X 1/2"
- VANISHPOINT SYRINGE 1 ML 29 GAUGE X 1/2"
- VERIFINE INSULIN SYRINGE 0.3 ML 31 GAUGE X 5/16"

- VERIFINE INSULIN SYRINGE 0.5 ML 29 GAUGE X 1/2"
- VERIFINE INSULIN SYRINGE 0.5 ML 31 GAUGE X 5/16"
- VERIFINE INSULIN SYRINGE 1 ML 29 GAUGE X 1/2"
- VERIFINE INSULIN SYRINGE 1 ML 31 GAUGE X 5/16"
- VERIFINE PEN NEEDLE 29 GAUGE X 1/2"
- VERIFINE PEN NEEDLE 31 GAUGE X 1/4"
- VERIFINE PEN NEEDLE 31 GAUGE X 3/16"
- VERIFINE PEN NEEDLE 31 GAUGE X 5/16"
- VERIFINE PEN NEEDLE 32 GAUGE X 1/4"
- VERIFINE PEN NEEDLE 32 GAUGE X 3/16"
- VERIFINE PEN NEEDLE 32 GAUGE X 5/32"
- VERIFINE PLUS PEN NEEDLE 31 GAUGE X 3/16"
- VERIFINE PLUS PEN NEEDLE 31 GAUGE X 5/16"
- VERIFINE PLUS PEN NEEDLE 32 GAUGE X 5/32"
- VERIFINE PLUS PEN NEEDLE-SHARPS CONTAINER 32 GAUGE X 5/32"
- VERSALON 2" X 2" SPONGE
- WEBCOL TOPICAL PADS

**Details**

<b>Criteria</b>	IN ORDER TO ASSIST IN PAYMENT DETERMINATION, A PRIOR CLAIM SEEN FOR AN INJECTABLE INSULIN WITHIN THE PAST 120 DAYS WILL QUALIFY FOR PART D PAYMENT.
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# KLISYRI

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## Products Affected

### Step 2:

- KLISYRI 1 % (250 MG) TOPICAL OINTMENT IN PACKET

## Details

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<b>Criteria</b>	PRIOR CLAIM FOR GENERIC TOPICAL FLUOROURACIL IN THE LAST 120 DAYS.
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# LEVOMILNACIPRAN

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## Products Affected

### Step 2:

- FETZIMA 120 MG  
CAPSULE,EXTENDED RELEASE
- FETZIMA 20 MG (2)-40 MG (26)  
CAPSULE,EXTENDED RELEASE,24  
HR,DOSE PACK
- FETZIMA 20 MG  
CAPSULE,EXTENDED RELEASE
- FETZIMA 40 MG  
CAPSULE,EXTENDED RELEASE
- FETZIMA 80 MG  
CAPSULE,EXTENDED RELEASE

## Details

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<b>Criteria</b>	PRIOR CLAIM FOR TRINTELLIX AND 1 GENERIC ANTIDEPRESSANT: BUPROPION, CITALOPRAM, ESCITALOPRAM, FLUOXETINE, MIRTAZAPINE, PAROXETINE, SERTRALINE, VENLAFAXINE, or VILAZODONE IN THE PAST 365 DAYS
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# LUMATEPERONE TOSYLATE

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## Products Affected

### Step 2:

- CAPLYTA 10.5 MG CAPSULE
- CAPLYTA 21 MG CAPSULE
- CAPLYTA 42 MG CAPSULE

## Details

<b>Criteria</b>	CLAIM FOR 2 FORMULARY ORAL GENERIC ANTIPSYCHOTICS: LURASIDONE, RISPERIDONE, OLANZAPINE, IMMEDIATE RELEASE QUETIAPINE FUMARATE, ZIPRASIDONE, ARIPIPRAZOLE, ASENAPINE WITHIN THE PAST 365 DAYS
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# MEMANTINE ER

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## Products Affected

### Step 2:

- *memantine 14 mg capsule sprinkle, extended release 24hr*
- *memantine 21 mg capsule sprinkle, extended release 24hr*
- *memantine 28 mg capsule sprinkle, extended release 24hr*
- *memantine 7 mg capsule sprinkle, extended release 24hr*

## Details

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<b>Criteria</b>	PRIOR CLAIM FOR FORMULARY VERSION OF MEMANTINE IR WITHIN THE PAST 120 DAYS
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# METHOTREXATE INJECTOR

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## Products Affected

### Step 2:

- RASUVO (PF) 10 MG/0.2 ML  
SUBCUTANEOUS AUTO-INJECTOR
- RASUVO (PF) 12.5 MG/0.25 ML  
SUBCUTANEOUS AUTO-INJECTOR
- RASUVO (PF) 15 MG/0.3 ML  
SUBCUTANEOUS AUTO-INJECTOR
- RASUVO (PF) 17.5 MG/0.35 ML  
SUBCUTANEOUS AUTO-INJECTOR
- RASUVO (PF) 20 MG/0.4 ML  
SUBCUTANEOUS AUTO-INJECTOR
- RASUVO (PF) 22.5 MG/0.45 ML  
SUBCUTANEOUS AUTO-INJECTOR
- RASUVO (PF) 25 MG/0.5 ML  
SUBCUTANEOUS AUTO-INJECTOR
- RASUVO (PF) 30 MG/0.6 ML  
SUBCUTANEOUS AUTO-INJECTOR
- RASUVO (PF) 7.5 MG/0.15 ML  
SUBCUTANEOUS AUTO-INJECTOR

## Details

<b>Criteria</b>	TRIAL OF OR CONTRAINDICATION TO GENERIC ORAL METHOTREXATE TABLET
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# OPHTHALMIC ALLERGY - NO OTC

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## Products Affected

### Step 2:

- *loteprednol etabonate 0.2 % eye drops,suspension*

## Details

<b>Criteria</b>	PRIOR CLAIM FOR FEDERAL LEGEND LEVOCETIRIZINE , CROMOLYN SODIUM, OR EPINASTINE WITHIN THE PAST 120 DAYS.
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# PERAMPANEL

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## Products Affected

### Step 2:

- FYCOMPA 0.5 MG/ML ORAL SUSPENSION
- *perampanel 0.5 mg/ml oral suspension*
- *perampanel 10 mg tablet*
- *perampanel 12 mg tablet*
- *perampanel 2 mg tablet*
- *perampanel 4 mg tablet*
- *perampanel 6 mg tablet*
- *perampanel 8 mg tablet*

## Details

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<b>Criteria</b>	PRIOR CLAIM FOR 2 GENERIC ANTICONVULSANT AGENTS (CARBAMAZEPINE, DIVALPROEX SODIUM, GABAPENTIN, LAMOTRIGINE, LEVETIRACETAM, OXCARBAZEPINE, TIAGABINE, TOPIRAMATE, VALPROIC ACID, ZONISAMIDE OR LACOSAMIDE), WITHIN THE PAST 365 DAYS.
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# RUFINAMIDE

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## Products Affected

### Step 2:

- *rufinamide 200 mg tablet*
- *rufinamide 40 mg/ml oral suspension*
- *rufinamide 400 mg tablet*

## Details

<b>Criteria</b>	PRIOR CLAIM FOR GENERIC ANTICONVULSANT AGENT (CARBAMAZEPINE, DIVALPROEX SODIUM, GABAPENTIN, LAMOTRIGINE, LEVETIRACETAM, OXCARBAZEPINE, TIAGABINE, TOPIRAMATE, VALPROIC ACID, OR ZONISAMIDE), WITHIN THE PAST 120 DAYS.
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# SELEGILINE PATCH

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## Products Affected

### Step 2:

- EMSAM 12 MG/24 HR TRANSDERMAL 24 HOUR PATCH
- EMSAM 6 MG/24 HR TRANSDERMAL 24 HOUR PATCH
- EMSAM 9 MG/24 HR TRANSDERMAL 24 HOUR PATCH

## Details

<b>Criteria</b>	PRIOR CLAIM OF FORMULARY ORAL VERSION OF SSRI (CITALOPRAM, ESCITALOPRAM, FLUOXETINE, PAROXETINE OR SERTRALINE), SNRI (DESVENLAFAXINE, DULOXETINE OR VENLAFAXINE), MIRTAZAPINE, OR BUPROPION IR/SR/XL IN THE PAST 120 DAYS
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# SPRITAM

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## Products Affected

### Step 2:

- *levetiracetam 250 mg tablet for oral suspension*
- SPRITAM 1,000 MG TABLET FOR ORAL SUSPENSION
- SPRITAM 250 MG TABLET FOR ORAL SUSPENSION
- SPRITAM 500 MG TABLET FOR ORAL SUSPENSION
- SPRITAM 750 MG TABLET FOR ORAL SUSPENSION

## Details

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<b>Criteria</b>	PRIOR CLAIM FOR GENERIC LEVETIRACETAM SOLUTION IN THE PAST 120 DAYS
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# XANOMELINE/TROSPIUM

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## Products Affected

### Step 2:

- COBENFY 100 MG-20 MG CAPSULE
- COBENFY 125 MG-30 MG CAPSULE
- COBENFY 50 MG-20 MG CAPSULE
- COBENFY STARTER PACK 50 MG-20 MG/100 MG-20 MG CAPSULES IN A DOSE PACK

## Details

<b>Criteria</b>	CLAIM FOR ONE FORMULARY ORAL ANTIPSYCHOTIC: LURASIDONE, RISPERIDONE, CLOZAPINE TAB, OLANZAPINE, IR QUETIAPINE FUMARATE, ZIPRASIDONE, ARIPIPRAZOLE, ASENAPINE, PALIPERIDONE WITHIN THE PAST 120 DAYS
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# XARELTO

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## Products Affected

### Step 2:

- XARELTO 2.5 MG TABLET

## Details

<b>Criteria</b>	PRIOR CLAIM FOR GENERIC RIVAROXABAN 2.5MG TABLET IN THE LAST 120 DAYS.
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## INDEX

### 1

1ST TIER UNIFINE PENTIPS 31 GAUGE  
X 1/4..... 18, 35  
1ST TIER UNIFINE PENTIPS 31 GAUGE  
X 3/16..... 18, 35  
1ST TIER UNIFINE PENTIPS 31 GAUGE  
X 5/16..... 18, 35  
1ST TIER UNIFINE PENTIPS 32 GAUGE  
X 5/32..... 18, 35  
1ST TIER UNIFINE PENTIPS PLUS 29  
GAUGE X 1/2..... 18, 35  
1ST TIER UNIFINE PENTIPS PLUS 31  
GAUGE X 3/16..... 18, 35  
1ST TIER UNIFINE PENTIPS PLUS 32  
GAUGE X 5/32..... 18, 35

### A

ABOUTTIME PEN NEEDLE 30 GAUGE  
X 5/16..... 18, 35  
ABOUTTIME PEN NEEDLE 31 GAUGE  
X 3/16..... 18, 35  
ABOUTTIME PEN NEEDLE 31 GAUGE  
X 5/16..... 18, 35  
ABOUTTIME PEN NEEDLE 32 GAUGE  
X 5/32..... 18, 35  
ADVOCATE PEN NEEDLE 29 GAUGE X  
1/2 ..... 18, 35  
ADVOCATE PEN NEEDLE 31 GAUGE X  
3/16 ..... 18, 35  
ADVOCATE PEN NEEDLE 31 GAUGE X  
5/16 ..... 18, 35  
ADVOCATE PEN NEEDLE 32 GAUGE X  
5/32 ..... 18, 35  
ADVOCATE PEN NEEDLE 33 GAUGE X  
5/32 ..... 18, 35  
ADVOCATE SYRINGES 0.3 ML 29  
GAUGE X 1/2..... 18, 35  
ADVOCATE SYRINGES 0.3 ML 30  
GAUGE X 5/16..... 18, 35  
ADVOCATE SYRINGES 0.3 ML 31  
GAUGE X 5/16..... 18, 35  
ADVOCATE SYRINGES 0.5 ML 29  
GAUGE X 1/2..... 18, 35  
ADVOCATE SYRINGES 0.5 ML 30  
GAUGE X 5/16..... 18, 35

ADVOCATE SYRINGES 0.5 ML 31  
GAUGE X 5/16..... 18, 35  
ADVOCATE SYRINGES 1 ML 29  
GAUGE X 1/2..... 18, 35  
ADVOCATE SYRINGES 1 ML 30  
GAUGE X 5/16..... 18, 35  
ADVOCATE SYRINGES 1 ML 31  
GAUGE X 5/16..... 18, 35  
ALCOHOL PADS ..... 18, 35  
ALCOHOL PREP PADS..... 18, 35  
ALCOHOL PREP SWABS ..... 18, 35  
ALCOHOL SWABS..... 18, 35  
ALCOHOL WIPES ..... 18, 35  
AQINJECT PEN NEEDLE 31 GAUGE X  
3/16 ..... 18, 35  
AQINJECT PEN NEEDLE 32 GAUGE X  
5/32 ..... 18, 35  
aripiprazole 10 mg disintegrating tablet ..... 4  
aripiprazole 15 mg disintegrating tablet ..... 4  
ASSURE ID DUO PRO SAFETY PEN  
NEEDLE 31 GAUGE X 3/16..... 18, 35  
ASSURE ID DUO-SHIELD 30 GAUGE X  
3/16 ..... 18, 35  
ASSURE ID DUO-SHIELD 30 GAUGE X  
5/16 ..... 18, 35  
ASSURE ID INSULIN SAFETY 0.5 ML 31  
GAUGE X 15/64..... 18, 35  
ASSURE ID INSULIN SAFETY 1 ML 29  
GAUGE X 1/2..... 18, 35  
ASSURE ID INSULIN SAFETY 1 ML 31  
GAUGE X 15/64..... 18, 35  
ASSURE ID PEN NEEDLE 30 GAUGE X  
3/16 ..... 18, 35  
ASSURE ID PEN NEEDLE 30 GAUGE X  
5/16 ..... 18, 35  
ASSURE ID PEN NEEDLE 31 GAUGE X  
3/16 ..... 18, 35  
ASSURE ID PRO PEN NEEDLE 30  
GAUGE X 3/16..... 19, 35  
AUTOSHIELD DUO PEN NEEDLE 30  
GAUGE X 3/16..... 19, 35  
AUVELITY 45 MG-105 MG TABLET,  
EXTENDED RELEASE..... 9

**B**

BD ALCOHOL SWABS ..... 19, 35  
 BD AUTOSHIELD DUO PEN NEEDLE 30 GAUGE X 3/16..... 19, 35  
 BD ECLIPSE LUER-LOK 1 ML 30 GAUGE X 1/2..... 19, 35  
 BD ECLIPSE LUER-LOK 30 X 1/2 .. 19, 35  
 BD INSULIN SYRINGE 1 ML 27 GAUGE X 1/2..... 19, 35  
 BD INSULIN SYRINGE ULTRA-FINE (HALF UNIT) 0.3 ML 31 GAUGE X 5/16 ..... 19, 35  
 BD INSULIN SYRINGE ULTRA-FINE 0.3 ML 30 GAUGE X 1/2..... 19, 35  
 BD INSULIN SYRINGE ULTRA-FINE 0.5 ML 30 GAUGE X 1/2..... 19, 35  
 BD LO-DOSE ULTRA-FINE 0.5 ML 29 GAUGE X 1/2..... 19, 35  
 BD NANO 2ND GEN PEN NEEDLE 32 GAUGE X 5/32..... 19, 35  
 BD SAFETYGLIDE INSULIN SYRINGE 0.3 ML 29 GAUGE X 1/2..... 19, 35  
 BD SAFETYGLIDE INSULIN SYRINGE 0.3 ML 31 GAUGE X 15/64..... 19, 35  
 BD SAFETYGLIDE INSULIN SYRINGE 0.3 ML 31 GAUGE X 5/16..... 19, 35  
 BD SAFETYGLIDE INSULIN SYRINGE 0.5 ML 29 GAUGE X 1/2..... 19, 35  
 BD SAFETYGLIDE INSULIN SYRINGE 0.5 ML 30 GAUGE X 5/16..... 19, 35  
 BD SAFETYGLIDE INSULIN SYRINGE 0.5 ML 31 GAUGE X 15/64..... 19, 35  
 BD SAFETYGLIDE INSULIN SYRINGE 1 ML 29 GAUGE X 1/2..... 19, 35  
 BD SAFETYGLIDE INSULIN SYRINGE 1 ML 31 GAUGE X 15/64..... 19, 35  
 BD SAFETYGLIDE SYRINGE 1 ML 27 GAUGE X 5/8..... 19, 35  
 BD ULTRA-FINE MICRO PEN NEEDLE 32 GAUGE X 1/4..... 19, 35  
 BD ULTRA-FINE MINI PEN NEEDLE 31 GAUGE X 3/16..... 19, 35  
 BD ULTRA-FINE NANO PEN NEEDLE 32 GAUGE X 5/32..... 19, 35  
 BD ULTRA-FINE ORIGINAL PEN NEEDLE 29 GAUGE X 1/2 ..... 19, 35

BD ULTRA-FINE SHORT PEN NEEDLE 31 GAUGE X 5/16..... 19, 35  
 BD VEO INSULIN SYRINGE ULTRA-FINE (HALF UNIT) 0.3 ML 31 GAUGE X 15/64..... 19, 35  
 BD VEO INSULIN SYRINGE ULTRA-FINE 0.3 ML 31 GAUGE X 15/64. 19, 35  
 BD VEO INSULIN SYRINGE ULTRA-FINE 1 ML 31 GAUGE X 15/64.... 19, 35  
 BD VEO INSULIN SYRINGE ULTRA-FINE 1/2 ML 31 GAUGE X 15/64. 19, 35  
 BORDERED GAUZE 2 ..... 19, 35  
**C**  
 CAPLYTA 10.5 MG CAPSULE ..... 38  
 CAPLYTA 21 MG CAPSULE..... 38  
 CAPLYTA 42 MG CAPSULE ..... 38  
 CAREFINE PEN NEEDLE 29 GAUGE X 1/2 ..... 19, 35  
 CAREFINE PEN NEEDLE 30 GAUGE X 5/16 ..... 19, 35  
 CAREFINE PEN NEEDLE 31 GAUGE X 1/4 ..... 19, 35  
 CAREFINE PEN NEEDLE 31 GAUGE X 5/16 ..... 19, 35  
 CAREFINE PEN NEEDLE 32 GAUGE X 1/4 ..... 19, 35  
 CAREFINE PEN NEEDLE 32 GAUGE X 3/16 ..... 19, 35  
 CAREFINE PEN NEEDLE 32 GAUGE X 5/32 ..... 19, 35  
 CARETOUCH ALCOHOL PREP PAD TOPICAL PADS ..... 19, 35  
 CARETOUCH INSULIN SYRINGE 0.3 ML 31 GAUGE X 5/16..... 19, 35  
 CARETOUCH INSULIN SYRINGE 0.5 ML 30 GAUGE X 5/16..... 19, 35  
 CARETOUCH INSULIN SYRINGE 0.5 ML 31 GAUGE X 5/16..... 19, 35  
 CARETOUCH INSULIN SYRINGE 1 ML 28 GAUGE X 5/16..... 19, 35  
 CARETOUCH INSULIN SYRINGE 1 ML 29 GAUGE X 5/16..... 19, 35  
 CARETOUCH INSULIN SYRINGE 1 ML 30 GAUGE X 5/16..... 19, 35  
 CARETOUCH INSULIN SYRINGE 1 ML 31 GAUGE X 5/16..... 20, 35

CARETOUCH PEN NEEDLE 29 GAUGE  
 X 1/2..... 20, 35  
 CARETOUCH PEN NEEDLE 31 GAUGE  
 X 1/4..... 20, 35  
 CARETOUCH PEN NEEDLE 31 GAUGE  
 X 3/16..... 20, 35  
 CARETOUCH PEN NEEDLE 31 GAUGE  
 X 5/16..... 20, 35  
 CARETOUCH PEN NEEDLE 32 GAUGE  
 X 3/16..... 20, 35  
 CARETOUCH PEN NEEDLE 32 GAUGE  
 X 5/32..... 20, 35  
 CLICKFINE PEN NEEDLE 31 GAUGE X  
 1/4 ..... 20, 35  
 CLICKFINE PEN NEEDLE 31 GAUGE X  
 5/16 ..... 20, 35  
 CLICKFINE PEN NEEDLE 32 GAUGE X  
 5/32 ..... 20, 35  
 clozapine 100 mg disintegrating tablet ..... 8  
 clozapine 12.5 mg disintegrating tablet ..... 8  
 clozapine 150 mg disintegrating tablet ..... 8  
 clozapine 200 mg disintegrating tablet ..... 8  
 clozapine 25 mg disintegrating tablet ..... 8  
 COBENFY 100 MG-20 MG CAPSULE.. 46  
 COBENFY 125 MG-30 MG CAPSULE.. 46  
 COBENFY 50 MG-20 MG CAPSULE.... 46  
 COBENFY STARTER PACK 50 MG-20  
 MG/100 MG-20 MG CAPSULES IN A  
 DOSE PACK ..... 46  
 COMFORT EZ INSULIN SYRINGE 0.3  
 ML 29 GAUGE X 1/2..... 20, 35  
 COMFORT EZ INSULIN SYRINGE 0.3  
 ML 30 GAUGE X 1/2..... 20, 35  
 COMFORT EZ INSULIN SYRINGE 0.3  
 ML 30 GAUGE X 5/16..... 20, 35  
 COMFORT EZ INSULIN SYRINGE 0.3  
 ML 31 GAUGE X 15/64..... 20, 35  
 COMFORT EZ INSULIN SYRINGE 0.3  
 ML 31 GAUGE X 5/16..... 20, 35  
 COMFORT EZ INSULIN SYRINGE 0.5  
 ML 29 GAUGE X 1/2..... 20, 35  
 COMFORT EZ INSULIN SYRINGE 0.5  
 ML 30 GAUGE X 1/2..... 20, 35  
 COMFORT EZ INSULIN SYRINGE 0.5  
 ML 30 GAUGE X 5/16..... 20, 35

COMFORT EZ INSULIN SYRINGE 0.5  
 ML 31 GAUGE X 5/16..... 20, 35  
 COMFORT EZ INSULIN SYRINGE 1 ML  
 27 GAUGE X 1/2..... 20, 35  
 COMFORT EZ INSULIN SYRINGE 1 ML  
 28 GAUGE X 1/2..... 20, 35  
 COMFORT EZ INSULIN SYRINGE 1 ML  
 29 GAUGE X 1/2..... 20, 35  
 COMFORT EZ INSULIN SYRINGE 1 ML  
 30 GAUGE X 1/2..... 20, 35  
 COMFORT EZ INSULIN SYRINGE 1 ML  
 30 GAUGE X 5/16..... 20, 35  
 COMFORT EZ INSULIN SYRINGE 1 ML  
 31 GAUGE X 15/64..... 20, 35  
 COMFORT EZ INSULIN SYRINGE 1 ML  
 31 GAUGE X 5/16..... 20, 35  
 COMFORT EZ INSULIN SYRINGE 1/2  
 ML 28 GAUGE X 1/2..... 20, 35  
 COMFORT EZ INSULIN SYRINGE 1/2  
 ML 31 GAUGE X 15/64..... 20, 35  
 COMFORT EZ PEN NEEDLES 29  
 GAUGE X 1/2..... 20, 35  
 COMFORT EZ PEN NEEDLES 31  
 GAUGE X 1/4..... 20, 35  
 COMFORT EZ PEN NEEDLES 31  
 GAUGE X 3/16..... 20, 35  
 COMFORT EZ PEN NEEDLES 31  
 GAUGE X 5/16..... 20, 35  
 COMFORT EZ PEN NEEDLES 32  
 GAUGE X 1/4..... 20, 35  
 COMFORT EZ PEN NEEDLES 32  
 GAUGE X 3/16..... 20, 35  
 COMFORT EZ PEN NEEDLES 32  
 GAUGE X 5/16..... 20, 35  
 COMFORT EZ PEN NEEDLES 32  
 GAUGE X 5/32..... 20, 35  
 COMFORT EZ PEN NEEDLES 33  
 GAUGE X 1/4..... 20, 35  
 COMFORT EZ PEN NEEDLES 33  
 GAUGE X 3/16..... 20, 35  
 COMFORT EZ PEN NEEDLES 33  
 GAUGE X 5/16..... 20, 35  
 COMFORT EZ PEN NEEDLES 33  
 GAUGE X 5/32..... 20, 35  
 COMFORT EZ PRO SAFETY PEN  
 NEEDLE 30 GAUGE X 5/16..... 20, 35

COMFORT EZ PRO SAFETY PEN  
 NEEDLE 31 GAUGE X 3/16..... 20, 35  
 COMFORT EZ PRO SAFETY PEN  
 NEEDLE 31 GAUGE X 5/32..... 20, 35  
 COMFORT TOUCH PEN NEEDLE 31  
 GAUGE X 1/4..... 20, 35  
 COMFORT TOUCH PEN NEEDLE 31  
 GAUGE X 3/16..... 20, 35  
 COMFORT TOUCH PEN NEEDLE 31  
 GAUGE X 5/16..... 20, 35  
 COMFORT TOUCH PEN NEEDLE 31  
 GAUGE X 5/32..... 21, 35  
 COMFORT TOUCH PEN NEEDLE 32  
 GAUGE X 1/4..... 21, 35  
 COMFORT TOUCH PEN NEEDLE 32  
 GAUGE X 3/16..... 21, 35  
 COMFORT TOUCH PEN NEEDLE 32  
 GAUGE X 5/16..... 21, 35  
 COMFORT TOUCH PEN NEEDLE 32  
 GAUGE X 5/32..... 21, 35  
 COMFORT TOUCH PEN NEEDLE 33  
 GAUGE X 1/4..... 21, 35  
 COMFORT TOUCH PEN NEEDLE 33  
 GAUGE X 3/16..... 21, 35  
 COMFORT TOUCH PEN NEEDLE 33  
 GAUGE X 5/32..... 21, 35  
 CURAD GAUZE PAD 2 ..... 21, 35  
 CURITY ALCOHOL SWABS..... 21, 35  
 CURITY GAUZE 2 ..... 21, 35  
 cyclophosphamide 25 mg capsule ..... 6  
 cyclophosphamide 25 mg tablet..... 6  
 cyclophosphamide 50 mg capsule ..... 6  
 cyclophosphamide 50 mg tablet..... 6  
**D**  
 DERMACEA 2 ..... 21, 35  
 DERMACEA NON-WOVEN 2 ..... 21, 35  
 dihydroergotamine 0.5 mg/pump act. (4  
 mg/ml) nasal spray ..... 10  
 DRIZALMA SPRINKLE 20 MG  
 CAPSULE,DELAYED RELEASE ..... 11  
 DRIZALMA SPRINKLE 30 MG  
 CAPSULE,DELAYED RELEASE ..... 11  
 DRIZALMA SPRINKLE 40 MG  
 CAPSULE,DELAYED RELEASE ..... 11  
 DRIZALMA SPRINKLE 60 MG  
 CAPSULE,DELAYED RELEASE ..... 11

DROPLET INSULIN SYRINGE (HALF  
 UNIT) 0.3 ML 29 GAUGE X 1/2... 21, 35  
 DROPLET INSULIN SYRINGE (HALF  
 UNIT) 0.3 ML 30 GAUGE X 1/2... 21, 35  
 DROPLET INSULIN SYRINGE (HALF  
 UNIT) 0.3 ML 30 GAUGE X 5/16. 21, 35  
 DROPLET INSULIN SYRINGE (HALF  
 UNIT) 0.3 ML 31 GAUGE X 15/6421, 35  
 DROPLET INSULIN SYRINGE (HALF  
 UNIT) 0.3 ML 31 GAUGE X 5/16. 21, 35  
 DROPLET INSULIN SYRINGE (HALF  
 UNIT) 0.5 ML 29 GAUGE X 1/2... 21, 35  
 DROPLET INSULIN SYRINGE (HALF  
 UNIT) 0.5 ML 30 GAUGE X 1/2... 21, 35  
 DROPLET INSULIN SYRINGE (HALF  
 UNIT) 0.5 ML 30 GAUGE X 15/6421, 35  
 DROPLET INSULIN SYRINGE (HALF  
 UNIT) 0.5 ML 30 GAUGE X 5/16. 21, 35  
 DROPLET INSULIN SYRINGE (HALF  
 UNIT) 0.5 ML 31 GAUGE X 15/6421, 35  
 DROPLET INSULIN SYRINGE (HALF  
 UNIT) 0.5 ML 31 GAUGE X 5/16. 21, 35  
 DROPLET INSULIN SYRINGE 0.3 ML 29  
 GAUGE X 1/2..... 21, 35  
 DROPLET INSULIN SYRINGE 0.3 ML 30  
 GAUGE X 1/2..... 21, 35  
 DROPLET INSULIN SYRINGE 0.3 ML 30  
 GAUGE X 15/64..... 21, 35  
 DROPLET INSULIN SYRINGE 0.3 ML 30  
 GAUGE X 5/16..... 21, 35  
 DROPLET INSULIN SYRINGE 0.3 ML 31  
 GAUGE X 15/64..... 21, 35  
 DROPLET INSULIN SYRINGE 0.3 ML 31  
 GAUGE X 5/16..... 21, 35  
 DROPLET INSULIN SYRINGE 0.5 ML 29  
 GAUGE X 1/2..... 21, 35  
 DROPLET INSULIN SYRINGE 0.5 ML 30  
 GAUGE X 1/2..... 21, 35  
 DROPLET INSULIN SYRINGE 0.5 ML 30  
 GAUGE X 5/16..... 21, 35  
 DROPLET INSULIN SYRINGE 0.5 ML 31  
 GAUGE X 5/16..... 21, 35  
 DROPLET INSULIN SYRINGE 1 ML 29  
 GAUGE X 1/2..... 21, 35  
 DROPLET INSULIN SYRINGE 1 ML 30  
 GAUGE X 1/2..... 21, 35

DROPLET INSULIN SYRINGE 1 ML 30  
     GAUGE X 15/64..... 21, 35  
 DROPLET INSULIN SYRINGE 1 ML 30  
     GAUGE X 5/16..... 21, 35  
 DROPLET INSULIN SYRINGE 1 ML 31  
     GAUGE X 15/64..... 21, 35  
 DROPLET INSULIN SYRINGE 1 ML 31  
     GAUGE X 5/16..... 21, 35  
 DROPLET INSULIN SYRINGE 1/2 ML 31  
     GAUGE X 15/64..... 21, 35  
 DROPLET MICRON PEN NEEDLE 34  
     GAUGE X 9/64..... 21, 35  
 DROPLET PEN NEEDLE 29 GAUGE X  
     1/2 ..... 21, 35  
 DROPLET PEN NEEDLE 29 GAUGE X  
     3/8 ..... 21, 35  
 DROPLET PEN NEEDLE 30 GAUGE X  
     5/16 ..... 21, 35  
 DROPLET PEN NEEDLE 31 GAUGE X  
     1/4 ..... 21, 35  
 DROPLET PEN NEEDLE 31 GAUGE X  
     3/16 ..... 22, 35  
 DROPLET PEN NEEDLE 31 GAUGE X  
     5/16 ..... 22, 35  
 DROPLET PEN NEEDLE 32 GAUGE X  
     1/4 ..... 22, 35  
 DROPLET PEN NEEDLE 32 GAUGE X  
     3/16 ..... 22, 35  
 DROPLET PEN NEEDLE 32 GAUGE X  
     5/16 ..... 22, 35  
 DROPLET PEN NEEDLE 32 GAUGE X  
     5/32 ..... 22, 35  
 DROPSAFE ALCOHOL PREP PADS ... 22,  
     35  
 DROPSAFE INSULIN SYRINGE 0.3 ML  
     31 GAUGE X 15/64..... 22, 35  
 DROPSAFE INSULIN SYRINGE 0.3 ML  
     31 GAUGE X 5/16..... 22, 35  
 DROPSAFE INSULIN SYRINGE 0.5 ML  
     31 GAUGE X 15/64..... 22, 35  
 DROPSAFE INSULIN SYRINGE 0.5 ML  
     31 GAUGE X 5/16..... 22, 35  
 DROPSAFE INSULIN SYRINGE 1 ML 29  
     GAUGE X 1/2..... 22, 35  
 DROPSAFE INSULIN SYRINGE 1 ML 31  
     GAUGE X 15/64..... 22, 35

DROPSAFE INSULIN SYRINGE 1 ML 31  
     GAUGE X 5/16..... 22, 35  
 DROPSAFE PEN NEEDLE 31 GAUGE X  
     1/4 ..... 22, 35  
 DROPSAFE PEN NEEDLE 31 GAUGE X  
     3/16 ..... 22, 35  
 DROPSAFE PEN NEEDLE 31 GAUGE X  
     5/16 ..... 22, 35

**E**  
 EASY COMFORT ALCOHOL PAD  
     TOPICAL PADS ..... 22, 35  
 EASY COMFORT INSULIN SYRINGE  
     0.3 ML 30 GAUGE X 5/16..... 22, 35  
 EASY COMFORT INSULIN SYRINGE  
     0.3 ML 31 GAUGE X 5/16..... 22, 35  
 EASY COMFORT INSULIN SYRINGE  
     0.3 ML 31 X 1/2..... 22, 35  
 EASY COMFORT INSULIN SYRINGE  
     0.5 ML 30 GAUGE X 1/2..... 22, 35  
 EASY COMFORT INSULIN SYRINGE  
     0.5 ML 30 GAUGE X 5/16..... 22, 35  
 EASY COMFORT INSULIN SYRINGE  
     0.5 ML 31 GAUGE X 5/16..... 22, 35  
 EASY COMFORT INSULIN SYRINGE 1  
     ML 29 GAUGE X 5/16..... 22, 35  
 EASY COMFORT INSULIN SYRINGE 1  
     ML 30 GAUGE X 1/2..... 22, 35  
 EASY COMFORT INSULIN SYRINGE 1  
     ML 30 GAUGE X 5/16..... 22, 35  
 EASY COMFORT INSULIN SYRINGE 1  
     ML 31 GAUGE X 5/16..... 22, 35  
 EASY COMFORT INSULIN SYRINGE 1  
     ML 32 GAUGE X 5/16..... 22, 35  
 EASY COMFORT INSULIN SYRINGE  
     1/2 ML 29 X 5/16 ..... 22, 35  
 EASY COMFORT INSULIN SYRINGE  
     1/2 ML 32 GAUGE X 5/16 ..... 22, 35  
 EASY COMFORT PEN NEEDLES 29  
     GAUGE X 3/16..... 22, 35  
 EASY COMFORT PEN NEEDLES 29  
     GAUGE X 5/32..... 22, 35  
 EASY COMFORT PEN NEEDLES 31  
     GAUGE X 1/4..... 22, 35  
 EASY COMFORT PEN NEEDLES 31  
     GAUGE X 3/16..... 22, 35

EASY COMFORT PEN NEEDLES 31  
 GAUGE X 5/16..... 22, 35

EASY COMFORT PEN NEEDLES 32  
 GAUGE X 5/32..... 22, 35

EASY COMFORT PEN NEEDLES 33  
 GAUGE X 1/4..... 22, 35

EASY COMFORT PEN NEEDLES 33  
 GAUGE X 3/16..... 22, 35

EASY COMFORT PEN NEEDLES 33  
 GAUGE X 5/32..... 22, 35

EASY COMFORT SAFETY PEN  
 NEEDLE 31 GAUGE X 1/4 ..... 22, 35

EASY COMFORT SAFETY PEN  
 NEEDLE 31 GAUGE X 3/16 ..... 22, 35

EASY COMFORT SAFETY PEN  
 NEEDLE 32 GAUGE X 5/32 ..... 22, 35

EASY GLIDE INSULIN SYRINGE 0.3 ML  
 31 GAUGE X 15/64..... 22, 35

EASY GLIDE INSULIN SYRINGE 1 ML  
 31 GAUGE X 15/64..... 22, 35

EASY GLIDE INSULIN SYRINGE 1/2 ML  
 31 GAUGE X 15/64..... 22, 35

EASY GLIDE PEN NEEDLE 33 GAUGE  
 X 5/32..... 23, 35

EASY TOUCH 29 GAUGE X 1/2 ..... 23, 35

EASY TOUCH 31 GAUGE X 1/4 ..... 23, 35

EASY TOUCH 31 GAUGE X 3/16 ... 23, 35

EASY TOUCH 31 GAUGE X 5/16 ... 23, 35

EASY TOUCH 32 GAUGE X 1/4 ..... 23, 35

EASY TOUCH 32 GAUGE X 3/16 ... 23, 35

EASY TOUCH 32 GAUGE X 5/32 ... 23, 35

EASY TOUCH ALCOHOL PREP PADS  
 ..... 23, 35

EASY TOUCH FLIPLOCK INSULIN 1  
 ML 29 GAUGE X 1/2..... 23, 35

EASY TOUCH FLIPLOCK INSULIN 1  
 ML 31 GAUGE X 5/16..... 23, 35

EASY TOUCH FLIPLOCK INSULIN  
 SYRINGE 1 ML 30 GAUGE X 1/2 23, 35

EASY TOUCH FLIPLOCK INSULIN  
 SYRINGE 1 ML 30 GAUGE X 5/16 .. 23,  
 35

EASY TOUCH FLIPLOCK SYRINGE 1  
 ML 27 GAUGE X 1/2..... 23, 35

EASY TOUCH INSULIN SAFETY  
 SYRINGE 0.5 ML 29 GAUGE X 1/2 . 23,  
 35

EASY TOUCH INSULIN SAFETY  
 SYRINGE 0.5 ML 30 GAUGE X 5/16 23,  
 35

EASY TOUCH INSULIN SAFETY  
 SYRINGE 1 ML 29 GAUGE X 1/2 23, 35

EASY TOUCH INSULIN SAFETY  
 SYRINGE 1 ML 30 GAUGE X 1/2 23, 35

EASY TOUCH INSULIN SYRINGE 0.3  
 ML 30 GAUGE X 1/2..... 23, 35

EASY TOUCH INSULIN SYRINGE 0.3  
 ML 30 GAUGE X 5/16..... 23, 35

EASY TOUCH INSULIN SYRINGE 0.3  
 ML 31 GAUGE X 5/16..... 23, 35

EASY TOUCH INSULIN SYRINGE 0.5  
 ML 29 GAUGE X 1/2..... 23, 35

EASY TOUCH INSULIN SYRINGE 0.5  
 ML 30 GAUGE X 1/2..... 23, 35

EASY TOUCH INSULIN SYRINGE 0.5  
 ML 30 GAUGE X 5/16..... 23, 35

EASY TOUCH INSULIN SYRINGE 0.5  
 ML 31 GAUGE X 5/16..... 23, 35

EASY TOUCH INSULIN SYRINGE 1 ML  
 27 GAUGE X 1/2..... 23, 35

EASY TOUCH INSULIN SYRINGE 1 ML  
 27 GAUGE X 5/8..... 23, 35

EASY TOUCH INSULIN SYRINGE 1 ML  
 28 GAUGE X 1/2..... 23, 35

EASY TOUCH INSULIN SYRINGE 1 ML  
 29 GAUGE X 1/2..... 23, 35

EASY TOUCH INSULIN SYRINGE 1 ML  
 30 GAUGE X 1/2..... 23, 35

EASY TOUCH INSULIN SYRINGE 1 ML  
 30 GAUGE X 5/16..... 23, 35

EASY TOUCH INSULIN SYRINGE 1 ML  
 31 GAUGE X 5/16..... 23, 35

EASY TOUCH INSULIN SYRINGE 1/2  
 ML 27 GAUGE X 1/2..... 23, 35

EASY TOUCH INSULIN SYRINGE 1/2  
 ML 28 GAUGE X 1/2..... 23, 35

EASY TOUCH LUER LOCK INSULIN 1  
 ML SYRINGE ..... 23, 35

EASY TOUCH PEN NEEDLE 30 GAUGE  
 X 5/16..... 23, 35

EASY TOUCH SAFETY PEN NEEDLE 29 GAUGE X 3/16..... 23, 35  
 EASY TOUCH SAFETY PEN NEEDLE 29 GAUGE X 5/16..... 23, 35  
 EASY TOUCH SAFETY PEN NEEDLE 30 GAUGE X 1/4..... 23, 35  
 EASY TOUCH SAFETY PEN NEEDLE 30 GAUGE X 3/16..... 23, 35  
 EASY TOUCH SAFETY PEN NEEDLE 30 GAUGE X 5/16..... 23, 35  
 EASY TOUCH SHEATHLOCK INSULIN 1 ML 29 GAUGE X 1/2..... 23, 35  
 EASY TOUCH SHEATHLOCK INSULIN 1 ML 30 GAUGE X 5/16..... 23, 35  
 EASY TOUCH SHEATHLOCK INSULIN 1 ML 31 GAUGE X 5/16..... 23, 35  
 EASY TOUCH SHEATHLOCK INSULIN SYRINGE 1 ML 30 GAUGE X 1/2 24, 35  
 EASY TOUCH UNI-SLIP 1 ML SYRINGE ..... 24, 35  
 ELEPSIA XR 1,000 MG TABLET,EXTENDED RELEASE ..... 12  
 ELEPSIA XR 1,500 MG TABLET,EXTENDED RELEASE ..... 12  
 EMBRACE PEN NEEDLE 29 GAUGE X 1/2 ..... 24, 35  
 EMBRACE PEN NEEDLE 30 GAUGE X 3/16 ..... 24, 35  
 EMBRACE PEN NEEDLE 30 GAUGE X 5/16 ..... 24, 35  
 EMBRACE PEN NEEDLE 31 GAUGE X 1/4 ..... 24, 35  
 EMBRACE PEN NEEDLE 31 GAUGE X 3/16 ..... 24, 35  
 EMBRACE PEN NEEDLE 31 GAUGE X 5/16 ..... 24, 35  
 EMBRACE PEN NEEDLE 32 GAUGE X 5/32 ..... 24, 35  
 EMSAM 12 MG/24 HR TRANSDERMAL 24 HOUR PATCH ..... 44  
 EMSAM 6 MG/24 HR TRANSDERMAL 24 HOUR PATCH ..... 44  
 EMSAM 9 MG/24 HR TRANSDERMAL 24 HOUR PATCH ..... 44  
 eslicarbazepine 200 mg tablet..... 14  
 eslicarbazepine 400 mg tablet..... 14

eslicarbazepine 600 mg tablet..... 14  
 eslicarbazepine 800 mg tablet..... 14  
 esomeprazole magnesium dr 10 mg granules delayed release for susp ..... 2  
 esomeprazole magnesium dr 20 mg granules delayed release for susp ..... 2  
 esomeprazole magnesium dr 40 mg granules delayed release for susp ..... 2  
 EXEL INSULIN 0.3 ML 29 GAUGE X 1/2 ..... 24, 35

**F**  
 FANAPT 1 MG TABLET ..... 17  
 FANAPT 10 MG TABLET ..... 17  
 FANAPT 12 MG TABLET ..... 17  
 FANAPT 2 MG TABLET ..... 17  
 FANAPT 4 MG TABLET ..... 17  
 FANAPT 6 MG TABLET ..... 17  
 FANAPT 8 MG TABLET ..... 17  
 FANAPT TITRATION PACK A 1 MG (2)-2 MG (2)-4 MG (2)-6 MG (2) TABLETS ..... 17  
 FANAPT TITRATION PACK B 1 MG (6)-2 MG (2)-6 MG (2)-8 MG (2) TABLETS ..... 17  
 FANAPT TITRATION PACK C 1 MG (4)-2 MG (2)-6 MG (2) TABLETS ..... 17  
 febuxostat 40 mg tablet..... 1  
 febuxostat 80 mg tablet..... 1  
 FETZIMA 120 MG CAPSULE,EXTENDED RELEASE .... 37  
 FETZIMA 20 MG (2)-40 MG (26) CAPSULE,EXTENDED RELEASE,24 HR,DOSE PACK..... 37  
 FETZIMA 20 MG CAPSULE,EXTENDED RELEASE..... 37  
 FETZIMA 40 MG CAPSULE,EXTENDED RELEASE..... 37  
 FETZIMA 80 MG CAPSULE,EXTENDED RELEASE..... 37  
 FREESTYLE PRECISION 0.5 ML 30 GAUGE X 5/16..... 24, 35  
 FREESTYLE PRECISION 0.5 ML 31 GAUGE X 5/16..... 24, 35  
 FREESTYLE PRECISION 1 ML 30 GAUGE X 5/16..... 24, 35

FREESTYLE PRECISION 1 ML 31  
 GAUGE X 5/16..... 24, 35  
 FYCOMPA 0.5 MG/ML ORAL  
 SUSPENSION ..... 42  
**G**  
 GAUZE BANDAGE 2 ..... 24, 35  
 GAUZE PAD 2 ..... 24, 35  
**H**  
 HEALTHWISE INSULIN SYRINGE 0.3  
 ML 30 GAUGE X 5/16..... 24, 35  
 HEALTHWISE INSULIN SYRINGE 0.3  
 ML 31 GAUGE X 5/16..... 24, 35  
 HEALTHWISE INSULIN SYRINGE 0.5  
 ML 30 GAUGE X 5/16..... 24, 35  
 HEALTHWISE INSULIN SYRINGE 0.5  
 ML 31 GAUGE X 5/16..... 24, 35  
 HEALTHWISE INSULIN SYRINGE 1 ML  
 30 GAUGE X 5/16..... 24, 35  
 HEALTHWISE INSULIN SYRINGE 1 ML  
 31 GAUGE X 5/16..... 24, 35  
 HEALTHWISE PEN NEEDLE 31 GAUGE  
 X 3/16..... 24, 35  
 HEALTHWISE PEN NEEDLE 31 GAUGE  
 X 5/16..... 24, 35  
 HEALTHWISE PEN NEEDLE 32 GAUGE  
 X 5/32..... 24, 35  
 HEALTHY ACCENTS UNIFINE PENTIP  
 29 GAUGE X 1/2..... 24, 35  
 HEALTHY ACCENTS UNIFINE PENTIP  
 31 GAUGE X 1/4..... 24, 35  
 HEALTHY ACCENTS UNIFINE PENTIP  
 31 GAUGE X 3/16..... 24, 35  
 HEALTHY ACCENTS UNIFINE PENTIP  
 31 GAUGE X 5/16..... 24, 35  
 HEALTHY ACCENTS UNIFINE PENTIP  
 32 GAUGE X 5/32..... 24, 35  
**I**  
 INCONTROL ALCOHOL PADS ..... 24, 35  
 INCONTROL PEN NEEDLE 29 GAUGE  
 X 1/2..... 24, 35  
 INCONTROL PEN NEEDLE 31 GAUGE  
 X 1/4..... 24, 35  
 INCONTROL PEN NEEDLE 31 GAUGE  
 X 3/16..... 24, 35  
 INCONTROL PEN NEEDLE 31 GAUGE  
 X 5/16..... 24, 35

INCONTROL PEN NEEDLE 32 GAUGE  
 X 5/32..... 24, 35  
 INSULIN SYRINGE MICROFINE 1 ML  
 27 GAUGE X 5/8..... 24, 35  
 INSULIN SYRINGE NEEDLELESS 1 ML  
 ..... 24, 35  
 INSULIN SYRINGE U-100 WITH  
 NEEDLE 0.3 ML 29 GAUGE ..... 24, 35  
 INSULIN SYRINGE U-100 WITH  
 NEEDLE 0.3 ML 29 GAUGE X 1/2 ... 24,  
 35  
 INSULIN SYRINGE U-100 WITH  
 NEEDLE 0.3 ML 30 ..... 24, 35  
 INSULIN SYRINGE U-100 WITH  
 NEEDLE 0.3 ML 30 GAUGE X 5/16. 24,  
 35  
 INSULIN SYRINGE U-100 WITH  
 NEEDLE 0.3 ML 31 GAUGE X 1/4 ... 24,  
 35  
 INSULIN SYRINGE U-100 WITH  
 NEEDLE 0.3 ML 31 GAUGE X 15/64 24,  
 35  
 INSULIN SYRINGE U-100 WITH  
 NEEDLE 0.3 ML 31 GAUGE X 5/16. 24,  
 35  
 INSULIN SYRINGE U-100 WITH  
 NEEDLE 0.5 ML 29 GAUGE X 1/2 ... 24,  
 35  
 INSULIN SYRINGE U-100 WITH  
 NEEDLE 0.5 ML 30 GAUGE X 1/2 ... 25,  
 35  
 INSULIN SYRINGE U-100 WITH  
 NEEDLE 0.5 ML 30 GAUGE X 5/16. 25,  
 35  
 INSULIN SYRINGE U-100 WITH  
 NEEDLE 0.5 ML 31 GAUGE X 5/16. 25,  
 35  
 INSULIN SYRINGE U-100 WITH  
 NEEDLE 1 ML 27 GAUGE X 1/2. 25, 35  
 INSULIN SYRINGE U-100 WITH  
 NEEDLE 1 ML 27 GAUGE X 5/8. 25, 35  
 INSULIN SYRINGE U-100 WITH  
 NEEDLE 1 ML 28 GAUGE ..... 25, 35  
 INSULIN SYRINGE U-100 WITH  
 NEEDLE 1 ML 28 GAUGE X 1/2. 25, 35

INSULIN SYRINGE U-100 WITH  
 NEEDLE 1 ML 29 GAUGE X 1/2. 25, 35  
 INSULIN SYRINGE U-100 WITH  
 NEEDLE 1 ML 29 GAUGE X 7/1625, 35  
 INSULIN SYRINGE U-100 WITH  
 NEEDLE 1 ML 30 GAUGE X 1/2. 25, 35  
 INSULIN SYRINGE U-100 WITH  
 NEEDLE 1 ML 30 GAUGE X 3/8. 25, 35  
 INSULIN SYRINGE U-100 WITH  
 NEEDLE 1 ML 30 GAUGE X 5/1625, 35  
 INSULIN SYRINGE U-100 WITH  
 NEEDLE 1 ML 30 GAUGE X 7/1625, 35  
 INSULIN SYRINGE U-100 WITH  
 NEEDLE 1 ML 31 GAUGE X 1/4. 25, 35  
 INSULIN SYRINGE U-100 WITH  
 NEEDLE 1 ML 31 GAUGE X 15/64.. 25,  
 35  
 INSULIN SYRINGE U-100 WITH  
 NEEDLE 1 ML 31 GAUGE X 5/1625, 35  
 INSULIN SYRINGE U-100 WITH  
 NEEDLE 1/2 ML 27 GAUGE X 1/2... 25,  
 35  
 INSULIN SYRINGE U-100 WITH  
 NEEDLE 1/2 ML 28 GAUGE..... 25, 35  
 INSULIN SYRINGE U-100 WITH  
 NEEDLE 1/2 ML 28 GAUGE X 1/2... 25,  
 35  
 INSULIN SYRINGE U-100 WITH  
 NEEDLE 1/2 ML 29..... 25, 35  
 INSULIN SYRINGE U-100 WITH  
 NEEDLE 1/2 ML 30 GAUGE..... 25, 35  
 INSULIN SYRINGE U-100 WITH  
 NEEDLE 1/2 ML 31 GAUGE X 1/4... 25,  
 35  
 INSULIN SYRINGE U-100 WITH  
 NEEDLE 1/2 ML 31 GAUGE X 15/6425,  
 35  
 INSULIN SYRINGE-NEEDLE U-100  
 HALF UNIT MARKING 0.3 ML 31  
 GAUGE X 1/4..... 25, 35  
 INSULIN U-500 SYRINGE-NEEDLE 1/2  
 ML 31 GAUGE X 15/64..... 25, 35  
 INSUPEN PEN NEEDLE 29 GAUGE X 1/2  
 ..... 25, 35  
 INSUPEN PEN NEEDLE 30 GAUGE X  
 5/16 ..... 25, 35

INSUPEN PEN NEEDLE 31 GAUGE X 1/4  
 ..... 25, 35  
 INSUPEN PEN NEEDLE 31 GAUGE X  
 3/16 ..... 25, 35  
 INSUPEN PEN NEEDLE 31 GAUGE X  
 5/16 ..... 25, 35  
 INSUPEN PEN NEEDLE 32 GAUGE X 1/4  
 ..... 25, 35  
 INSUPEN PEN NEEDLE 32 GAUGE X  
 5/16 ..... 25, 35  
 INSUPEN PEN NEEDLE 32 GAUGE X  
 5/32 ..... 25, 35  
 INSUPEN PEN NEEDLE 33 GAUGE X  
 5/32 ..... 25, 35  
 IV PREP WIPES MEDICATED ..... 25, 35  
**J**  
 JYLAMVO 2 MG/ML ORAL SOLUTION6  
**K**  
 KLISYRI 1 % (250 MG) TOPICAL  
 OINTMENT IN PACKET ..... 36  
**L**  
 levetiracetam 250 mg tablet for oral  
 suspension..... 45  
 LISCO 2 ..... 25, 35  
 LITE TOUCH INSULIN PEN NEEDLES  
 29 GAUGE X 1/2..... 25, 35  
 LITE TOUCH INSULIN PEN NEEDLES  
 31 GAUGE X 1/4..... 25, 35  
 LITE TOUCH INSULIN PEN NEEDLES  
 31 GAUGE X 3/16..... 25, 35  
 LITE TOUCH INSULIN PEN NEEDLES  
 31 GAUGE X 5/16..... 25, 35  
 LITE TOUCH INSULIN SYRINGE 0.3 ML  
 29 GAUGE X 1/2..... 25, 35  
 LITE TOUCH INSULIN SYRINGE 0.3 ML  
 30 GAUGE X 5/16..... 25, 35  
 LITE TOUCH INSULIN SYRINGE 0.3 ML  
 31 GAUGE X 5/16..... 25, 35  
 LITE TOUCH INSULIN SYRINGE 0.5 ML  
 29 GAUGE X 1/2..... 25, 35  
 LITE TOUCH INSULIN SYRINGE 0.5 ML  
 30 GAUGE X 5/16..... 25, 35  
 LITE TOUCH INSULIN SYRINGE 0.5 ML  
 31 GAUGE X 5/16..... 25, 35  
 LITE TOUCH INSULIN SYRINGE 1 ML  
 28 GAUGE..... 26, 35

LITE TOUCH INSULIN SYRINGE 1 ML  
 28 GAUGE X 1/2..... 26, 35  
 LITE TOUCH INSULIN SYRINGE 1 ML  
 29 GAUGE..... 26, 35  
 LITE TOUCH INSULIN SYRINGE 1 ML  
 29 GAUGE X 1/2..... 26, 35  
 LITE TOUCH INSULIN SYRINGE 1 ML  
 30 GAUGE X 5/16..... 26, 35  
 LITE TOUCH INSULIN SYRINGE 1 ML  
 30 GAUGE X 7/16..... 26, 35  
 LITE TOUCH INSULIN SYRINGE 1 ML  
 31 GAUGE X 5/16..... 26, 35  
 LITE TOUCH INSULIN SYRINGE 1/2 ML  
 28 GAUGE..... 26, 35  
 LITE TOUCH INSULIN SYRINGE 1/2 ML  
 28 GAUGE X 1/2..... 26, 35  
 LITE TOUCH INSULIN SYRINGE 1/2 ML  
 29..... 26, 35  
 LITE TOUCH INSULIN SYRINGE 1/2 ML  
 30 GAUGE..... 26, 35  
 loteprednol etabonate 0.2 % eye  
 drops,suspension ..... 41

**M**

MAGELLAN INSULIN SAFETY  
 SYRINGE 0.3 ML 29 GAUGE X 1/2 . 26,  
 35  
 MAGELLAN INSULIN SAFETY  
 SYRINGE 0.5 ML 29 GAUGE X 1/2 . 26,  
 35  
 MAGELLAN INSULIN SAFETY  
 SYRINGE 1 ML 29 GAUGE X 1/2 26, 35  
 MAGELLAN INSULIN SAFETY  
 SYRINGE 1 ML 30 GAUGE X 5/16 .. 26,  
 35  
 MAGELLAN SYRINGE 0.3 ML 30 X 5/16  
 ..... 26, 35  
 MAGELLAN SYRINGE 0.5 ML 30  
 GAUGE X 5/16..... 26, 35  
 MAXICOMFORT II PEN NEEDLE 31  
 GAUGE X 1/4..... 26, 35  
 MAXICOMFORT INSULIN SYRINGE 1  
 ML 27 GAUGE X 1/2..... 26, 35  
 MAXI-COMFORT INSULIN SYRINGE 1  
 ML 28 GAUGE X 1/2..... 26, 35  
 MAXICOMFORT INSULIN SYRINGE 1/2  
 ML 27 GAUGE X 1/2..... 26, 35

MAXI-COMFORT INSULIN SYRINGE  
 1/2 ML 28 GAUGE X 1/2 ..... 26, 35  
 MAXICOMFORT SAFETY PEN NEEDLE  
 29 GAUGE X 3/16..... 26, 35  
 MAXICOMFORT SAFETY PEN NEEDLE  
 29 GAUGE X 5/16..... 26, 35  
 memantine 14 mg capsule sprinkle,extended  
 release 24hr ..... 39  
 memantine 21 mg capsule sprinkle,extended  
 release 24hr ..... 39  
 memantine 28 mg capsule sprinkle,extended  
 release 24hr ..... 39  
 memantine 7 mg capsule sprinkle,extended  
 release 24hr ..... 39  
 methotrexate sodium 2.5 mg tablet..... 6  
 MICRODOT INSULIN PEN NEEDLE 31  
 GAUGE X 1/4..... 26, 35  
 MICRODOT INSULIN PEN NEEDLE 32  
 GAUGE X 5/32..... 26, 35  
 MICRODOT INSULIN PEN NEEDLE 33  
 GAUGE X 5/32..... 26, 35  
 MICRODOT READYGARD PEN  
 NEEDLE 31 GAUGE X 3/16..... 26, 35  
 MINI ULTRA-THIN II 31 GAUGE X 3/16  
 ..... 26, 35  
 MONOJECT INSULIN SAFETY  
 SYRINGE 0.3 ML 30 GAUGE X 5/16 26,  
 35  
 MONOJECT INSULIN SAFETY  
 SYRINGE 0.5 ML 29 GAUGE X 1/2 . 26,  
 35  
 MONOJECT INSULIN SAFETY  
 SYRINGE 0.5 ML 30 GAUGE X 5/16 26,  
 35  
 MONOJECT INSULIN SAFETY  
 SYRINGE 1 ML 29 GAUGE X 1/2 26, 35  
 MONOJECT INSULIN SYRINGE 0.3 ML  
 29 GAUGE X 1/2..... 26, 35  
 MONOJECT INSULIN SYRINGE 0.3 ML  
 30 GAUGE X 5/16..... 26, 35  
 MONOJECT INSULIN SYRINGE 0.3 ML  
 31 GAUGE X 5/16..... 26, 35  
 MONOJECT INSULIN SYRINGE 0.5 ML  
 29 GAUGE X 1/2..... 26, 35  
 MONOJECT INSULIN SYRINGE 0.5 ML  
 30 GAUGE X 5/16..... 26, 35

MONOJECT INSULIN SYRINGE 0.5 ML  
 31 GAUGE X 5/16..... 26, 35  
 MONOJECT INSULIN SYRINGE 1 ML 26,  
 35  
 MONOJECT INSULIN SYRINGE 1 ML 25  
 GAUGE X 5/8..... 26, 35  
 MONOJECT INSULIN SYRINGE 1 ML 27  
 GAUGE X 1/2..... 26, 35  
 MONOJECT INSULIN SYRINGE 1 ML 28  
 GAUGE X 1/2..... 26, 35  
 MONOJECT INSULIN SYRINGE 1 ML 29  
 GAUGE X 1/2..... 26, 35  
 MONOJECT INSULIN SYRINGE 1 ML 30  
 GAUGE X 5/16..... 26, 35  
 MONOJECT INSULIN SYRINGE 1 ML 31  
 GAUGE X 5/16..... 26, 35  
 MONOJECT INSULIN SYRINGE 1/2 ML  
 28 GAUGE X 1/2..... 27, 35  
 MONOJECT SYRINGE 1/2 ML 28  
 GAUGE..... 27, 35  
 MONOJECT ULTRA COMFORT  
 INSULIN 1/2 ML 28 GAUGE SYRINGE  
 ..... 27, 35

## N

NANO 2ND GEN PEN NEEDLE 32  
 GAUGE X 5/32..... 27, 35  
 NANO PEN NEEDLE 32 GAUGE X 5/32  
 ..... 27, 35  
 NEXLETOL 180 MG TABLET ..... 16  
 NEXLIZET 180 MG-10 MG TABLET.... 16  
 NOVOFINE 30 NEEDLE..... 27, 35  
 NOVOFINE 32 32 GAUGE X 1/4 ..... 27, 35  
 NOVOFINE PLUS 32 GAUGE X 1/6 27, 35  
 NOVOTWIST 32 GAUGE X 1/5..... 27, 35

## O

omega-3 acid ethyl esters 1 gram capsule. 15  
 OPIPZA 10 MG ORAL FILM..... 3  
 OPIPZA 2 MG ORAL FILM..... 3  
 OPIPZA 5 MG ORAL FILM..... 3

## P

PEN NEEDLE 29 GAUGE X 1/2 ..... 27, 35  
 PEN NEEDLE 30 GAUGE X 5/16 .... 27, 35  
 PEN NEEDLE 31 GAUGE X 1/4 ..... 27, 35  
 PEN NEEDLE 31 GAUGE X 3/16 .... 27, 35  
 PEN NEEDLE 31 GAUGE X 5/16 .... 27, 35  
 PEN NEEDLE 32 GAUGE X 5/32 .... 27, 35

PEN NEEDLE, DIABETIC 29 GAUGE X  
 1/2 ..... 27, 35  
 PEN NEEDLE, DIABETIC 29 GAUGE X  
 15/32 ..... 27, 35  
 PEN NEEDLE, DIABETIC 30 GAUGE X  
 3/16 ..... 27, 35  
 PEN NEEDLE, DIABETIC 30 GAUGE X  
 5/16 ..... 27, 35  
 PEN NEEDLE, DIABETIC 31 GAUGE X  
 1/3 ..... 27, 35  
 PEN NEEDLE, DIABETIC 31 GAUGE X  
 1/4 ..... 27, 35  
 PEN NEEDLE, DIABETIC 31 GAUGE X  
 1/6 ..... 27, 35  
 PEN NEEDLE, DIABETIC 31 GAUGE X  
 13/64 ..... 27, 35  
 PEN NEEDLE, DIABETIC 31 GAUGE X  
 15/64 ..... 27, 35  
 PEN NEEDLE, DIABETIC 31 GAUGE X  
 3/16 ..... 27, 35  
 PEN NEEDLE, DIABETIC 31 GAUGE X  
 5/16 ..... 27, 35  
 PEN NEEDLE, DIABETIC 31 GAUGE X  
 5/32 ..... 27, 35  
 PEN NEEDLE, DIABETIC 32 GAUGE X  
 1/4 ..... 27, 35  
 PEN NEEDLE, DIABETIC 32 GAUGE X  
 3/16 ..... 27, 35  
 PEN NEEDLE, DIABETIC 32 GAUGE X  
 5/16 ..... 27, 35  
 PEN NEEDLE, DIABETIC 32 GAUGE X  
 5/32 ..... 27, 35  
 PEN NEEDLE, DIABETIC 33 GAUGE X  
 1/4 ..... 27, 35  
 PEN NEEDLE, DIABETIC 33 GAUGE X  
 3/16 ..... 27, 35  
 PEN NEEDLE, DIABETIC 33 GAUGE X  
 5/32 ..... 27, 35  
 PEN NEEDLE, DIABETIC, SAFETY 31  
 GAUGE X 5/32..... 27, 35  
 PENTIPS PEN NEEDLE 29 GAUGE X 1/2  
 ..... 27, 35  
 PENTIPS PEN NEEDLE 31 GAUGE X 1/4  
 ..... 27, 35  
 PENTIPS PEN NEEDLE 31 GAUGE X  
 3/16 ..... 27, 35

PENTIPS PEN NEEDLE 31 GAUGE X  
5/16 ..... 27, 35

PENTIPS PEN NEEDLE 32 GAUGE X 1/4  
..... 27, 35

PENTIPS PEN NEEDLE 32 GAUGE X  
5/32 ..... 27, 35

perampanel 0.5 mg/ml oral suspension.... 42

perampanel 10 mg tablet..... 42

perampanel 12 mg tablet..... 42

perampanel 2 mg tablet..... 42

perampanel 4 mg tablet..... 42

perampanel 6 mg tablet..... 42

perampanel 8 mg tablet..... 42

PIP PEN NEEDLE 31 GAUGE X 3/16... 27,  
35

PIP PEN NEEDLE 32 GAUGE X 5/32... 27,  
35

PREVENT DROPSAFE PEN NEEDLE 31  
GAUGE X 1/4..... 27, 35

PREVENT DROPSAFE PEN NEEDLE 31  
GAUGE X 5/16..... 27, 35

PRO COMFORT ALCOHOL PADS. 27, 35

PRO COMFORT INSULIN SYRINGE 0.5  
ML 30 GAUGE X 1/2..... 27, 35

PRO COMFORT INSULIN SYRINGE 0.5  
ML 30 GAUGE X 5/16..... 27, 35

PRO COMFORT INSULIN SYRINGE 0.5  
ML 31 GAUGE X 5/16..... 27, 35

PRO COMFORT INSULIN SYRINGE 1  
ML 30 GAUGE X 1/2..... 27, 35

PRO COMFORT INSULIN SYRINGE 1  
ML 30 GAUGE X 5/16..... 28, 35

PRO COMFORT INSULIN SYRINGE 1  
ML 31 GAUGE X 5/16..... 28, 35

PRO COMFORT PEN NEEDLE 32  
GAUGE X 1/4..... 28, 35

PRO COMFORT PEN NEEDLE 32  
GAUGE X 3/16..... 28, 35

PRO COMFORT PEN NEEDLE 32  
GAUGE X 5/16..... 28, 35

PRO COMFORT PEN NEEDLE 32  
GAUGE X 5/32..... 28, 35

PRODIGY INSULIN SYRINGE 0.3 ML 31  
GAUGE X 5/16..... 28, 35

PRODIGY INSULIN SYRINGE 0.5 ML 31  
GAUGE X 5/16..... 28, 35

PRODIGY INSULIN SYRINGE 1 ML 28  
GAUGE X 1/2..... 28, 35

PURE COMFORT ALCOHOL PADS28, 35

PURE COMFORT PEN NEEDLE 32  
GAUGE X 1/4..... 28, 35

PURE COMFORT PEN NEEDLE 32  
GAUGE X 3/16..... 28, 35

PURE COMFORT PEN NEEDLE 32  
GAUGE X 5/16..... 28, 35

PURE COMFORT PEN NEEDLE 32  
GAUGE X 5/32..... 28, 35

PURE COMFORT SAFETY PEN NEEDLE  
31 GAUGE X 1/4..... 28, 35

PURE COMFORT SAFETY PEN NEEDLE  
31 GAUGE X 3/16..... 28, 35

PURE COMFORT SAFETY PEN NEEDLE  
32 GAUGE X 5/32..... 28, 35

**R**

RASUVO (PF) 10 MG/0.2 ML  
SUBCUTANEOUS AUTO-INJECTOR  
..... 40

RASUVO (PF) 12.5 MG/0.25 ML  
SUBCUTANEOUS AUTO-INJECTOR  
..... 40

RASUVO (PF) 15 MG/0.3 ML  
SUBCUTANEOUS AUTO-INJECTOR  
..... 40

RASUVO (PF) 17.5 MG/0.35 ML  
SUBCUTANEOUS AUTO-INJECTOR  
..... 40

RASUVO (PF) 20 MG/0.4 ML  
SUBCUTANEOUS AUTO-INJECTOR  
..... 40

RASUVO (PF) 22.5 MG/0.45 ML  
SUBCUTANEOUS AUTO-INJECTOR  
..... 40

RASUVO (PF) 25 MG/0.5 ML  
SUBCUTANEOUS AUTO-INJECTOR  
..... 40

RASUVO (PF) 30 MG/0.6 ML  
SUBCUTANEOUS AUTO-INJECTOR  
..... 40

RASUVO (PF) 7.5 MG/0.15 ML  
SUBCUTANEOUS AUTO-INJECTOR  
..... 40

REPATHA PUSHTRONEX 420 MG/3.5  
 ML SUBCUTANEOUS WEARABLE  
 INJECTOR..... 16  
 REPATHA SURECLICK 140 MG/ML  
 SUBCUTANEOUS PEN INJECTOR.. 16  
 REPATHA SYRINGE 140 MG/ML  
 SUBCUTANEOUS SYRINGE ..... 16  
 rufinamide 200 mg tablet ..... 43  
 rufinamide 40 mg/ml oral suspension..... 43  
 rufinamide 400 mg tablet ..... 43  
**S**  
 SAFESNAP INSULIN SYRINGE 0.3 ML  
 30 GAUGE X 5/16..... 28, 35  
 SAFESNAP INSULIN SYRINGE 0.5 ML  
 29 GAUGE X 1/2..... 28, 35  
 SAFESNAP INSULIN SYRINGE 0.5 ML  
 30 GAUGE X 5/16..... 28, 35  
 SAFESNAP INSULIN SYRINGE 1 ML 28  
 GAUGE X 1/2..... 28, 35  
 SAFESNAP INSULIN SYRINGE 1 ML 29  
 GAUGE X 1/2..... 28, 35  
 SAFETY PEN NEEDLE 31 GAUGE X  
 3/16 ..... 28, 35  
 SECUADO 3.8 MG/24 HOUR  
 TRANSDERMAL 24 HOUR PATCH... 5  
 SECUADO 5.7 MG/24 HOUR  
 TRANSDERMAL 24 HOUR PATCH... 5  
 SECUADO 7.6 MG/24 HOUR  
 TRANSDERMAL 24 HOUR PATCH... 5  
 SECURES SAFE INSULIN SYRINGE 0.5  
 ML 29 GAUGE X 1/2..... 28, 35  
 SECURES SAFE INSULIN SYRINGE 1 ML  
 29 GAUGE X 1/2..... 28, 35  
 SECURES SAFE PEN NEEDLE 30 GAUGE  
 X 5/16..... 28, 35  
 SIMPLI PEN NEEDLE 32 GAUGE X 5/32  
 ..... 28, 35  
 SKY SAFETY PEN NEEDLE 30 GAUGE  
 X 3/16..... 28, 35  
 SKY SAFETY PEN NEEDLE 30 GAUGE  
 X 5/16..... 28, 35  
 SPRITAM 1,000 MG TABLET FOR ORAL  
 SUSPENSION ..... 45  
 SPRITAM 250 MG TABLET FOR ORAL  
 SUSPENSION ..... 45

SPRITAM 500 MG TABLET FOR ORAL  
 SUSPENSION ..... 45  
 SPRITAM 750 MG TABLET FOR ORAL  
 SUSPENSION ..... 45  
 STERILE PADS 2 ..... 28, 35  
 SURE COMFORT ALCOHOL PREP  
 PADS ..... 28, 35  
 SURE COMFORT INSULIN SYRINGE 0.3  
 ML 29 GAUGE X 1/2..... 28, 35  
 SURE COMFORT INSULIN SYRINGE 0.3  
 ML 30 GAUGE X 1/2..... 28, 35  
 SURE COMFORT INSULIN SYRINGE 0.3  
 ML 30 GAUGE X 5/16..... 28, 35  
 SURE COMFORT INSULIN SYRINGE 0.3  
 ML 31 GAUGE X 1/4..... 28, 35  
 SURE COMFORT INSULIN SYRINGE 0.3  
 ML 31 GAUGE X 5/16..... 28, 35  
 SURE COMFORT INSULIN SYRINGE 0.5  
 ML 30 GAUGE X 1/2..... 28, 35  
 SURE COMFORT INSULIN SYRINGE 0.5  
 ML 30 GAUGE X 5/16..... 28, 35  
 SURE COMFORT INSULIN SYRINGE 0.5  
 ML 31 GAUGE X 5/16..... 28, 35  
 SURE COMFORT INSULIN SYRINGE 1  
 ML 28 GAUGE X 1/2..... 28, 35  
 SURE COMFORT INSULIN SYRINGE 1  
 ML 29 GAUGE X 1/2..... 28, 35  
 SURE COMFORT INSULIN SYRINGE 1  
 ML 30 GAUGE X 1/2..... 28, 35  
 SURE COMFORT INSULIN SYRINGE 1  
 ML 30 GAUGE X 5/16..... 28, 35  
 SURE COMFORT INSULIN SYRINGE 1  
 ML 31 GAUGE X 1/4..... 28, 35  
 SURE COMFORT INSULIN SYRINGE 1  
 ML 31 GAUGE X 5/16..... 28, 35  
 SURE COMFORT INSULIN SYRINGE  
 1/2 ML 28 GAUGE X 1/2 ..... 28, 35  
 SURE COMFORT INSULIN SYRINGE  
 1/2 ML 31 GAUGE X 1/4 ..... 29, 35  
 SURE COMFORT INSULIN SYRINGE U-  
 100 0.5 ML 29 GAUGE X 1/2..... 29, 35  
 SURE COMFORT PEN NEEDLE 29  
 GAUGE X 1/2..... 29, 35  
 SURE COMFORT PEN NEEDLE 30  
 GAUGE X 5/16..... 29, 35

SURE COMFORT PEN NEEDLE 31  
 GAUGE X 3/16..... 29, 35  
 SURE COMFORT PEN NEEDLE 31  
 GAUGE X 5/16..... 29, 35  
 SURE COMFORT PEN NEEDLE 32  
 GAUGE X 1/4..... 29, 35  
 SURE COMFORT PEN NEEDLE 32  
 GAUGE X 5/32..... 29, 35  
 SURE COMFORT SAFETY PEN NEEDLE  
 31 GAUGE X 1/4..... 29, 35  
 SURE COMFORT SAFETY PEN NEEDLE  
 32 GAUGE X 5/32..... 29, 35  
 SURE-FINE PEN NEEDLES 29 GAUGE X  
 1/2 ..... 29, 35  
 SURE-FINE PEN NEEDLES 31 GAUGE X  
 3/16 ..... 29, 35  
 SURE-FINE PEN NEEDLES 31 GAUGE X  
 5/16 ..... 29, 35  
 SURE-JECT INSULIN SYRINGE 0.3 ML  
 29 GAUGE X 1/2..... 29, 35  
 SURE-JECT INSULIN SYRINGE 0.3 ML  
 30 GAUGE X 5/16..... 29, 35  
 SURE-JECT INSULIN SYRINGE 0.5 ML  
 29 GAUGE X 1/2..... 29, 35  
 SURE-JECT INSULIN SYRINGE 0.5 ML  
 30 GAUGE X 5/16..... 29, 35  
 SURE-JECT INSULIN SYRINGE 1 ML 28  
 GAUGE X 1/2..... 29, 35  
 SURE-JECT INSULIN SYRINGE 1 ML 29  
 GAUGE X 1/2..... 29, 35  
 SURE-JECT INSULIN SYRINGE 1 ML 30  
 GAUGE X 5/16..... 29, 35  
 SURE-JECT INSULIN SYRINGE 1 ML 31  
 GAUGE X 5/16..... 29, 35  
 SURE-JECT INSULIN SYRINGE 1/2 ML  
 28 GAUGE X 1/2..... 29, 35  
 SURE-PREP ALCOHOL PREP PADS .. 29,  
 35  
 SYRINGE WITH NEEDLE, SAFETY 0.5  
 ML 30 GAUGE X 1/2..... 29, 35

**T**

TECHLITE INSULIN SYRINGE (HALF  
 UNIT) 0.3 ML 29 GAUGE X 1/2... 29, 35  
 TECHLITE INSULIN SYRINGE (HALF  
 UNIT) 0.3 ML 30 GAUGE X 5/16. 29, 35

TECHLITE INSULIN SYRINGE (HALF  
 UNIT) 0.3 ML 31 GAUGE X 15/64 29, 35  
 TECHLITE INSULIN SYRINGE (HALF  
 UNIT) 0.3 ML 31 GAUGE X 5/16. 29, 35  
 TECHLITE INSULIN SYRINGE (HALF  
 UNIT) 0.5 ML 30 GAUGE X 1/2... 29, 35  
 TECHLITE INSULIN SYRINGE (HALF  
 UNIT) 0.5 ML 30 GAUGE X 5/16. 29, 35  
 TECHLITE INSULIN SYRINGE (HALF  
 UNIT) 0.5 ML 31 GAUGE X 15/64 29, 35  
 TECHLITE INSULIN SYRINGE (HALF  
 UNIT) 0.5 ML 31 GAUGE X 5/16. 29, 35  
 TECHLITE INSULIN SYRINGE 1 ML 29  
 GAUGE X 1/2..... 29, 35  
 TECHLITE INSULIN SYRINGE 1 ML 30  
 GAUGE X 1/2..... 29, 35  
 TECHLITE INSULIN SYRINGE 1 ML 31  
 GAUGE X 15/64..... 29, 35  
 TECHLITE INSULIN SYRINGE 1 ML 31  
 GAUGE X 5/16..... 29, 35  
 TECHLITE PEN NEEDLE 29 GAUGE X  
 1/2 ..... 29, 35  
 TECHLITE PEN NEEDLE 29 GAUGE X  
 3/8 ..... 29, 35  
 TECHLITE PEN NEEDLE 31 GAUGE X  
 1/4 ..... 29, 35  
 TECHLITE PEN NEEDLE 31 GAUGE X  
 3/16 ..... 29, 35  
 TECHLITE PEN NEEDLE 31 GAUGE X  
 5/16 ..... 29, 35  
 TECHLITE PEN NEEDLE 32 GAUGE X  
 1/4 ..... 29, 35  
 TECHLITE PEN NEEDLE 32 GAUGE X  
 5/16 ..... 29, 35  
 TECHLITE PEN NEEDLE 32 GAUGE X  
 5/32 ..... 29, 35  
 TECHLITE PLUS PEN NEEDLE 32  
 GAUGE X 5/32..... 29, 35  
 TERUMO INSULIN SYRINGE 0.3 ML 30  
 X 3/8..... 29, 35  
 TERUMO INSULIN SYRINGE 0.5 ML 29  
 GAUGE X 1/2..... 30, 35  
 TERUMO INSULIN SYRINGE 1 ML 27  
 GAUGE X 1/2..... 30, 35  
 TERUMO INSULIN SYRINGE 1 ML 28  
 GAUGE X 1/2..... 30, 35

TERUMO INSULIN SYRINGE 1 ML 29	TOPCARE ULTRA COMFORT 1 ML 29
GAUGE X 1/2..... 30, 35	GAUGE X 1/2..... 30, 35
TERUMO INSULIN SYRINGE 1/2 ML 27	TOPCARE ULTRA COMFORT 1 ML 30
GAUGE X 1/2..... 30, 35	GAUGE X 5/16..... 30, 35
TERUMO INSULIN SYRINGE 1/2 ML 28	TOPCARE ULTRA COMFORT 1 ML 31
GAUGE X 1/2..... 30, 35	GAUGE X 5/16..... 30, 35
TERUMO INSULIN SYRINGE 1/2 ML 30	topiramate 25 mg/ml oral solution..... 13
X 3/8..... 30, 35	TRUE COMFORT ALCOHOL PADS ... 30,
THINPRO INSULIN SYRINGE 0.3 ML 29	35
GAUGE X 1/2..... 30, 35	TRUE COMFORT INSULIN SYRINGE
THINPRO INSULIN SYRINGE 0.3 ML 30	0.5 ML 31 GAUGE X 5/16..... 30, 35
X 3/8..... 30, 35	TRUE COMFORT INSULIN SYRINGE 1
THINPRO INSULIN SYRINGE 0.3 ML 31	ML 31 GAUGE X 5/16..... 30, 35
X 3/8..... 30, 35	TRUE COMFORT PEN NEEDLE 31
THINPRO INSULIN SYRINGE 0.5 ML 29	GAUGE X 1/4..... 30, 35
GAUGE X 1/2..... 30, 35	TRUE COMFORT PEN NEEDLE 31
THINPRO INSULIN SYRINGE 0.5 ML 31	GAUGE X 3/16..... 30, 35
X 3/8..... 30, 35	TRUE COMFORT PEN NEEDLE 31
THINPRO INSULIN SYRINGE 1 ML 28	GAUGE X 5/16..... 30, 35
GAUGE X 1/2..... 30, 35	TRUE COMFORT PEN NEEDLE 32
THINPRO INSULIN SYRINGE 1 ML 29	GAUGE X 1/4..... 30, 35
GAUGE X 1/2..... 30, 35	TRUE COMFORT PEN NEEDLE 32
THINPRO INSULIN SYRINGE 1 ML 30	GAUGE X 3/16..... 30, 35
GAUGE X 3/8..... 30, 35	TRUE COMFORT PEN NEEDLE 32
THINPRO INSULIN SYRINGE 1 ML 31 X	GAUGE X 5/32..... 30, 35
3/8 ..... 30, 35	TRUE COMFORT PEN NEEDLE 33
THINPRO INSULIN SYRINGE 1/2 ML 28	GAUGE X 1/4..... 30, 35
GAUGE X 1/2..... 30, 35	TRUE COMFORT PEN NEEDLE 33
THINPRO INSULIN SYRINGE 1/2 ML 30	GAUGE X 3/16..... 30, 35
X 3/8..... 30, 35	TRUE COMFORT PEN NEEDLE 33
TOPCARE CLICKFINE 31 GAUGE X 1/4	GAUGE X 5/32..... 30, 35
..... 30, 35	TRUE COMFORT PRO ALCOHOL PADS
TOPCARE CLICKFINE 31 GAUGE X	..... 30, 35
5/16 ..... 30, 35	TRUE COMFORT PRO INS SYRINGE 0.5
TOPCARE ULTRA COMFORT 0.3 ML 29	ML 30 GAUGE X 1/2..... 30, 35
GAUGE X 1/2..... 30, 35	TRUE COMFORT PRO INS SYRINGE 0.5
TOPCARE ULTRA COMFORT 0.3 ML 30	ML 30 GAUGE X 5/16..... 30, 35
GAUGE X 5/16..... 30, 35	TRUE COMFORT PRO INS SYRINGE 0.5
TOPCARE ULTRA COMFORT 0.3 ML 31	ML 31 GAUGE X 5/16..... 30, 35
GAUGE X 5/16..... 30, 35	TRUE COMFORT PRO INS SYRINGE 1
TOPCARE ULTRA COMFORT 0.5 ML 29	ML 30 GAUGE X 1/2..... 30, 35
GAUGE X 1/2..... 30, 35	TRUE COMFORT PRO INS SYRINGE 1
TOPCARE ULTRA COMFORT 0.5 ML 30	ML 30 GAUGE X 5/16..... 31, 35
GAUGE X 5/16..... 30, 35	TRUE COMFORT PRO INS SYRINGE 1
TOPCARE ULTRA COMFORT 0.5 ML 31	ML 31 GAUGE X 5/16..... 31, 35
GAUGE X 5/16..... 30, 35	

TRUE COMFORT PRO INS SYRINGE 1 ML 32 GAUGE X 5/16..... 31, 35  
 TRUE COMFORT PRO INS SYRINGE 1/2 ML 32 GAUGE X 5/16..... 31, 35  
 TRUE COMFORT SAFETY INSULIN SYRINGE 0.5 ML 30 GAUGE X 1/2 . 31, 35  
 TRUE COMFORT SAFETY INSULIN SYRINGE 0.5 ML 30 GAUGE X 5/16 31, 35  
 TRUE COMFORT SAFETY INSULIN SYRINGE 0.5 ML 31 GAUGE X 5/16 31, 35  
 TRUE COMFORT SAFETY INSULIN SYRINGE 1 ML 30 GAUGE X 1/2 31, 35  
 TRUE COMFORT SAFETY INSULIN SYRINGE 1 ML 30 GAUGE X 5/16 .. 31, 35  
 TRUE COMFORT SAFETY INSULIN SYRINGE 1 ML 31 GAUGE X 5/16 .. 31, 35  
 TRUE COMFORT SAFETY INSULIN SYRINGE 1 ML 32 GAUGE X 5/16 .. 31, 35  
 TRUE COMFORT SAFETY PEN NEEDLE 31 GAUGE X 1/4..... 31, 35  
 TRUE COMFORT SAFETY PEN NEEDLE 31 GAUGE X 3/16..... 31, 35  
 TRUE COMFORT SAFETY PEN NEEDLE 32 GAUGE X 5/32..... 31, 35  
 TRUEPLUS INSULIN 0.3 ML 29 GAUGE X 1/2..... 31, 35  
 TRUEPLUS INSULIN 0.3 ML 30 GAUGE X 5/16..... 31, 35  
 TRUEPLUS INSULIN 0.3 ML 31 GAUGE X 5/16..... 31, 35  
 TRUEPLUS INSULIN 0.5 ML 29 GAUGE X 1/2..... 31, 35  
 TRUEPLUS INSULIN 0.5 ML 30 GAUGE X 5/16..... 31, 35  
 TRUEPLUS INSULIN 0.5 ML 31 GAUGE X 5/16..... 31, 35  
 TRUEPLUS INSULIN 1 ML 28 GAUGE X 1/2 ..... 31, 35  
 TRUEPLUS INSULIN 1 ML 29 GAUGE X 1/2 ..... 31, 35

TRUEPLUS INSULIN 1 ML 30 GAUGE X 5/16 ..... 31, 35  
 TRUEPLUS INSULIN 1 ML 31 GAUGE X 5/16 ..... 31, 35  
 TRUEPLUS INSULIN 1/2 ML 28 GAUGE X 1/2..... 31, 35  
 TRUEPLUS PEN NEEDLE 29 GAUGE X 1/2 ..... 31, 35  
 TRUEPLUS PEN NEEDLE 31 GAUGE X 1/4 ..... 31, 35  
 TRUEPLUS PEN NEEDLE 31 GAUGE X 3/16 ..... 31, 35  
 TRUEPLUS PEN NEEDLE 31 GAUGE X 5/16 ..... 31, 35  
 TRUEPLUS PEN NEEDLE 32 GAUGE X 5/32 ..... 31, 35  
**U**  
 ULTICARE 0.3 ML 30 GAUGE X 1/2... 31, 35  
 ULTICARE 0.3 ML 31 GAUGE X 5/16. 31, 35  
 ULTICARE 0.5 ML 30 GAUGE X 1/2... 31, 35  
 ULTICARE 0.5 ML 31 GAUGE X 5/16. 31, 35  
 ULTICARE 1 ML 30 GAUGE X 1/2. 31, 35  
 ULTICARE 1 ML 31 GAUGE X 5/16 31, 35  
 ULTICARE INSULIN SYRINGE (HALF UNIT) 0.3 ML 31 GAUGE X 1/4... 31, 35  
 ULTICARE INSULIN SYRINGE 0.3 ML 31 GAUGE X 1/4..... 31, 35  
 ULTICARE INSULIN SYRINGE 1 ML 31 GAUGE X 1/4..... 31, 35  
 ULTICARE INSULIN SYRINGE 1/2 ML 31 GAUGE X 1/4..... 31, 35  
 ULTICARE PEN NEEDLE 29 GAUGE X 1/2 ..... 31, 35  
 ULTICARE PEN NEEDLE 31 GAUGE X 1/4 ..... 31, 35  
 ULTICARE PEN NEEDLE 31 GAUGE X 3/16 ..... 31, 35  
 ULTICARE PEN NEEDLE 31 GAUGE X 5/16 ..... 31, 35  
 ULTICARE PEN NEEDLE 32 GAUGE X 1/4 ..... 31, 35

ULTICARE PEN NEEDLE 32 GAUGE X 5/32 .....	31, 35	ULTILET INSULIN SYRINGE 1 ML 29 GAUGE.....	32, 35
ULTICARE SAFETY PEN NEEDLE 30 GAUGE X 3/16.....	32, 35	ULTILET INSULIN SYRINGE 1 ML 29 GAUGE X 1/2.....	32, 35
ULTICARE SAFETY PEN NEEDLE 30 GAUGE X 5/16.....	32, 35	ULTILET INSULIN SYRINGE 1 ML 30 GAUGE X 5/16.....	32, 35
ULTIGUARD SAFEPACK-INSULIN SYRINGE 0.3 ML 30 X 1/2 .....	32, 35	ULTILET INSULIN SYRINGE 1 ML 31 GAUGE X 5/16.....	32, 35
ULTIGUARD SAFEPACK-INSULIN SYRINGE 0.3 ML 31 X 5/16 .....	32, 35	ULTILET INSULIN SYRINGE 1/2 ML 29 .....	32, 35
ULTIGUARD SAFEPACK-INSULIN SYRINGE 1 ML 30 X 1/2 .....	32, 35	ULTILET PEN NEEDLE 29 GAUGE	32, 35
ULTIGUARD SAFEPACK-INSULIN SYRINGE 1 ML 31 X 5/16 .....	32, 35	ULTILET PEN NEEDLE 32 GAUGE X 5/32 .....	32, 35
ULTIGUARD SAFEPACK-INSULIN SYRINGE 1/2 ML 30 X 1/2 .....	32, 35	ULTRA COMFORT INSULIN SYRINGE (HALF UNIT) 0.3 ML 29 GAUGE X 1/2 .....	32, 35
ULTIGUARD SAFEPACK-INSULIN SYRINGE 1/2 ML 31 X 5/16 .....	32, 35	ULTRA COMFORT INSULIN SYRINGE (HALF UNIT) 0.3 ML 31 GAUGE X 5/16 .....	32, 35
ULTIGUARD SAFEPACK-PEN NEEDLE 29 GAUGE X 1/2.....	32, 35	ULTRA COMFORT INSULIN SYRINGE 0.3 ML 29 GAUGE X 1/2.....	32, 35
ULTIGUARD SAFEPACK-PEN NEEDLE 31 GAUGE X 1/4.....	32, 35	ULTRA COMFORT INSULIN SYRINGE 0.3 ML 30.....	32, 35
ULTIGUARD SAFEPACK-PEN NEEDLE 31 GAUGE X 3/16.....	32, 35	ULTRA COMFORT INSULIN SYRINGE 0.3 ML 30 GAUGE X 5/16.....	32, 35
ULTIGUARD SAFEPACK-PEN NEEDLE 31 GAUGE X 5/16.....	32, 35	ULTRA COMFORT INSULIN SYRINGE 0.3 ML 31 GAUGE X 5/16.....	32, 35
ULTIGUARD SAFEPACK-PEN NEEDLE 32 GAUGE X 1/4.....	32, 35	ULTRA COMFORT INSULIN SYRINGE 0.5 ML 29 GAUGE X 1/2.....	32, 35
ULTIGUARD SAFEPACK-PEN NEEDLE 32 GAUGE X 5/32.....	32, 35	ULTRA COMFORT INSULIN SYRINGE 0.5 ML 30 GAUGE X 5/16.....	32, 35
ULTILET ALCOHOL SWAB .....	32, 35	ULTRA COMFORT INSULIN SYRINGE 0.5 ML 31 GAUGE X 5/16.....	32, 35
ULTILET INSULIN SYRINGE 0.3 ML 29 GAUGE.....	32, 35	ULTRA COMFORT INSULIN SYRINGE 1 ML 28 GAUGE X 1/2.....	32, 35
ULTILET INSULIN SYRINGE 0.3 ML 29 GAUGE X 1/2.....	32, 35	ULTRA COMFORT INSULIN SYRINGE 1 ML 29 GAUGE.....	32, 35
ULTILET INSULIN SYRINGE 0.3 ML 30 GAUGE X 5/16.....	32, 35	ULTRA COMFORT INSULIN SYRINGE 1 ML 29 GAUGE X 1/2.....	32, 35
ULTILET INSULIN SYRINGE 0.3 ML 31 GAUGE X 5/16.....	32, 35	ULTRA COMFORT INSULIN SYRINGE 1 ML 30 GAUGE X 5/16.....	32, 35
ULTILET INSULIN SYRINGE 0.5 ML 29 GAUGE X 1/2.....	32, 35	ULTRA COMFORT INSULIN SYRINGE 1 ML 30 GAUGE X 7/16.....	32, 35
ULTILET INSULIN SYRINGE 0.5 ML 30 GAUGE X 5/16.....	32, 35	ULTRA COMFORT INSULIN SYRINGE 1 ML 31 GAUGE X 5/16.....	32, 35
ULTILET INSULIN SYRINGE 0.5 ML 31 GAUGE X 5/16.....	32, 35		

ULTRA COMFORT INSULIN SYRINGE  
 1/2 ML 28 GAUGE X 1/2 ..... 32, 35  
 ULTRA COMFORT INSULIN SYRINGE  
 1/2 ML 29 ..... 33, 35  
 ULTRA COMFORT INSULIN SYRINGE  
 1/2 ML 30 GAUGE ..... 33, 35  
 ULTRA FLO INSULIN SYRINGE (HALF  
 UNIT) 0.3 ML 30 GAUGE X 1/2... 33, 35  
 ULTRA FLO INSULIN SYRINGE (HALF  
 UNIT) 0.3 ML 30 GAUGE X 5/16. 33, 35  
 ULTRA FLO INSULIN SYRINGE (HALF  
 UNIT) 0.3 ML 31 GAUGE X 5/16. 33, 35  
 ULTRA FLO INSULIN SYRINGE 0.3 ML  
 29 GAUGE X 1/2..... 33, 35  
 ULTRA FLO INSULIN SYRINGE 0.3 ML  
 30 GAUGE X 5/16..... 33, 35  
 ULTRA FLO INSULIN SYRINGE 0.3 ML  
 31 GAUGE X 5/16..... 33, 35  
 ULTRA FLO INSULIN SYRINGE 0.5 ML  
 29 GAUGE X 1/2..... 33, 35  
 ULTRA FLO PEN NEEDLE 29 GAUGE X  
 1/2 ..... 33, 35  
 ULTRA FLO PEN NEEDLE 31 GAUGE X  
 3/16 ..... 33, 35  
 ULTRA FLO PEN NEEDLE 31 GAUGE X  
 5/16 ..... 33, 35  
 ULTRA FLO PEN NEEDLE 32 GAUGE X  
 5/32 ..... 33, 35  
 ULTRA FLO PEN NEEDLE 33 GAUGE X  
 5/32 ..... 33, 35  
 ULTRA THIN PEN NEEDLE 32 GAUGE  
 X 5/32..... 33, 35  
 ULTRACARE INSULIN SYRINGE 0.3  
 ML 30 GAUGE X 5/16..... 33, 35  
 ULTRACARE INSULIN SYRINGE 0.3  
 ML 31 GAUGE X 5/16..... 33, 35  
 ULTRACARE INSULIN SYRINGE 0.5  
 ML 30 GAUGE X 1/2..... 33, 35  
 ULTRACARE INSULIN SYRINGE 0.5  
 ML 30 GAUGE X 5/16..... 33, 35  
 ULTRACARE INSULIN SYRINGE 0.5  
 ML 31 GAUGE X 5/16..... 33, 35  
 ULTRACARE INSULIN SYRINGE 1 ML  
 30 GAUGE X 1/2..... 33, 35  
 ULTRACARE INSULIN SYRINGE 1 ML  
 30 GAUGE X 5/16..... 33, 35

ULTRACARE INSULIN SYRINGE 1 ML  
 31 GAUGE X 5/16..... 33, 35  
 ULTRACARE PEN NEEDLE 31 GAUGE  
 X 1/4..... 33, 35  
 ULTRACARE PEN NEEDLE 31 GAUGE  
 X 3/16..... 33, 35  
 ULTRACARE PEN NEEDLE 31 GAUGE  
 X 5/16..... 33, 35  
 ULTRACARE PEN NEEDLE 32 GAUGE  
 X 1/4..... 33, 35  
 ULTRACARE PEN NEEDLE 32 GAUGE  
 X 3/16..... 33, 35  
 ULTRACARE PEN NEEDLE 32 GAUGE  
 X 5/32..... 33, 35  
 ULTRACARE PEN NEEDLE 33 GAUGE  
 X 5/32..... 33, 35  
 ULTRA-FINE INSULIN SYRINGE (HALF  
 UNIT) 0.3 ML 31 GAUGE X 15/64 33, 35  
 ULTRA-FINE INSULIN SYRINGE (HALF  
 UNIT) 0.3 ML 31 GAUGE X 5/16. 33, 35  
 ULTRA-FINE INSULIN SYRINGE 0.3 ML  
 30 GAUGE X 1/2..... 33, 35  
 ULTRA-FINE INSULIN SYRINGE 0.3 ML  
 31 GAUGE X 5/16..... 33, 35  
 ULTRA-FINE INSULIN SYRINGE 0.5 ML  
 30 GAUGE X 1/2..... 33, 35  
 ULTRA-FINE INSULIN SYRINGE 0.5 ML  
 31 GAUGE X 5/16..... 33, 35  
 ULTRA-FINE INSULIN SYRINGE 1 ML  
 30 GAUGE X 1/2..... 33, 35  
 ULTRA-FINE INSULIN SYRINGE 1 ML  
 31 GAUGE X 15/64..... 33, 35  
 ULTRA-FINE INSULIN SYRINGE 1 ML  
 31 GAUGE X 5/16..... 33, 35  
 ULTRA-FINE INSULIN SYRINGE 1/2 ML  
 31 GAUGE X 15/64..... 33, 35  
 ULTRA-FINE PEN NEEDLE 29 GAUGE  
 X 1/2..... 33, 35  
 ULTRA-FINE PEN NEEDLE 31 GAUGE  
 X 3/16..... 33, 35  
 ULTRA-FINE PEN NEEDLE 31 GAUGE  
 X 5/16..... 33, 35  
 ULTRA-FINE PEN NEEDLE 32 GAUGE  
 X 1/4..... 33, 35

ULTRA-THIN II (SHORT) INSULIN  
 SYRINGE 0.3 ML 30 GAUGE X 5/16 34,  
 35  
 ULTRA-THIN II (SHORT) INSULIN  
 SYRINGE 0.3 ML 31 GAUGE X 5/16 34,  
 35  
 ULTRA-THIN II (SHORT) INSULIN  
 SYRINGE 0.5 ML 30 GAUGE X 5/16 34,  
 35  
 ULTRA-THIN II (SHORT) INSULIN  
 SYRINGE 0.5 ML 31 GAUGE X 5/16 34,  
 35  
 ULTRA-THIN II (SHORT) INSULIN  
 SYRINGE 1 ML 30 GAUGE X 5/16 .. 34,  
 35  
 ULTRA-THIN II (SHORT) INSULIN  
 SYRINGE 1 ML 31 GAUGE X 5/16 .. 34,  
 35  
 ULTRA-THIN II (SHORT) PEN NDL 31  
 GAUGE X 5/16..... 34, 35  
 ULTRA-THIN II INSULIN PEN  
 NEEDLES 29 GAUGE X 1/2..... 34, 35  
 ULTRA-THIN II INSULIN SYRINGE 0.5  
 ML 29 GAUGE X 1/2..... 34, 35  
 ULTRA-THIN II INSULIN SYRINGE 1  
 ML 29 GAUGE X 1/2..... 34, 35  
 UNIFINE OTC PEN NEEDLE 31 GAUGE  
 X 3/16..... 34, 35  
 UNIFINE OTC PEN NEEDLE 32 GAUGE  
 X 5/32..... 34, 35  
 UNIFINE PEN NEEDLE 32 GAUGE X  
 5/32 ..... 34, 35  
 UNIFINE PENTIPS 29 GAUGE NEEDLE  
 ..... 34, 35  
 UNIFINE PENTIPS 29 GAUGE X 1/2... 34,  
 35  
 UNIFINE PENTIPS 31 GAUGE X 1/4... 34,  
 35  
 UNIFINE PENTIPS 31 GAUGE X 3/16. 34,  
 35  
 UNIFINE PENTIPS 31 GAUGE X 5/16. 34,  
 35  
 UNIFINE PENTIPS 32 GAUGE X 1/4... 34,  
 35  
 UNIFINE PENTIPS 32 GAUGE X 5/32. 34,  
 35

UNIFINE PENTIPS 33 GAUGE X 5/32. 34,  
 35  
 UNIFINE PENTIPS MAXFLOW 30  
 GAUGE X 3/16..... 34, 35  
 UNIFINE PENTIPS PLUS 29 GAUGE X  
 1/2 ..... 34, 35  
 UNIFINE PENTIPS PLUS 31 GAUGE X  
 1/4 ..... 34, 35  
 UNIFINE PENTIPS PLUS 31 GAUGE X  
 3/16 ..... 34, 35  
 UNIFINE PENTIPS PLUS 31 GAUGE X  
 5/16 ..... 34, 35  
 UNIFINE PENTIPS PLUS 32 GAUGE X  
 5/32 ..... 34, 35  
 UNIFINE PENTIPS PLUS 33 GAUGE X  
 5/32 ..... 34, 35  
 UNIFINE PENTIPS PLUS MAXFLOW 30  
 GAUGE X 3/16..... 34, 35  
 UNIFINE PROTECT 30 GAUGE X 3/16 34,  
 35  
 UNIFINE PROTECT 30 GAUGE X 5/16 34,  
 35  
 UNIFINE PROTECT 32 GAUGE X 5/32 34,  
 35  
 UNIFINE SAFECONTROL PEN NEEDLE  
 30 GAUGE X 3/16..... 34, 35  
 UNIFINE SAFECONTROL PEN NEEDLE  
 30 GAUGE X 5/16..... 34, 35  
 UNIFINE SAFECONTROL PEN NEEDLE  
 31 GAUGE X 1/4..... 34, 35  
 UNIFINE SAFECONTROL PEN NEEDLE  
 31 GAUGE X 3/16..... 34, 35  
 UNIFINE SAFECONTROL PEN NEEDLE  
 31 GAUGE X 5/16..... 34, 35  
 UNIFINE SAFECONTROL PEN NEEDLE  
 32 GAUGE X 5/32..... 34, 35  
 UNIFINE ULTRA PEN NEEDLE 31  
 GAUGE X 1/4..... 34, 35  
 UNIFINE ULTRA PEN NEEDLE 31  
 GAUGE X 3/16..... 34, 35  
 UNIFINE ULTRA PEN NEEDLE 31  
 GAUGE X 5/16..... 34, 35  
 UNIFINE ULTRA PEN NEEDLE 32  
 GAUGE X 5/32..... 34, 35

**V**

VANISHPOINT INSULIN SYRINGE 1 ML 30 GAUGE X 3/16.....	34, 35
VANISHPOINT SYRINGE 0.5 ML 30 GAUGE X 1/2.....	34, 35
VANISHPOINT SYRINGE 1 ML 29 GAUGE X 1/2.....	34, 35
VERIFINE INSULIN SYRINGE 0.3 ML 31 GAUGE X 5/16.....	34, 35
VERIFINE INSULIN SYRINGE 0.5 ML 29 GAUGE X 1/2.....	35
VERIFINE INSULIN SYRINGE 0.5 ML 31 GAUGE X 5/16.....	35
VERIFINE INSULIN SYRINGE 1 ML 29 GAUGE X 1/2.....	35
VERIFINE INSULIN SYRINGE 1 ML 31 GAUGE X 5/16.....	35
VERIFINE PEN NEEDLE 29 GAUGE X 1/2 .....	35
VERIFINE PEN NEEDLE 31 GAUGE X 1/4 .....	35
VERIFINE PEN NEEDLE 31 GAUGE X 3/16 .....	35
VERIFINE PEN NEEDLE 31 GAUGE X 5/16 .....	35
VERIFINE PEN NEEDLE 32 GAUGE X 1/4 .....	35

VERIFINE PEN NEEDLE 32 GAUGE X 3/16 .....	35
VERIFINE PEN NEEDLE 32 GAUGE X 5/32 .....	35
VERIFINE PLUS PEN NEEDLE 31 GAUGE X 3/16.....	35
VERIFINE PLUS PEN NEEDLE 31 GAUGE X 5/16.....	35
VERIFINE PLUS PEN NEEDLE 32 GAUGE X 5/32.....	35
VERIFINE PLUS PEN NEEDLE-SHARPS CONTAINER 32 GAUGE X 5/32 .....	35
VERSACLOZ 50 MG/ML ORAL SUSPENSION .....	8
VERSALON 2 .....	35
VRAYLAR 1.5 MG (1)-3 MG (6) CAPSULES IN A DOSE PACK .....	7
VRAYLAR 1.5 MG CAPSULE .....	7
VRAYLAR 3 MG CAPSULE .....	7
VRAYLAR 4.5 MG CAPSULE .....	7
VRAYLAR 6 MG CAPSULE .....	7
<b>W</b>	
WEBCOL TOPICAL PADS.....	35
<b>X</b>	
XARELTO 2.5 MG TABLET .....	47
XATMEP 2.5 MG/ML ORAL SOLUTION	6