One time, up to seven (7) days complimentary issue on *Expired Prescriptions or Zero (0) Refills Remaining

1. Oral HTN MEDS
   A. Ca Antagonist
      i. Verapamil
      ii. Diltiazem
      iii. Felodipine
      iv. Nifepidine
   B. Beta-blocker
      i. Atenolol
      ii. Metoprolol
      iii. Propranolol
   C. Angiotensin Converting Enzyme Inhibitor
      i. Lisinopril
      ii. Captopril
      iii. Ramipril
   D. Diuretics
      i. HCTZ
      ii. Maxzide
      iii. Furosemide
   E. Alpha-blocker
      i. Doxazosin
      ii. Clonidine
   F. Angiotensin Receptor Blockers
      i. Avapro (Irbesartan)
2. Oral DM MEDS
   A. Sulfonylureas
      i. Glyburide
      ii. Glipizide
      iii. Glipizide XL
   B. Metformin
   C. Acarbose
   D. Pioglitazone
   E. Rosiglitazone
3. H2 Antagonist
   A. Cimetidine
   B. Ranitidine
4. Proton Pump Inhibitors
   A. Lansoprazole
   B. Rabeprazole
5. Hormones
   A. Levothyroxine
   B. Estrogens/Progestins for Menopause
      i. Medroxyprogesterone
      ii. Prempro
   C. Oral Contraceptives-one month supply only
6. Chronic Pain Medication (No Controlled Substances)
   A. NSAIDs
   B. Muscle Relaxant
7. Anti-Seizure MEDS
   A. Carbamazepine
   B. Phenytoin
   C. Divalproex
8. Antipsychotics
   A. SSRIs
      i. Flouxetine
      ii. Sertraline
      iii. Paroxetine
      iv. Citalopram
   B. Trazodone
   C. Buspirone
9. Antiarrythmics
   A. Digoxin
   B. Amiodarone

* Only on patients who have been on continuous therapy and has not had the chance to see their PCM to update prescription