MEDICARE-COVERED DRUG LIST FOR PAAD
SEPTEMBER 2001

Immunosuppressives

Drug name	NDC #
AZATHIOPRINE 50MG TABLETS	00054408425
AZATHIOPRINE 50MG TABLETS	00054808425
AZATHIOPRINE 50MG TABLETS	00378100501
AZATHIOPRINE 50MG TABLETS	00781105901
CYCLOSPORIN 100MG SOFTGEL	00185093330
CYCLOSPORIN 100MG SOFTGEL	50111092043
CYCLOSPORIN 25MG SOFTGEL	50111090943
CYCLOSPORIN 50MG/ML VIAL	55390012210
IMURAN 100MG VIAL	60976059871
IMURAN 100MG VIAL	65483055101
IMURAN 50MG TABLET	52959007900
IMURAN 50MG TABLET	54868092104
IMURAN 50MG TABLET	60976059755
IMURAN 50MG TABLET	65483059010
NEORAL 100MG/ML SOLUN	00078027422
NEORAL 100MG/ML SOLUN	00078027422
PROGRAF 1MG CAPSULE	00469061710
PROGRAF 1MG CAPSULE	00469061771
PROGRAF 5MG CAPSULE	00469065710
PROGRAF 5MG CAPSULE	00469065771
PROGRAF 5MG/ML AMPULE	00469301601
RAPAMUNE 1MG/ML ORAL SOLN	00008103001
RAPAMUNE 1MG/ML ORAL SOLN	00008103002
RAPAMUNE 1MG/ML ORAL SOLN	00008103003
RAPAMUNE 1MG/ML ORAL SOLN	00008103004
RAPAMUNE 1MG/ML ORAL SOLN	00008103005
RAPAMUNE 1MG/ML ORAL SOLN	00008103006
RAPAMUNE 1MG/ML ORAL SOLN	00008103007
RAPAMUNE 1MG/ML ORAL SOLN	00008103008
RAPAMUNE 1MG/ML ORAL SOLN	00008103014
RAPAMUNE 1MG/ML ORAL SOLN	00008103015