



**OCTOBER 2021** The following medications are available through the Welvista Medication Assistance Program. Please check our website at [www.Welvista.org](http://www.Welvista.org) for the current dosages and recent updates. The medication and dosage must be listed on the Welvista Formulary in order to be filled from our pharmacy.

Pharmacy **telephone** number – **(803) 933-9184**

Pharmacy **fax** number – **(803) 933-0489**

**\*\*IMPORTANT—Prescriptions should be written for a 90 day supply\*\*  
(ONLY DOCTORS OFFICES MAY FAX PRESCRIPTIONS)**

Drug Name Strength *
ADVAIR DISKUS INHALER® (100/50mcg, 250/50mcg, 500/50mcg)
ADVAIR HFA INHALER® (45-21mcg, 115-21mcg, 230-21mcg)
Alendronate (70mg)
Allopurinol (100mg, 300mg)
Amiodarone (200mg)
Amitriptyline HCL (10mg, 25mg, 50mg, 75 mg, 100mg)
Amlodipine Besylate (2.5mg, 5mg, 10mg)
Amoxicillin (250mg, 500mg)
Amoxicillin/ Clavulanic Acid (500mg, 875mg)
ANORO ELLIPTA® (62.5/25mcg)
ARNUIITY ELLIPTA® (200mcg)
ARTHROTEC TABLET® (50mg/200mcg, 75mg/200mcg)
Atenolol (25mg, 50mg, 100mg)
Atorvastatin Calcium (10mg, 20mg, 40mg, 80mg)
Azithromycin (250mg, 500mg)
AZOPT OPTHALMIC® (1%)
BASAGLAR KWIKPEN® (100 Units/ml)
BECONASE AQ NASAL SPRAY® (0.00042)
BREO ELLIPTA® (100/25mcg, 200/25mcg)
Bupropion HCL SR (100mg, 150mg, 200mg)
Bupirone (5mg, 7.5mg, 10mg, 15mg, 30mg)
CADUET TABLET® (5-10mg, 5-20mg, 5-40mg, 5-80mg, 10-10mg, 10-20mg, 10-40mg, 10-80mg)
Carvedilol (3.125mg, 25mg)
Celecoxib (100mg, 200mg, 400mg)
Cephalexin (250mg, 500mg)
Cetirizine (10 mg)
CHANTIX CONTINUING MONTH PACK®
CHANTIX STARTING MONTH PACK®
CHANTIX® (0.5mg, 1mg)

Ciprofloxacin (250mg, 500mg)
Clindamycin (150mg, 300mg)
Clonidine (0.1mg, 0.2mg, 0.3mg)
Clopidogrel bisulfate (75mg)
CYMBALTA® (20mg, 30mg, 60mg)
DEPAKOTE DR® (125mg, 250mg, 500mg)
DEPAKOTE ER® (500mg)
DEPAKOTE SPRINKLE® (125mg)
DETROL LA® (2mg, 4mg)
DETROL® (1mg, 2mg)
Digoxin (0.125mg, 0.25mg)
DUREZOL OPTHALMIC® (0.05%)
ELIQUIS® (2.5mg, 5mg)
ELMIRON® (100mg)
ENTRESTO® (24/26mg, 49/51mg, 97/103mg)
EVISTA® (60mg)
Ezetimibe (10mg)
Ezetimibe-Simvastatin (10mg-10mg, 10mg-20mg, 10mg-40mg)
Famotidine (20 mg, 40 mg)
FELDENE® (10mg, 20mg)
FLOVENT DISKUS® (50mcg, 100mcg, 250mcg)
FLOVENT HFA INHALER® (44mcg, 110mcg, 220mcg)
Fluticasone Propionate (50mg/nasal spray)
Furosemide (20mg, 40mg, 80mg)
Gabapentin (100mg, 300mg, 400mg, 600mg, 800mg)
Gemfibrozil (600mg)
Glimepiride (1mg, 2mg, 4mg)
Glipizide (5mg, 10mg)
Glipizide ER (2.5mg, 5mg, 10mg)
GLUCAGEN HYPOKIT® (1mg)
HUMALOG 100U/ML INJECTION (vial, kwikpen)® (100 Units/ml)

HUMALOG MIX 50/50 INJECTION (kwikpen)® (50/50 Units/ml)
HUMALOG MIX 75/25 INJECTION (vial, kwikpen)® (75/25 Units/ml)
HUMULIN 70/30 (vial)® (70-30 Units/ml)
HUMULIN N 100U/ML (vial)® (100 Units/ml)
HUMULIN R 100U/ML (vial)® (100 Units/ml)
Hydralazine HCl (25mg, 50mg, 100mg)
Hydrochlorothiazide(12.5mg, 25mg, 50mg)
Hydroxyzine HCl (10mg, 25mg, 50mg)
Hydroxyzine Pamoate (25mg, 50mg)
Ibuprofen (400mg, 600mg, 800mg)
ILEVRO OPTHALMIC® (0.3%)
IMITREX NASAL SPRAY® (5mg, 20mg)
INCRUSE ELLIPTA® (62.5mcg)
INVOKAMET XR® (50/1000mg, 150/500mg, 150/1000mg)
INVOKAMET® (50/500mg, 50/1000mg, 150/500mg, 150/1000mg)
INVOKANA® (100mg, 300mg)
Isosorbide Mononitrate ER (30mg, 60mg)
JANUMET XR® (50/500mg, 50/1000mg, 100/1000mg)
JANUMET® (50/500mg, 50/1000mg)
JANUVIA® (25mg, 50mg, 100mg)
LAMICTAL DISPERSABLE® (25mg)
LAMICTAL® (25mg, 100mg, 150mg, 200mg)
LEVEMIR 100 UNITS/ML (vial, flexpen)® (100 Units/ml )
Levetiracetam (250mg, 500mg, 750mg, 1000mg)
Levofloxacin (250mg, 500mg, 750mg)
Lisinopril (2.5mg, 5mg, 10mg, 20mg, 30mg, 40mg)
Lisinopril/HCTZ (10/12.5mg, 20/12.5mg, 20/25mg)
Losartan (25mg, 50mg, 100mg)
Losartan/ HCTZ (50/12.5mg, 100/12.5mg, 100/25mg)



**OCTOBER 2021** The following medications are available through the Welvista Medication Assistance Program. Please check our website at [www.Welvista.org](http://www.Welvista.org) for the current dosages and recent updates. The medication and dosage must be listed on the Welvista Formulary in order to be filled from our pharmacy.

Pharmacy **telephone** number – **(803) 933-9184**

Pharmacy **fax** number – **(803) 933-0489**

**\*\*IMPORTANT—Prescriptions should be written for a 90 day supply\*\*  
(ONLY DOCTORS OFFICES MAY FAX PRESCRIPTIONS)**

Meloxicam (7.5mg, 15mg)
Metformin HCL (500mg, 850mg, 1000mg)
Metformin HCL ER (500mg)
Methotrexate (2.5mg)
Metoprolol Succinate ER (25mg, 50mg, 100mg, 200mg)
Metoprolol Tartrate (25mg, 50mg, 100mg)
Mirtazapine (15mg, 30mg, 45mg)
Montelukast (10mg)
Mupirocin Topical Ointment (2%)
Naproxen (500mg)
NICOTROL NASAL SPRAY® (10mg/ml)
Nifedipine ER (30mg, 60mg, 90mg)
NOVOFINE NEEDLES® (32G)
NOVOLIN 70/30 (vial)® (70-30 Units/ml)
NOVOLIN N 100 UNITS/ML (vial)® (100 Units/ml)
NOVOLIN R 100 UNITS/ML (vial)® (100 Units/ml)
NOVOLOG 100 UNITS/ML (vial, flexpen)® (100 Units/ml)
NOVOLOG MIX 70/30 (vial, flexpen)® (70-30Units/ml)
Omega-3 Acid Ethyl Esters (1 gram)
Omeprazole DR (20mg, 40mg)
Ondansetron (4mg, 8mg)
Ondansetron ODT (4mg, 8mg)
Pantoprazole Sodium (20mg, 40mg)
Phenytoin (50mg)
Phenytoin Sodium Extended Release (100mg)

Pioglitazone (15 mg, 30 mg, 45 mg)
Potassium Chloride ER (10meq, 20meq)
Prasugrel (5mg, 10mg)
PREMARIN VAGINAL CREAM® (30 gm tube)
PREMARIN® (0.3mg, 0.45mg, 0.625mg, 0.9mg, 1.25mg)
PREMPRO® (0.3/1.5mg, 0.45/1.5mg, 0.625/2.5mg, 0.625/5mg)
PRISTIQ® (50mg, 100mg)
Promethazine HCl (12.5mg, 25mg)
PROVENTIL HFA INHALER® (90mcg)
PROZAC® (10mg, 20mg, 40mg)
Quetiapine Fumarate (25mg, 50mg, 100mg, 200mg, 300mg, 400mg)
RELENZA DISKHALER® (5mg)
RELPAx® (20mg, 40mg)
REPATHA® - (140 mg/ml)
Risperidone (0.25mg, 0.5mg, 1mg, 2mg, 3mg, 4mg)
Ropinirole HCL ER (2mg, 4mg, 6mg, 8 mg)
Rosuvastatin (5mg, 10mg, 20mg, 40mg)
SEREVENT DISKUS INHALER® (50mcg)
Sertraline (25mg, 50mg, 100mg)
SIMBRINZA OPTHALMIC® (0.2%/1%)
Simvastatin (10mg, 20mg, 40mg)
Spironolactone (25mg, 50mg)
SPORANOx® (100mg)
STRATTERA® (10mg, 18mg, 25mg, 40mg, 60mg, 80mg, 100mg)
Sulfamethoxazole/Trimethoprim DS (800/160mg)

Sumatriptan (25mg, 50mg, 100mg)
SYMBYAX® (3/25mg, 6/25mg, 6/50mg, 12/50mg)
SYNTHROID® (25mcg, 50mcg, 75mcg, 88mcg, 100mcg, 112mcg, 125mcg, 137mcg, 150mcg, 175mcg, 200mcg, 300mcg)
Tamoxifen (10mg, 20mg)
Tamsulosin (0.4 mg)
TEGRETOL XR® (100mg, 200mg, 400mg)
Topiramate (25mg, 50mg, 100mg, 200mg)
TOVIAZ® (4mg, 8mg)
TRAVATAN Z OPTHALMIC® (0.004%)
Trazodone (50mg, 100mg, 150mg)
TRELEGY ELLIPTA® (100 mcg/62.5 mcg/25 mcg)
TRESIBA FLEXTOUCH® (100 units/ml, 200 units/ml)
Triamterene/Hydrochlorothiazide (37.5-25mg)
TRILEPTAL® (150mg, 300mg, 600mg)
TRULICITY® - (0.75mg, 1.5mg, 3mg, 4.5mg)
Valacyclovir HCL (500mg, 1000mg)
Valsartan (40mg, 80mg, 160mg, 320mg)
Valsartan/HCTZ (80/12.5mg, 160/12.5mg, 160/25mg, 320/12.5mg, 320/25mg)
VICTOZA® (18mg / 3ml)
VIGAMOX OPTHALMIC® (0.5%)
Warfarin Sodium (1mg, 2mg, 2.5mg, 3mg, 4mg, 5mg, 6mg, 7.5mg, 10mg)
XARELTO® (2.5mg, 10mg, 15mg, 20mg)
ZYPREXA® (2.5mg, 5mg, 7.5mg, 10mg, 15mg, 20mg)