DRUG QUANTITY MANAGEMENT POLICY - PER RX

POLICY: Proton Pump Inhibitors Drug Quantity Management Policy – Per Rx

Prescription	Products Targeted	Manufacturer
Proton Pump		
Inhibitor		
Dexlansoprazole	Dexilant® delayed-release capsules, generic	Takeda
Esomeprazole	Esomeprazole strontium delayed-release capsules	Generic only
	Nexium® delayed-release capsules, generic	AstraZeneca
	Nexium® delayed-release oral granules, generic	
Lansoprazole	Prevacid® delayed-release capsules, generic	Takeda
	Prevacid® SoluTab® delayed-release orally disintegrating tablets, generic	
Omeprazole	Omeprazole delayed-release capsules	Generic only
	Prilosec® delayed-release oral granules	AstraZeneca
	Zegerid® capsules, generic	Salix
	Zegerid® powder for oral suspension, generic	
Pantoprazole	Protonix® delayed-release tablets, generic	Wyeth
Rabeprazole	Aciphex [®] Sprinkle [™] delayed-release capsules	Aytu Therapeutics

REVIEW DATE: 07/06/2022

OVERVIEW

The FDA-approved indications for the proton pump inhibitors (PPIs) are in Table 1.

Table 1. FDA-Approved Indications for the Oral Prescription Proton Pump Inhibitors. 1-11

Brand	Indications
(generic)	
Aciphex,	Duodenal ulcer, active (short-term treatment)
Aciphex	Erosive esophagitis (short-term treatment)
Sprinkle(rabeprazole)	Erosive esophagitis, healed (maintenance)
	Gastroesophageal reflux disease
	• H. pylori infection
	Pathological hypersecretory conditions (e.g., ZES)
Dexilant	Erosive esophagitis (short-term treatment)
(dexlansoprazole)	Erosive esophagitis, healed (maintenance)
	Gastroesophageal reflux disease
Nexium	Erosive esophagitis (short-term treatment)
(esomeprazole	Erosive esophagitis, healed (maintenance)
magnesium)	Gastroesophageal reflux disease
	• H. pylori infection
	NSAID-associated gastric ulcer, risk reduction
	Pathological hypersecretory conditions (e.g., ZES)
Esomeprazole strontium	Erosive esophagitis (short-term treatment)
(no trade name)	Erosive esophagitis, healed (maintenance)
	Gastroesophageal reflux disease
	• H. pylori infection
	NSAID-associated gastric ulcer, risk reduction
	Pathological hypersecretory conditions (e.g., ZES)

Table 1 (continued). FDA-Approved Indications for the Oral Prescription Proton Pump Inhibitors. 1-11

Brand	Indications
(generic)	
Prevacid,	• Duodenal ulcer, active (short-term treatment)
Prevacid SoluTab	• Duodenal ulcer, healed (maintenance)
(lansoprazole)	• Erosive esophagitis (short-term treatment)
	• Erosive esophagitis, healed (maintenance)
	• Gastric ulcer, active benign (short-term treatment)
	Gastroesophageal reflux disease
	• H. pylori infection
	NSAID-associated gastric ulcer, risk reduction
	NSAID-associated gastric ulcer, treatment
	• Pathological hypersecretory conditions (e.g., ZES)
Prilosec	• Duodenal ulcer, active (short-term treatment)
(omeprazole)	• Erosive esophagitis (short-term treatment)
	• Erosive esophagitis, healed (maintenance)
	• Gastric ulcer, active benign (short-term treatment)
	Gastroesophageal reflux disease
	• H. pylori infection
	• Pathological hypersecretory conditions (e.g., ZES)
Protonix	• Erosive esophagitis (short-term treatment)
(pantoprazole)	• Erosive esophagitis, healed (maintenance)
	Gastroesophageal reflux disease
	Pathological hypersecretory conditions (e.g., ZES)
Zegerid	• Duodenal ulcer, active (short-term treatment)
(omeprazole and sodium	• Erosive esophagitis (short-term treatment)
bicarbonate)	• Erosive esophagitis, healed (maintenance)
	• Gastric ulcer, active benign (short-term treatment)
	Gastroesophageal reflux disease
	• Gastrointestinal bleeding in critically ill patients, risk reduction (suspension only)

 $DR-Delayed\text{-}release;\ ZES-Zollinger\text{-}Ellison\ syndrome.$

Dosing and Availability

Refer to Drug Quantity Limit table below for dosing and availability of the PPIs.

GUIDELINES

Gastroesophageal Reflux Disease (GERD) and Erosive/Reflux Esophagitis

The American College of Gastroenterology (ACG) guidelines on the treatment of GERD (2021) note that PPIs eliminate symptoms and heal esophagitis more frequently and more rapidly than the other agents (e.g., histamine₂ receptor antagnoists [H₂RAs]).¹² All seven of the available (at time of publication) PPIs (omeprazole, lansoprazole, rabeprazole, pantoprazole, esomeprazole, omeprazole/sodium bicarbonate, and dexlansoprazole) have been demonstrated to control GERD symptoms and to heal esophagitis when used at prescription strengths. The ACG guidelines also note that chronic PPI therapy is effective and appropriate for maintenance therapy of GERD in patients who continue to have symptoms after an 8-week course of PPI therapy and in patients with complications including erosive esophagitis and Barrett's esophagus. For optimal use, the ACG guidelines note that when giving PPIs once daily (QD), it is best to administer 30 to 60 minutes prior to meals and prior to the morning meal for most patients (with the exception of omeprazole-sodium bicarbonate [administer at bedtime for nighttime acid] and dexlansoprazole [administer at any time of the day]). For patients with partial response to QD therapy, tailored therapy with adjustment of dose timing and/or twice daily (BID) dosing should be considered in patients with night-time symptoms, variable schedules, and/or sleep disturbance. BID dosing has also been shown to improve nighttime acid control.¹³

Proton Pump Inhibitors DQM Policy – Per Rx Page 3

The American Gastroenterological Association (AGA) published a medical position statement on the management of GERD in 2008.¹⁴ The AGA position statement is similar to the ACG guidelines, and indicates that PPIs are more effective than H₂RAs. In addition, BID PPI therapy for patients with esophageal syndrome with an inadequate response to QD PPI therapy may improve outcomes.

Laryngopharyngeal Reflux (LPR)

LPR is defined as the backflow of stomach contents (acid) into the throat.¹⁵ Most LPR patients will require BID dosing of PPIs secondary to the need for consistent acid suppression (intragastric pH > 4) for 24 hours. A position statement from the American Academy of Otolaryngology Head and Neck Surgery (AAOHNS) recommends BID PPI dosing for a minimum of 6 months in most LPR patients. Prolonged tapering and/or chronic treatment (life-long) may be needed in some patients.

Helicobacter pylori

The ACG guidelines for the management of *H. pylori* infection were updated in 2017.¹⁶ Despite FDA-approval of various dual drug regimens, the ACG recommends use of triple or quadruple drug regimens for the management of *H. pylori* since these regimens are more effictive. PPIs are a component of all of the first-line recommended regimens. Of note, some PPIs are supplied in combination kits with other medications for the treatment of *H. pylori* infections. In the Omeclamox-Pak[™] (omeprazole delayed-release capsules, clarithromycin tablets, amoxicillin capsules), it is noted that for patients with an ulcer present at initiation of therapy, an additional 18 days of omeprazole 20 mg QD is recommended following completion of the 10- to 14-day triple therapy regimen.¹⁷

Additional Information

The intent of the drug quantity management on lower strength PPIs is dose consolidation. The highest strength dosage form for each product does not have a quantity limit. For example, if a drug is available in a 20 mg and 40 mg strength, only the 20 mg strength has a quantity limit and criteria. Patients are encouraged to take one 40 mg unit instead of two 20 mg units. The highest strengths of the proton pump inhibitors do not have quantity limits since it is clinically appropriate in certain patients, such as those with a hypersecretory condition (e.g., Zollinger-Ellison syndrome, endocrine adenoma, systemic mastocytosis) and acute healing of ulcers, to take a dose above the highest strength. Over-the-counter PPIs are managed by plan design and are not subject to quantity limits under this program.

POLICY STATEMENT

This Drug Quantity Management program has been developed to promote dose consolidation of proton pump inhibitors. If the Drug Quantity Management rule is not met for the requested medication at the point of service, coverage will be determined by the Criteria below. All approvals are provided for 1 year in duration.

Automation: None.

Drug Quantity Limits

Adults release tablets, generic) Adults Adu	Brand (generic)	FDA-Approved Dosing	Availability	Maximum
#Healing of erosive or ulcerative GERD: 20 mg QD for 4 to 8 weeks.		A 1 1.	20 11 1	Quantity per Rx
8 weeks. 8 weeks. 8 weeks. 9 wintenance healing of erosive or ulcerative GERD: 20 mg QD (studied for 12 months). • Symptomatic GERD: 20 mg QD for 4 weeks. • Healing of duodenal ulcers: 20 mg QD after morning meal for up to 4 weeks. • Fradication of H. pylori to reduce the risk of duodenal ulcer recurrence: 20 mg BID for 7 days as triple therapy in combination with other agents. • Pathological hypersecretory conditions, including Zollinger-Elison Syndrome: 60 mg QD. Adolescents • Symptomatic GERD in patients ≥ 12 years of age: 20 mg QD for up to 8 weeks. Somition delayed-release capsules (rabeprazole sodium delayed-release capsules, generic) Dexiliant* Patients 1 to 11 vears of age • Weight < 15 kg: 10 mg QD for up to 12 weeks. If an inadequate response, may increase to 10 mg QD. Weight ≥ 15 kg: 10 mg QD for up to 12 weeks. Note: If a larger dose is required, the patients should be referred to the 20 mg tablet. Patients 21 years of age • Healing of EE: 60 mg QD for up to 8 weeks. • Weight < 16 kg: 10 mg QD for 4 weeks. Note: If a larger dose is required, the patient should be referred to the 20 mg tablet. Patients 12 years of age • Healing of EE: 60 mg QD for up to 8 weeks. • Maintenance healing of EE: 60 mg QD for 4 to 8 weeks. • Symptomatic more-rosive GERD: 30 mg QD for 4 weeks. Note: If a dose larger than 30 mg per day is required, the patient should be referred to the 60 mg capsules. • GERD: 24.65 mg or 49.3 mg QD for 4 to 8 weeks. • Risk Reduction of NSAID-associated gastric ulcer: 24.65 mg or 49.3 mg QD for 10 days, in combination with other agents • Pathological hypersexereory conditions: 49.3 mg BID. Note: 24.65 mg capsules are no longer available, so dosing at the 24.65 mg dose is not possible. • Eassociated with GERD: 20 mg QD for up to 8 weeks. • Adults • Eassociated with GERD: 20 mg QD for up to 8 weeks. • Adults • Eassociated with GERD: 20 mg QD for up to 8 weeks. • Adults • Eassociated with GERD: 20 mg QD for up to 8 weeks. • Adults • Eassociated with GERD: 20				No quantity limit
Maintenance heading of erosive or ulcerative GERD: 20 mg QD (studied for 12 months).			release tablets	
QD (studied for 12 months). • Symptomatic GERD: 20 mg QD for 4 weeks. • Healing of duodenal ulcers: 20 mg QD after morning meal for up to 4 weeks. • Fedication of H. pylori to reduce the risk of duodenal ulcer recurrence: 20 mg BID for 7 days as triple therapy in combination with other agents. • Pathological hypersecretory conditions, including Zollinger-Elison Syndrome: 60 mg QD. Adolescents • Symptomatic GERD in patients ≥ 12 years of age: 20 mg QD for up to 8 weeks. • Weight < 15 kg: 5 mg QD for up to 12 weeks. If an inadequate response, may increase to 10 mg QD. • Weight < 15 kg: 5 mg QD for up to 12 weeks. If an inadequate response, may increase to 10 mg QD. • Weight < 15 kg: 10 mg QD for up to 12 weeks. Mog: If a larger dose is required, the patient should be referred to the 20 mg tablet. • Healing of EE: 60 mg QD for up to 8 weeks. • Maintenance of healed EE and relief of heartburn: 30 mg QD for 4 weeks. Nog: If a dose larger than 30 mg per day is required, the patient should be referred to the 60 mg capsules. • Symptomatic one-rorsive GERD: 30 mg QD for 4 weeks. Nog: If a dose larger than 30 mg per day is required, the patient should be referred to the 60 mg capsules. • Adults • Fathological hypersecretory conditions: 49.3 mg BID. Nog: 24.65 mg capsules are no longer available, so dosing at the 24.65 mg dose is not possible. • Protonix® (pantoprazole sodium delayed-release capsules are no longer available, so dosing at the 24.65 mg dose is not possible. • Protonix® (pantoprazole sodium delayed-release oral subjects) and the 24.65 mg dose is not possible. • Protonix® (pantoprazole sodium delayed-release oral suspension. • EE associated with GERD: 20 mg QD for up to 8 weeks. • Aliantenance healing of EE: 40 mg QD. • Pathological hypersecretory conditions: 40 mg BID. • EE associated with GERD: 0 ≥ 15 kg to < 40 kg: 20 mg QD for up to 8 weeks. • 24 0 kg: 40 mg QD for up to 8 weeks. • 25 to generic) • 26 to generic) • 26 to generic) • 27 to generic) • 28 to generic) • 29 mg delayed-release capsules (•			
Symptomatic GERD: 20 mg QD for 4 weeks. Healing of duodenal ulcers: 20 mg QD after morning meal for up to 4 weeks. Pradication of H. Pylori to reduce the risk of duodenal ulcer recurrence: 20 mg BD for 7 days as triple therapy in combination with other agents. Pathological hypersecretory conditions, including Zollinger-Elison Syndrome: 60 mg QD. Adolescents Symptomatic GERD in patients ≥ 12 years of age: 20 mg QD for up to 8 weeks. Aciphex® Sprinkle™ (rabeprazole softium delayed-release capsules, generic) Dexilant® (dexlamsoprazole delayed-release capsules, spencir) Dexilant® (dexlamsoprazole strontium delayed-release (arbanded generic) Patients ≥ 12 years of age Neight > 15 kg: 10 mg QD for up to 12 weeks. If an imadequate response, may increase to 10 mg QD. Patients ≥ 12 years of age Neight > 15 kg: 10 mg QD for up to 12 weeks. Note: If a larger dose is required, the patient should be referred to the 20 mg tablet. Patients ≥ 12 years of age Healing of EE: 60 mg QD for up to 8 weeks. Maintenance of healted EE and relief of hearthurn: 30 mg QD for 4 to 6 months. Symptomatic non-erosive GERD: 30 mg QD for 4 weeks. Note: If a dose larger than 30 mg per day is required, the patient should be referred to the 60 mg capsules. Adults Adults GERD: 24.65 mg or 49.3 mg QD for 4 to 8 weeks. Rathological hypersecretory conditions: 49.3 mg BID. Patients ≥ 2.465 mg capsules are no longer available, so dosing at the 24.65 mg dose is not possible. Protonix® (pantoprazole sodium delayed-release capsules are no longer available, so dosing at the 24.65 mg dose is not possible. Protonix® (pantoprazole sodium delayed-release oral suspension. EE associated with GERD: 0 mg QD for up to 8 weeks. Alintenance healing of EE: 40 mg QD. Sea associated with GERD: 0 mg QD for up to 8 weeks. Adults EE associated with GERD: 0 mg QD for up to 8 weeks. Adults EE associated with GERD: 0 mg QD for up to 8 weeks. Alintenance healing of EE: 40 mg QD. EE associated with GERD: 0 mg QD for up to 8 weeks. Sea to the				
Healing of duodenal ulcers: 20 mg QD after morning meal for up to 4 weeks. Eradication of H. pylori to reduce the risk of duodenal ulcer recurrence: 20 mg BID for 7 days as triple therapy in combination with other agents. Pathological hypersecretory conditions, including Zollinger-Elison Syndrome: 60 mg QD. Adolescents Symptomatic GERD in patients ≥ 12 years of age: 20 mg QD for up to 8 weeks. Aciphex® Sprinkle™ Patients I to 11 years of age Weight < 15 kg: 5 mg QD for up to 12 weeks. If an inadequate response, may increase to 10 mg QD. Weight < 15 kg: 10 mg QD for up to 12 weeks. If an inadequate response, may increase to 10 mg QD. Weight < 15 kg: 10 mg QD for up to 12 weeks. Note: 16 a larger dose is required, the patient should be referred to the 20 mg tablet. Patients I to 11 years of age Healing of EE: 60 mg QD for up to 8 weeks. Healing of Action of NSAID-associated gastric ulcer: 24.65 mg or 49.3 mg QD for 4 to 8 weeks. Risk Reduction of NSAID-associated gastric ulcer: 24.65 mg or 49.3 mg QD for up to 6 months. Healing of EE: 60 mg QD for up to 6 weeks. Risk Reduction of NSAID-associated gastric ulcer: 24.65 mg or 49.3 mg QD for up to 6 months. Healing of EE: 60 mg QD for up to 6 weeks. Risk Reduction of NSAID-associated gastric ulcer: 24.65 mg or 49.3 mg QD for up to 6 months. Healing of EE: 60 mg QD for up to 6 months. Healing of EE: 60 mg QD for up to 8 weeks. Healing of EE: 60 mg QD for up to 8 weeks. Healing of EE: 60 mg QD for up to 8 weeks. Healing of EE: 60 mg QD for up to 8 weeks. Healing of EE: 60 mg QD for up to 8 weeks. Healing of EE: 60 mg QD for up to 8 weeks. Healing of EE: 60 mg QD for up to 8 weeks. Healing of EE: 60 mg QD for up to 8 weeks. Healing of EE: 60 mg QD for up to 8 weeks. Healing of EE: 60 mg QD for up to 8 weeks. Healing of EE: 60 mg QD for up to 8 weeks. Healing of EE: 60 mg QD for up to 8 weeks. Healing of EE: 60 mg QD for up to 8 weeks. Healing of EE: 60 mg QD for up	generic)			
for up to 4 weeks. • Eradication of H. pylori to reduce the risk of duodenal ulcer recurrence: 20 mg BID for 7 days as triple therapy in combination with other agents. • Pathological hypersecretory conditions, including Zollinger-Elison Syndrome: 60 mg QD. Adolescents • Symptomatic GERD in patients ≥ 12 years of age: 20 mg QD for up to 8 weeks. Aciphex® Sprinkle™ (rabeprazole sodium delayed-release capsules, generic) Dexilant® 1 to 11 years of age • Weight < 15 kg: 5 mg QD for up to 12 weeks. If an inadequate response, may increase to 10 mg QD. Patients ≥ 12 years of age • Weight < 15 kg: 10 mg QD for up to 12 weeks. Note: If a larger dose is required, the patient should be referred to the 20 mg tablet. Patients ≥ 12 years of age • Weight < 15 kg: 10 mg QD for up to 12 weeks. Note: If a larger dose is required, the patient should be referred to the 20 mg tablet. Patients ≥ 12 years of age • Weight < 15 kg: 10 mg QD for up to 12 weeks. Note: If a larger dose is required, the patient should be referred to the 20 mg tablet. Patients ≥ 12 years of age • Weight < 15 kg: 10 mg QD for up to 12 weeks. Note: If a larger dose is required, the patient should be referred to the 60 mg capsules. • Halling of EE: 60 mg QD for up to 8 weeks. • Maintenance of healed EE and relief of hearthum: 30 mg QD for 4 to 6 months. • Mintenance of healed EE and relief of hearthum: 30 mg QD for 4 to 6 months. • Mintenance of healed EE and relief of hearthum: 30 mg QD for 4 to 8 weeks. • Risk Reduction of NSAID-associated gastric ulcer: 24.65 mg or 49.3 mg QD for 4 to 8 weeks. • Risk Reduction of NSAID-associated gastric ulcer: 24.65 mg or 49.3 mg QD for 10 days, in combination with other agents • Pathological hypersecretory conditions: 49.3 mg BID. Note: 24.65 mg dose is not possible. Protonix® (pantoprazole sodium delayed-release tablets) • EE associated with GERD: ○ ≥ 15 kg to < 40 kg: 20 mg QD for up to 8 weeks. ○ ≥ 40 kg: 40 mg QD for up to 8 weeks. ○ ≥ 40 kg: 40 mg QD for up to 8 weeks. ○ ≥ 40 kg: 40 mg QD				
• Eradication of H. Pydori to reduce the risk of duodenal ulcer recurrence: 20 mg BID for 7 days as triple therapy in combination with other agents. • Pathological hypersecretory conditions, including Zollinger-Elison Syndrome: 60 mg QD. Adolescents • Symptomatic GERD in patients ≥ 12 years of age: 20 mg QD for up to 8 weeks. Sprinkle" (rabeprazole sodium delayed-release capsules, generic) Dexilant® Patients 1 to 11 years of age • Weight < 15 kg: 5 mg QD for up to 12 weeks. If an inadequate response, may increase to 10 mg QD. • Weight < 15 kg: 5 mg QD for up to 12 weeks. Note: If a larger dose is required, the patient should be referred to the 20 mg tablet. Patients ≥ 12 years of age • Healing of EE: 60 mg QD for up to 12 weeks. Note: If a flore dose is required, the patient should be referred to the 20 mg tablet. Symptomatic non-crosive GERD: 30 mg QD for 4 weeks. Note: If a dose larger than 30 mg per day is required, the patient should be referred to the 60 mg capsules. Adults • H. pylori eradication: 49.3 mg QD for 10 days, in combination with other agents • Pathological hypersecretory conditions: 49.3 mg BID. Note: 24.65 mg capsules are no longer available, so dosing at the 24.65 mg dose is not possible. Protonix® (pantoprazole sodium delayed-release tablets, generic) • Pathological hypersecretory conditions: 49.3 mg BID. Patients ≥ 2 years to 17 years of age • Eassociated with GERD: • Pathological hypersecretory conditions: 40 mg BID. Patients ≥ 5 years to 17 years of age • Eassociated with GERD: • Pathological hypersecretory conditions: 40 mg BID. Patients ≥ 5 years to 17 years of age • Eassociated with GERD: • 20 mg delayed-release release tablets • Eassociated with GERD: • 20 mg delayed-release release tablets • Eassociated with GERD: • 20 mg delayed-release release tablets • Eassociated with GERD: • 20 mg delayed-release release tablets • Eassociated with GERD: • 20 mg delayed-release reparales for orals with GERD: • 20 mg delayed-release granules for				
recurrence: 20 mg BID for 7 days as triple therapy in combination with other agents. • Pathological hypersecretory conditions, including Zollinger-Elison Syndrome: 60 mg QD. Adolescents • Symptomatic GERD in patients ≥ 12 years of age: 20 mg QD for up to 8 weeks. • Weight < 15 kg: 5 mg QD for up to 12 weeks. If an inadequate response, may increase to 10 mg QD. • Weight < 15 kg: 10 mg QD for up to 12 weeks. Mote: If a larger dose is required, the patient should be release capsules equal to 12 years of age • Healing of EE: 60 mg QD for up to 8 weeks. • Meintenance of healed EE and relief of heartburn: 30 mg QD for 4 to 6 months. • Symptomatic non-erosive GERD: 30 mg QD for 4 weeks. Note: If a dose larger than 30 mg per day is required, the patient should be referred to the 20 mg CD. Esomeprazole strontium delayed-release capsules (no trade name) Esomeprazole strontium delayed-release capsules Frotonix® (pantoprazole sodium delayed-release tablets) Protonix® (pantoprazole sodium delayed-release tablets) Protonix® (pantoprazole sodium delayed-release tablets) Perotonix® (pantoprazole sodium delayed-release tablets) Protonix® (pantoprazole sodium delayed-release oral suspension)		for up to 4 weeks.		
combination with other agents. • Pathological hypersecretory conditions, including Zollinger-Elison Syndrome: 60 mg QD. Adolescents • Symptomatic GERD in patients ≥ 12 years of age: 20 mg QD for up to 8 weeks. Patients 1 to 11 years of age Weight < 15 kg: 5 mg QD for up to 12 weeks. If an inadequate response, may increase to 10 mg QD. • Weight < 15 kg: 10 mg QD for up to 12 weeks. If an inadequate response, may increase to 10 mg QD. • Weight < 15 kg: 10 mg QD for up to 12 weeks. Note: If a larger dose is required, the patient should be referred to the 20 mg tablet. • Symptomatic non-erosive GERD: 30 mg QD for 4 weeks. • Maintenance of healed EE and relief of heartburn: 30 mg QD for 4 to 6 months. • Symptomatic non-erosive GERD: 30 mg QD for 4 weeks. Note: If a dose larger than 30 mg per day is required, the patient should be referred to the 60 mg capsules granulor and the patient should be referred to the 60 mg capsules. Esomeprazole strontium delayed-release capsules (no trade name) Adults • GERD: 24.65 mg or 49.3 mg QD for 4 to 8 weeks. • H. pylori eradication: 49.3 mg QD for 10 days, in combination with other agents • Pathological hypersecretory conditions: 49.3 mg BID. Note: 24.65 mg dose is not possible. Protonix® (pantoprazole sodium delayed-release tablets) Perotonix® (pantoprazole sodium delayed-release tablets) Protonix® (pantoprazole sodium delayed-release tablets) Protonix® (pantoprazole sodium delayed-release oral suspension. Protonix® (pantoprazole sodium delayed-release oral suspension) 20 mg delayed-release capsules No quantity limit. 20 mg delayed-release capsules No quantity limit. 49.3 mg QD for up to 8 weeks. 49.3 mg QD for up to 8 weeks. 20 mg delayed-release tablets 40 mg delayed-release granules 40 mg delayed-release granules 40 mg delayed-release granules 40 mg delayed-release granul		Eradication of H. pylori to reduce the risk of duodenal ulcer		
Pathological hypersecretory conditions, including Zollinger-Elison Syndrome: 60 mg QD. Adolescents Symptomatic GERD in patients ≥ 12 years of age: 20 mg QD for up to 8 weeks. Aciphex® Sprinkle™ (rabeprazole sodium delayed-release capsules generic) Dexilant® (dex.lansoprazole delayed-release capsules, generic) Esomeprazole strontium delayed-release (no trade name) Esomeprazole stodium delayed-release tablets generic) Protonix® (pantoprazole sodium delayed-release tablets generic) Protonix® (pantoprazole sodium delayed-release oral) Prot				
Aciphex® Sprinkle™ (rabeprazole sodium delayed-release capsules, generic) Esomeprazole strontium delayed-release (no trade name) Protonix® (pantoprazole sodium delayed-release tablets, generic) Protonix® (pantoprazole sodium delayed-release oral subspension, suspension, s		combination with other agents.		
Adolescents • Symptomatic GERD in patients ≥ 12 years of age: 20 mg QD for up to 8 weeks. Aciphex® Sprinkle™ (rabeprazole sodium delayed-release capsules, generic) Dexilant® (dexidansoprazole delayed-release capsules, generic) Dexilant® (dexidansoprazole strontium delayed-release capsules, moterated to the 20 mg tablet. Symptomatic non-erosive GERD: 30 mg QD for 4 to 8 weeks. Note: If a dose larger than 30 mg per day is required, the patient should be referred to the 20 mg tablet. Symptomatic non-erosive GERD: 30 mg QD for 4 weeks. Note: If a dose larger than 30 mg per day is required, the patient should be referred to the 60 mg capsules. Adults • Healing of EE: 60 mg QD for 4 to 8 weeks. Note: If a dose larger than 30 mg per day is required, the patient should be referred to the 60 mg capsules. Adults • Risk Reduction of NSAID-associated gastric ulcer: 24.65 mg or 49.3 mg QD for 49.3 mg QD for 10 days, in combination with other agents • Patients ≥ 12 years of age • Healing of EE: 60 mg QD for 4 to 8 weeks. Note: If a dose larger than 30 mg per day is required, the patient should be referred to the 60 mg capsules. Adults • Risk Reduction of NSAID-associated gastric ulcer: 24.65 mg or 49.3 mg QD for 10 days, in combination with other agents • Patients≥ 12 years of age EEsomeprazole strontium delayed-release tablets • Patients≥ 12 years of age • Healing of EE: 40 mg QD. • Protonix® (pantoprazole sodium delayed-release tablets) • Patients≥ 12 years of age • Protonix® (pantoprazole sodium delayed-release tablets) • Patients≥ 12 years of age • Patients ≥ 12 years of age • Healing of EE: 40 mg QD. • Pathological hypersecretory conditions: 49.3 mg BID. Patients ≥ 12 years of age • Patients ≥ 12 years of age • Healing of EE: 40 mg QD. • Pathological hypersecretory conditions: 49.3 mg BID. • Patients ≥ 12 years of age • Patients ≥ 12 years of age • Healing of EE: 40 mg QD. • Pathological hypersecretory conditions: 49.3 mg BID. • Patients ≥ 12 years of age • Healing of EE: 40 mg QD for		Pathological hypersecretory conditions, including		
Symptomatic GERD in patients ≥ 12 years of age: 20 mg QD for up to 8 weeks. Sprinkle™				
Symptomatic GERD in patients ≥ 12 years of age: 20 mg QD for up to 8 weeks. Sprinkle™		Adolescents		
OD for up to 8 weeks. Patients 1 to 11 years of age Sprinkle™ (rabeprazole sodium delayed- release capsules, generic) Dexilant® (dexlansoprazole delayed-release capsules, generic) Dexilant® (dexlansoprazole delayed-release capsules, generic) Dexilant® (dexlansoprazole delayed-release capsules, generic) Dexilant® (Dex in imadequate response, may increase to 10 mg QD. • Weight ≥ 15 kg: 10 mg QD for up to 12 weeks. If an inadequate response, may increase to 10 mg QD. • Weight ≥ 15 kg: 10 mg QD for up to 12 weeks. If an inadequate response, may increase to 10 mg QD. • Weight ≥ 15 kg: 10 mg QD for up to 8 weeks. Dexilant® (dexlansoprazole delayed-release capsules inadequate response, may increase to 10 mg QD. • Weight ≥ 15 kg: 10 mg QD for up to 8 weeks. Patients ≥ 12 years of age QD for 4 to 6 months. • Maintenance of healed EE and relief of heartburn: 30 mg QD for 4 weeks. Note: If a dose larger than 30 mg per day is required, the patient should be referred to the 60 mg capsules. Adults • GERD: 24.65 mg or 49.3 mg QD for 4 to 8 weeks. • Risk Reduction of NSAID-associated gastric ulcer: 24.65 mg or 49.3 mg QD for up to 8 weeks. • Risk Reduction of NSAID-associated gastric ulcer: 24.65 mg or 49.3 mg QD for up to 8 weeks. • Pathological hypersecretory conditions: 49.3 mg BID. Note: 24.65 mg dose is not possible. Protonix® (pantoprazole sodium delayed-release tablets, generic) Protonix® (pantoprazole sodium delayed-release tablets) • Ea ssociated with GERD: 20 mg QD for up to 8 weeks. • Pathological hypersecretory conditions: 40 mg BID. Pathological hypersecretory conditions: 40 mg BID. Protonix® (pantoprazole sodium delayed-release or and the 24.65 mg dose is not possible. Protonix® (pantoprazole sodium delayed-release or and the 24.65 mg dose is not possible. • Ea ssociated with GERD: 20 mg QD for up to 8 weeks. • Alults • Ea ssociated with GERD: 20 mg QD for up to 8 weeks. • Alults • Ea ssociated with GERD: 20 mg QD for up to 8 weeks. • Alults • Ea ssociated with GERD: 20 mg QD for up t				
Aciphex® Sprinkle™ (rabeprazole sodium delayed-release capsules generic) Patients 1 to 11 years of age • Weight < 15 kg: 5 mg QD for up to 12 weeks. If an inadequate response, may increase to 10 mg QD. • Weight < 15 kg: 5 mg QD for up to 12 weeks. Note: If a larger dose is required, the patient should be referred to the 20 mg tablet. Patients ≥ 12 years of age • Healing of EE: 60 mg QD for up to 8 weeks. • Maintenance of healed EE and relief of heartburn: 30 mg QD for 4 to 6 months. • Symptomatic non-erosive GERD: 30 mg QD for 4 weeks. Note: If a dose larger than 30 mg per day is required, the patient should be referred to the 60 mg capsules. Esomeprazole strontium delayed-release capsules (no trade name) Adults • GERD: 24.65 mg or 49.3 mg QD for 4 to 8 weeks. • Risk Reduction of NSAID-associated gastric ulcer: 24.65 mg or 49.3 mg QD for up to 6 months. • H. pylori eradication: 49.3 mg QD for 10 days, in combination with other agents • Patients ≥ 12 years of age (pantoprazole sodium delayed-release tablets, generic) Protonix® (pantoprazole sodium delayed-release tablets, generic) Protonix® (pantoprazole sodium delayed-release oral patients ≥ 5 years to 17 years of age • EE associated with GERD: ○ ≥ 15 kg to < 40 kg: 20 mg QD for up to 8 weeks. ○ ≥ 40 kg: 40 mg QD for up to 8 weeks. ○ ≥ 40 kg: 40 mg QD for up to 8 weeks. ○ ≥ 40 kg: 40 mg QD for up to 8 weeks. ○ ≥ 40 kg: 40 mg QD for up to 8 weeks. ○ ≥ 40 kg: 40 mg QD for up to 8 weeks. ○ ≥ 40 kg: 40 mg QD for up to 8 weeks. ○ ≥ 15 kg to < 40 kg: 20 mg QD for up to 8 weeks. ○ ≥ 40 kg: 40 mg QD for up to 8 weeks. ○ ≥ 15 kg to < 40 kg: 20 mg QD for up to 8 weeks. ○ ≥ 40 kg: 40 mg QD for up to 8 weeks. ○ ≥ 40 kg: 40 mg QD for up to 8 weeks. ○ ≥ 40 kg: 40 mg QD for up to 8 weeks. ○ ≥ 40 kg: 40 mg QD for up to 8 weeks. ○ ≥ 40 kg: 40 mg QD for up to 8 weeks. ○ ≥ 40 kg: 40 mg QD for up to 8 weeks. ○ ≥ 15 kg to < 40 kg: 20 mg QD for up to 8 weeks. ○ ≥ 40 kg: 40 mg QD for up to 8 weeks. ○ ≥ 40 kg: 40 mg QD for up to 8 weeks. ○ ≥ 40 kg:				
• Weight < 15 kg: 5 mg QD for up to 12 weeks. If an inadequate response, may increase to 10 mg QD. • Weight ≥ 15 kg: 10 mg QD for up to 12 weeks. Note: If a larger dose is required, the patient should be referred to the 20 mg tablet. Dexilant® (dexlansoprazole delayed-release capsules, speneric) Dexilant® (dexlansoprazole delayed-release capsules, speneric) Dexilant® (dexlansoprazole delayed-release capsules, speneric) Dexilant® (dexlansoprazole delayed-release capsules, some in the patient should be referred to the 20 mg tablet. Patients ≥ 12 years of age Patients ≥ 12 years of age OD for up to 8 weeks. • Maintenance of healed EE and relief of heartburn: 30 mg QD for 4 to 6 months. • Symptomatic non-erosive GERD: 30 mg QD for 4 weeks. Note: If a dose larger than 30 mg per day is required, the patient should be referred to the 60 mg capsules. Adults • GERD: 24.65 mg or 49.3 mg QD for 4 to 8 weeks. • Risk Reduction of NSAID-associated gastric ulcer: 24.65 mg or 49.3 mg QD for up to 6 months. • H. pylori eradication: 49.3 mg QD for 10 days, in combination with other agents • Pathological hypersecretory conditions: 49.3 mg BID. Note: 24.65 mg capsules are no longer available, so dosing at the 24.65 mg dose is not possible. Protonix® (pantoprazole sodium delayed-release tablets, generic) Protonix® (pantoprazole sodium delayed-release or albets, generic) Protonix® (pantoprazole sodium delayed-release or albets) • EE associated with GERD: o ≥ 15 kg to < 40 kg: 20 mg QD for up to 8 weeks. • 20 mg delayed-release tablets • 20 mg delayed-release tablets • 20 mg delayed-release tablets • 40 mg pack	Aciphex [®]		5 mg delayed-	30 capsules
inadequate response, may increase to 10 mg QD. • Weight ≥ 15 kg: 10 mg QD for up to 12 weeks. Note: If a larger dose is required, the patient should be referred to the 20 mg tablet.	Sprinkle™			1
• Weight ≥ 15 kg: 10 mg QD for up to 12 weeks. Note: If a larger dose is required, the patient should be referred to the 20 mg tablet. Patients ≥ 12 years of age • Healing of EE: 60 mg QD for up to 8 weeks. • Maintenance of healed EE and relief of heartburn: 30 mg QD for 4 to 6 months. • Maintenance of healed EE and relief of heartburn: 30 mg QD for 4 to 6 months. • Symptomatic non-erosive GERD: 30 mg QD for 4 weeks. Note: If a dose larger than 30 mg per day is required, the patient should be referred to the 60 mg capsules. Esomeprazole strontium delayed-release capsules (no trade name) • Protonix® (pantoprazole sodium delayed-release tablets, generic) Protonix® (pantoprazole sodium delayed-release oral suspension, Protonix® (pantoprazole sodium delayed-release oral suspension,				30 capsules
Note: If a larger dose is required, the patient should be referred to the 20 mg tablet.				1
Patients ≥ 12 years of age	release capsules,			
Patients ≥ 12 years of age	generic)			
**Healing of EE: 60 mg QD for up to 8 weeks. **Maintenance of healed EE and relief of heartburn: 30 mg QD for 4 to 6 months. **Symptomatic non-erosive GERD: 30 mg QD for 4 weeks. **Note: If a dose larger than 30 mg per day is required, the patient should be referred to the 60 mg capsules. **Comparison of Post of the Symptomatic non-erosive GERD: 30 mg QD for 4 weeks. **Note: If a dose larger than 30 mg per day is required, the patient should be referred to the 60 mg capsules. **Adults of GERD: 24.65 mg or 49.3 mg QD for 4 to 8 weeks. **Risk Reduction of NSAID-associated gastric ulcer: 24.65 mg or 49.3 mg QD for up to 6 months. **Habiting of EE: 60 mg QD for 4 weeks. **OGERD: 24.65 mg or 49.3 mg QD for 4 to 8 weeks. **Risk Reduction of NSAID-associated gastric ulcer: 24.65 mg or 49.3 mg QD for up to 6 months. **Pathological hypersecretory conditions: 49.3 mg BID. **Note: 24.65 mg capsules are no longer available, so dosing at the 24.65 mg dose is not possible. **Adults of EE associated with GERD: 20 mg QD for up to 8 weeks. **Pathological hypersecretory conditions: 40 mg BID. **Pathological hypersecretory condit			30 mg delayed-	30 capsules
 Maintenance of healed EE and relief of heartburn: 30 mg QD for 4 to 6 months. Symptomatic non-erosive GERD: 30 mg QD for 4 weeks. Note: If a dose larger than 30 mg per day is required, the patient should be referred to the 60 mg capsules. Esomeprazole strontium delayed-release capsules (no trade name) GERD: 24.65 mg or 49.3 mg QD for 4 to 8 weeks. Risk Reduction of NSAID-associated gastric ulcer: 24.65 mg or 49.3 mg QD for up to 6 months. H. pylori eradication: 49.3 mg QD for 10 days, in combination with other agents Pathological hypersecretory conditions: 49.3 mg BID. Note: 24.65 mg dose is not possible. Protonix® (pantoprazole sodium delayed-release tablets, generic) Protonix® (pantoprazole sodium delayed-release oral suspension, Waintenance healing of EE: 40 mg QD. Pathological hypersecretory conditions: 40 mg BID. Patients ≥ 5 years to 17 years of age EE associated with GERD: 20 mg QD for up to 8 weeks. O≥ 215 kg to < 40 kg: 20 mg QD for up to 8 weeks. O≥ 40 kg: 40 mg QD for up to 8 weeks. O≥ 40 kg: 40 mg QD for up to 8 weeks. 				o o conposition
QD for 4 to 6 months. • Symptomatic non-erosive GERD: 30 mg QD for 4 weeks. Note: If a dose larger than 30 mg per day is required, the patient should be referred to the 60 mg capsules. Adults • GERD: 24.65 mg or 49.3 mg QD for 4 to 8 weeks. • Risk Reduction of NSAID-associated gastric ulcer: 24.65 mg or 49.3 mg QD for 10 days, in combination with other agents • Pathological hypersecretory conditions: 49.3 mg BID. Note: 24.65 mg capsules are no longer available, so dosing at the 24.65 mg dose is not possible. Protonix® (pantoprazole sodium delayed-release tablets, generic) Protonix® (pantoprazole sodium delayed-release oral suspension,				
• Symptomatic non-erosive GERD: 30 mg QD for 4 weeks. Note: If a dose larger than 30 mg per day is required, the patient should be referred to the 60 mg capsules. Adults			·	No quantity limit.
Note: If a dose larger than 30 mg per day is required, the patient should be referred to the 60 mg capsules. Adults GERD: 24.65 mg or 49.3 mg QD for 4 to 8 weeks.	1 ,0 ,			1
Protonix® (pantoprazole sodium delayed-release tablets, generic) Protonix® (pantoprazole sodium delayed-release oral suspension, Protonix® (pantoprazole sodium delayed-release oral suspension, Patients should be referred to the 60 mg capsules. Patients should be referred to the 60 mg capsules. Patients should be referred to the 60 mg capsules. Patients should be referred to the 60 mg capsules. Patients should be referred to the 60 mg capsules. Patients should be referred to the 60 mg capsules. Patients should be referred to the 60 mg capsules. Patients should be referred to the 60 mg capsules. Patients should be referred to the 60 mg capsules. Patients should be referred to the 60 mg capsules. Patients should be referred to the 60 mg capsules. Patients should be referred to the 60 mg capsules. Patients should be referred to the 60 mg capsules. Patients should be referred to the 60 mg capsules. Patients should be referred to the 60 mg capsules. Patients should be referred to the 60 mg capsules. Patients should be referred to the 60 mg capsules. Patients should be referred to the 60 mg capsules. Patients should be referred to the 60 mg able to 8 weeks. Patients capsules release capsules Patients should be referred to the 8 weeks. Patients capsules are no longer available, so dosing at the 24.65 mg dose is not possible. Pathological hypersecretory conditions: 49.3 mg BID. Pathological hypersecretory conditions: 49.3 mg BID. Pathological hypersecretory conditions: 40 mg BID. Pathological h				
Adults • GERD: 24.65 mg or 49.3 mg QD for 4 to 8 weeks. • Risk Reduction of NSAID-associated gastric ulcer: 24.65 mg or 49.3 mg QD for up to 6 months. • H. pylori eradication: 49.3 mg QD for 10 days, in combination with other agents • Pathological hypersecretory conditions: 49.3 mg BID. Note: 24.65 mg capsules are no longer available, so dosing at the 24.65 mg dose is not possible. Protonix® (pantoprazole sodium delayed-release tablets, generic) Protonix® (pantoprazole sodium delayed-release oral suspension, Protonix® (pantoprazole sodium delayed-release oral suspension,				
Strontium delayed-release capsules (no trade name) **GERD: 24.65 mg or 49.3 mg QD for 4 to 8 weeks. **Risk Reduction of NSAID-associated gastric ulcer: 24.65 mg or 49.3 mg QD for up to 6 months. **H. pylori eradication: 49.3 mg QD for 10 days, in combination with other agents **Pathological hypersecretory conditions: 49.3 mg BID. Note: 24.65 mg capsules are no longer available, so dosing at the 24.65 mg dose is not possible. **Protonix® (pantoprazole sodium delayed-release tablets, generic) **Protonix®* (pantoprazole sodium delayed-release oral suspension, **Protonix®* (pantoprazole sodium delayed-release oral suspension, **Protonix®* (pantoprazole sodium delayed-release oral suspension, **Protonix®* (pantoprazole sodium delayed-release oral suspension) **Protonix®* (pantoprazole sodium delayed-release oral suspension) **Protonix®* (pantoprazole sodium delayed-release oral suspension)	Esomenrazole		49.3 mg delayed-	No quantity limit
* Risk Reduction of NSAID-associated gastric ulcer: 24.65 mg or 49.3 mg QD for up to 6 months. * H. pylori eradication: 49.3 mg QD for 10 days, in combination with other agents * Pathological hypersecretory conditions: 49.3 mg BID. Note: 24.65 mg capsules are no longer available, so dosing at the 24.65 mg dose is not possible. Protonix® (pantoprazole sodium delayed-release tablets, generic) Protonix® (pantoprazole sodium delayed-release oral suspension, * Risk Reduction of NSAID-associated gastric ulcer: 24.65 mg or 49.3 mg QD for 10 days, in combination with other agents * Pathological hypersecretory conditions: 49.3 mg BID. * Adults * EE associated with GERD: 20 mg QD for up to 8 weeks. * Maintenance healing of EE: 40 mg QD. * Pathological hypersecretory conditions: 40 mg BID. *				110 quantity innit.
or 49.3 mg QD for up to 6 months. • H. pylori eradication: 49.3 mg QD for 10 days, in combination with other agents • Pathological hypersecretory conditions: 49.3 mg BID. Note: 24.65 mg capsules are no longer available, so dosing at the 24.65 mg dose is not possible. Protonix® (pantoprazole sodium delayed-release tablets, generic) Protonix® (pantoprazole sodium delayed-release oral suspension, Protonix® (pantoprazole sodium delayed-release oral suspension, Adults 20 mg delayed-release tablets			Toronso supsures	
 H. pylori eradication: 49.3 mg QD for 10 days, in combination with other agents Pathological hypersecretory conditions: 49.3 mg BID. Note: 24.65 mg capsules are no longer available, so dosing at the 24.65 mg dose is not possible. Protonix® (pantoprazole sodium delayed-release tablets, generic) Protonix® (pantoprazole sodium delayed-release sodium delayed-release oral suspension, Eassociated with GERD: 20 mg QD for up to 8 weeks. Maintenance healing of EE: 40 mg QD. Pathological hypersecretory conditions: 40 mg BID. Patients ≥ 5 years to 17 years of age EE associated with GERD: ≥ 15 kg to < 40 kg: 20 mg QD for up to 8 weeks. ⇒ 215 kg to < 40 kg: 20 mg QD for up to 8 weeks. ⇒ 240 kg: 40 mg QD for up to 8 weeks. ⇒ 240 kg: 40 mg QD for up to 8 weeks. Wo quantity limit. odelayed-release granules for oral suspension 				
combination with other agents Pathological hypersecretory conditions: 49.3 mg BID. Note: 24.65 mg capsules are no longer available, so dosing at the 24.65 mg dose is not possible. Protonix® (pantoprazole sodium delayed-release tablets, generic) Protonix® (pantoprazole sodium delayed-release oral suspension, Protonix® (pantoprazole sodium delayed-release oral suspension, Combination with other agents 49.3 mg BID. Note: 24.65 mg capsules are no longer available, so dosing at the 24.65 mg dose is not possible. 20 mg delayed-release tablets 40 mg BID. Pathological hypersecretory conditions: 40 mg BID. Patients ≥ 5 years to 17 years of age 40 mg delayed-release tablets 40 mg packets of delayed-release granules for oral suspension 50 mg packets of delayed-release granules for oral suspension 50 mg packets of delayed-release granules for oral suspension 50 mg packets of delayed-release granules for oral suspension 50 mg packets of delayed-release granules for oral suspension 50 mg packets of delayed-release granules for oral suspension 50 mg packets of delayed-release granules for oral suspension 50 mg packets of delayed-release granules for oral suspension 50 mg packets of delayed-release granules for oral suspension 50 mg packets of delayed-release granules for oral suspension 50 mg packets of delayed-release granules for oral suspension 50 mg packets of delayed-release granules for oral suspension 50 mg packets of delayed-release granules for oral suspension 50 mg packets of delayed-release granules for oral suspension 50 mg packets of delayed-release granules for oral suspension 50 mg packets of delayed-release granules for oral suspension 50 mg packets of delayed-release granules for oral suspension 50 mg packets of delayed-release granules for oral suspension 50 mg packets of delayed-release granules for oral 50 mg packets of delayed-release granules for oral 50 mg packets of delayed-release granules for oral 50 mg packets of delayed-rele	(
 Pathological hypersecretory conditions: 49.3 mg BID. Note: 24.65 mg capsules are no longer available, so dosing at the 24.65 mg dose is not possible. Protonix® (pantoprazole sodium delayed-release tablets, generic) Protonix® (pantoprazole sodium delayed-release oral suspension, Protonix® (a layed-release are no longer available, so dosing at the 24.65 mg dose is not possible. 20 mg delayed-release release tablets 30 tablets 20 mg delayed-release release tablets 40 mg delayed-release tablets - Pathological hypersecretory conditions: 40 mg BID. - Pathological hypersecretory conditions: 40 m				
Note: 24.65 mg capsules are no longer available, so dosing at the 24.65 mg dose is not possible. Protonix® (pantoprazole sodium delayed-release tablets, generic) Protonix® (pantoprazole sodium delayed-release oral suspension, Note: 24.65 mg capsules are no longer available, so dosing at the 24.65 mg dose is not possible. 20 mg delayed-release tablets 40 mg delayed-release granules for oral suspension				
the 24.65 mg dose is not possible. Protonix® (pantoprazole sodium delayed-release tablets, generic) Protonix® (pantoprazole sodium delayed-release oral suspension, The 24.65 mg dose is not possible. Adults (a EE associated with GERD: 20 mg QD for up to 8 weeks. The second of the 24.65 mg dose is not possible. 20 mg delayed release tablets release tablets 20 mg delayed release tablets 40 mg packets of delayed-release granules for oral suspension				
Protonix® (pantoprazole sodium delayed-release tablets, generic) Protonix® (pantoprazole sodium delayed-release tablets, generic) Protonix® (pantoprazole sodium delayed-release oral suspension, Patients ≥ 5 years to 17 years of age (pantoprazole sodium delayed-release oral suspension, Adults • EE associated with GERD: 20 mg QD for up to 8 weeks. • Maintenance healing of EE: 40 mg QD. • Pathological hypersecretory conditions: 40 mg BID. Patients ≥ 5 years to 17 years of age (pantoprazole sodium delayed-release oral suspension) • EE associated with GERD: (pantoprazole sodium delayed-release granules for oral suspension) 20 mg delayed-release tablets 40 mg packets of delayed-release granules for oral suspension				
(pantoprazole sodium delayed-release tablets, generic) Protonix® (pantoprazole sodium delayed-release oral suspension, EE associated with GERD: 20 mg QD for up to 8 weeks. • Maintenance healing of EE: 40 mg QD. • Pathological hypersecretory conditions: 40 mg BID. Patients ≥ 5 years to 17 years of age • EE associated with GERD: • Eassociated with GERD: • Eassociated with GERD: • EE associated with GERD: • EE associated with GERD: • EE associated with GERD: • Eassociated with GERD: • Ea	Protoniy®		20 mg dalayad	30 tablets
 Maintenance healing of EE: 40 mg QD. Pathological hypersecretory conditions: 40 mg BID. Patients ≥ 5 years to 17 years of age EE associated with GERD: ○ ≥ 15 kg to < 40 kg: 20 mg QD for up to 8 weeks. ○ ≥ 40 kg: 40 mg QD for up to 8 weeks. ○ ≥ 40 kg: 40 mg QD for up to 8 weeks. In the second of the second of the suspension of the sus				30 tablets
Protonix® (pantoprazole sodium delayed-release oral suspension, Pathological hypersecretory conditions: 40 mg BID. Patients ≥ 5 years to 17 years of age • EE associated with GERD: ○ ≥ 15 kg to < 40 kg: 20 mg QD for up to 8 weeks. ○ ≥ 40 kg: 40 mg QD for up to 8 weeks. 40 mg delayed-release tablets 40 mg delayed-release tablets 40 mg packets of delayed-release granules for oral suspension	* *		Totale tablets	
generic) Protonix® (pantoprazole sodium delayed-release oral suspension, Patients \geq 5 years to 17 years of age • EE associated with GERD: ○ \geq 15 kg to < 40 kg: 20 mg QD for up to 8 weeks. ○ \geq 40 kg: 40 mg QD for up to 8 weeks. 40 mg packets of delayed-release granules for oral suspension	•		40 11 1	AT
Protonix® (pantoprazole sodium delayed-release oral suspension, • EE associated with GERD: ○ ≥ 15 kg to < 40 kg: 20 mg QD for up to 8 weeks. ○ ≥ 40 kg: 40 mg QD for up to 8 weeks. 40 mg packets of delayed-release granules for oral suspension	*			No quantity limit.
Protonix® $\circ \geq 15 \text{ kg to} < 40 \text{ kg}$: 20 mg QD for up to 8 weeks. $\circ \geq 40 \text{ kg}$: 40 mg QD for up to 8 weeks. $\circ \geq 40 \text{ kg}$: 40 mg QD for up to 8 weeks. $\circ \geq 40 \text{ kg}$: 40 mg QD for up to 8 weeks. $\circ \geq 40 \text{ kg}$: 40 mg QD for up to 8 weeks. $\circ \geq 40 \text{ kg}$: 40 mg packets of delayed-release granules for oral suspension	Scheric)		release tablets	
(pantoprazole sodium delayed-release oral suspension, (pantoprazole sodium delayed-release oral suspension, (pantoprazole o ≥ 40 kg: 40 mg QD for up to 8 weeks.	Protonix®			
sodium delayed- release oral suspension, delayed-release granules for oral suspension			40 mg m = -1t- C	No quantita liari
release oral granules for oral suspension suspension		$\circ \ge 40 \text{ kg}$: 40 mg QD for up to 8 weeks.		ino quantity limit.
suspension, suspension	•			
			_	
	generic)		suspension	

Drug Quantity Limits (continued)

Brand (generic)	FDA-Approved Dosing	Availability	Maximum
			Quantity per Rx
Nexium [®]	Adults	20 mg delayed-	30 capsules
(esomeprazole	• Healing of EE: 20 mg to 40 mg QD for 4 to 8 weeks.	release capsules	
magnesium	• Maintenance of healing of EE: 20 mg QD (controlled		
delayed-release	studies do not extend beyond 6 months)	40 mg delayed-	No quantity limit.
capsules, generic)	• Treatment of symptomatic GERD: 20 mg QD (for 4 weeks,	release capsules	
	may consider an additional 4 weeks if symptoms do not		
Nexium [®]	resolve completely).	2.5 mg delayed-	30 packets
(esomeprazole	• Risk reduction of NSAID-associated gastric ulcer: 20 mg to	release granules	
magnesium	40 mg QD (data does not extend beyond 6 months).		
delayed-release	H. pylori eradication to reduce the risk of duodenal ulcer	5 mg delayed-	30 packets
granules for oral	recurrence (triple therapy): 40 mg QD in combination with	release granules	
suspension, generic to 10 mg,	other agents (for 10 days). Some studies have found that 20	10 mg delayed-	30 packets
20 mg, and 40 mg	mg BID in combination with other agents (for 7 to 10 days).	release granules	
packets only)	Pathological hypersecretory conditions including Zollinger-	20 mg delayed-	30 packets
packets omy)	Ellison syndrome: doses up to 240 mg/day have been	release granules	
	administered as long as clinically indicated.	40 mg delayed-	No quantity limit.
	Patient's 12 to 17 years of age	release granules	
	• Healing of EE (≥ 1 year): 20 mg to 40 mg QD for 4 to 8		
	weeks.		
	• Treatment of symptomatic GERD: 20 mg QD for 4 weeks.		
	Patient's 1 year to 11 years		
	Healing of EE/EE due to acid-mediated GERD:		
	0 < 20 kg: 10 mg QD		
	\circ ≥ 20 kg: 10 mg or 20 mg QD for 8 weeks.		
	• Treatment of symptomatic GERD: 10 mg QD for 8 weeks.		
	Patient's 1 month to < 1 year		
	• Treatment of EE due to acid-mediated GERD:		
	○ 3 to 5 kg: 2.5 mg QD ○ > 5 kg to 7.5 kg: 5 mg QD		
	0 > 3 kg to 7.3 kg. 3 mg QD 0 > 7.5 kg to 12 kg: 10 mg QD		
Prevacid®	Adults	15 mg delayed-	30 tablets
(lansoprazole	• Duodenal ulcers: 15 mg QD for 4 weeks as short-term	release capsules	30 tablets
delayed-release	treatment and ongoing for maintenance.	rerease capsures	
capsules, generic)	Eradication of H. pylori to reduce the risk of duodenal ulcer	30 mg delayed-	No quantity limit.
	recurrence: 30 mg BID for 10 or 14 days as triple therapy	release capsules	110 quantity innit.
Prevacid SoluTab®	in combination with other agents or 30 mg TID for 14 days	rerease empsures	
(lansoprazole	as dual therapy in combination with another agent.	15 mg delayed-	30 tablets
delayed-release	Benign gastric ulcer: 30 mg QD for 8 weeks.	release ODT	30 1401013
ODT, generic)	• Risk reduction of NSAID-associated gastric ulcer: 15 mg	Teledisc OD I	
	QD for up to 12 weeks.	30 mg delayed-	No quantity limit.
	Healing of NSAID-associated gastric ulcer: 30 mg QD for	release ODT	The qualities inner
	8 weeks.	1010450 02 1	
	• Short-term treatment of symptomatic GERD: 15 mg QD for		
	up to 8 weeks.		
	• <i>Short-term treatment of EE</i> : 30 mg QD for up to 8 weeks.		
	• Maintenance healing of EE: 15 mg QD.		
	Pathological hypersecretory conditions including Zollinger-		
	Ellison syndrome: 60 mg QD.		
	Patient's 1 to 11 years of age		
	Symptomatic GERD and treatment of EE:		
	• $\leq 30 \text{ kg}$: 15 mg QD for up to 12 weeks.		
	• $> 30 \text{ kg}$: 30 mg QD for up to 12 weeks.		
	Patient's 12 to 17 years of age		
	• Non-erosive GERD: 15 mg QD for up to 8 weeks.		
	• EE associated with symptomatic GERD: 30 mg QD for up		
	to 8 weeks.		1

Drug Quantity Limits (continued)

Brand (generic)	FDA-Approved Dosing	Availability	Maximum Quantity per Rx
omeprazole	Adults	10 mg delayed-	30 capsules
delayed-release capsules	Duodenal ulcers: 20 mg QD for 4 weeks; some patients may require an additional 4 weeks.	release capsules	30 cupsules
(generic only) Prilosec®	• Eradication of H. pylori to reduce the risk of duodenal ulcer recurrence: 20 mg BID for 10 days as triple therapy in combination with other agents or 40 mg QD for 14 days	20 mg delayed- release capsules	30 capsules
(omeprazole magnesium delayed-release	 as dual therapy in combination with another agent. Active benign gastric ulcer: 40 mg QD for 4 to 8 weeks. Symptomatic GERD: 20 mg QD for up to 4 weeks. 	40 mg delayed- release capsules	No quantity limit
oral suspension)	 EE due to acid-mediated GERD: 20 mg QD for 4 to 8 weeks. Maintenance healing of EE due to acid-mediated GERD: 	2.5 mg delayed- release oral suspension packets	60 packets
	20 mg QD.Pathological hypersecretory conditions: 60 mg QD as long as clinically indicated.	10 mg delayed- release oral suspension packets	30 packets
	Patient's 1 to 16 years of age Symptomatic GERD, treatment of EE due to acid-mediated GERD, and maintenance healing of EE due to acid-mediated		
	GERD:: \circ 5 kg to < 10 kg: 5 mg QD for 4 to 8 weeks (for up to 12		
	months for maintenance). 0.10 kg to < 20 kg: 10 mg QD for 4 to 8 weeks. $0.00 \ge 10 \text{ kg}$: 20 mg QD for 4 to 8 weeks.		
	Patient's 1 month to $<$ 1 year of age		
	Treatment of EE due to acid-mediated GERD:		
	\circ 3 kg to $<$ 5 kg: 2.5 mg QD for up to 6 weeks.		
	○ $5 \text{ kg to} < 10 \text{ kg}$: 10 mg QD for up to 6 weeks. ○ $\geq 10 \text{ kg}$: 10 mg QD for up to 6 weeks.		
Zegerid®	Adults	20 mg/1,100 mg	30 capsules
(omeprazole and sodium	Active duodenal ulcer: 20 mg QD for 4 weeks; some patients may require an additional 4 weeks.	capsules	1
bicarbonate capsules, generic)	 Active benign gastric ulcer: 40 mg QD for 4 to 8 weeks. Symptomatic GERD: 20 mg QD for up to 4 weeks. EE due to acid-mediated GERD: 20 mg QD for 4 to 8 	40 mg/1,100 mg capsules	No quantity limit.
Zegerid (omeprazole and	weeks. • Maintenance healing of EE due to acid-mediated GERD:	20 mg/1,680 mg packets of powder	30 packets
sodium	20 mg QD.	for oral suspension	
bicarbonate for oral suspension, generic)	• Reduction of risk of upper GI bleeding in critically ill patients (40 mg oral suspension only): 40 mg initially, followed by 40 mg 6 to 8 hours later and 40 mg QD thereafter for 14 days.	40 mg/1,680 mg packets of powder for oral suspension	No quantity limit.

CRITERIA

Aciphex Sprinkle 5 mg delayed-release capsules

1. If the patient is ≤ 11 years of age and according to the prescriber the patient's symptoms are not controlled by once daily dosing, approve 60 capsules per dispensing.

Rabeprazole 10 mg delayed release capsules (Aciphex Sprinkle, branded generic)

- 1. If the patient is ≤ 11 years of age and according to the prescriber the patient's symptoms are not controlled by once daily dosing, approve 60 capsules per dispensing.
- 2. If the patient is unable to swallow a 20 mg rabeprazole delayed-release tablet (Aciphex, generic), approve the requested quantity per dispensing, not to exceed 180 capsules.

Dexlansoprazole 30 mg delayed-release capsules (Dexilant, branded generic)

Proton Pump Inhibitors DQM Policy – Per Rx Page 7

- 1. If according to the prescriber the patient's symptoms are not controlled by once daily dosing, approve 60 capsules per dispensing.
 - Note: A quantity of 60 capsules per dispensing allows for 30 mg twice daily dosing.
- 2. If the patient has laryngopharyngeal reflux, approve 60 capsules per dispensing.

Nexium 2.5 mg packets of delayed-release granules for oral suspension

1. If the patient is < 1 year of age and according to the prescriber the patient's symptoms are not controlled by once daily dosing, approve 60 packets per dispensing.

Note: A quantity of 60 packets allows for 2.5 mg twice daily dosing.

Nexium 5 mg packets of delayed-release granules for oral suspension

1. If the patient is ≤ 11 years of age and according to the prescriber the patient's symptoms are not controlled by once daily dosing, approve 60 packets per dispensing.

Note: A quantity of 60 packets allows for 5 mg twice daily dosing.

Esomeprazole magnesium 10 mg packets of delayed-release granules for oral suspension (Nexium, generic)

1. If the patient is \leq 17 years of age and according to the prescriber the patient's symptoms are not controlled by once daily dosing, approve 60 packets per dispensing.

Note: A quantity of 60 packets allows for 10 mg twice daily dosing.

Esomeprazole magnesium 20 mg packets of delayed-release granules for oral suspension (Nexium, generic)

- 1. If according to the prescriber the patient's symptoms are not controlled by once daily dosing, approve 60 packets per dispensing.
 - Note: A quantity of 60 packets allows for 20 mg twice daily dosing.
- 2. If the patient has laryngopharyngeal reflux, approve 60 packets per dispensing.

Esomeprazole magnesium 20 mg delayed-release capsules (Nexium, generic)

- 1. If according to the prescriber the patient's symptoms are not controlled by once daily dosing, approve 60 capsules per dispensing.
 - Note: A quantity of 60 packets allows for 20 mg twice daily dosing.
- 2. If the patient has laryngopharyngeal reflux, approve 60 capsules per dispensing.

Lansoprazole 15 mg delayed-release capsules (Prevacid, generic)

- 1. If according to the prescriber the patient's symptoms are not controlled by once daily dosing, approve 60 capsules per dispensing.
- 2. If the patient has laryngopharyngeal reflux, approve 60 capsules per dispensing.

Lansoprazole 15 mg delayed-release orally-disintegrating tablets (Prevacid SoluTab, generic)

- 1. If according to the prescriber the patient's symptoms are not controlled by once daily dosing, approve 60 tablets per dispensing.
- 2. If the patient has laryngopharyngeal reflux, approve 60 tablets per dispensing.

Omeprazole 10 mg delayed-release capsules

- 1. If the patient is taking a dose that does not correspond to a commercially-available dosage form (that is, the dose requires multiple same strength tablets be used AND would otherwise require two or more strengths to be used), approve the requested quantity per dispensing, not to exceed 90 capsules.

 Note: For example, if a patient is receiving 30 mg once daily (three capsules per day), a quantity of 90 capsules per day would be approved.
- 2. If the patient is ≤ 16 years of age and according to the prescriber, the patient's symptoms are not controlled by once daily dosing, approve 60 capsules per dispensing.
 - Note: A quantity of 60 capsules allows for 10 mg twice daily dosing.
- 3. If the patient has laryngopharyngeal reflux, approve 60 packets per dispensing.

Omeprazole 20 mg delayed-release capsules

- 1. If the patient has a hypersecretory condition, (e.g., Zollinger-Ellison syndrome, endocrine adenomas, or systemic mastocytosis), approve 90 capsules per dispensing.
 - <u>Note</u>: If a larger dose is required, the patient should be referred to the 40 mg prescription omeprazole capsule.
- 2. If according to the prescriber the patient's symptoms are not controlled by once daily dosing, approve 60 capsules per dispensing.
 - Note: A quantity of 60 capsules allows for 20 mg twice daily dosing.
- 3. If the patient has laryngopharyngeal reflux, approve 60 capsules per dispensing.
- **4.** If the patient has an ulcer caused by *H. pylori*, approve a one-time override of 46 capsules.
- 5. If the patient is taking a dose that does not correspond to a commercially-available dosage form (that is, the dose requires multiple same strength tablets be used AND would otherwise require two or more strengths to be used), approve the requested quantity per dispensing, not to exceed 90 tablets.

 Note: An example of this would be if a patient is receiving 60 mg once daily (three tablets per day), a
 - <u>Note</u>: An example of this would be if a patient is receiving 60 mg once daily (three tablets per day), a quantity override for 90 capsules per dispensing would be approved.

Prilosec 2.5 mg delayed-release oral suspension packets

- If the patient is ≤ 16 years of age and according to the prescriber the patient's symptoms are not controlled by once daily dosing, approve 120 packets per dispensing.
 Note: A quantity of 120 packets allows for 2.5 mg or 5 mg twice daily dosing.
 - <u>Note</u>. A quantity of 120 packets allows for 2.5 mg of 5 mg twice date

Prilosec 10 mg delayed-release oral suspension packets

- 1. If the patient is taking a dose that does not correspond to a commercially-available dosage form (that is, the dose requires multiple same strength tablets be used AND would otherwise require two or more strengths to be used), approve the requested quantity per dispensing, not to exceed 90 packets.
 - <u>Note</u>: An example of this situation is a patient receiving 30 mg once daily (three packets per day), a quantity of 90 packets per dispensing would be approved.
- 2. If the patient is ≤ 16 years of age and according to the prescriber the patient's symptoms are not controlled by once daily dosing, approve 60 packets per dispensing.
 - Note: A quantity of 60 packets allows for 10 mg twice daily dosing.
- 3. If the patient has laryngopharyngeal reflux, approve 60 packets per dispensing.

Pantoprazole 20 mg delayed-release tablets (Protonix, generic)

- 1. If the patient is taking a dose that does not correspond to a commercially-available dosage form (that is, the dose requires multiple same strength tablets be used AND would otherwise require two or more strengths to be used), approve the requested quantity per dispensing, not to exceed 90 tablets.
 - <u>Note</u>: An example of this would be if a patient is receiving 60 mg once daily (three tablets per day), a quantity override for 90 tablets would be approved).
- 2. If the patient is ≥ 5 years of age and according to the prescriber the patient's symptoms are not controlled with once daily dosing, approve 60 tablets per dispensing.
- 3. If the patient has laryngopharyngeal reflux, approve 60 capsules per dispensing.

Omeprazole and sodium bicarbonate 20 mg/1,100 mg capsules (Zegerid, generic)

- **1.** If the patient has a hypersecretory condition (e.g., Zollinger-Ellison syndrome, endocrine adenomas, systemic mastocytosis), approve 90 capsules per dispensing.
 - <u>Note</u>: If a larger dose of omeprazole and sodium bicarbonate (Zegerid, generic) is required, the patient should be referred to the 40 mg/1,100 mg capsules.
- 2. If according to the prescriber the patient's symptoms are not controlled by once daily dosing, approve 60 capsules per dispensing.
 - Note: A quantity of 60 capsules allows for 20 mg/1,100 mg twice daily dosing.
- 3. If the patient has laryngopharyngeal reflux, approve 60 capsules per dispensing.

Omeprazole and sodium bicarbonate 20 mg/1,680 mg oral suspension (Zegerid, generic)

- 1. If the patient has a hypersecretory condition (e.g., Zollinger-Ellison syndrome, endocrine adenomas, systemic mastocytosis), approve 90 packets per dispensing.
 - <u>Note</u>: If a larger dose of omeprazole and sodium bicarbonate (Zegerid, generic) is required, the patient should be referred to the 40 mg/1,680 mg packets.
- 2. If according to the prescriber the patient's symptoms are not controlled by once daily, approve 60 packets per dispensing.
 - Note: A quantity of 60 packets allows for 20 mg/1,680 mg twice daily dosing.
- 3. If the patient has laryngopharyngeal reflux, approve 60 packets per dispensing.

REFERENCES

- 1. Aciphex® delayed-release tablets [prescribing information]. Woodcliff Lake, NJ: Eisai; March 2022.
- 2. Aciphex® Sprinkle™ delayed-release capsules [prescribing information]. Englewood, CO: Aytu; November 2020.
- 3. Dexilant[™] delayed-release capsules [prescribing information]. Deerfield, IL: Takeda; March 2022.
- Nexium[®] delayed-release capsules/delayed-release oral granules [prescribing information]. Wilmington, DE: AstraZeneca; March 2022.
- 5. Esomeprazole strontium delayed-release capsules [prescribing information]. Glasgow, KY: Amneal; March 2022.
- 6. Prevacid®/Prevacid® SoluTab™ delayed-release capsules/delayed-release orally disintegrating tablets [prescribing information]. Deerfield, IL: Takeda; March 2022.
- 7. Prilosec® delayed-release oral granules [prescribing information]. Wilmington, DE: AstraZeneca; March 2022.
- 8. Omeprazole delayed-release capsules [prescribing information]. Bachupally, India: Dr. Reddy's; March 2022.
- 9. Prilosec OTC® Product Monograph. Available at: https://prilosecotc.com/en-us/article/product-monograph. Accessed on July 6, 2022.
- 10. Protonix® delayed-release tablets/delayed-release oral suspension [prescribing information]. Philadelphia, PA: Wyeth; March 2022.
- 11. Zegerid® powder for oral suspension/capsules [prescribing information]. Bridgewater, NJ: Salix; March 2022.
- 12. Katz PO, Dunbar KB, Schnoll-Sussman FH, et al. ACG Clinical Guideline for the Diagnosis and Management of Gastroesophageal Reflux Disease. *Am J Gastroenterol.* 2022;117(1):27-56.
- 13. Johnson DA, Katz PO. Nocturnal gastroesophageal reflux disease: issues, implications, and management strategies. *Rev Gastroenterol Disord.* 2008;8:98-108.
- 14. AGA Institute. American Gastroenterological Association medical position statement on the management of gastroesophageal reflux disease. *Gastroenterol.* 2008;135:1383-1391.

- 15. Koufman JA, Aviv JE, Casiano RR, Shaw GY. Laryngopharyngeal reflux: Position statement of the Committee on Speech, Voice, and Swallowing Disorders of the American Academy of Otolaryngology-Head and Neck Surgery. *Otolaryngol Head Neck Surg.* 2002;127(1):32-35.
- 16. Chey WD, Leontiadis GI, Howden CW, et al. ACG Clinical Guideline: Treatment of *Helicobacter pylori* infection. *Am J Gastroenterol*. 2017;112:212–238.
- 17. Omeclamox-Pak[™] [prescribing information]. Nashville, TN: Cumberland; March 2022.

Type of Revision	Summary of Changes	Review Date
Annual Revision	No criteria changes	05/29/2020
Annual Revision	No criteria changes	05/27/2021
Annual Revision	Approval duration was changed from 3 years to 1 year. Aciphex Sprinkle (rabeprazole sodium delayed-release capsules, generic): Branded	07/06/2022
	generic to the 10 mg delayed-release capsules was added to the policy. Override criteria were updated to approve a quantity of 60 units per dispensing if according to the prescriber, the patients symptoms are not controlled by once daily dosing. Previously, criteria did not indicate "according to the prescriber" and required the symptoms to have not been controlled by 5 mg or 10 mg once daily dosing specifically.	
	Dexilant (dexlansoprazole delayed-release capsules, generic): Branded generics to the 30 mg delayed-release capsules were added to the policy. Override criteria for the 30 mg capsules were updated to approve a quantity of 60 units per dispensing if according to the prescriber, the patients symptoms are not controlled by once daily dosing. Previously, criteria did not indicate "according to the prescriber" and required the symptoms to have not been controlled by 60 mg once daily dosing specifically.	
	Esomeprazole strontium delayed-release capsules: The quantity limit and override criteria for the 25.65 mg delayed-release capsules were removed from the policy (product obsolete).	
	Nexium (esomeprazole magnesium delayed-release capsules, generic): Override criteria for the 20 mg capsules were updated to approve a quantity of 60 units per dispensing if according to the prescriber, the patients symptoms are not controlled by once daily dosing. Previously, criteria did not indicate "according to the prescriber" and required the symptoms to have not been controlled by 40 mg once daily dosing, specifically.	
	Nexium (esomeprazole magnesium delayed-release granules for oral suspension, generic to 10 mg, 20 mg, and 40 mg packets only): Override criteria for the 2.5 mg, 5 mg, 10 mg, and 20 mg packets were updated to approve a quantity of 60 units per dispensing if according to the prescriber, the patient's symptoms are not controlled by once daily dosing. Previously, criteria did not indicate "according to the prescriber" and required the symptoms to have not been controlled by 5 mg, 10 mg, 20 mg, or 40 mg once daily dosing, respectively.	
	Prevacid (lansoprazole delayed-release capsules, generic) and Prevacid SoluTab (lansoprazole delayed-release orally disintegrating tablets, generic): Override criteria for the 15 mg capsules were updated to approve a quantity of 60 units per dispensing if according to the prescriber, the patients symptoms are not controlled by once daily dosing. Previously, criteria did not indicate "according to the prescriber", and required the patient to be ≤ 11 years of age, weigh ≤ 30 kg, and the symptoms to have not been controlled by 15 mg or 30 mg once daily dosing, specifically.	
	Prilosec OTC (omeprazole delayed-release tablets): Quantity limit and override criteria for the 20 mg tablets were removed.	

Proton Pump	Inhibitors	DQM Polic	cy – Per I	Rx
Page 11				

(CONTINUED)