



**NHS Scotland  
Directors of Pharmacy**



## **Scottish Unlicensed Medicines Advisory Board**

### **NHS Scotland Agreed List of Pre-Labelled Medicines**

**Fourth Edition  
March 2023**

## **FOREWORD**

This is the fourth edition of the NHS Scotland Agreed List of Pre-labelled Medicines. This edition has been produced following input from a wide range of colleagues in NHS Scotland. As we are all aware, unwarranted variation can be harmful to patients and to healthcare. This may be due to variable clinical outcomes or increased resource use. In an area such as unscheduled care where, by the very nature of the work, planning is more difficult, it is important to put in place systems and processes to streamline activity. Part of the work of the Scottish Unlicensed Medicines Advisory Board (SUMAB) is to promote and facilitate rationalisation of manufactured, over-labelled and repackaged medicines. This Agreed List is an important part of this work.

SUMAB recognises the significant amount of work that goes in to updating this formulary and the number of changes that can occur between editions. We will therefore introduce a rolling programme of section updates in order to streamline the process and move to a more responsive, “live” list which aligns with contemporary formulary management processes.

On behalf of the Scottish Unlicensed Medicines Advisory Board (SUMAB), I want to recognise the work of a wide range of specialist groups and individuals without whom this revision would not have been possible. My thanks, in particular, go to Professor Angela Timoney, previous Chair of SUMAB and custodian of the Agreed List thus far and to Simon Bath, who has co-ordinated the review and the response to the proposed changes.

We hope you find this revision helpful and commend it to you.

**Roisin Kavanagh**

Chair  
Scottish Unlicensed Medicines Advisory Board (SUMAB)

## **INTRODUCTION**

The First Edition of this Formulary was published in September 2009 and for the first time, a document was available that reflected a national approach to the provision of pre-labelled medicines for unscheduled care.

The Second and Third Editions built on the approach taken with the First Edition adopting comments from individual Health Boards and incorporating revised national guidelines.

The Working Group was conscious that Health Boards were purchasing over labelled medicines for a number of uses other than in Unscheduled Care. For the Fourth Edition it was agreed that it would become a Formulary for Pre-labelled Medicine to encompass the wider usage.

The new 4<sup>th</sup> Edition is broken down into categories in line with those of the British National Formulary. Inclusion in the 'Agreed List' will be based on national guidelines and recommendations from the Specialist Interest Groups.

Updates will be made following revisions to documents e.g. SIGN Guidelines, SAPG Antimicrobial Guidelines etc. It is important that such document updates are highlighted to [SimonD.Bath@nhs.scot](mailto:SimonD.Bath@nhs.scot) (see section - Review of the Document)

Requests for a new pre-labelled packs should be discussed and approved locally and submitted to PSS for a quote on the approved form. A copy of the form is available [online](#) or from PSS.

### **Simon Bath**

Production Manager  
NHS Scotland Pharmaceutical 'Specials' Service

## ***REVIEW OF THE DOCUMENT***

The document will be reviewed on a bi-annual basis on a rolling basis by BNF section. The first review will commence six months after publishing the fourth edition to incorporate any major changes in practice or omissions in the document.

For subsequent reviews, the relevant section of the document will be sent to the Chair of the Specialist Interest Group with a two month turn around for a review and update if required. The review should consider any changes to treatment guidelines (SIGN, NICE etc.) as well as relevant primary or secondary care prescribing data. Discussions should be held within the Group to ensure that a national approach is adopted.

Suggested additions / removals should be emailed from the Group Chair back to the editor ([SimonD.Bath@nhs.scot](mailto:SimonD.Bath@nhs.scot)) who will update the document. The change will be recorded within version control and a notification of the update will be circulated to SUMAB and posted on the KHUB. If a new product is required, a forecast demand will be requested from each of the Health Boards before the product becomes active within the NHSS PSS inventory. In a similar way notification will be sent to Health Boards of any products which NHSS PSS intend to discontinue as a result of the review.



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## 1. Gastro-Intestinal System

### Drug and presentation

### Labelling details

Bisacodyl E/C Tablets 5mg x 4	Take as directed
Cyclizine Tablets 50mg x 21	Take ONE tablet every 8 hours as required for relief from nausea for ..... day
Dioralyte Sachets x 6	To be taken, dissolved in water, according to the enclosed patient information leaflet
Hyoscine Butylbromide Tablets 10mg x 10	Take ONE tablet FOUR times a day
Lansoprazole Capsules 15mg x 28	Take ONE capsule in the MORNING
Lansoprazole Capsules 30mg x 28	Take ONE capsule in the MORNING
Laxido Sachets x 20	Take as directed
Loperamide Capsules 2mg x 30	Take TWO capsules initially, then ONE capsule after each loose stool or as directed
Metoclopramide Tablets 10mg x 28	Take ONE tablet THREE times a day
Omeprazole Capsules 20mg x 7	Take ONE capsule in the MORNING
Peptac Liquid x 500ml	Take ..... ml FOUR times a day when required for indigestion
Prochlorperazine Tablets 5mg x 28	Take ONE tablet THREE times a day
Prochlorperazine Buccal Tablets 3mg x 8	Use ..... tablets TWICE a day
Sennosides B Tablets 7.5mg x 20	Take TWO tablets at NIGHT
Sennosides B Syrup 7.5mg/5ml x 150ml	Give .....ml at BEDTIME as directed

## 2. Cardiovascular System

### Drug and presentation

### Labelling details

Apixaban Tablets 2.5mg x 20	Take ONE tablet TWICE a day
Apixaban Tablets 2.5mg x 56	Take TWO tablets TWICE a day for ONE week, then reduce to ONE tablet TWICE a day thereafter
Apixaban Tablets 5mg x 12	Take TWO tablets TWICE a day
Apixaban Tablets 5mg x 56	Take ONE tablet TWICE a day
Aspirin Tablets 75mg x 28	Take ..... tablet(s) in the MORNING
Atorvastatin Tablets 40mg x 28	Take ONE tablets DAILY
Atrovastatin Tablets 80mg x 28	Take ONE tablets DAILY
Bisoprolol Tablets 1.25mg x 28	Take ..... tablet(s) DAILY

<b>Bisoprolol Tablets 2.5mg x 28</b>	Take ..... tablet(s) DAILY
<b>Clopidogrel Tablets 75mg x 28</b>	Take ONE tablet DAILY
<b>Dalteparin Sodium PFS 2,500 IU x 10</b>	Inject the contents of ONE syringe subcutaneously DAILY as directed
<b>Dalteparin Sodium PFS 5,000 IU x 10</b>	Inject the contents of ONE syringe subcutaneously DAILY as directed
<b>Dalteparin Sodium PFS 7,500 IU x 10</b>	Inject the contents of ONE syringe subcutaneously DAILY as directed
<b>Dalteparin Sodium PFS 10,000 IU x 5</b>	Inject the contents of ONE syringe subcutaneously DAILY as directed
<b>Dalteparin Sodium PFS 12,500 IU x 5</b>	Inject the contents of ONE syringe subcutaneously DAILY as directed
<b>Dalteparin Sodium PFS 15,000 IU x 5</b>	Inject the contents of ONE syringe subcutaneously DAILY as directed
<b>Dalteparin Sodium PFS 18,000 IU x 5</b>	Inject the contents of ONE syringe subcutaneously DAILY as directed
<b>Enoxaparin Sodium PFS 20mg x 10</b>	Inject the contents of ONE syringe subcutaneously DAILY as directed
<b>Enoxaparin Sodium PFS 40mg x 10</b>	Inject the contents of ONE syringe subcutaneously DAILY as directed
<b>Enoxaparin Sodium PFS 60mg x 10</b>	Inject the contents of ONE syringe subcutaneously DAILY as directed
<b>Enoxaparin Sodium PFS 80mg x 10</b>	Inject the contents of ONE syringe subcutaneously DAILY as directed
<b>Edoxaban Tablets 30mg x 28</b>	Take ONE tablet DAILY
<b>Edoxaban Tablets 60mg x 28</b>	Take ONE tablet DAILY
<b>Furosemide Tablets 40mg x28</b>	Take ..... tablet(s) in the MORNING
<b>Glyceryl Trinitrate Spray 400 micrograms x 75 dose</b>	Spray ONE or TWO metered doses under the tongue as required for chest pain



### **3. Respiratory System**

#### **Drug and presentation**

**Cetirizine Tablets 10mg x 7**  
**Chlorphenamine Tablets 4mg x 28**  
**Chlorphenamine Syrup 2mg/5ml x 150ml**  
**Prednisolone Tablets 5mg x 28**  
**Salbutamol Inhaler 100 micrograms x 1**  
**Salbutamol Inhaler 100 micrograms x 1**

#### **Labelling details**

Take ONE tablet in the MORNING  
Take ONE tablet every 4 to 6 hours when required  
Give .....ml ..... times a day  
Give /Take ....tablet(s) in the MORNING for.... days  
Inhale ..... puffs via spacer as directed  
Inhal TWO puffs as directed

### **4. Central Nervous System**

#### **Drug and presentation**

**Chlordiazepoxide Capsules 5mg x4**  
**Chlordiazepoxide Capsules 10mg x 1**  
**Chlordiazepoxide Capsules 10mg x 2**  
**Chlordiazepoxide Capsules 10mg x 3**  
**Chlordiazepoxide Capsules 10mg x 4**  
**Chlordiazepoxide Capsules 10mg x 5**  
**Chlordiazepoxide Capsules 10mg x 6**  
**Chlordiazepoxide Capsules 10mg x 7**  
**Chlordiazepoxide Capsules 10mg x 8**  
**Chlordiazepoxide Capsules 10mg x 12**  
**Chlordiazepoxide Capsules 10mg x 16**  
**Chlordiazepoxide Capsules 10mg x 20**

#### **Labelling details**

Take ONE capsule FOUR times a day  
Take ONE capsule at bedtime  
Take ONE capsule at breakfast, and ONE at bedtime  
Take ONE at breakfast, ONE at dinnertime, and ONE at bedtime  
Take ONE capsule FOUR times a day  
Take ONE capsule at breakfast, TWO at dinnertime, and TWO at bedtime  
Take TWO capsules at breakfast, TWO at dinnertime, and TWO at bedtime  
Take TWO capsules in the morning, ONE at lunchtime, TWO at teatime and TWO at bedtime  
Take TWO capsules FOUR times a day  
Take THREE capsules FOUR times a day  
Take FOUR capsules FOUR times a day  
Take FIVE capsules FOUR times a day

**Co-Codamol Tablets 8/500 x 32**

Take ONE or TWO tablets every 4 to 6 hours as required for pain relief

**Co-Codamol Tablets 30/500 x 30**

Take ONE or TWO tablets every 4 to 6 hours as required for pain relief

<b>Co-Codamol Tablets Effervescent 30/500 x 12</b>	Take ONE or TWO tablets dissolved in water every 4 to 6 hours as required for pain relief
<b>Codeine Phosphate Tablets 15mg x 28</b>	Take ..... tablets every SIX hours as required for relief of pain
<b>Diazepam Tablets 2mg x 6</b>	To be taken as directed
<b>Diazepam Tablets 5mg x 6</b>	To be taken as directed
<b>Dihydrocodeine Tablets 30mg x 14</b>	Take ONE tablet every FOUR to SIX hours as required for relief from pain
<b>Dihydrocodeine Tablets 30mg x 28</b>	Take ONE tablet every FOUR to SIX hours as required for relief from pain
<b>Morphine Sulfate Oral Solution 10mg/5ml x 100ml</b>	Take ONE 5ml spoonful every FOUR to SIX hours as required for relief from pain
<b>Paracetamol Tablets 500mg x 32</b>	Take TWO tablets every 4 to 6 hours as required for pain relief
<b>Paracetamol Susp S/F 120mg/5ml x 100ml</b>	Give.....ml every 4 to 6 hours as required for pain relief
<b>Paracetamol Susp S/F 250mg/5ml x 100ml</b>	Give.....ml every 4 to 6 hours as required for pain relief
<b>Sumatriptan Tablets 50mg x 6</b>	Take as directed. Read the enclosed information leaflet

## 5. Anti-Infectives

This section has been reviewed and agreed with the Association of Scottish Antimicrobial Pharmacists (ASAP) and Scottish Antimicrobial Prescribing Group (SAPG).

The pack sizes and directions have been standardised to, as far as possible, make them suitable for community settings but also hospital settings (e.g. Emergency Departments, hospital outpatients and hospital wards to complete courses on discharge). Use for adult and paediatric patients has also been considered.

The principles of good antimicrobial stewardship have been applied to ensure doses and course lengths are appropriate and meet national guidelines, with the overall aim of reducing antimicrobial consumption and resistance. Prescribers should follow guidance in their local NHS Board Antimicrobial guidelines which advise on dose and duration for all common infections.

To ensure stewardship principles continue to be applied, ASAP and SAPG recommend that NHS Board procurement teams discuss any new requests for antimicrobial packs with their Antimicrobial teams prior to submitting a request to NHS Scotland Pharmaceutical Specials Service (NHSS PSS). NHS PSS will discuss with ASAP members if requests for a new pack size or directions are received from a number of Boards to ensure standardised use where possible across NHS Scotland.

### Drug and presentation

### Labelling details

<b>Aciclovir Tablets 200mg x 25</b>	Take ONE tablet FIVE times a day for five days
<b>Aciclovir Tablets 200mg x 28</b>	Take ONE tablet FOUR times a day for 7 days
<b>Aciclovir Tablets 400mg x 56</b>	Take ONE tablet ..... times a day for ..... days
<b>Aciclovir Tablets 400mg x 15</b>	Take ONE tablet THREE times a day
<b>Aciclovir Tablets 800mg x 6</b>	Take ONE tablet THREE times a day for TWO days
<b>Aciclovir Tablets 800mg x 35</b>	Take ONE tablet FIVE times a day
<b>Amoxicillin Capsules 500mg x 9</b>	Take ..... capsule(s) THREE times a day for ..... days
<b>Amoxicillin Capsules 500mg x 15</b>	Take ..... capsule(s) THREE times a day for ..... days
<b>Amoxicillin Capsules 500mg x 21</b>	Take .....capsule(s) THREE times a day for ..... days
<b>Amoxicillin Syrup 125mg/5ml x 100ml</b>	Give .....ml THREE times a day for .....days (only supplied if Kent Pharma licenced product not available)
<b>Amoxicillin Syrup 250mg/5ml x 100ml</b>	Give .....ml THREE times a day for .....days (only supplied if Kent Pharma licenced product not available)
<b>Azithromycin Tablets 250mg x 8</b>	Take FOUR tablets as a single dose on day 1, followed by TWO daily on day 2 and 3
<b>Azithromycin Suspension 200mg/5ml x 15ml</b>	Give .....ml ONCE daily for 3 days
<b>Cefalexin Capsules 500mg x 9</b> <i>N.B. only indicated for UTI</i>	Take ... capsule(s) ..... times a day for ..... Days
<b>Cefalexin Capsules 500mg x 14</b> <i>N.B. only indicated for UTI</i>	Take ... capsule(s) ..... times a day for ..... days
<b>Cefalexin Capsules 500mg x 21</b> <i>N.B. only indicated for UTI</i>	Take ... capsule(s) ..... times a day for .....days

<b>Cefalexin Suspension 125mg/5ml x 100ml</b> <i>N.B. only indicated for UTI</i>	Give .....ml THREE times a day for THREE days
<b>Cefalexin Suspension 250mg/5ml x 100ml</b> <i>N.B. only indicated for UTI</i>	Give .....ml THREE times a day for THREE days
<b>Ciprofloxacin Tablets 250mg x 2 (for meningitis prophylaxis)</b>	Give ..... tablet(s) as a single dose
<b>Ciprofloxacin Tablets 250mg x 14</b>	Take ONE tablet TWICE a day for ..... days
<b>Ciprofloxacin Tablets 250mg x 28</b>	Starting on Day 8, taken ONE tablet TWICE a day for 14 days
<b>Ciprofloxacin Tablets 500mg x 6</b>	Take ONE tablet TWICE a day
<b>Ciprofloxacin Tablets 500mg x 14</b>	Take ONE tablet TWICE a day for ..... days
<b>Ciprofloxacin Tablets 500mg x 10</b>	Take ONE tablet TWICE a day for .... days
<b>Ciprofloxacin Tablets 750mg x 3</b>	Give ..... tablet(s) as a single dose Take ONE on the morning of surgery, ONE on the evening of surgery, and ONE the following MORNING.
<b>Clarithromycin Tablets 500mg x 10</b>	Take ONE tablet TWICE a day for ..... days.
<b>Clarithromycin Suspension 125mg/5ml x 100ml</b>	Give .....ml TWICE a day for .....days
<b>Clarithromycin Suspension 250mg/5ml x 100ml</b>	Give .....ml TWICE a day for .....days
<b>Clindamycin Capsules 150mg x 45</b>	Take ..... capsules ..... times a day for ..... days
<b>Clindamycin Capsules 150mg x 60</b>	Take ..... capsules ..... times a day for ..... days
<b>Co-Amoxiclav Tablets 375mg x 21</b>	Take ONE tablet THREE times a day.
<b>Co-Amoxiclav Tablets 625mg x 9</b>	Take ONE tablet THREE times a day for ..... days
<b>Co-Amoxiclav Tablets 625mg x 15</b>	Take ONE tablet THREE times a day for .....days
<b>Co-Amoxiclav Tablets 625mg x 21</b>	Take ONE tablet THREE times a day for ..... days
<b>Co-Amoxiclav Suspension 125/31 x 100ml</b>	Give .....ml THREE times a day for .....days
<b>Co-Amoxiclav Suspension 250/62 x 100ml</b>	Give .....ml THREE times a day for .....days
<b>Co-Amoxiclav Duo Suspension 400/57 x 35ml</b>	Give .....ml TWICE a day for .....days
<b>Co-Amoxiclav Duo Suspension 400/57 x 70ml</b>	Give .....ml TWICE a day for .....days
<b>Co-Trimoxazole Tablets 480mg x 12</b>	Take TWO tablets TWICE a day for ..... days
<b>Co-Trimoxazole Tablets 480mg x 20</b>	Take TWO tablets TWICE a day for ..... days

<b>Co-Trimoxazole Tablets 480mg x 28</b>	Take TWO tablets TWICE a day for ..... days
<b>Co-Trimoxazole Tablets 480mg x 28</b>	Take TWO tablets in the MORNING on Mondays, Wednesdays and Friday.
<b>Doxycycline Capsules 100mg x 6 (COPD)</b>	Take TWO capsules on first day then take ONE capsule daily for 4 days
<b>Doxycycline Capsules 100mg x 6</b>	Take ONE capsule TWICE a day for ..... days
<b>Doxycycline Capsules 100mg x 14</b>	Take ONE capsule TWICE daily for ..... days (only supplied if Kent Pharma licenced product not available)
<b>Emtricitabine /Tenofovir Tablets 200mg/245mg x 30 (PrEP)</b>	Take ONE daily or as directed.
<b>Erythromycin Tablets 250mg x 20</b>	Take ..... tablet(s) FOUR times a day for ..... days
<b>Flucloxacillin Capsules 250mg x 20</b>	Give/Take ONE capsule FOUR times a day for ..... days
<b>Flucloxacillin Capsules 500mg x 20</b>	Take ..... capsule(s) FOUR times a day for ..... days
<b>Flucloxacillin Capsules 500mg x 28</b>	Take ..... capsule(s) FOUR times a day for ..... days
<b>Flucloxacillin Syrup 125mg/5ml x 100ml</b>	Give .....ml FOUR times a day for .....days
<b>Flucloxacillin Syrup 250mg/5ml x 100ml</b>	Give .....ml FOUR times a day for .....days
<b>Fluconazole Capsules 50mg x 7</b>	Take ONE capsule DAILY
<b>Fluconazole Capsules 50mg x 14</b>	Take TWO capsules at the same time each day
<b>Metronidazole Tablets 400mg x 3</b>	Take ONE tablet at 3pm, 4pm and at 10pm the day before surgery
<b>Metronidazole Tablets 400mg x 5</b>	Take FIVE tablets as a single dose as directed
<b>Metronidazole Tablets 400mg x 9</b>	Take ONE tablet THREE times a day for ..... days
<b>Metronidazole Tablets 400mg x 10</b>	Take ONE tablet TWICE a day for ..... days
<b>Metronidazole Tablets 400mg x 14</b>	Take ONE tablet TWICE a day for ..... days
<b>Metronidazole Tablets 400mg x 28</b>	Take ONE tablet TWICE a day for ..... days
<b>Metronidazole Tablets 400mg x 15</b>	Take ONE tablet ..... times a day for ..... days
<b>Metronidazole Tablets 400mg x 21</b>	Take ONE tablet THREE times a day for ..... days
<b>Neomycin Tablets 500mg x 6</b>	Take ONE tablet at 3pm, 4pm and at 10pm the day before surgery
<b>Nitrofurantoin M/R Capsules 100mg x 6</b>	Take ONE capsule TWICE a day for THREE days
<b>Nitrofurantoin M/R Capsules 100mg x 14</b>	Take ONE capsule TWICE a day for SEVEN days
<b>Nitrofurantoin Capsules 50mg x 28</b>	Take ONE capsule FOUR times a day for ..... days
<b>Nystatin Suspension 100,000 units/ml x 30ml</b>	Use 1ml FOUR times a day
<b>Ofloxacin Tablets 200mg x 28</b>	Take ..... tablet(s) ..... times a day for ..... days.

<b>Ofloxacin Tablets 400mg x 14</b>	Take ..... tablet(s) ..... times a day for ..... days.
<b>Penicillin V Tablets 250mg x 40</b>	Take ..... tablet(s) FOUR times a day for ..... days
<b>Penicillin V Solution 125mg/5ml x 100ml</b>	Give .....ml FOUR times a day for .....days (only supplied if Kent Pharma licenced product not available)
<b>Penicillin V Solution 250mg/5ml x 100ml</b>	Give .....ml FOUR times a day for .....days (only supplied if Kent Pharma licenced product not available)
<b>Pivmecillinam tablets 200mg x 10</b>	Take TWO tablets THREE times a day for ..... days
<b>Pivmecillinam tablets 200mg x 42</b>	Take TWO tablets THREE times a day for ..... days
<b>Post Exposure Prophylaxis Kit (7 day pack)</b>	Take as directed
<b>Post Exposure Prophylaxis Kit (21 day pack)</b>	Take as directed
<b>Post Exposure Prophylaxis Kit (30 day pack)</b>	Take as directed
<b>Trimethoprim Tablets 200mg x 6</b>	Take ONE tablet TWICE a day for THREE days (only supplied if Kent Pharma licenced product not available)
<b>Trimethoprim Tablets 200mg x 14</b>	Take ONE tablet TWICE a day for SEVEN days (only supplied if Kent Pharma licenced product not available)
<b>Trimethoprim Suspension 50mg/5ml x 100ml</b>	Give .....ml TWICE a day for ..... days

## **6. Endocrine**

### **Drug and presentation**

### **Labelling details**

*No overlabelled medicines currently within this section*

## **7. Genito-Urinary Tract Disorders**

### **Drug and presentation**

### **Labelling details**

<b>Clotrimazole Pessary 500mg x 1</b>	Insert ONE pessary into the vagina at NIGHT as directed
<b>Fluconazole capsules 150mg</b>	Take ONE capsule as a single dose
<b>Levonorgestrel Tablet 1.5mg x 1</b>	Take tablet as soon as possible, preferably within 12 hours, but no later than 72 hours after unprotected sex
<b>Mifepristone Tablets 200mg x 1</b>	Take ONE tablet as directed on Day 1
<b>Misoprostol Tablets 200microgram x 2</b>	Either place TWO tablets under the tongue TWO hours before the procedure and retain for 30 minutes OR insert TWO tablets as high as possible into the vagina TWO hours before the procedure

<b>Misoprostol Tablets 200microgram x 6</b>	Either place FOUR tablets under the tongue TWO hours and retain for 30 minutes OR insert FOUR tablets as high as possible into the vagina. Place another TWO tablets under the tongue for 30 minutes after 4 hours
<b>Ulipristal Acetate Tablets 30mg x 1</b>	The treatment consists of one tablet to be taken orally as soon as possible, but no later than 120 hours (5 days) after unprotected intercourse or contraceptive failure.

## **8. Immune system and malignant disease**

### **Drug and presentation**

### **Labelling details**

*No overlabelled medicines currently within this section*

## **9. Blood and nutrition**

### **Drug and presentation**

### **Labelling details**

<b>Abidec Drops 1 x 25ml</b>	Give 0.6ml DAILY as directed
<b>Accrete D3 Tablets x 60</b>	Take ONE tablet TWICE a day
<b>Ferrous Fumarate Tablets 210mg x 84</b>	Take ONE tablet THREE times a day
<b>Ferrous Sulfate Tablets 200mg</b>	Take ONE tablet THREE times a day
<b>Folic Acid Tablets 5mg x 28</b>	Take ONE tablet DAILY
<b>Sodium Ferredetate Oral Solution</b>	Give .....mls ..... times a day

## **10. Musculoskeletal & Joint Disease**

### **Drug and presentation**

### **Labelling details**

<b>Diclofenac Sodium Tablets 50mg x 28</b>	Take ONE tablet THREE times a day
<b>Ibuprofen Tablets 400mg x 24</b>	Take ONE tablet every 4 to 6 hours as required for pain relief
<b>Ibuprofen Syrup 100mg/5ml x 100ml</b>	Give ..... ml ..... times a day as required for pain relief
<b>Naproxen Tablets 250mg x 28</b>	Take ..... tablet(s) ..... times a day

## 11. Ophthalmic

### Drug and presentation

### Labelling details

<b>Carbomer Eye Gel 0.2% x 10g</b>	Place ONE drop into RIGHT / LEFT / BOTH eye(s) ..... times a day
<b>Chloramphenicol Eye Drops 0.5% x 10ml</b>	Put ONE drop into the .....eye(s) every TWO hours for TWO days, then reduce to ONE drop FOUR times a day
<b>Chloramphenicol Eye Ointment 1% x 4g</b>	Apply.....times a day into the .....eye(s)
<b>Dexamethasone Eye Drops (Maxidex) 0.1% x 5ml</b>	Put ONE / TWO drops into ..... eye(s) ..... times a day
<b>Dexamethasone Minims 0.1% x 30</b>	Put ONE drop into RIGHT / LEFT / BOTH eye(s) ..... times a day
<b>Fluorometholone Eye Drops 0.1% x 10ml</b>	Put ONE drop into RIGHT / LEFT / BOTH eye(s) ..... times a day
<b>Fusidic Acid Eye Drops 1% x 5g</b>	Put ONE drop TWICE a day into ..... eye(s)
<b>Hylo-Night Eye Ointment x5g</b>	Apply into the RIGHT / LEFT / BOTH eye(s) ..... times a day
<b>Hypromellose Eye Drops 0.3% x 10ml</b>	Put ONE / TWO drop(s) into RIGHT / LEFT / BOTH eye(s) ..... times a day
<b>Latanoprost Eye Drops 500mcg/ml x 5ml</b>	Put ONE drop into RIGHT / LEFT / BOTH eye(s) ONCE daily as directed
<b>Maxitrol Eye Drops</b>	Put ONE drop into .....eye(s) ..... time(s) daily. Shake well before using.
<b>Prednisolone Acetate Eye Drops (PredForte) 1% x 5ml</b>	Put ONE drop into RIGHT / LEFT / BOTH eye(s) ..... times a day
<b>Sodium Hyaluronate Eye Drops 0.2% 10ml</b>	Put ONE drop into RIGHT / LEFT / BOTH eye(s) ..... times a day
<b>Sodium Hyaluronate Eye Drops 0.4% 30 x 0.5ml</b>	Put ONE drop into ..... eye(s) ..... times a day

## 12. Ear, nose and oropharynx

### Drug and presentation

### Labelling details

<b>Benzdyamine Spray 0.15% x 30ml</b>	Use 4-8 sprays into the mouth every ONE and a HALF to THREE hours as directed
<b>Benzdyamine Spray 0.15% x 30ml (paeds)</b>	Spray ..... puff(s) in the mouth .... times a day
<b>Benzdyamine Mouthwash 0.15% x 300ml</b>	Use 15ml as a mouthwash FOUR times a day



<b>Chlorhexidine Digluconate Mouthwash 0.2% 300ml</b>	Use 10ml as a mouthwash TWICE a day
<b>Mupirocin Nasal Ointment 2% x 3g</b>	Apply to each nostril THREE times a day for FIVE days
<b>Naseptin Cream x 15g</b>	Apply ..... times a day to each nostril as directed.

### 13. Skin

#### Drug and presentation

**Aciclovir Cream 5% x 2g**

**Betamethasone Dipropionate  
Ointment 0.05% x 30g**

**Clobetasol Propionate Ointment  
0.05% x 30g**

**Clobetasone Butyrate Ointment  
0.05% x 30g**

**Clotrimazole Cream 1% x 20g**

**Hydrocortisone Cream 1% x 30g**

**8-MOP Tablets 10mg x 3**

**8-MOP Tablets 10mg x 4**

**8-MOP Tablets 10mg x 5**

**8-MOP Tablets 10mg x 6**

#### Labelling details

Apply FIVE times a day as directed

Apply ONCE or TWICE a day as directed

Apply ONCE or TWICE a day as directed.

Apply ONCE or TWICE a day as directed.

Apply sparingly as directed

Apply TWICE a day as directed

Take as directed

Take as directed

Take as directed

Take as directed

## ***ACKNOWLEDGEMENTS***

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