Steven W. Schierholt, Esq.
Executive Director

John R. Kasich
Governor

STATE OF OHIO BOARD OF PHARMACY

Controlled Substance Reference Table

Annual Review Completed for All Drug Entries on 9-15-2016
with Semi-Annual Update Completed 3-20-2017

Please be advised that the information contained in this table is compiled solely from reference works recognized and approved by the State Board of Pharmacy pursuant to rule 4729-11-07.

77 South High Street, 17th Floor, Columbus, Ohio 43215

T: (614) 466.4143 | **F:** (614) 752.4836 | **contact@pharmacy.ohio.gov** | **www.pharmacy.ohio.gov**

Controlled Substance Reference Table

Annual Review Completed for All Drug Entries on 3-20-2017

PRODUCT NAME •INGREDIENTS	C.S.A. SCHEDULE	DISTRIBUTOR	STRENGTH	MAXIMUM DAILY DOSE	--BULK AMOUNTS-- BY WGT	BY DOSE
ALFENTANIL						
Alfenta	II	Akorn				
•Alfentanil Hydrochloride *			0.5 mg/ml	17.15 mg	n/a	172 ml injection
Alfentanil	II	various				
•Alfentanil Hydrochloride *			0.5 mg/ml	17.15 mg	n/a	172 ml injection
ALPRAZOLAM						
Alprazolam	IV	various				
•Alprazolam *			n/a	n/a	120 Gm powder	n/a
			0.5 mg	10 mg	120 Gm	600 extended release tablets
			1 mg	10 mg	120 Gm	300 extended release tablets
			2 mg	10 mg	120 Gm	150 extended release tablets
			3 mg	10 mg	120 Gm	100 extended release tablets
			0.25 mg	10 mg	120 Gm	1200 tablets
			0.5 mg	10 mg	120 Gm	600 tablets
			1 mg	10 mg	120 Gm	300 tablets
			2 mg	10 mg	120 Gm	150 tablets
			0.25 mg	10 mg	120 Gm	200 orally disintegrating tablet
			0.5 mg	10 mg	120 Gm	600 orally disintegrating tablets
			1 mg	10 mg	120 Gm	300 orally disintegrating tablets
			2 mg	10 mg	120 Gm	150 orally disintegrating tablets
			0.1 mg/ml	10 mg	n/a	3000 ml oral solution
			1.0 mg/ml	10 mg	n/a	300 ml oral solution
Niravam	IV	Azur				
•Alprazolam *			0.25 mg	10 mg	120 Gm	1200 tablets
			0.5 mg	10 mg	120 Gm	600 tablets
			1 mg	10 mg	120 Gm	300 tablets
			2 mg	10 mg	120 Gm	150 tablets
Xanax	IV	Pfizer				
•Alprazolam *			0.25 mg	10 mg	120 Gm	1200 tablets
			0.5 mg	10 mg	120 Gm	600 tablets

Please be advised that the information contained in this table is compiled solely from reference works recognized and approved by the State Board of Pharmacy pursuant to rule 4729-11-07.

Controlled Substance Reference Table

PRODUCT NAME •INGREDIENTS	C.S.A. SCHEDULE	DISTRIBUTOR	STRENGTH	MAXIMUM DAILY DOSE	--BULK AMOUNTS-- BY WGT	BY DOSE
			1 mg	10 mg	120 Gm	300 tablets
			2 mg	10 mg	120 Gm	150 tablets
Xanax XR	IV	Pfizer				
•Alprazolam *			0.5 mg	10 mg	120 Gm	600 extended release tablets
			1 mg	10 mg	120 Gm	300 extended release tablets
			2 mg	10 mg	120 Gm	150 extended release tablets
			3 mg	10 mg	120 Gm	100 extended release tablets
AMOBARBITAL						
Amobarbital	II	various				
•Amobarbital Sodium *			500 mg/ml	1000 mg	n/a	60 vials
Amytal	II	Ranbaxy				
•Amobarbital Sodium *			500 mg/ml	1000 mg	n/a	60 vials
Tuinal	II	Ranbaxy				
•Amobarbital Sodium 50 mg *		1				
•Secobarbital Sodium 50 mg *			100 mg	200 mg	120 Gm	60 capsules
AMPHETAMINE						
Adderall	II	Shire				
•Amphetamine Aspartate *			5 mg	60 mg	120 Gm	360 tablets
•Amphetamine Sulfate *			7.5 mg	60 mg	120 Gm	240 tablets
•Dextroamphetamine Saccharate *			10 mg	60 mg	120 Gm	180 tablets
•Dextroamphetamine Sulfate *			12.5 mg	60 mg	120 Gm	144 tablets
			15 mg	60 mg	120 Gm	120 tablets
			20 mg	60 mg	120 Gm	90 tablets
			30 mg	60 mg	120 Gm	60 tablets
Adderall XR	II	Shire				
•Amphetamine Aspartate *			5 mg	60 mg	120 Gm	360 extended release capsules
•Amphetamine Sulfate *			10 mg	60 mg	120 Gm	180 extended release capsules
•Dextroamphetamine Saccharate *			15 mg	60 mg	120 Gm	120 extended release capsules
•Dextroamphetamine Sulfate *			20 mg	60 mg	120 Gm	90 extended release capsules
			25 mg	60 mg	120 Gm	72 extended release capsules
			30 mg	60 mg	120 Gm	60 extended release capsules

Please be advised that the information contained in this table is compiled solely from reference works recognized and approved by the State Board of Pharmacy pursuant to rule 4729-11-07.

Controlled Substance Reference Table

PRODUCT NAME •INGREDIENTS	C.S.A. SCHEDULE	DISTRIBUTOR	STRENGTH	MAXIMUM DAILY DOSE	--BULK AMOUNTS-- BY WGT	BY DOSE
Adzenys XR-ODT	II	Neos Therapeutics				
•Amphetamine *			3.1 mg	18.8 mg	120 Gm	nded release orally disintegratin
			6.3 mg	18.8 mg	120 Gm	ıded release orally disintegratin
			9.4 mg	18.8 mg	120 Gm	ıded release orally disintegratin
			12.5 mg	18.8 mg	120 Gm	ıded release orally disintegratin
			15.7 mg	18.8 mg	120 Gm	ıded release orally disintegratin
			18.8 mg	18.8 mg	120 Gm	ıded release orally disintegratin
Amphetamine and Dextroamphetamine	II	various				
•Amphetamine Aspartate *			5 mg	60 mg	120 Gm	360 extended release capsules
•Amphetamine Sulfate *			7.5 mg	60 mg	120 Gm	240 extended release capsules
•Amphetamine Sulfate *			10 mg	60 mg	120 Gm	180 extended release capsules
•Dextroamphetamine Sulfate *			12.5 mg	60 mg	120 Gm	144 extended release capsules
•Dextroamphetamine Saccharate *			15 mg	60 mg	120 Gm	120 extended release capsules
•Dextroamphetamine Sulfate *			20 mg	60 mg	120 Gm	90 extended release capsules
			25 mg	60 mg	120 Gm	72 extended release capsules
			30 mg	60 mg	120 Gm	60 extended release capsules
Dyanavel XR	II	Tris Pharma				
•Amphetamine *			2.5 mg/ml	20 mg	120 Gm	ml extended release oral suspe
Evekeo	II	Arbor				
•Amphetamine Sulfate *			5 mg	60 mg	120 Gm	360 tablets
			10 mg	60 mg	120 Gm	180 tablets
ARMODAFINIL						
Armodafinil	IV	various				
•Armodafinil *			50 mg	250 mg	120 Gm	150 tablets
			150 mg	250 mg	120 Gm	50 tablets
			200 mg	250 mg	120 Gm	38 tablets
			250 mg	250 mg	120 Gm	30 tablets
Nuvigil	IV	Cephalon				
•Armodafinil *			50 mg	250 mg	120 Gm	150 tablets

Please be advised that the information contained in this table is compiled solely from reference works recognized and approved by the State Board of Pharmacy pursuant to rule 4729-11-07.

Controlled Substance Reference Table

PRODUCT NAME •INGREDIENTS	C.S.A. SCHEDULE	DISTRIBUTOR	STRENGTH	MAXIMUM DAILY DOSE	--BULK AMOUNTS-- BY WGT	BY DOSE
			150 mg	250 mg	120 Gm	50 tablets
			200 mg	250 mg	120 Gm	38 tablets
			250 mg	250 mg	120 Gm	30 tablets
BELLADONNA EXTRACT						
B & O No. 15A	II	PolyMedica				
•Belladonna Extract 16.2 mg			30 mg	60 mg	20 Gm	10 suppositories
•Opium *						
B & O No. 16A	II	PolyMedica				
•Belladonna Extract 16.2 mg			60 mg	120 mg	20 Gm	10 suppositories
•Opium *						
BENZPHETAMINE						
Benzphetamine	III	various				
•Benzphetamine Hydrochloride *			25 mg	150 mg	120 Gm	180 tablets
			50 mg	150 mg	120 Gm	90 tablets
Didrex	III	Pfizer				
•Benzphetamine Hydrochloride *			25 mg	150 mg	120 Gm	180 tablets
			50 mg	150 mg	120 Gm	90 tablets
Regimex	III	Wraser				
•Benzphetamine Hydrochloride *			25 mg	150 mg	120 Gm	180 tablets
BOLDENONE						
Equipoise	III	Solvay				
•Boldenone Undecylenate *			n/a	n/a	n/a	16 ml injection
Boldenone	III	various				
•Boldenone Undecylenate *			n/a	n/a	n/a	16 ml injection
BRIVARACETAM						
Briviact	V	UCB Pharmaceuticals	10 mg	n/a	250 Gm	n/a
•Brivaracetam *			25 mg	n/a	250 Gm	n/a
			50 mg	n/a	250 Gm	n/a
			75 mg	n/a	250 Gm	n/a

Please be advised that the information contained in this table is compiled solely from reference works recognized and approved by the State Board of Pharmacy pursuant to rule 4729-11-07.

Controlled Substance Reference Table

PRODUCT NAME •INGREDIENTS	C.S.A. SCHEDULE	DISTRIBUTOR	STRENGTH	MAXIMUM DAILY DOSE	--BULK AMOUNTS-- BY WGT	BY DOSE
			100 mg	n/a	250 Gm	n/a
			10 mg/ml	n/a	n/a	250 ml oral solution
			50 mg/5 ml	n/a	n/a	250 ml intravenous solution
BUPRENORPHINE						
Belbuca						
•Buprenorphine *	III	Endo Pharmaceuticals	75 mcg	1800 mcg		720 buccal films
			150 mcg	1800 mcg		360 buccal films
			300 mcg	1800 mcg		180 buccal films
			450 mcg	1800 mcg		120 buccal films
			600 mcg	1800 mcg		90 buccal films
			750 mcg	1800 mcg		72 buccal films
			900 mcg	1800 mcg		60 buccal films
Bunavail	III	BioDelivery Sciences				
•Buprenorphine *			2.1 mg	12.6 mg	120 Gm	180 buccal films
•Naloxone 0.3mg						
•Buprenorphine *			4.2 mg	12.6 mg	120 Gm	90 buccal films
•Naloxone 0.7mg						
•Buprenorphine *			6.3 mg	12.6 mg	120 Gm	60 buccal films
•Naloxone 1 mg						
Buprenorphine	III	various				
•Buprenorphine *			2 mg	24 mg	120 Gm	360 sublingual tablets
			8 mg	24 mg	120 Gm	90 sublingual tablets
Buprenorphine and Naloxone	III	various				
•Buprenorphine *			2 mg	24 mg	120 Gm	360 sublingual tablets
Naloxone 0.5 mg						
•Buprenorphine *	III		8 mg	24 mg	120 Gm	90 sublingual tablets
Naloxone 2 mg						
Buprenex	III	Indivior				
•Buprenorphine *			0.3 mg/ml	2.4 mg	n/a	240 ml injection

Please be advised that the information contained in this table is compiled solely from reference works recognized and approved by the State Board of Pharmacy pursuant to rule 4729-11-07.

Controlled Substance Reference Table

PRODUCT NAME •INGREDIENTS	C.S.A. SCHEDULE	DISTRIBUTOR	STRENGTH	MAXIMUM DAILY DOSE	--BULK AMOUNTS-- BY WGT	BY DOSE
Buprenorphine	III	various	0.3 mg/ml	2.4 mg	n/a	240 ml injection
Buprenorphine						
Butrans	III	Purdue Pharma				
•Buprenorphine *			5 mcg/hour	480 mcg	n/a	3 patches
			7.5 mcg/hour	480 mcg	n/a	2 patches
			10 mcg/hour	480 mcg	n/a	2 patches
			15 mcg/hour	480 mcg	n/a	1 patch
			20 mcg/hour	480 mcg	n/a	1 patch
Probuphine Implant Kit	III	Braeburn Pharmaceutical				
•Buprenorphine Hydrochloride *			74.2 mg	n/a	n/a	1 kit/4 implants
Suboxone	III	Indivior				
•Buprenorphine *			2 mg	24 mg	120 Gm	360 sublingual tablets
Naloxone 0.5 mg						360 sublingual films
•Buprenorphine *	III		4 mg	24 mg	120 Gm	180 sublingual films
Naloxone 1 mg						
•Buprenorphine *	III		8 mg	24 mg	120 Gm	90 sublingual tablets
Naloxone 2 mg						90 sublingual films
•Buprenorphine *	III		12 mg	24 mg	120 Gm	60 sublingual films
Naloxone 3 mg						
Subutex	III	Reckitt Benckiser				
•Buprenorphine *			2 mg	24 mg	120 Gm	360 sublingual tablets
			8 mg	24 mg	120 Gm	90 sublingual tablets
Zubsolv	III	Orexo				
•Buprenorphine *			0.7 mg	17.2 mg	120 Gm	738 sublingual tablets
Naloxone 0.18 mg						
•Buprenorphine *			1.4 mg	17.2 mg	120 Gm	369 sublingual tablets
Naloxone 0.36 mg						

Please be advised that the information contained in this table is compiled solely from reference works recognized and approved by the State Board of Pharmacy pursuant to rule 4729-11-07.

Controlled Substance Reference Table

PRODUCT NAME •INGREDIENTS	C.S.A. SCHEDULE	DISTRIBUTOR	STRENGTH	MAXIMUM DAILY DOSE	--BULK AMOUNTS-- BY WGT	BY DOSE
•Buprenorphine *	III		2.9 mg	17.2 mg	120 Gm	178 sublingual tablets
Naloxone 0.71 mg						
•Buprenorphine *	III		5.7 mg	17.2 mg	120 Gm	91 sublingual tablets
Naloxone 1.4 mg						
•Buprenorphine *	III		8.6 mg	17.2 mg	120 Gm	60 sublingual tablets
Naloxone 2.1 mg						
•Buprenorphine *	III		11.4 mg	17.2 mg	120 Gm	46 sublingual tablets
Naloxone 2.9 mg						
BUTABARBITAL						
Butabarbital	III	various				
•Butabarbital Sodium *			30 mg/5 ml	120 mg	n/a	600 ml oral solution
			15 mg	120 mg	120 Gm	240 tablets
			30 mg	120 mg	120 Gm	120 tablets
			50 mg	120 mg	120 Gm	72 tablets
			100 mg	120 mg	120 Gm	36 tablets
Butisol	III	Meda				
•Butabarbital Sodium *			30 mg	120 mg	120 Gm	120 tablets
			50 mg	120 mg	120 Gm	112 tablets
			100 mg	120 mg	120 Gm	36 tablets
BUTALBITAL						
Butalbital/Acetaminophen	ExRx	various				
•Acetaminophen 325 mg			50 mg	n/a	n/a	n/a
•Butalbital *						
•Acetaminophen 500 mg	ExRx	various	50 mg	n/a	n/a	n/a
•Butalbital *						
Butalbital/Acetaminophen/Caffeine	ExRx	various	50 mg capsule	n/a	n/a	n/a
•Acetaminophen 300 mg						
•Butalbital *						
•Caffeine 40 mg						

Please be advised that the information contained in this table is compiled solely from reference works recognized and approved by the State Board of Pharmacy pursuant to rule 4729-11-07.

Controlled Substance Reference Table

PRODUCT NAME •INGREDIENTS	C.S.A. SCHEDULE	DISTRIBUTOR	STRENGTH	MAXIMUM DAILY DOSE	--BULK AMOUNTS-- BY WGT	BY DOSE
Butalbital/Acetaminophen/Caffeine	ExRx	various				
•Acetaminophen 325 mg			50 mg capsule	n/a	n/a	n/a
•Butalbital *			50 mg tablet	n/a	n/a	n/a
•Caffeine 40 mg						
Butalbital/Acetaminophen/Caffeine/Codeine	III	various				
•Acetaminophen 300 mg			30 mg	180 mg	20 Gm	30 capsules
•Butalbital 50 mg **						
•Caffeine 40 mg						
•Codeine Phosphate *						
Butalbital/Acetaminophen/Caffeine/Codeine	III	various				
•Acetaminophen 325 mg			30 mg	180 mg	20 Gm	30 tablets
•Butalbital 50 mg **						
•Caffeine 40 mg						
•Codeine Phosphate *						
Butalbital/Aspirin/Caffeine	III	various				
•Aspirin 325 mg			50 mg	300 mg	120 Gm	180 tablets
•Butalbital *			50 mg	300 mg	120 Gm	180 tablets
•Caffeine 40 mg						
Butalbital/Aspirin/Caffeine/Codeine	III	various				
•Aspirin 325 mg			30 mg	180 mg	20 Gm	30 capsules
•Butalbital 50 mg **			30 mg	180 mg	20 Gm	30 tablets
•Caffeine 40 mg						
•Codeine Phosphate *						
Esgic	ExRx	Mayne				
•Acetaminophen 325 mg			50 mg	n/a	n/a	n/a
•Butalbital *			50 mg	n/a	n/a	n/a
•Caffeine 40 mg						
Esgic-Plus	ExRx	Forest				
•Acetaminophen 500mg			50mg	n/a	n/a	n/a
•Butalbital *						

Please be advised that the information contained in this table is compiled solely from reference works recognized and approved by the State Board of Pharmacy pursuant to rule 4729-11-07.

Controlled Substance Reference Table

PRODUCT NAME •INGREDIENTS	C.S.A. SCHEDULE	DISTRIBUTOR	STRENGTH	MAXIMUM DAILY DOSE	--BULK AMOUNTS-- BY WGT	BY DOSE
•Caffeine 40mg						
Fioricet	ExRx	Actavis				
•Acetaminophen 300 mg			50 mg	n/a	n/a	n/a
•Butalbital *						
•Caffeine 40 mg						
Fiorinal	III	Actavis				
• Aspirin 325 mg			50 mg	300 mg	120 Gm	180 capsules
•Butalbital *						
•Caffeine 40 mg						
Fiorinal with Codeine #3	III	Actavis				
•Aspirin 325 mg			30 mg	180 mg	20 Gm	30 capsules
•Butalbital 50 mg **						
•Caffeine 40 mg						
•Codeine Phosphate *						
Fioricet with Codeine	III	Actavis				
•Acetaminophen 300 mg			30 mg	180 mg	20 Gm	30 capsules
•Butalbital 50 mg **						
•Caffeine 40 mg						
•Codeine Phosphate *						
Phrenilin	ExRx	Carnrick				
•Acetaminophen 325 mg			50 mg		n/a	n/a
•Butalbital *						
Phrenilin Forte	ExRx	Valeant				
•Acetaminophen 650 mg			50 mg		n/a	n/a
•Butalbital *						
Promacet	ExRx	MCR American				
•Acetaminophen 650 mg			50 mg		n/a	n/a
•Butalbital *						
BUTORPHANOL						
Butorphanol Tartrate	IV	various				

Please be advised that the information contained in this table is compiled solely from reference works recognized and approved by the State Board of Pharmacy pursuant to rule 4729-11-07.

Controlled Substance Reference Table

PRODUCT NAME •INGREDIENTS	C.S.A. SCHEDULE	DISTRIBUTOR	STRENGTH	MAXIMUM DAILY DOSE	--BULK AMOUNTS-- BY WGT	BY DOSE
•Butorphanol Tartrate *			1 mg/ml	32 mg	n/a	960 ml injection
			2 mg/ml	32 mg	n/a	480 ml injection
. . . . .						
Butorphanol Tartrate Nasal Spray	IV	various				
•Butorphanol Tartrate *			1 mg/metered spray	16 mg	n/a	480 mg
. . . . .						
Stadol	IV	Sandoz				
•Butorphanol Tartrate *			1 mg/ml	32 mg	n/a	960 ml injection
			2 mg/ml	32 mg	n/a	480 ml injection
. . . . .						
Stadol-NS	IV	Bristol-Myers Squibb				
•Butorphanol Tartrate *			1 mg/metered spray	16 mg	n/a	480 mg
CARISOPRODOL						
. . . . .						
Carisoprodol	IV	various				
•Carisoprodol*			250 mg	1000 mg	120 Gm	120 tablets
			350 mg	1400 mg	120 Gm	120 tablets
. . . . .						
Carisoprodol Compound	IV	various				
•Carisoprodol*			200 mg	1600 mg	120 Gm	240 tablets
•Aspirin 325 mg						
. . . . .						
Carisoprodol Compound with Codeine	III	various				
•Aspirin 325 mg			200 mg	128 mg	20 Gm	40 tablets
•Carisoprodol*						
•Codeine Phosphate 16 mg						
. . . . .						
Soma	IV	Meda				
•Carisoprodol*			250 mg	1000 mg	120 Gm	120 tablets
			350 mg	1400 mg	120 Gm	120 tablets
. . . . .						
Soma Compound with Codeine	III	Meda				
•Aspirin 325 mg			200 mg	128 mg	20 Gm	40 tablets
•Carisoprodol*						
•Codeine Phosphate 16 mg						
CHLORAL HYDRATE						

Please be advised that the information contained in this table is compiled solely from reference works recognized and approved by the State Board of Pharmacy pursuant to rule 4729-11-07.

Controlled Substance Reference Table

PRODUCT NAME •INGREDIENTS	C.S.A. SCHEDULE	DISTRIBUTOR	STRENGTH	MAXIMUM DAILY DOSE	--BULK AMOUNTS-- BY WGT	BY DOSE
Aquachloral Supprettes	IV	Amerifit Pharma				
•Chloral Hydrate *			325 mg	2000 mg	120 Gm	185 suppositories
			650 mg	2000 mg	120 Gm	93 suppositories
Chloral Hydrate	IV	various				
•Chloral Hydrate *			500 mg	2000 mg	120 Gm	120 capsules
			500 mg	2000 mg	120 Gm	120 suppositories
			250 mg/5 ml	2000 mg	n/a	1200 ml oral solution
			500 mg/5 ml	2000 mg	n/a	600 ml oral solution
Somnote	IV	Breckenridge				
•Chloral Hydrate *			500 mg	2000 mg	120 Gm	120 capsules
CHLORDIAZEPOXIDE						
Chlordiazepoxide	IV	various				
•Chlordiazepoxide Hydrochloride *			5 mg	300 mg	120 Gm	1800 capsules
			10 mg	300 mg	120 Gm	900 capsules
			25 mg	300 mg	120 Gm	360 capsules
Chlordiazepoxide with Clidinium	ExRx	various				
•Chlordiazepoxide Hydrochloride *			5 mg	n/a	n/a	n/a
•Clidinium Bromide 2.5 mg						
Chlordiazepoxide with Amitriptyline	IV	various				
•Amitriptyline 12.5mg			5 mg	60 mg	120 Gm	360 tablets
•Chlordiazepoxide *						
•Amitriptyline 25 mg			10 mg	60 mg	120 Gm	180 tablets
•Chlordiazepoxide Hydrochloride *						
Librax	ExRx	Valeant				
•Chlordiazepoxide Hydrochloride *			5 mg	n/a	n/a	n/a
•Clidinium Bromide 2.5 mg						
Libritabs	IV	Roche				

Please be advised that the information contained in this table is compiled solely from reference works recognized and approved by the State Board of Pharmacy pursuant to rule 4729-11-07.

Controlled Substance Reference Table

PRODUCT NAME •INGREDIENTS	C.S.A. SCHEDULE	DISTRIBUTOR	STRENGTH	MAXIMUM DAILY DOSE	--BULK AMOUNTS-- BY WGT	BY DOSE
•Chlordiazepoxide Hydrochloride *			5 mg	300 mg	120 Gm	1800 tablets
			10 mg	300 mg	120 Gm	900 tablets
			25 mg	300 mg	120 Gm	360 tablets
Librium	IV	ICN				
•Chlordiazepoxide Hydrochloride *			5 mg	300 mg	120 Gm	1800 capsules
			10 mg	300 mg	120 Gm	900 capsules
			25 mg	300 mg	120 Gm	360 capsules
			100 mg	300 mg	120 Gm	9000 mg injection(or 90 amps)
Limbitrol	IV	Valeant				
•Amitriptyline 12.5 mg			5 mg	60 mg	120 Gm	360 tablets
•Chlordiazepoxide Hydrochloride *						
Limbitrol DS	IV	Valeant				
•Amitriptyline 25 mg			10 mg	60 mg	120 Gm	180 tablets
•Chlordiazepoxide Hydrochloride *						
CLOBAZAM						
Onfi	IV	Lundbeck				
•Clobapam *			2.5 mg/ml	40 mg	120 Gm	480 ml oral suspension
			5 mg	40 mg	120 gm	240 tablets
			10 mg	40 mg	120 Gm	120 tablets
			20 mg	40 mg	120 Gm	60 tablets
CLONAZEPAM						
Klonopin	IV	Genentech				
•Clonazepam *			0.125 mg	20 mg	120 Gm	4800 tablets
			0.25 mg	20 mg	120 Gm	2400 tablets
			0.5 mg	20 mg	120 Gm	1200 tablets
			1 mg	20 mg	120 Gm	600 tablets
			2 mg	20 mg	120 Gm	300 tablets
Clonazepam	IV	various				
•Clonazepam *			0.125 mg	20 mg	120 Gm	4800 tablets
			0.25 mg	20 mg	120 Gm	2400 tablets
			0.5 mg	20 mg	120 Gm	1200 tablets

Please be advised that the information contained in this table is compiled solely from reference works recognized and approved by the State Board of Pharmacy pursuant to rule 4729-11-07.

Controlled Substance Reference Table

PRODUCT NAME •INGREDIENTS	C.S.A. SCHEDULE	DISTRIBUTOR	STRENGTH	MAXIMUM DAILY DOSE	--BULK AMOUNTS-- BY WGT	BY DOSE
			1 mg	20 mg	120 Gm	600 tablets
			2 mg	20 mg	120 Gm	300 tablets
CLORAZEPATE DIPOTASSIUM						
Clorazepate Dipotassium	IV	various				
•Clorazepate Dipotassium *			3.75 mg	90 mg	120 Gm	720 tablets
			7.5 mg	90 mg	120 Gm	360 tablets
			15 mg	90 mg	120 Gm	180 tablets
Tranxene T-tab	IV	Ovation				
•Clorazepate Dipotassium *			3.75 mg	90 mg	120 Gm	720 tablets
			7.5 mg	90 mg	120 Gm	360 tablets
			15 mg	90 mg	120 Gm	180 tablets
Tranxene SD	IV	Ovation				
•Clorazepate Dipotassium *			11.25 mg	22.5 mg	120 Gm	60 extended release tablets
			22.5 mg	22.5 mg	120 Gm	30 extended release tablets
COCAINE						
Cocaine*	II				see 2925.03 or .11, ORC	
CODEINE						
Acetaminophen with Codeine	III	various				
•Acetaminophen 300 mg			15 mg	195 mg	20 Gm	65 tablets
•Codeine Phosphate *			30 mg	360 mg	20 Gm	60 tablets
			60 mg	360 mg	20 Gm	30 tablets
Acetaminophen with Codeine	III	various				
•Acetaminophen 325 mg			15 mg	180 mg	20 Gm	60 tablets
•Codeine Phosphate *			30 mg	360 mg	20 Gm	60 tablets
			60 mg	360 mg	20 Gm	30 tablets
Acetaminophen with Codeine	III	various				
•Acetaminophen 650 mg			30 mg	180 mg	20 Gm	30 tablets
•Codeine Phosphate *						
Acetaminophen with Codeine	V	various				

Please be advised that the information contained in this table is compiled solely from reference works recognized and approved by the State Board of Pharmacy pursuant to rule 4729-11-07.

Controlled Substance Reference Table

PRODUCT NAME •INGREDIENTS	C.S.A. SCHEDULE	DISTRIBUTOR	STRENGTH	MAXIMUM DAILY DOSE	--BULK AMOUNTS-- BY WGT	BY DOSE
•Acetaminophen 120 mg			12 mg/5 ml	n/a	n/a	250 ml oral solution
•Codeine Phosphate *						
Alahist AC	V	Poly				
•Codeine Phosphate *			10 mg/5 ml	n/a	n/a	250 ml oral solution
•Phenylephedrine 7.5 mg						
Aspirin with Codeine	III	various				
•Aspirin 325 mg			15 mg	360 mg	20 Gm	120 tablets
•Codeine Phosphate *			30 mg	360 mg	20 Gm	60 tablets
			60 mg	360 mg	20 Gm	30 tablets
Aspirin/Caffeine/Butalbital/Codeine	III	various				
•Aspirin 325 mg			30 mg	180 mg	20 Gm	30 capsules
•Butalbital 50 mg **			30 mg	180 mg	20 Gm	30 tablets
•Caffeine 40 mg						
•Codeine Phosphate *						
Capital with Codeine	III	Amarin				
•Acetaminophen 325 mg			30 mg	360 mg	20 Gm	60 capsules
•Codeine Phosphate *						
Capital with Codeine	V	Valeant				
•Acetaminophen 120 mg/5 ml						
•Codeine Phosphate *			12 mg/5 ml	n/a	n/a	250 ml oral solution
Carisoprodol Compound with Codeine	III	various				
•Aspirin 325 mg			16 mg	128 mg	20 Gm	40 tablets
•Carisoprodol 200 mg						
•Codeine Phosphate *						
Cheratussin DAC	V	Par				
•Codeine Phosphate *			10 mg/5 ml	n/a	n/a	250 ml oral solution
•Guaifenesin 100 mg						
•Pseudoephedrine Hydrochloride 30 mg						
Cocet	III	Poly Pharmaceuticals				

Please be advised that the information contained in this table is compiled solely from reference works recognized and approved by the State Board of Pharmacy pursuant to rule 4729-11-07.

Controlled Substance Reference Table

PRODUCT NAME •INGREDIENTS	C.S.A. SCHEDULE	DISTRIBUTOR	STRENGTH	MAXIMUM DAILY DOSE	--BULK AMOUNTS-- BY WGT	BY DOSE
Codeine Phosphate			30 mg	180 mg	20 Gm	30 tablets
*Acetaminophen 650 mg						
Cocet Plus	III	Poly Pharmaceuticals				
Codeine Phosphate			60 mg	360 mg	20 Gm	30 tablets
*Acetaminophen 650 mg						
Codeine Phosphate	II	various				
•Codeine Phosphate *			30 mg/ml	360 mg	n/a	60 ml injection
			60 mg/ml	360 mg	n/a	30 ml injection
			15 mg/5 ml	360 mg	n/a	600 ml oral solution
			n/a	n/a	20 Gm powder	n/a
Codeine Phosphate with Brompheniramine and Pseudophedrine HCL	V	various				
•Brompheniramine Maleate 1.3 mg						
•Codeine Phosphate *			6.3 mg/ 5 ml	n/a	n/a	250 ml solution
•Pseudoephedrine Hydrochloride 10 mg						
Codeine Phosphate with Chlorpheniramine Maleate	V	various				
•Chlorpheniramine Maleate 2 mg						
•Codeine Phosphate *			10 mg/ 5 ml	n/a	n/a	250 ml solution
Codeine Phosphate with Chlorpheniramine ER	III	various				
•Chlorpheniramine Maleate 8 mg			54.3 mg	108.6 mg	20 Gm	10 extended release tablets
•Codeine Phosphate *						
Codeine Sulfate	II	various				
•Codeine Sulfate *			n/a	n/a	20 Gm powder	n/a
			15 mg	360 mg	20 Gm	120 tablets
			30 mg	360 mg	20 Gm	60 tablets
			60 mg	360 mg	20 Gm	30 tablets
			30 mg/5 ml	360 mg	n/a	300 ml oral solution
Codeprex	III	Celltech				
•Chlorpheniramine (as polistirex) 4 mg			20 mg/5 ml	80 mg	n/a	0 ml extended release suspensi
•Codeine (as polistirex)*						

Please be advised that the information contained in this table is compiled solely from reference works recognized and approved by the State Board of Pharmacy pursuant to rule 4729-11-07.

Controlled Substance Reference Table

PRODUCT NAME •INGREDIENTS	C.S.A. SCHEDULE	DISTRIBUTOR	STRENGTH	MAXIMUM DAILY DOSE	--BULK AMOUNTS-- BY WGT	BY DOSE
Cotab A	III	MCR American				
•Chlorpheniramine Maleate 4 mg			10 mg	60 mg	20 Gm	30 tablets
•Codeine Phosphate *						
Cotab AX	III	MCR American				
•Chlorpheniramine Maleate 4 mg			20 mg	120 mg	20 Gm	30 tablets
•Codeine Phosphate *						
Cotabflu	III	MCR American				
•Acetaminophen 500 mg			20 mg	120 mg	20 Gm	30 tablets
•Chlorpheniramine Maleate 4 mg						
•Codeine Phosphate *						
Dex-Tuss	V	Cypress				
•Codeine Phosphate *			10 mg/5 ml	n/a	n/a	250 ml oral solution
•Guaifenesin 300 mg						
Empirin with Codeine No.3	III	GlaxoWellcome				
•Aspirin 325 mg						
•Codeine Phosphate *			30 mg	360 mg	20 Gm	60 tablets
Empirin with Codeine No.4	III	GlaxoWellcome				
•Aspirin 325 mg						
•Codeine Phosphate *			60 mg	360 mg	20 Gm	30 tablets
EndaCof-DC Liquid	V	Larken Labs				
•Codeine Phosphate *			10 mg/ 5 ml	n/a	n/a	250 ml solution
•Pseudoephedrine Hydrochloride 30 mg						
Fioricet with Codeine	III	Actavis				
•Acetaminophen 300 mg			30 mg	180 mg	20 Gm	30 capsules
•Butalbital 50 mg **						
•Caffeine 40 mg						
•Codeine Phosphate *						
Fiorinal with Codeine #3	III	Actavis				
•Aspirin 325 mg			30 mg	180 mg	20 Gm	30 capsules

Please be advised that the information contained in this table is compiled solely from reference works recognized and approved by the State Board of Pharmacy pursuant to rule 4729-11-07.

Controlled Substance Reference Table

PRODUCT NAME •INGREDIENTS	C.S.A. SCHEDULE	DISTRIBUTOR	STRENGTH	MAXIMUM DAILY DOSE	--BULK AMOUNTS-- BY WGT	BY DOSE
•Butalbital 50 mg **						
•Caffeine 40 mg						
•Codeine Phosphate *						
Guaifenesin AC	V	various				
•Codeine Phosphate *			10 mg/5 ml	n/a	n/a	250 ml oral solution
•Guaifenesin 100 mg						
Guaifenesin with Codeine	V	various				
•Codeine Phosphate *			6.3 mg/5 ml	n/a	n/a	250 ml oral solution
•Guaifenesin 100 mg						
Guaifenesin with Codeine	V	various				
•Codeine Phosphate *			7.5 mg/5 ml	n/a	n/a	250 ml oral solution
•Guaifenesin 225 mg						
Guaifenesin with Codeine	V	various				
•Codeine Phosphate *			8 mg/5 ml	n/a	n/a	250 ml oral solution
•Guaifenesin 200 mg						
Guaifenesin with Codeine	V	various				
•Codeine Phosphate *			10 mg/5 ml	n/a	n/a	250 ml oral solution
•Guaifenesin 200 mg						
M-End Max D Liquid	V	R.A. McNeil				
•Dexbrompheniramine Maleate 0.667 mg			6 mg/5 ml	n/a	n/a	250 ml oral solution
•Codeine Phosphate *						
•Pseudoephedrine Hydrochloride 20 mg						
M-End PE	V	R.A. McNeil				
•Brompheniramine Maleate 1.33 mg			6.33 mg/5 ml	n/a	n/a	250 ml oral solution
•Codeine Phosphate *						
•Phenylephrine Hydrochloride 3.33 mg						
Mar-Cof BP Liquid	V	Marnel Pharmaceutical				
•Brompheniramine Maleate 2 mg						
•Codeine Phosphate *			7.5 mg/ 5 ml	n/a	n/a	250 ml solution

Please be advised that the information contained in this table is compiled solely from reference works recognized and approved by the State Board of Pharmacy pursuant to rule 4729-11-07.

Controlled Substance Reference Table

PRODUCT NAME •INGREDIENTS	C.S.A. SCHEDULE	DISTRIBUTOR	STRENGTH	MAXIMUM DAILY DOSE	--BULK AMOUNTS-- BY WGT	BY DOSE
•Pseudoephedrine Hydrochloride 30 mg						
Neo AC Liquid	V	Laser				
•Codeine Phosphate *			10 mg/ 5 ml	n/a	n/a	250 ml solution
•Pseudoephedrine Hydrochloride 30 mg						
•Pyrilamine Maleate 15 mg						
Nucofed	III	Monarch				
•Codeine Phosphate *			20 mg/5 ml	80 mg	n/a	100 ml oral solution
•Pseudoephedrine Hydrochloride 30 mg			20 mg	80 mg	20 Gm	20 tablets
Nucotuss Expectorant	III	Alpharma				
•Codeine Phosphate *			20 mg/5 ml	80 mg	n/a	100 ml oral solution
•Guaifenesin 200 mg						
•Pseudoephedrine Hydrochloride 60 mg						
Phenylhistine DH Liquid	V	Qualitest				
•Chlorpheniramine Maleate 2 mg						
•Codeine Phosphate *			10 mg/ 5 ml	n/a	n/a	250 ml solution
•Pseudophedrine Hydrochloride 30 mg						
Phrenilin with Caffeine and Codeine	III	Valeant				
•Acetaminophen 325 mg			30 mg	180 mg	20 Gm	30 capsules
•Butalbital 50 mg **						
•Caffeine 40 mg						
•Codeine Phosphate *						
Poly Hist NC Liquid	V	Poly				
•Codeine Phosphate *			10 mg/ 5 ml	n/a	n/a	250 ml solution
•Pseudophedrine Hydrochloride 15 mg						
•Triprolidine Hydrochloride 1.25 mg						
Poly-Tussin	V	Poly				
•Codeine Phosphate *			10 mg/5 ml	n/a	n/a	250 ml oral solution
•Chlorcyclizine HCl 9.375 mg						
Poly-Tussin AC Liquid	V	Poly				

Please be advised that the information contained in this table is compiled solely from reference works recognized and approved by the State Board of Pharmacy pursuant to rule 4729-11-07.

Controlled Substance Reference Table

PRODUCT NAME •INGREDIENTS	C.S.A. SCHEDULE	DISTRIBUTOR	STRENGTH	MAXIMUM DAILY DOSE	--BULK AMOUNTS-- BY WGT	BY DOSE
•Brompheniramine Maleate 2 mg						
•Codeine Phosphate *			10 mg/ 5 ml	n/a	n/a	250 ml solution
•Phenylephrine Hydrochloride 7.5 mg						
Poly-Tussin-D	V	Poly				
•Codeine Phosphate *			10 mg/5 ml	n/a	n/a	250 ml oral solution
•Chlorcyclizine HCl 9.375 mg						
•Pseudoephedrine 30 mg						
Pro-Red AC	V	Pro-Pharma				
•Codeine Phosphate *			9 mg/5ml	n/a	n/a	250 ml oral solution
•Dexchlorpheniramine maleate 1 mg						
•Phenylephrine 5 mg						
Promethazine with Codeine	V	various				
•Codeine Phosphate *			10 mg/5 ml	n/a	n/a	250 ml oral solution
•Promethazine Hydrochloride 5 mg						
Promethazine with Codeine	V	various				
•Codeine Phosphate *			10 mg/5 ml	n/a	n/a	250 ml oral solution
•Promethazine Hydrochloride 6.25 mg						
Promethazine HCl with Phenylephrine HCl and Codeine Phosphate	V	various				
•Codeine Phosphate *			10 mg/ 5 ml	n/a	n/a	250 ml solution
•Phenylephrine HCL 5 mg						
• Promethazine HCL 6.25 mg						
Rid-A-Pain with Codeine	V	Pfeiffer				
•Acetaminophen 97.2 mg			1 mg	n/a	250 Gm	n/a
•Aspirin 226.8 mg						
•Caffeine 32.4 mg						
•Codeine Phosphate *						
•Salicylamide 32.4 mg						
Robitussin A-C	V	A H Robins				
•Codeine Phosphate *			10 mg/5 ml	n/a	n/a	250 ml oral solution
•Guaifenesin 100 mg						

Please be advised that the information contained in this table is compiled solely from reference works recognized and approved by the State Board of Pharmacy pursuant to rule 4729-11-07.

Controlled Substance Reference Table

PRODUCT NAME •INGREDIENTS	C.S.A. SCHEDULE	DISTRIBUTOR	STRENGTH	MAXIMUM DAILY DOSE	--BULK AMOUNTS-- BY WGT	BY DOSE
Status Green Liquid	V	Magna				
•Chlorcyclizine HCl 12.5 mg						
•Codeine Phosphate *			9 mg/ 5 ml	n/a	n/a	250 ml solution
•Pseudophedrine Hydrochloride 30 mg						
Tricode AR Liquid	V	Respa				
•Chlorpheniramine Maleate 2 mg						
•Codeine Phosphate *			8 mg/ 5 ml	n/a	n/a	250 ml solution
•Pseudophedrine Hydrochloride 30 mg						
Tussi Organidin NR	V	Victory				
•Codeine Phosphate *			10 mg/5 ml	n/a	n/a	250 ml oral solution
•Guaifenesin 300 mg						
Tuzistra XR		Vernalis Therapeutics				
•Chlorpheniramine (as polistirex) 2.8 mg	III		14.7 mg/5 ml	58.8 mg	20 GM	0 ml extended release suspensi
•Codeine (as polistirex)*						
Tylenol with Codeine No. 3	III	Janssen				
•Acetaminophen 300 mg			30 mg	360 mg	20 Gm	60 capsules
•Codeine Phosphate *			30 mg	360 mg	20 Gm	60 tablets
Tylenol with Codeine No. 4	III	Janssen				
•Acetaminophen 300 mg			60 mg	360 mg	20 Gm	30 capsules
•Codeine Phosphate *			60 mg	360 mg	20 Gm	30 tablets
Vanacof CD Liquid	V	GM				
•Codeine Phosphate *			10 mg/ 5 ml	n/a	n/a	250 ml solution
•Dexchlorpheniramine Maleate 1 mg						
•Phenylephrine Hydrochloride 5 mg						
Vopac	III	Athlon				
•Acetaminophen 650 mg			30 mg	180 mg	20 Gm	30 tablets
•Codeine Phosphate *						
Zodryl AC 25 Liquid	V	CodaDOSE				

Please be advised that the information contained in this table is compiled solely from reference works recognized and approved by the State Board of Pharmacy pursuant to rule 4729-11-07.

Controlled Substance Reference Table

PRODUCT NAME •INGREDIENTS	C.S.A. SCHEDULE	DISTRIBUTOR	STRENGTH	MAXIMUM DAILY DOSE	--BULK AMOUNTS-- BY WGT	BY DOSE
•Chlorpheniramine Maleate 1.665 mg						
•Codeine Phosphate *			5 mg/ 5 ml	n/a	n/a	250 ml solution
Zodryl AC 30 Liquid	V	CodaDOSE				
•Chlorpheniramine Maleate 1.43 mg						
•Codeine Phosphate *			5 mg/ 5 ml	n/a	n/a	250 ml solution
Zodryl AC 35 Liquid	V	CodaDOSE				
•Chlorpheniramine Maleate 1.25 mg						
•Codeine Phosphate *			5 mg/ 5 ml	n/a	n/a	250 ml solution
Zodryl AC 40 Liquid	V	CodaDOSE				
•Chlorpheniramine Maleate 1.11 mg						
•Codeine Phosphate *			5 mg/ 5 ml	n/a	n/a	250 ml solution
Z-Tuss AC Liquid	V	Magna				
•Chlorpheniramine Maleate 2 mg						
•Codeine Phosphate *			9 mg/ 5 ml	n/a	n/a	250 ml solution
DEXMETHYLPHENIDATE						
Dexmethylphenidate	II	various				
•Dexmethylphenidate Hydrochloride *			2.5 mg	20 mg	120 Gm	240 tablets
			5 mg	20 mg	120 Gm	120 tablets
			5 mg	40 mg	120 Gm	240 extended-release capsules
			10 mg	20 mg	120 Gm	60 tablets
			10 mg	40 mg	120 Gm	120 extended-release capsules
			15 mg	40 mg	120 Gm	80 extended-release tablets
			20 mg	40 mg	120 Gm	60 extended-release capsules
			25 mg	40 mg	120 Gm	48 extended-release capsules
			30 mg	40 mg	120 Gm	40 extended-release tablets
			35 mg	40 mg	120 Gm	35 extended-release capsules
			40 mg	40 mg	120 Gm	30 extended-release tablets
Focalin	II	Novartis				
•Dexmethylphenidate Hydrochloride *			2.5 mg	20 mg	120 Gm	240 tablets
			5 mg	20 mg	120 Gm	120 tablets
			10 mg	20 mg	120 Gm	60 tablets

Please be advised that the information contained in this table is compiled solely from reference works recognized and approved by the State Board of Pharmacy pursuant to rule 4729-11-07.

Controlled Substance Reference Table

PRODUCT NAME •INGREDIENTS	C.S.A. SCHEDULE	DISTRIBUTOR	STRENGTH	MAXIMUM DAILY DOSE	--BULK AMOUNTS-- BY WGT	BY DOSE
Focalin XR	II	Novartis				
•Dexmethylphenidate Hydrochloride *			5 mg	40 mg	120 Gm	240 extended-release capsules
			10 mg	40 mg	120 Gm	120 extended-release capsules
			15 mg	40 mg	120 Gm	80 extended-release capsules
			20 mg	40 mg	120 Gm	60 extended-release capsules
			25 mg	40 mg	120 Gm	48 extended-release capsules
			30 mg	40 mg	120 Gm	40 extended-release capsules
			35 mg	40 mg	120 Gm	35 extended-release capsules
			40 mg	40 mg	120 Gm	30 extended-release capsules
DEXTROAMPHETAMINE						
Adderall	II	Teva				
•Amphetamine Aspartate *			5 mg	60 mg	120 Gm	360 tablets
•Amphetamine Sulfate *			7.5 mg	60 mg	120 Gm	240 tablets
•Dextroamphetamine Saccharate *			10 mg	60 mg	120 Gm	180 tablets
•Dextroamphetamine Sulfate *			12.5 mg	60 mg	120 Gm	144 tablets
			15 mg	60 mg	120 Gm	120 tablets
			20 mg	60 mg	120 Gm	90 tablets
			30 mg	60 mg	120 Gm	60 tablets
Adderall XR	II	Shire				
•Amphetamine Aspartate *			5 mg	60 mg	120 Gm	360 extended release capsules
•Amphetamine Sulfate *			10 mg	60 mg	120 Gm	180 extended release capsules
•Dextroamphetamine Saccharate *			15 mg	60 mg	120 Gm	120 extended release capsules
•Dextroamphetamine Sulfate *			20 mg	60 mg	120 Gm	90 extended release capsules
			25 mg	60 mg	120 Gm	72 extended release capsules
			30 mg	60 mg	120 Gm	60 extended release capsules
Amphetamine and Dextroamphetamine	II	various				
•Amphetamine Aspartate *			5 mg	60 mg	120 Gm	360 tablets
•Amphetamine Sulfate *			7.5 mg	60 mg	120 Gm	240 tablets
•Dextroamphetamine Saccharate *			10 mg	60 mg	120 Gm	180 tablets
•Dextroamphetamine Sulfate *			12.5 mg	60 mg	120 Gm	144 tablets
			15 mg	60 mg	120 Gm	120 tablets
			20 mg	60 mg	120 Gm	90 tablets
			30 mg	60 mg	120 Gm	60 tablets

Please be advised that the information contained in this table is compiled solely from reference works recognized and approved by the State Board of Pharmacy pursuant to rule 4729-11-07.

Controlled Substance Reference Table

PRODUCT NAME •INGREDIENTS	C.S.A. SCHEDULE	DISTRIBUTOR	STRENGTH	MAXIMUM DAILY DOSE	--BULK AMOUNTS-- BY WGT	BY DOSE
Amphetamine and Dextroamphetamine ER	II	various				
•Amphetamine Aspartate *			5 mg	60 mg	120 Gm	360 extended release capsules
•Amphetamine Sulfate *			10 mg	60 mg	120 Gm	180 extended release capsules
•Dextroamphetamine Saccharate *			15 mg	60 mg	120 Gm	120 extended release capsules
•Dextroamphetamine Sulfate *			20 mg	60 mg	120 Gm	90 extended release capsules
			25 mg	60 mg	120 Gm	72 extended release capsules
			30 mg	60 mg	120 Gm	60 extended release capsules
Dexedrine	II	Amedra				
•Dextroamphetamine Sulfate *			5 mg	60 mg	120 Gm	360 tablets
			5 mg	60 mg	120 Gm	360 extended release capsules
			10 mg	60 mg	120 Gm	180 tablets
			10 mg	60 mg	120 Gm	180 extended release capsules
			15 mg	60 mg	120 Gm	120 extended release capsules
Dextrotat	II	Shire				
•Dextroamphetamine Sulfate *			5 mg	60 mg	120 Gm	360 tablets
			10 mg	60 mg	120 Gm	180 tablets
Dextroamphetamine Sulfate	II	various				
•Dextroamphetamine Sulfate *			n/a	n/a	120 Gm powder	n/a
			5 mg	60 mg	120 Gm	360 extended release capsules
			10 mg	60 mg	120 Gm	180 extended release capsules
			15 mg	60 mg	120 Gm	120 extended release capsules
			5 mg/5 ml	60 mg	120 Gm	300 ml oral solution
			2.5 mg	60 mg	120 Gm	720 tablets
			5 mg	60 mg	120 Gm	360 tablets
			7.5 mg	60 mg	120 Gm	240 tablets
			10 mg	60 mg	120 Gm	180 tablets
ProCentra	II	Independence Pharmaceuticals				
•Dextroamphetamine Sulfate *			5 mg/5 ml	60 mg	120 Gm	300 ml oral solution
Zenzedi	II	Arbor				
•Dextroamphetamine Sulfate *			2.5 mg	60 mg	120 Gm	720 tablets

Please be advised that the information contained in this table is compiled solely from reference works recognized and approved by the State Board of Pharmacy pursuant to rule 4729-11-07.

Controlled Substance Reference Table

PRODUCT NAME •INGREDIENTS	C.S.A. SCHEDULE	DISTRIBUTOR	STRENGTH	MAXIMUM DAILY DOSE	--BULK AMOUNTS-- BY WGT	BY DOSE
			5 mg	60 mg	120 Gm	360 tablets
			7.5 mg	60 mg	120 Gm	240 tablets
			10 mg	60 mg	120 Gm	180 tablets
			15 mg	60 mg	120 Gm	120 tablets
			20 mg	60 mg	120 Gm	90 tablets
			30 mg	60 mg	120 Gm	60 tablets
DEXTROPROPOXYPHENE						
Dextropropoxyphene	IV	various				
•Dextropropoxyphene *			n/a	n/a	120 Gm powder	n/a
DIAZEPAM						
Diastat AcuDial	IV	Valeant				
•Diazepam *			2.5 mg	20 mg	120 Gm	240 rectal applicators
			10 mg	20 mg	120 Gm	60 rectal applicators
			20 mg	20 mg	120 Gm	30 rectal applicators
Diazepam	IV	various				
•Diazepam *			5 mg/ml	30 mg	n/a	180 ml injection
			n/a	n/a	120 Gm powder	n/a
			5 mg/ml	40 mg	n/a	240 ml oral solution
			1 mg/ml	40 mg	n/a	1200 ml oral solution
			2 mg	40 mg	120 Gm	600 tablets
			5 mg	40 mg	120 Gm	240 tablets
			10 mg	40 mg	120 Gm	120 tablets
			10 mg/2 ml	30 mg	n/a	180 ml injection
			2.5 mg	20 mg	120 Gm	240 rectal applicators
			10 mg	20 mg	120 Gm	60 rectal applicators
			20 mg	20 mg	120 Gm	30 rectal applicators
Diazepam Intensol	IV	Roxane				
•Diazepam *			5 mg/ml	40 mg	n/a	240 ml oral solution
Valium	IV	Genetech				
•Diazepam *			5 mg/ml	30 mg	n/a	180 ml injection
			2 mg	40 mg	120 Gm	600 tablets
			5 mg	40 mg	120 Gm	240 tablets

Please be advised that the information contained in this table is compiled solely from reference works recognized and approved by the State Board of Pharmacy pursuant to rule 4729-11-07.

Controlled Substance Reference Table

PRODUCT NAME •INGREDIENTS	C.S.A. SCHEDULE	DISTRIBUTOR	STRENGTH	MAXIMUM DAILY DOSE	--BULK AMOUNTS-- BY WGT	BY DOSE
			10 mg	40 mg	120 Gm	120 tablets
DICHLORALPHENAZONE						
Isometheptene/Dichoralphenazone/APAP	IV	various				
•Isometheptene Mucate 65 mg			100 mg	800 mg	120 Gm	240 capsules
•Dichoralphenazone *						
•Acetaminophen (APAP) 325 mg						
Midrin	IV	Caraco				
•Isometheptene Mucate 65 mg			100 mg	800 mg	120 Gm	240 capsules
•Dichoralphenazone *						
•Acetaminophen (APAP) 325 mg						
DIETHYLPROPION						
Diethylpropion	IV	various				
•Diethylpropion *			25 mg	75 mg	120 Gm	90 tablets
			75 mg	75 mg	120 Gm	30 extended release tablets
Tenuate	IV	Aventis				
•Diethylpropion Hydrochloride *			25 mg	75 mg	120 Gm	90 tablets
Tenuate Dospan	IV	Aventis				
•Diethylpropion Hydrochloride *			75 mg	75 mg	120 Gm	30 extended release tablets
DIFENOXIN						
Motofen	IV	Sebela				
•Atropine Sulfate 0.025 mg			1 mg	8 mg	120 Gm	240 tablets
•Difenoxin *						
DIHYDROCODEINE						
Alahist DHC Liquid	V	Poly				
•Dihydrocodeine Bitartrate *			3 mg/5 ml	n/a	n/a	250 ml oral solution
•Phenylephrine HCl 7.5 mg						
Dihydrocodeine/APAP/Caffeine	III	various				

Please be advised that the information contained in this table is compiled solely from reference works recognized and approved by the State Board of Pharmacy pursuant to rule 4729-11-07.

Controlled Substance Reference Table

PRODUCT NAME •INGREDIENTS	C.S.A. SCHEDULE	DISTRIBUTOR	STRENGTH	MAXIMUM DAILY DOSE	--BULK AMOUNTS-- BY WGT	BY DOSE
•Acetaminophen 320.5 mg			16 mg	160 mg	20 Gm	50 capsules
•Caffeine 30 mg						
•Dihydrocodeine Bitartrate *						
Dihydrocodeine/APAP/Caffeine	III	various				
•Acetaminophen 356.4 mg			16 mg	160 mg	20 Gm	50 tablets
•Caffeine 30 mg						
•Dihydrocodeine Bitartrate *						
Dihydrocodeine/APAP/Caffeine	III	various				
•Acetaminophen 712.8 mg			32 mg	160 mg	20 Gm	25 tablets
•Caffeine 60 mg						
•Dihydrocodeine Bitartrate *						
Dihydrocodeine/Guaifenesin	III	various				
•Dihydrocodeine Bitartrate *			7.5mg/5 ml	90 mg	n/a	300 ml oral solution
•Guaifenesin 100 mg						
Donatuss DC	III	Laser				
•Dihydrocodeine Bitartrate *			7.5 mg/5 ml	90 mg	n/a	300 ml oral solution
•Guaifenesin 50 mg						
•Phenylephrine Hydrochloride						
DHC Plus	III	Purdue Pharma				
•Acetaminophen 356.4 mg			16 mg	160 mg	20 Gm	50 capsules
•Caffeine 30 mg						
•Dihydrocodeine Bitartrate *						
J-Cof DHC Liquid						
•Dihydrocodeine Bitartrate *	III	Great Southern	7.5 mg/5ml	90 mg	n/a	300 ml oral solution
*Brompheniramine Maleate 3 mg						
*Pseudoephedrine HCl 15 mg						
Novahistine DH	III	Destin Therapeutics				
•Chlorpheniramine Maleate 2 mg			7.25 mg/5 ml	58 mg	n/a	200 ml oral solution
•Dihydrocodeine Bitartrate *						
•Phenylephedrine Hydrochloride 5 mg						

Please be advised that the information contained in this table is compiled solely from reference works recognized and approved by the State Board of Pharmacy pursuant to rule 4729-11-07.

Controlled Substance Reference Table

PRODUCT NAME •INGREDIENTS	C.S.A. SCHEDULE	DISTRIBUTOR	STRENGTH	MAXIMUM DAILY DOSE	--BULK AMOUNTS-- BY WGT	BY DOSE
Panlor DC	III	Pan American				
•Acetaminophen 356.4 mg			16 mg	160 mg	20 Gm	50 capsules
•Caffeine 30 mg						
•Dihydrocodeine Bitartrate *						
Panlor SS	III	Pan American				
•Acetaminophen 712.8 mg			32 mg	160 mg	20 Gm	25 capsules
•Caffeine 60 mg						
•Dihydrocodeine Bitartrate *						
Poly Hist DHC Liquid						
•Dihydrocodeine Bitartrate *	III	Poly Pharmaceuticals	7.5 mg/5ml	45 mg	n/a	150 ml oral solution
*Pyrilamine Maleate 7.5 mg						
*Phenylephrine 5 mg						
Poly-Tussin DHC Liquid	V	Great Southern				
•Dihydrocodeine Bitartrate *			3 mg/5ml	n/a	n/a	250 ml oral solution
*Brompheniramine Maleate 4 mg						
*Phenylephrine HCl 7.5 mg						
Synalgos DC	III	Caraco				
•Aspirin 356.4 mg			16 mg	192 mg	20 Gm	60 capsules
•Caffeine 30 mg						
•Dihydrocodeine Bitartrate *						
Trezix	III	Wraser				
•Acetaminophen 320.5 mg			16 mg	160 mg	20 Gm	50 capsules
•Caffeine 30 mg						
•Dihydrocodeine Bitartrate *						
DIPHENOXYLATE						
Diphenoxylate & Atropine	V	various				
•Atropine Sulfate 0.025 mg			2.5 mg/5 ml	n/a	n/a	250 ml oral solution
•Diphenoxylate Hydrochloride *			2.5 mg	n/a	250 Gm	n/a
Lomotil	V	Searle				

Please be advised that the information contained in this table is compiled solely from reference works recognized and approved by the State Board of Pharmacy pursuant to rule 4729-11-07.

Controlled Substance Reference Table

PRODUCT NAME •INGREDIENTS	C.S.A. SCHEDULE	DISTRIBUTOR	STRENGTH	MAXIMUM DAILY DOSE	--BULK AMOUNTS-- BY WGT	BY DOSE
•Atropine Sulfate 0.025 mg			2.5 mg/5 ml	n/a	n/a	250 ml oral solution
•Diphenoxylate Hydrochloride *			2.5 mg	n/a	250 Gm	n/a
DRONABINOL						
Marinol	III	Abbvie				
•Dronabinol *			2.5 mg	20 mg	120 Gm	240 capsules
			5 mg	20 mg	120 Gm	120 capsules
			10 mg	20 mg	120 Gm	60 capsules
Dronabinal	III	various				
•Dronabinol *			2.5 mg	20 mg	120 Gm	240 capsules
			5 mg	20 mg	120 Gm	120 capsules
			10 mg	20 mg	120 Gm	60 capsules
EPHEDRINE						
Ephedrine	V	various				
•Ephedrine Sulfate*			25 mg	n/a	250 Gm	n/a
			50 mg/ml	n/a	n/a	250 ml injection
ESTAZOLAM						
Estazolam	IV	various				
•Estazolam *			1 mg	2 mg	120 Gm	60 tablets
			2 mg	2 mg	120 Gm	30 tablets
Prosom	IV	Abbott				
•Estazolam *			1 mg	2 mg	120 Gm	60 tablets
			2 mg	2 mg	120 Gm	30 tablets
ESZOPICLONE						
Lunesta	IV	Sunovion				
•Eszopiclone *			1 mg	3 mg	120 Gm	90 tablets
			2 mg	3 mg	120 Gm	45 tablets
			3 mg	3 mg	120 Gm	30 tablets
Eszopiclone	IV	various				
•Eszopiclone *			1 mg	3 mg	120 Gm	90 tablets
			2 mg	3 mg	120 Gm	45 tablets

Please be advised that the information contained in this table is compiled solely from reference works recognized and approved by the State Board of Pharmacy pursuant to rule 4729-11-07.

Controlled Substance Reference Table

PRODUCT NAME •INGREDIENTS	C.S.A. SCHEDULE	DISTRIBUTOR	STRENGTH	MAXIMUM DAILY DOSE	--BULK AMOUNTS-- BY WGT	BY DOSE
			3 mg	3 mg	120 Gm	30 tablets
ETHYLESTRENOL						
Maxibolin	III	Organon				
•Ethylestrenol *			2 mg/5 ml	n/a	n/a	16 ml oral solution
			2 mg	n/a	16 Gm	200 dosage units
ETHYLMORPHINE						
Ethylmorphine	II	various				
•Ethylmorphine *			n/a	n/a	20 Gm	n/a
EZOGABINE						
Potiga	V	GlaxoSmithKline				
•Ezogabine *			50 mg	n/a	250 Gm	n/a
			200 mg	n/a	250 Gm	n/a
			300 mg	n/a	250 Gm	n/a
			400 mg	n/a	250 Gm	n/a
FENTANYL						
Abstral	II	Sentynl				
•Fentanyl *			100 mcg	3200 mcg	20 Gm	160 sublingual tablets
			200 mcg	3200 mcg	20 Gm	80 sublingual tablets
			300 mcg	3200 mcg	20 Gm	56 sublingual tablets
			400 mcg	3200 mcg	20 Gm	40 sublingual tablets
			600 mcg	3200 mcg	20 Gm	32 sublingual tablets
			800 mcg	3200 mcg	20 Gm	24 sublingual tablets
Actiq	II	Cephalon				
•Fentanyl *			200 mcg	6400 mcg	20 Gm	160 lozenges
			400 mcg	6400 mcg	20 Gm	80 lozenges
			600 mcg	6400 mcg	20 Gm	56 lozenges
			800 mcg	6400 mcg	20 Gm	40 lozenges
			1200 mcg	6400 mcg	20 Gm	32 lozenges
			1600 mcg	6400 mcg	20 Gm	24 lozenges
Duragesic (NOTE: fentanyl patch content changed-select correct patch	II	Janssen				
•Fentanyl *			12.5 mcg/hr -1.25 mg/patch	1200 mcg	n/a	5 patches

Please be advised that the information contained in this table is compiled solely from reference works recognized and approved by the State Board of Pharmacy pursuant to rule 4729-11-07.

Controlled Substance Reference Table

PRODUCT NAME •INGREDIENTS	C.S.A. SCHEDULE	DISTRIBUTOR	STRENGTH	MAXIMUM DAILY DOSE	--BULK AMOUNTS-- BY WGT	BY DOSE
			25 mcg/hr-2.5 mg/patch	1200 mcg	n/a	3 patches
			50 mcg/hr-5 mg/patch	1200 mcg	n/a	2 patches
			75 mcg/hr-7.5 mg/patch	1200 mcg	n/a	1 patch
			100 mcg/hr-10 mg/patch	1200 mcg	n/a	1 patch
			12.5 mcg/hr -2.1 mg/patch	1200 mcg	n/a	3 patches
			25 mcg/hr-4.2 mg/patch	1200 mcg	n/a	2 patches
			50 mcg/hr-8.4 mg/patch	1200 mcg	n/a	1 patch
			75 mcg/hr-12.6 mg/patch	1200 mcg	n/a	1 patch
			100 mcg/hr-16.8 mg/patch	1200 mcg	n/a	1 patch
Fentanyl	II	various				
•Fentanyl *			0.05 mg/ml (50 mcg/ml)	3.5 mg	n/a	350 ml injection
			100 mcg	4800 mcg	20 Gm	240 buccal tablets
			200 mcg	4800 mcg	20 Gm	120 buccal tablets
			400 mcg	4800 mcg	20 Gm	60 buccal tablets
			600 mcg	4800 mcg	20 Gm	40 buccal tablets
			800 mcg	4800 mcg	20 Gm	30 buccal tablets
			200 mcg	6400 mcg	20 Gm	160 lozenges
			400 mcg	6400 mcg	20 Gm	80 lozenges
			600 mcg	6400 mcg	20 Gm	56 lozenges
			800 mcg	6400 mcg	20 Gm	40 lozenges
			1200 mcg	6400 mcg	20 Gm	32 lozenges
			1600 mcg	6400 mcg	20 Gm	24 lozenges
			n/a	n/a	20 Gm powder	n/a
Fentanyl Patch (Also see Duragesic above)	II	various	25 mcg/hr-2.5 mg/patch	1200 mcg	n/a	3 patches
•Fentanyl *			50 mcg/hr-5 mg/patch	1200 mcg	n/a	2 patches
			75 mcg/hr-7.5 mg/patch	1200 mcg	n/a	1 patch
			100 mcg/hr-10 mg/patch	1200 mcg	n/a	1 patch
		Sandoz	12.5 mcg/hr -2.1 mg/patch	1200 mcg	n/a	3 patches
			25 mcg/hr-4.2 mg/patch	1200 mcg	n/a	2 patches
			50 mcg/hr-8.4 mg/patch	1200 mcg	n/a	1 patch
			75 mcg/hr-12.6 mg/patch	1200 mcg	n/a	1 patch
			100 mcg/hr-16.8 mg/patch	1200 mcg	n/a	1 patch
		DAVA	25 mcg/hr-2.75 mg/patch	1200 mcg	n/a	3 patches
			50 mcg/hr-5.5 mg/patch	1200 mcg	n/a	2 patches
			75 mcg/hr-8.25 mg/patch	1200 mcg	n/a	1 patch

Please be advised that the information contained in this table is compiled solely from reference works recognized and approved by the State Board of Pharmacy pursuant to rule 4729-11-07.

Controlled Substance Reference Table

PRODUCT NAME •INGREDIENTS	C.S.A. SCHEDULE	DISTRIBUTOR	STRENGTH	MAXIMUM DAILY DOSE	--BULK AMOUNTS-- BY WGT	BY DOSE
			100 mcg/hr-11 mg/patch	1200 mcg	n/a	1 patch
		Mallinckrodt	12.5 mcg/hr -1.375 mg/patch	1200 mcg	n/a	5 patches
			25 mcg/hr-2.75 mg/patch	1200 mcg	n/a	3 patches
			50 mcg/hr-5.5 mg/patch	1200 mcg	n/a	2 patches
			75 mcg/hr-8.25 mg/patch	1200 mcg	n/a	1 patch
			100 mcg/hr-11 mg/patch	1200 mcg	n/a	1 patch
		Apotex	12.5 mcg/hr -1.38 mg/patch	1200 mcg	n/a	5 patches
			25 mcg/hr-2.76 mg/patch	1200 mcg	n/a	3 patches
			50 mcg/hr-5.52 mg/patch	1200 mcg	n/a	2 patches
			75 mcg/hr-8.28 mg/patch	1200 mcg	n/a	1 patch
			100 mcg/hr-11.04 mg/patch	1200 mcg	n/a	1 patch
		Mylan	12.5 mcg/hr -1.28 mg/patch	1200 mcg	n/a	5 patches
			25 mcg/hr-2.55 mg/patch	1200 mcg	n/a	3 patches
			37.5 mcg/hr-3.83 mg/patch	1200 mcg	n/a	2 patches
			50 mcg/hr-5.1 mg/patch	1200 mcg	n/a	2 patches
			62.5 mcg/hr-6.38 mg/patch	1200 mcg	n/a	1 patch
			75 mcg/hr-7.65 mg/patch	1200 mcg	n/a	1 patch
			87.5 mcg/hr-8.93 mg/patch	1200 mcg	n/a	1 patch
			100 mcg/hr-10.2 mg/patch	1200 mcg	n/a	1 patch
Fentora	II	Cephalon				
•Fentanyl *			100 mcg	4800 mcg	20 Gm	240 buccal tablets
			200 mcg	4800 mcg	20 Gm	120 buccal tablets
			400 mcg	4800 mcg	20 Gm	60 buccal tablets
			600 mcg	4800 mcg	20 Gm	40 buccal tablets
			800 mcg	4800 mcg	20 Gm	30 buccal tablets
Ionsys	II	Ortho-McNeil				
•Fentanyl *			40 mcg/activation	3.2 mg	n/a	5 transdermal systems
Lazanda	II	Archimedis Pharma				
•Fentanyl *			100 mcg/activation	3200 mcg	n/a	) intranasal sprays/20 pump bot
			300 mcg/activation	3200 mcg	n/a	) intranasal sprays/7 pump bottl
			400 mcg/activation	3200 mcg	n/a	) intranasal sprays/5 pump bottl
Onsolis	II	Meda				
•Fentanyl *			200 mcg	4800 mcg	20 Gm	120 buccal films

Please be advised that the information contained in this table is compiled solely from reference works recognized and approved by the State Board of Pharmacy pursuant to rule 4729-11-07.

Controlled Substance Reference Table

PRODUCT NAME •INGREDIENTS	C.S.A. SCHEDULE	DISTRIBUTOR	STRENGTH	MAXIMUM DAILY DOSE	--BULK AMOUNTS-- BY WGT	BY DOSE
			400 mcg	4800 mcg	20 Gm	60 buccal films
			600 mcg	4800 mcg	20 Gm	42 buccal films
			800 mcg	4800 mcg	20 Gm	30 buccal films
			1200 mcg	4800 mcg	20 Gm	24 buccal films
Sublimaze	II	Akorn				
•Fentanyl *			0.05 mg/ml (50 mcg/ml)	3.5 mg	n/a	350 ml injection
Subsys	II	Insys Therapeutics				
•Fentanyl *			100 mcg	6400 mcg	20 Gm	320 sublingual spray units
			200 mcg	6400 mcg	20 Gm	160 sublingual spray units
			400 mcg	6400 mcg	20 Gm	80 sublingual spray units
			600 mcg	6400 mcg	20 Gm	54 sublingual spray units
			800 mcg	6400 mcg	20 Gm	40 sublingual spray units
			1200 mcg	6400 mcg	20 Gm	27 sublingual spray units
			1600 mcg	6400 mcg	20 Gm	20 sublingual spray units
FLUNITRAZEPAM						
Flunitrazepam	IV	various				
•Flunitrazepam *			0.5 mg	2 mg	120 Gm	120 tablets
			1 mg	2 mg	120 Gm	60 tablets
FLUOXYMESTERONE						
Androxy	III	Upsher-Smith				
•Fluoxymesterone *			10 mg	n/a	16 Gm	200 dosage units
Fluoxymesterone	III	various				
•Fluoxymesterone *			2 mg	n/a	16 Gm	200 dosage units
			5 mg	n/a	16 Gm	200 dosage units
			10 mg	n/a	16 Gm	200 dosage units
Halotestin	III	Pharmacia				
•Fluoxymesterone *			2 mg	n/a	16 Gm	200 dosage units
			5 mg	n/a	16 Gm	200 dosage units
			10 mg	n/a	16 Gm	200 dosage units
FLURAZEPAM						

Please be advised that the information contained in this table is compiled solely from reference works recognized and approved by the State Board of Pharmacy pursuant to rule 4729-11-07.

Controlled Substance Reference Table

PRODUCT NAME •INGREDIENTS	C.S.A. SCHEDULE	DISTRIBUTOR	STRENGTH	MAXIMUM DAILY DOSE	--BULK AMOUNTS-- BY WGT	BY DOSE
Dalmane	IV	Valeant				
•Flurazepam Hydrochloride *			15 mg	30 mg	120 Gm	60 capsules
			30 mg	30 mg	120 Gm	30 capsules
Flurazepam	IV	various				
•Flurazepam Hydrochloride *			15 mg	30 mg	120 Gm	60 capsules
			30 mg	30 mg	120 Gm	30 capsules
GAMMA HYDROXYBUTERATE (GHB)						
Gamma Hydroxybuterate (GHB) *	I		n/a	n/a	30 Gm	10 unit doses
HALAZEPAM						
Paxipam	IV	Schering				
•Halazepam *			20 mg	160 mg	120 Gm	240 tablets
			40 mg	160 mg	120 Gm	120 tablets
HASHISH						
Hashish*	I				see 2925.03 or .11, ORC	
HEROIN						
Heroin *	I				see 2925.03 or .11, ORC	
HYDROCODONE						
Dolacet	II	Roberts Hauck				
•Acetaminophen 500 mg			5 mg	40 mg	20 Gm	40 capsules
•Hydrocodone Bitartrate *						
Flowtuss	II	Mission Pharmacal				
•Guaifenesin 200 mg			2.5 mg/5 ml	30 mg	n/a	300 ml oral solution
•Hydrocodone Bitartrate *						
Hycet	II	G&W Labs				
•Acetaminophen 325 mg			7.5 mg/15 ml	45 mg	n/a	450 ml oral solution
•Hydrocodone Bitartrate*						

Please be advised that the information contained in this table is compiled solely from reference works recognized and approved by the State Board of Pharmacy pursuant to rule 4729-11-07.

Controlled Substance Reference Table

PRODUCT NAME •INGREDIENTS	C.S.A. SCHEDULE	DISTRIBUTOR	STRENGTH	MAXIMUM DAILY DOSE	--BULK AMOUNTS-- BY WGT	BY DOSE
Hycodan	II	Endo				
•Homatropine Methylbromide 1.5 mg			5 mg/5 ml	30 mg	n/a	150 ml oral solution
•Hydrocodone Bitartrate *			5 mg	30 mg	20 Gm	30 tablets
Hycofenix	II	Cintex Services				
•Guaifenesin 200 mg			2.5 mg/5 ml	20 mg	n/a	200 ml oral solution
•Hydrocodone Bitartrate *						
•Pseudoephedrine Hydrochloride 30 mg						
Hycotuss Expectorant	II	Endo				
•Guaifenesin 100 mg			5 mg/5 ml	30 mg	n/a	150 ml oral solution
•Hydrocodone Bitartrate *						
Hydrocodone	II	various				
•Hydrocodone Bitartrate *			n/a	n/a	20 Gm powder	n/a
Hydrocodone with Acetaminophen	II	various				
•Acetaminophen 108 mg			2.5 mg/5 ml	45 mg	n/a	450 ml oral solution
•Hydrocodone Bitartrate *						
•Acetaminophen 167 mg			2.5 mg/5 ml	45 mg	n/a	450 ml oral solution
•Hydrocodone Bitartrate *						
•Acetaminophen 300 mg			2.5 mg	30 mg	20 Gm	60 tablets
•Hydrocodone Bitartrate *						
•Acetaminophen 325 mg			2.5 mg	30 mg	20 Gm	60 tablets
•Hydrocodone Bitartrate *						
•Acetaminophen 500 mg			2.5 mg	20 mg	20 Gm	40 tablets
•Hydrocodone Bitartrate *						
•Acetaminophen 217 mg			5 mg/10 ml	45 mg	n/a	450 ml oral solution
•Hydrocodone Bitartrate *						
•Acetaminophen 300 mg			5 mg	60 mg	20 Gm	60 tablets

Please be advised that the information contained in this table is compiled solely from reference works recognized and approved by the State Board of Pharmacy pursuant to rule 4729-11-07.

Controlled Substance Reference Table

PRODUCT NAME •INGREDIENTS	C.S.A. SCHEDULE	DISTRIBUTOR	STRENGTH	MAXIMUM DAILY DOSE	--BULK AMOUNTS-- BY WGT	BY DOSE
•Hydrocodone Bitartrate *						
•Acetaminophen 325 mg			5 mg	60 mg	20 Gm	60 tablets
•Hydrocodone Bitartrate *						
•Acetaminophen 500 mg			5 mg	40 mg	20 Gm	40 tablets
•Hydrocodone Bitartrate *						
•Acetaminophen 750 mg			5 mg	25 mg	20 Gm	25 tablets
•Hydrocodone Bitartrate *						
•Acetaminophen 325 mg			7.5 mg/15 ml	45 mg	n/a	450 ml oral solution
•Hydrocodone Bitartrate *						
•Acetaminophen 300 mg			7.5 mg	45 mg	20 Gm	30 tablets
•Hydrocodone Bitartrate *						
•Acetaminophen 325 mg			7.5 mg	45 mg	20 Gm	30 tablets
•Hydrocodone Bitartrate *						
•Acetaminophen 500 mg			7.5 mg	45mg	20 Gm	30 tablets
•Hydrocodone Bitartrate *						
•Acetaminophen 650 mg			7.5 mg	45mg	20 Gm	30 tablets
•Hydrocodone Bitartrate *						
•Acetaminophen 750 mg			7.5 mg	37.5 mg	20 Gm	25 tablets
•Hydrocodone Bitartrate *						
•Acetaminophen 300 mg			10 mg	60 mg	20 Gm	30 tablets
•Hydrocodone Bitartrate *						
•Acetaminophen 325 mg			10 mg	60 mg	20 Gm	30 tablets
•Hydrocodone Bitartrate *						
•Acetaminophen 500 mg			10 mg	60 mg	20 Gm	30 tablets
•Hydrocodone Bitartrate *						

Please be advised that the information contained in this table is compiled solely from reference works recognized and approved by the State Board of Pharmacy pursuant to rule 4729-11-07.

Controlled Substance Reference Table

PRODUCT NAME •INGREDIENTS	C.S.A. SCHEDULE	DISTRIBUTOR	STRENGTH	MAXIMUM DAILY DOSE	--BULK AMOUNTS-- BY WGT	BY DOSE
•Acetaminophen 650 mg			10 mg	60mg	20 Gm	30 tablets
•Hydrocodone Bitartrate *						
•Acetaminophen 660 mg			10 mg	60 mg	20 Gm	30 tablets
•Hydrocodone Bitartrate*						
•Acetaminophen 325 mg			10 mg/15 ml	60 mg	n/a	450 ml oral solution
•Hydrocodone Bitartrate*						
•Acetaminophen 500 mg			10 mg/15 ml	60 mg	n/a	450 ml oral solution
•Hydrocodone Bitartrate*						
•Acetaminophen 750 mg			10 mg	50 mg	20 Gm	25 tablets
•Hydrocodone Bitartrate *						
. . . . .						
Hydrocodone with Homatropine	II	various				
•Homatropine 1.5 mg			5 mg/5 ml	30 mg	n/a	150 ml oral solution
•Hydrocodone Bitartrate *			5 mg	30 mg	20 Gm	30 tablets
. . . . .						
Hydrocodone with chlorpheniramine	II	various				
•Hydrocodone Bitartrate *			5 mg/5 ml	20 mg	n/a	100 ml oral solution
•Chlorpheniramine Maleate 4 mg						
. . . . .						
Hydrocodone with chlorpheniramine						
•Hydrocodone Bitartrate (as polistirex)*	II	various	10 mg/5ml	20 mg	n/a	ml oral extended release suspen
•Chlorpheniramine Maleate 8 mg (as polistirex)						
. . . . .						
Hydrocodone with Ibuprofen	II	various				
•Hydrocodone Bitartrate*			2.5 mg	12.5 mg	20 Gm	25 tablets
•Ibuprofen 200 mg						
•Hydrocodone Bitartrate*			5 mg	25 mg	20 Gm	25 tablets
•Ibuprofen 200 mg						
•Hydrocodone Bitartrate*			7.5 mg	37.5 mg	20 Gm	25 tablets
•Ibuprofen 200 mg						

Please be advised that the information contained in this table is compiled solely from reference works recognized and approved by the State Board of Pharmacy pursuant to rule 4729-11-07.

Controlled Substance Reference Table

PRODUCT NAME •INGREDIENTS	C.S.A. SCHEDULE	DISTRIBUTOR	STRENGTH	MAXIMUM DAILY DOSE	--BULK AMOUNTS-- BY WGT	BY DOSE
•Hydrocodone Bitartrate*			10 mg	50 mg	20 Gm	25 tablets
•Ibuprofen 200 mg						
Hydrocodone with Pseudoephedrine	II	various				
•Guaifenesin 100 mg			2.5 mg/5 ml	20 mg	n/a	200 ml oral solution
•Hydrocodone Bitartrate *						
•Pseudoephedrine Hydrochloride 30 mg						
Hydromet	II	Actavis Mid Atlantic				
•Homatropine 1.5 mg			5 mg/5 ml	30 mg	n/a	150 ml oral solution
•Hydrocodone Bitartrate *						
Hydro-Tussin HC	II	Ethex				
•Hydrocodone Bitartrate *			3 mg/5 ml	24 mg	n/a	200 ml oral solution
•Chlorpheniramine Maleate 2 mg						
•Pseudoephedrine 15 mg						
Hyphed	II	Cypress				
•Hydrocodone Bitartrate *			2.5 mg/5 ml	20 mg	n/a	200 ml oral solution
•Chlorpheniramine Maleate 2 mg						
•Pseudoephedrine 30 mg						
Hysingla ER	II	Purdue				
•Hydrocodone Bitartrate *			20 mg	80 mg	20 Gm	20 extended release tablets
			30 mg	80 mg	20 Gm	14 extended release tablets
			40 mg	80 mg	20 Gm	10 extended release tablets
			60 mg	80 mg	20 Gm	7 extended release tablets
			80 mg	80 mg	20 Gm	5 extended release tablets
			100 mg	80 mg	20 Gm	4 extended release tablets
			120 mg	80 mg	20 Gm	4 extended release tablets
Kwelcof	II	Ascher				
•Guaifenesin 100 mg			5 mg/5 ml	30 mg	n/a	150 ml oral solution
•Hydrocodone Bitartrate *						
Lorcet	II	Mayne Pharma				

Please be advised that the information contained in this table is compiled solely from reference works recognized and approved by the State Board of Pharmacy pursuant to rule 4729-11-07.

Controlled Substance Reference Table

PRODUCT NAME •INGREDIENTS	C.S.A. SCHEDULE	DISTRIBUTOR	STRENGTH	MAXIMUM DAILY DOSE	--BULK AMOUNTS-- BY WGT	BY DOSE
•Acetaminophen 325 mg			5 mg	60 mg	20 Gm	60 tablets
•Hydrocodone Bitartrate *						
Lorcet Plus	II	Mayne Pharma				
•Acetaminophen 325 mg			7.5 mg	45mg	20 Gm	30 tablets
•Hydrocodone Bitartrate *						
Lorcet-HD	II	Mayne Pharma				
•Acetaminophen 325 mg			10 mg	60 mg	20 Gm	30 tablets
•Hydrocodone Bitartrate *						
Lortab	II	UCB Pharma				
•Acetaminophen 325 mg			5 mg	60 mg	20 Gm	60 tablets
•Hydrocodone Bitartrate *						
Lortab	II	UCB Pharma				
•Acetaminophen 325 mg			7.5 mg	45mg	20 Gm	30 tablets
•Hydrocodone Bitartrate *						
Lortab	II	UCB Pharma				
•Acetaminophen 325 mg			10 mg	60 mg	20 Gm	30 tablets
•Hydrocodone Bitartrate *						
Lortab Elixir	II	Akorn				
•Acetaminophen 300 mg			10 mg/15 ml	60 mg	n/a	450 ml oral solution
•Hydrocodone Bitartrate *						
Norco 5/325	II	Actavis Pharma				
•Acetaminophen 325 mg			5 mg	60 mg	20 Gm	60 tablets
•Hydrocodone Bitartrate*						
Norco 7.5/325	II	Actavis Pharma				
•Acetaminophen 325 mg			7.5 mg	45 mg	20 Gm	30 tablets
•Hydrocodone Bitartrate *						
Norco 10/325	II	Actavis Pharma				
•Acetaminophen 325 mg			10 mg	60 mg	20 Gm	30 tablets

Please be advised that the information contained in this table is compiled solely from reference works recognized and approved by the State Board of Pharmacy pursuant to rule 4729-11-07.

Controlled Substance Reference Table

PRODUCT NAME •INGREDIENTS	C.S.A. SCHEDULE	DISTRIBUTOR	STRENGTH	MAXIMUM DAILY DOSE	--BULK AMOUNTS-- BY WGT	BY DOSE
•Hydrocodone Bitartrate*						
Obredon	II	Actavis Pharma				
•Guaifenesin 200 mg			2.5 mg/5 ml	30 mg	n/a	300 ml oral solution
•Hydrocodone Bitartrate *						
Rezira						
•Hydrocodone Bitartrate*	II	Hawthorn	5 mg/5ml	20 mg	n/a	100 ml oral solution
*Pseudoephedrine 60 mg						
TussiCaps Full Strength	II	ECR				
•Chlorpheniramine Maleate 8 mg			10 mg	20 mg	20 Gm	10 extended release capsules
•Hydrocodone Bitartrate*						
TussiCaps Half Strength	II	ECR				
•Chlorpheniramine Maleate 4 mg			5 mg	20 mg	20 Gm	20 extended release capsules
•Hydrocodone Bitartrate*						
TussCaps						
•Chlorpheniramine 4 mg (as polistirex)	II	Valeant				
•Hydrocodone (as polistirex) *			5 mg	20 mg	20 Gm	20 capsules
•Chlorpheniramine 8 mg (as polistirex)	II	Valeant				
•Hydrocodone (as polistirex) *			10 mg	20 mg	20 Gm	10 capsules
Tussionex Pennkinetic	II	UCB Pharma				
•Chlorpheniramine 8 mg (as polistirex)			10 mg/5 ml	20 mg	n/a	0 ml extended release suspensio
•Hydrocodone (as polistirex) *						
Vicodin	II	AbbVie				
•Acetaminophen 300 mg			5 mg	60 mg	20 Gm	60 tablets
•Hydrocodone Bitartrate *						
Vicodin ES	II	AbbVie				
•Acetaminophen 300 mg			7.5 mg	45 mg	20 Gm	30 tablets
•Hydrocodone Bitartrate *						

Please be advised that the information contained in this table is compiled solely from reference works recognized and approved by the State Board of Pharmacy pursuant to rule 4729-11-07.

Controlled Substance Reference Table

PRODUCT NAME •INGREDIENTS	C.S.A. SCHEDULE	DISTRIBUTOR	STRENGTH	MAXIMUM DAILY DOSE	--BULK AMOUNTS-- BY WGT	BY DOSE
Vicodin HP	II	Abbvie				
•Acetaminophen 300 mg			10 mg	60 mg	20 Gm	30 tablets
•Hydrocodone Bitartrate*						
Vicodin Tuss	II	Knoll				
•Guaifenesin 100 mg			5 mg/5 ml	30 mg	n/a	150 ml oral solution
•Hydrocodone Bitartrate *						
Vicoprofen	II	AbbVie				
•Hydrocodone Bitartrate*			7.5 mg	37.5 mg	20 Gm	25 tablets
•Ibuprofen 200 mg						
Xodol	II	Shionogi				
•Acetaminophen 300 mg			5 mg	60 mg	20 Gm	60 tablets
•Hydrocodone Bitartrate *			7.5 mg	45 mg	20 Gm	30 tablets
			10 mg	60 mg	20 Gm	30 tablets
Zohydro ER	II	Pernix				
•Hydrocodone Bitartrate *			10 mg	80 mg	20 Gm	40 extended release capsules
			15 mg	80 mg	20 Gm	27 extended release capsules
			20 mg	80 mg	20 Gm	20 extended release capsules
			30 mg	80 mg	20 Gm	14 extended release capsules
			40 mg	80 mg	20 Gm	10 extended release capsules
			50 mg	80 mg	20 Gm	8 extended release capsules
Zydone 5/400	II	Endo				
•Acetaminophen 400 mg			5 mg	50 mg	20 Gm	50 tablets
•Hydrocodone Bitartrate *						
Zydone 7.5/400	II	Endo				
•Acetaminophen 400 mg			7.5 mg	45 mg	20 Gm	30 tablets
•Hydrocodone Bitartrate *						
Zydone 10/400	II	Endo				
•Acetaminophen 400 mg			10 mg	60 mg	20 Gm	30 tablets
•Hydrocodone Bitartrate *						
HYDROMORPHONE						

Please be advised that the information contained in this table is compiled solely from reference works recognized and approved by the State Board of Pharmacy pursuant to rule 4729-11-07.

Controlled Substance Reference Table

PRODUCT NAME •INGREDIENTS	C.S.A. SCHEDULE	DISTRIBUTOR	STRENGTH	MAXIMUM DAILY DOSE	--BULK AMOUNTS-- BY WGT	BY DOSE
Dilaudid	II	Purdue Pharma				
•Hydromorphone Hydrochloride *			1 mg/ml	24 mg	n/a	120 ml injection
			2 mg/ml	24 mg	n/a	60 ml injection
			4 mg/ml	24 mg	n/a	30 ml injection
			1 mg/5 ml	80 mg	n/a	2000 ml oral solution
			1 mg/ml	80 mg	n/a	400 ml oral solution
			2 mg	80 mg	20 Gm	200 tablets
			4 mg	80 mg	20 Gm	100 tablets
			8 mg	80 mg	20 Gm	50 tablets
Dilaudid-HP	II	Purdue Pharma				
•Hydromorphone Hydrochloride *			10 mg/ml	24 mg	n/a	12 ml injection
Exalgo	II	Mallinckrodt				
•Hydromorphone Hydrochloride *			8 mg	64 mg	20 Gm	40 extended release tablets
			12 mg	64 mg	20 Gm	27 extended release tablets
			16 mg	64 mg	20 Gm	20 extended release tablets
			32 mg	64 mg	20 Gm	10 extended release tablets
Hydromorphone	II	various				
•Hydromorphone Hydrochloride *			1 mg/ml	24 mg	n/a	120 ml injection
			10 mg/ml	24 mg	n/a	12 ml injection
			2 mg/ml	24 mg	n/a	60 ml injection
			4 mg/ml	24 mg	n/a	30 ml injection
			n/a	n/a	20 Gm powder	n/a
			2 mg	80 mg	20 Gm	200 tablets
			4 mg	80 mg	20 Gm	100 tablets
			8 mg	80 mg	20 Gm	50 tablets
			8 mg	64 mg	20 Gm	40 extended release tablets
			12 mg	64 mg	20 Gm	27 extended release tablets
			16 mg	64 mg	20 Gm	20 extended release tablets
			32 mg	64 mg	20 Gm	10 extended release tablets
			3 mg	12 mg	20 Gm	20 suppositories
KETAMINE						
Ketamine	III	various				

Please be advised that the information contained in this table is compiled solely from reference works recognized and approved by the State Board of Pharmacy pursuant to rule 4729-11-07.

Controlled Substance Reference Table

PRODUCT NAME •INGREDIENTS	C.S.A. SCHEDULE	DISTRIBUTOR	STRENGTH	MAXIMUM DAILY DOSE	--BULK AMOUNTS-- BY WGT	BY DOSE
•Ketamine Hydrochloride *			10 mg/ml	910 mg	n/a	2730 ml injection
			50 mg/ml	910 mg	n/a	546 ml injection
			100 mg/ml	910 mg	n/a	273 ml injection
			n/a	n/a	120 Gm powder	n/a
. . . . .						
Ketalar	III	PAR				
•Ketamine Hydrochloride *			10 mg/ml	910 mg	n/a	2730 ml injection
			50 mg/ml	910 mg	n/a	546 ml injection
			100 mg/ml	910 mg	n/a	273 ml injection
LACOSAMIDE						
. . . . .						
Vimpat	V	UCB				
•Lacosamide *			10 mg/ ml	n/a	n/a	250 ml injection
			10 mg/ ml	n/a	n/a	250 ml oral solution
			50 mg	n/a	250 Gm	n/a
			100 mg	n/a	250 Gm	n/a
			150 mg	n/a	250 Gm	n/a
			200 mg	n/a	250 Gm	n/a
LISDEXAMFETAMINE						
. . . . .						
Vyvanse	II	Shire				
•Lisdexamfetamine *			10 mg	70 mg	120 Gm	210 capsulees
			20 mg	70 mg	120 Gm	105 capsules
			30 mg	70 mg	120 Gm	70 capsules
			40 mg	70 mg	120 Gm	53 capsules
			50 mg	70 mg	120 Gm	42 capsules
			60 mg	70 mg	120 Gm	35 capsules
			70 mg	70 mg	120 Gm	30 capsules
LEVO-ALPHACETYLMETHADOL						
. . . . .						
Orlaam	II	Roxane				
•Levomethadyl Acetate Hydrochloride *			10 mg/ml	120 mg	n/a	60 ml oral solution
LEVORPHANOL						
. . . . .						
Levo-Dromoran	II	Valeant				
•Levorphanol Tartrate *			2 mg/ml	12 mg	n/a	30 ml injection
			2 mg	12 mg	20 Gm	30 tablets

Please be advised that the information contained in this table is compiled solely from reference works recognized and approved by the State Board of Pharmacy pursuant to rule 4729-11-07.

Controlled Substance Reference Table

PRODUCT NAME •INGREDIENTS	C.S.A. SCHEDULE	DISTRIBUTOR	STRENGTH	MAXIMUM DAILY DOSE	--BULK AMOUNTS-- BY WGT	BY DOSE
Levorphanol	II	various				
•Levorphanol Tartrate *			2 mg	12 mg	20 Gm	30 tablets
LORAZEPAM						
Ativan	IV	various				
•Lorazepam *			2 mg/ml	10 mg	n/a	150 ml injection
			4 mg/ml	10 mg	n/a	75 ml injection
			0.5 mg	10 mg	120 Gm	600 tablets
			1 mg	10 mg	120 Gm	300 tablets
			2 mg	10 mg	120 Gm	150 tablets
Lorazepam	IV	various				
•Lorazepam *			2 mg/ml	10 mg	n/a	150 ml injection
			4 mg/ml	10 mg	n/a	75 ml injection
			n/a	n/a	120 Gm powder	n/a
			2 mg/ml	10 mg	n/a	150 ml oral solution
			0.5 mg	10 mg	120 Gm	600 tablets
			1 mg	10 mg	120 Gm	300 tablets
			2 mg	10 mg	120 Gm	150 tablets
Lorazepam Intensol	IV	Roxane				
•Lorazepam *			2 mg/ml	10 mg	n/a	150 ml oral solution
LORCASERIN						
Belviq	IV	Eisai				
•Lorcaserin *			10 mg	20 mg	120 Gm	60 tablets
Belviq XR	IV	Eisai				
•Lorcaserin *			20 mg	20 mg	120 Gm	30 tablets
LYSERGIC ACID DIETHYLAMIDE						
LSD	I					
•Lysergic Acid Diethylamide *					see 2925.03 or .11, ORC	
MARIHUANA						

Please be advised that the information contained in this table is compiled solely from reference works recognized and approved by the State Board of Pharmacy pursuant to rule 4729-11-07.

Controlled Substance Reference Table

PRODUCT NAME •INGREDIENTS	C.S.A. SCHEDULE	DISTRIBUTOR	STRENGTH	MAXIMUM DAILY DOSE	--BULK AMOUNTS-- BY WGT	BY DOSE
Marihuana *	I				see 2925.03 or .11, ORC	
MAZINDOL						
Mazanor	IV	Wyeth-Ayerst				
•Mazindol *			1 mg	3 mg	120 Gm	90 tablets
Sanorex	IV	Sandoz				
•Mazindol *			1 mg	3 mg	120 Gm	90 tablets
			2 mg	3 mg	120 Gm	45 tablets
MEPERIDINE						
Demerol	II	various				
•Meperidine Hydrochloride *			25 mg/0.5 ml	1200 mg	n/a	120 ml injection
			25 mg/ml	1200 mg	n/a	240 ml injection
			50 mg/ml	1200 mg	n/a	120 ml injection
			75 mg/1.5 ml	1200 mg	n/a	120 ml injection
			75 mg/ml	1200 mg	n/a	80 ml injection
			100 mg/ml	1200 mg	n/a	60 ml injection
			50 mg/5 ml	1200 mg	n/a	600 ml oral solution
			50 mg	1200 mg	20 Gm	120 tablets
			100 mg	1200 mg	20 Gm	60 tablets
Meperidine	II	various				
•Meperidine Hydrochloride *			10 mg/ml	1200 mg	n/a	600 ml injection
			25 mg/ml	1200 mg	n/a	240 ml injection
			50 mg/ml	1200 mg	n/a	120 ml injection
			75 mg/ml	1200 mg	n/a	80 ml injection
			100 mg/ml	1200 mg	n/a	60 ml injection
			n/a	n/a	20 Gm powder	n/a
			50 mg/5 ml	1200 mg	n/a	600 ml oral solution
			50 mg	1200 mg	20 Gm	120 tablets
			100 mg	1200 mg	20 Gm	60 tablets
Meperidine and Promethazine	II	various				
•Meperidine Hydrochloride *			50 mg	300 mg	20 Gm	30 capsules

Please be advised that the information contained in this table is compiled solely from reference works recognized and approved by the State Board of Pharmacy pursuant to rule 4729-11-07.

Controlled Substance Reference Table

PRODUCT NAME •INGREDIENTS	C.S.A. SCHEDULE	DISTRIBUTOR	STRENGTH	MAXIMUM DAILY DOSE	--BULK AMOUNTS-- BY WGT	BY DOSE
•Promethazine 25 mg						
MEPHOBARBITAL						
Mebaral	IV	Ovation				
•Mephobarbital *			32 mg	600 mg	120 Gm	563 tablets
			50 mg	600 mg	120 Gm	360 tablets
			100 mg	600 mg	120 Gm	180 tablets
			200 mg	600 mg	120 Gm	90 tablets
Mephobarbital	IV	various				
•Mephobarbital *			32 mg	600 mg	120 Gm	563 tablets
			50 mg	600 mg	120 Gm	360 tablets
			100 mg	600 mg	120 Gm	180 tablets
MEPROBAMATE						
Equagesic	IV	Leitner				
•Aspirin 325 mg			200 mg	2400 mg	120 Gm	360 tablets
•Meprobamate *						
Equanil	IV	Wyeth -Ayerst				
•Meprobamate *			200 mg	2400 mg	120 Gm	360 tablets
			400 mg	2400 mg	120 Gm	180 tablets
Meprobamate	IV	various				
•Meprobamate *			200 mg	2400 mg	120 Gm	360 tablets
			400 mg	2400 mg	120 Gm	180 tablets
Miltown	IV	Wallace				
•Meprobamate *			200 mg	2400 mg	120 Gm	360 tablets
			400 mg	2400 mg	120 Gm	180 tablets
METHADONE						
Dolophine	II	West-Ward				
•Methadone Hydrochloride *			5 mg	120 mg	20 Gm	120 tablets
			10 mg	120 mg	20 Gm	60 tablets

Please be advised that the information contained in this table is compiled solely from reference works recognized and approved by the State Board of Pharmacy pursuant to rule 4729-11-07.

Controlled Substance Reference Table

PRODUCT NAME •INGREDIENTS	C.S.A. SCHEDULE	DISTRIBUTOR	STRENGTH	MAXIMUM DAILY DOSE	--BULK AMOUNTS-- BY WGT	BY DOSE
Methadone	II	various				
•Methadone Hydrochloride *			n/a	n/a	20 Gm powder	n/a
			10 mg/ml	120 mg	n/a	60 ml injection
			5 mg/5 ml	120 mg	n/a	600 ml oral solution
			10 mg/ml	120 mg	n/a	60 ml oral solution
			10 mg/5 ml	120 mg	n/a	300 ml oral solution
			5 mg	120 mg	20 Gm	120 tablets
			10 mg	120 mg	20 Gm	60 tablets
			40 mg	120 mg	20 Gm	16 dispersible tablets
Methadose	II	Mallinckrodt				
•Methadone Hydrochloride *			5 mg	120 mg	20 Gm	120 tablets
			10 mg	120 mg	20 Gm	60 tablets
			40 mg	120 mg	20 Gm	16 dispersible tablets
			10 mg/ml	120 mg	20 Gm	60 ml oral solution
Methadone Intensol	II	West-Ward				
•Methadone Hydrochloride *			10 mg/ml	120 mg	n/a	60 ml oral solution
METHAMPHETAMINE						
Desoxyn	II	Recordati Rare Diseases				
•Methamphetamine Hydrochloride *			5 mg	25 mg	120 Gm	150 tablets
Methamphetamine	II	various				
			5 mg	25 mg	120 Gm	150 tablets
METHANDRIOL						
Methandriol	III	various				
•Methandriol *			n/a	n/a	n/a	16 ml injection
METHANDROSTENOLONE						
Methandrostenolone	III	various				
•Methandrostenolone *			n/a	n/a	16 Gm	200 dosage units
METHAQUALONE						
Methaqualone	I					
•Methaqualone *		n/a	n/a	n/a	30 Gm	10 unit doses

Please be advised that the information contained in this table is compiled solely from reference works recognized and approved by the State Board of Pharmacy pursuant to rule 4729-11-07.

Controlled Substance Reference Table

PRODUCT NAME •INGREDIENTS	C.S.A. SCHEDULE	DISTRIBUTOR	STRENGTH	MAXIMUM DAILY DOSE	--BULK AMOUNTS-- BY WGT	BY DOSE
METHOHEXITAL						
Brevital	IV	Par				
•Methohexital Sodium *			200 mg/vial	120mg	n/a	18 vials
			500 mg/vial	120mg	n/a	8 vials
			2500 mg/vial	120mg	n/a	2 vials
			5000 mg/vial	120mg	n/a	1 vial
Methohexital Sodium	IV	various				
			50 mg/5 ml	120 mg	n/a	360 ml injection
			100 mg/10 ml	120 mg	n/a	360 ml injection
METHYLPHENIDATE						
Aptensio XR	II	Rhodes				
•Methylphenidate Hydrochloride *			10 mg	60 mg	120 Gm	180 extended release capsules
			15 mg	60 mg	120 Gm	120 extended release capsules
			20 mg	60 mg	120 Gm	90 extended release capsules
			30 mg	60 mg	120 Gm	60 extended release capsules
			40 mg	60 mg	120 Gm	45 extended release capsules
			50 mg	60 mg	120 Gm	36 extended release capsules
			60 mg	60 mg	120 Gm	30 extended release capsules
Concerta	II	Janssen				
•Methylphenidate Hydrochloride *			18 mg	72 mg	120 Gm	120 extended release tablets
			27 mg	72 mg	120 Gm	80 extended release tablets
			36 mg	72 mg	120 Gm	60 extended release tablets
			54 mg	72 mg	120 Gm	40 extended release tablets
Daytrana	II	Noven Therapeutics				
•Methylphenidate *			10 mg	30 mg	n/a	90 patches
			15 mg	30 mg	n/a	60 patches
			20 mg	30 mg	n/a	45 patches
			30 mg	30 mg	n/a	30 patches
Metadate CD	II	Upstate Pharma				
•Methylphenidate Hydrochloride *			10 mg	60 mg	120 Gm	180 extended release capsules
			20 mg	60 mg	120 Gm	90 extended release capsules

Please be advised that the information contained in this table is compiled solely from reference works recognized and approved by the State Board of Pharmacy pursuant to rule 4729-11-07.

Controlled Substance Reference Table

PRODUCT NAME •INGREDIENTS	C.S.A. SCHEDULE	DISTRIBUTOR	STRENGTH	MAXIMUM DAILY DOSE	--BULK AMOUNTS-- BY WGT	BY DOSE
			30 mg	60 mg	120 Gm	60 extended release capsules
			40 mg	60 mg	120 Gm	45 extended release capsules
			50 mg	60 mg	120 Gm	36 extended release capsules
			60 mg	60 mg	120 Gm	30 extended release capsules
Metadate ER	II	UCB				
•Methylphenidate Hydrochloride *			20 mg	60 mg	120 Gm	90 extended release tablets
Methylin	II	Shionogi Pharma				
•Methylphenidate Hydrochloride *			2.5 mg	60 mg	120 Gm	720 chewable tablets
			5 mg	60 mg	120 Gm	360 chewable tablets
			10 mg	60 mg	120 Gm	180 chewable tablets
			5 mg/5 ml	60 mg	n/a	1,800 ml oral solution
			10 mg/5 ml	60 mg	n/a	900 ml oral solution
Methylphenidate	II	various				
•Methylphenidate Hydrochloride *			5 mg	60 mg	120 Gm	360 tablets
			10 mg	60 mg	120 Gm	180 tablets
			10 mg	60 mg	120 Gm	180 extended release capsules
			20 mg	60 mg	120 Gm	90 tablets
			20 mg	60 mg	120 Gm	90 extended release tablets
			20 mg	60 mg	120 Gm	90 extended release capsules
			30 mg	60 mg	120 Gm	60 extended release capsules
			40 mg	60 mg	120 Gm	45 extended release capsules
			50 mg	60 mg	120 Gm	30 extended release capsules
			60 mg	60 mg	120 Gm	30 extended release capsules
			5 mg/5 ml	60 mg	n/a	1,800 ml oral solution
			10 mg/5 ml	60 mg	n/a	900 ml oral solution
Methylphenidate	II	Actavis, Kremers, Mallinckrodt				
•Methylphenidate Hydrochloride *			18 mg	72 mg	120 Gm	120 extended release tablets
			27 mg	72 mg	120 Gm	80 extended release tablets
			36 mg	72 mg	120 Gm	60 extended release tablets
			54 mg	72 mg	120 Gm	40 extended release tablets
Quillichew ER	II	NextWave Pharmaceuticals				
•Methylphenidate Hydrochloride *			20 mg	60 mg	120 Gm	extended release chewable tabl

Please be advised that the information contained in this table is compiled solely from reference works recognized and approved by the State Board of Pharmacy pursuant to rule 4729-11-07.

Controlled Substance Reference Table

PRODUCT NAME •INGREDIENTS	C.S.A. SCHEDULE	DISTRIBUTOR	STRENGTH	MAXIMUM DAILY DOSE	--BULK AMOUNTS-- BY WGT	BY DOSE
			30 mg	60 mg	120 Gm	extended release chewable tabl
			40 mg	60 mg	120 Gm	extended release chewable tabl
Quillivant XR	II	Pfizer				
•Methylphenidate Hydrochloride *			25 mg/5 ml	60 mg	n/a	0 ml extended release suspensi
Ritalin	II	Novartis				
•Methylphenidate Hydrochloride *			5 mg	60 mg	120 Gm	360 tablets
			10 mg	60 mg	120 Gm	180 tablets
			20 mg	60 mg	120 Gm	90 tablets
Ritalin LA	II	Novartis				
•Methylphenidate Hydrochloride *			10 mg	60 mg	120 Gm	180 extended release capsules
			20 mg	60 mg	120 Gm	90 extended release capsules
			30 mg	60 mg	120 Gm	60 extended release capsules
			40 mg	60 mg	120 Gm	45 extended release capsules
			60 mg	60 mg	120 Gm	30 extended release capsules
Ritalin-SR	II	Novartis				
•Methylphenidate Hydrochloride *			20 mg	60 mg	120 Gm	90 sustained release tablets
METHYLTESTOSTERONE						
Android	III	Valeant				
•Methyltestosterone *			10 mg	n/a	16 Gm	200 dosage units
Methitest	III	Global				
•Methyltestosterone *			10 mg	n/a	16 Gm	200 dosage units
Methyltestosterone	III	various				
•Methyltestosterone *			10 mg	n/a	16 Gm	200 dosage units
Testred	III	Valeant				
•Methyltestosterone *			10 mg	n/a	16 Gm	200 dosage units
Virilon	III	Star				
•Methyltestosterone *			10 mg	n/a	16 Gm	200 dosage units

Please be advised that the information contained in this table is compiled solely from reference works recognized and approved by the State Board of Pharmacy pursuant to rule 4729-11-07.

Controlled Substance Reference Table

PRODUCT NAME •INGREDIENTS	C.S.A. SCHEDULE	DISTRIBUTOR	STRENGTH	MAXIMUM DAILY DOSE	--BULK AMOUNTS-- BY WGT	BY DOSE
Esterified Estrogens and Methyltestosterone	ExAS	various				
•Estrogens, Esterified 1.25 mg			2.5 mg	n/a	16 Gm	200 dosage units
•Methyltestosterone *						
Esterified Estrogens and Methyltestosterone H.S.	ExAS	various				
•Estrogens, Esterified 0.625 mg			1.25 mg	n/a	16 Gm	200 dosage units
•Methyltestosterone *						
MIDAZOLAM						
Versed	IV	Roche				
•Midazolam Hydrochloride *			1 mg/ml	24.5 mg	n/a	735 ml injection
			5 mg/ml	24.5 mg	n/a	147 ml injection
			2 mg/ml	20 mg	n/a	300 ml oral solution
•Midazolam Hydrochloride *	IV	various				
			1 mg/ml	24.5 mg	n/a	735 ml injection
			5 mg/ml	24.5 mg	n/a	147 ml injection
			2 mg/ml	20 mg	n/a	300 ml oral solution
MODAFINIL						
•Modafinil *	IV	various				
			100 mg	200 mg	120 Gm	60 tablets
			200 mg	200 mg	120 Gm	30 tablets
Provigil	IV	Cephalon				
•Modafinil *			100 mg	200 mg	120 Gm	60 tablets
			200 mg	200 mg	120 Gm	30 tablets
MORPHINE						
Astramorph-PF	II	Fresenius Kabi				
•Morphine Sulfate *			0.5 mg/ml	60 mg	n/a	600 ml injection
			1 mg/ml	60 mg	n/a	300 ml injection
Avinza	II	Ligand				
•Morphine Sulfate *			30 mg	180 mg	20 Gm	30 extended release capsules
			45 mg	180 mg	20 Gm	20 extended release capsules

Please be advised that the information contained in this table is compiled solely from reference works recognized and approved by the State Board of Pharmacy pursuant to rule 4729-11-07.

Controlled Substance Reference Table

PRODUCT NAME •INGREDIENTS	C.S.A. SCHEDULE	DISTRIBUTOR	STRENGTH	MAXIMUM DAILY DOSE	--BULK AMOUNTS-- BY WGT	BY DOSE
			60 mg	180 mg	20 Gm	15 extended release capsules
			75 mg	180 mg	20 Gm	12 extended release capsules
			90 mg	180 mg	20 Gm	10 extended release capsules
			120 mg	180 mg	20 Gm	8 extended release capsules
DepoDur	II	EKR Therapeutics				
•Morphine Sulfate *			10 mg/ml	15 mg	n/a	7.5 ml extended release injectio
			15 mg/1.5 ml	15 mg	n/a	7.5 ml extended release injectio
Duramorph	II	various				
•Morphine Sulfate *			0.5 mg/ml	60 mg	n/a	600 ml injection
			1 mg/ml	60 mg	n/a	300 ml injection
Embeda 20 mg/0.8 mg	II	Pfizer				
•Morphine Sulfate *			20 mg	180 mg	20 Gm	45 extended release tablets
•Naltrexone hydrochloride 0.8 mg						
Embeda 30 mg/1.2 mg	II	Pfizer				
•Morphine Sulfate *			30 mg	180 mg	20 Gm	30 extended release tablets
•Naltrexone hydrochloride 1.2 mg						
Embeda 50 mg/2 mg	II	Pfizer				
•Morphine Sulfate *			50 mg	180 mg	20 Gm	18 extended release tablets
•Naltrexone hydrochloride 2 mg						
Embeda 60 mg/2.4 mg	II	Pfizer				
•Morphine Sulfate *			60 mg	180 mg	20 Gm	15 extended release tablets
•Naltrexone hydrochloride 2.4 mg						
Embeda 80 mg/3.2 mg	II	Pfizer				
•Morphine Sulfate *			80 mg	180 mg	20 Gm	12 extended release tablets
•Naltrexone hydrochloride 3.2 mg						
Embeda 100 mg/4 mg	II	Pfizer				
•Morphine Sulfate *			100 mg	180 mg	20 Gm	9 extended release tablets
•Naltrexone hydrochloride 4 mg						

Please be advised that the information contained in this table is compiled solely from reference works recognized and approved by the State Board of Pharmacy pursuant to rule 4729-11-07.

Controlled Substance Reference Table

PRODUCT NAME •INGREDIENTS	C.S.A. SCHEDULE	DISTRIBUTOR	STRENGTH	MAXIMUM DAILY DOSE	--BULK AMOUNTS-- BY WGT	BY DOSE
Infumorph	II	West-Ward				
•Morphine Sulfate *			10 mg/ml	60 mg	n/a	30 ml injection
			25 mg/ml	60 mg	n/a	12 ml injection
Kadian	II	Actavis				
•Morphine Sulfate *			10 mg	180 mg	20 Gm	90 extended release capsules
			20 mg	180 mg	20 Gm	45 extended release capsules
			30 mg	180 mg	20 Gm	30 extended release capsules
			40 mg	180 mg	20 Gm	23 extended release capsules
			50 mg	180 mg	20 Gm	18 extended release capsules
			60 mg	180 mg	20 Gm	15 extended release capsules
			70 mg	180 mg	20 Gm	13 extended release capsules
			80 mg	180 mg	20 Gm	12 extended release capsules
			100 mg	180 mg	20 Gm	9 extended release capsules
			130 mg	180 mg	20 Gm	7 extended release capsules
			150 mg	180 mg	20 Gm	6 extended release capsules
			200 mg	180 mg	20 Gm	5 extended release capsules
Morphine	II	various				
•Morphine Sulfate *			10 mg	180 mg	20 Gm	extended release tablets/capsu
			15 mg	180 mg	20 Gm	60 extended release tablets
			20 mg	180 mg	20 Gm	extended release tablets/capsu
			30 mg	180 mg	20 Gm	extended release tablets/capsu
			50 mg	180 mg	20 Gm	extended release tablets/capsu
			60 mg	180 mg	20 Gm	extended release tablets/capsu
			80 mg	180 mg	20 Gm	extended release tablets/capsu
			100 mg	180 mg	20 Gm	extended release tablets/capsul
			200 mg	180 mg	20 Gm	5 extended release tablets
			30 mg	180 mg	20 Gm	30 extended release beads
			45 mg	180 mg	20 Gm	20 extended release beads
			60 mg	180 mg	20 Gm	15 extended release beads
			75 mg	180 mg	20 Gm	12 extended release beads
			90 mg	180 mg	20 Gm	10 extended release beads
			120 mg	180 mg	20 Gm	8 extended release beads
			10 mg	60 mg	20 Gm	30 hypodermic tablets
			15 mg	60 mg	20 Gm	20 hypodermic tablets
			30 mg	60 mg	20 Gm	10 hypodermic tablets

Please be advised that the information contained in this table is compiled solely from reference works recognized and approved by the State Board of Pharmacy pursuant to rule 4729-11-07.

Controlled Substance Reference Table

PRODUCT NAME •INGREDIENTS	C.S.A. SCHEDULE	DISTRIBUTOR	STRENGTH	MAXIMUM DAILY DOSE	--BULK AMOUNTS-- BY WGT	BY DOSE
			0.5 mg/ml	60 mg	n/a	600 ml injection
			1 mg/ml	60 mg	n/a	300 ml injection
			2 mg/ml	60 mg	n/a	150 ml injection
			4 mg/ml	60 mg	n/a	75 ml injection
			5 mg/ml	60 mg	n/a	60 ml injection
			8 mg/ml	60 mg	n/a	38 ml injection
			10 mg/ml	60 mg	n/a	30 ml injection
			10 mg/0.7 ml	60 mg	n/a	21 ml injection
			15 mg/ml	60 mg	n/a	20 ml injection
			25 mg/ml	60 mg	n/a	12 ml injection
			50 mg/ml	60 mg	n/a	6 ml injection
			n/a	n/a	20 Gm powder	n/a
			10 mg/5 ml	180 mg	n/a	450 ml oral solution
			20 mg/5 ml	180 mg	n/a	225 ml oral solution
			20 mg/ml	180 mg	n/a	45 ml oral solution
			5 mg	120 mg	20 Gm	120 suppositories
			10 mg	120 mg	20 Gm	60 suppositories
			20 mg	120 mg	20 Gm	30 suppositories
			30 mg	120 mg	20 Gm	20 suppositories
			15 mg	180 mg	20 Gm	60 tablets
			30 mg	180 mg	20 Gm	30 tablets
MS Contin	II	Purdue Pharma				
•Morphine Sulfate *			15 mg	180 mg	20 Gm	60 extended release tablets
			30 mg	180 mg	20 Gm	30 extended release tablets
			60 mg	180 mg	20 Gm	15 extended release tablets
			100 mg	180 mg	20 Gm	9 extended release tablets
			200 mg	180 mg	20 Gm	5 extended release tablets
MSIR	II	Purdue Frederick				
•Morphine Sulfate *			10 mg/5 ml	180 mg	n/a	450 ml oral solution
			20 mg/5 ml	180 mg	n/a	225 ml oral solution
			20 mg/ml	180 mg	n/a	45 ml oral solution
			15 mg	180 mg	20 Gm	60 tablets
			30 mg	180 mg	20 Gm	30 tablets
Oramorph SR	II	aaiPharma				
•Morphine Sulfate *			15 mg	180 mg	20 Gm	60 extended release tablets

Please be advised that the information contained in this table is compiled solely from reference works recognized and approved by the State Board of Pharmacy pursuant to rule 4729-11-07.

Controlled Substance Reference Table

PRODUCT NAME •INGREDIENTS	C.S.A. SCHEDULE	DISTRIBUTOR	STRENGTH	MAXIMUM DAILY DOSE	--BULK AMOUNTS-- BY WGT	BY DOSE
			30 mg	180 mg	20 Gm	30 extended release tablets
			60 mg	180 mg	20 Gm	15 extended release tablets
			100 mg	180 mg	20 Gm	9 extended release tablets
RMS	II	Upsher-Smith				
•Morphine Sulfate *			5 mg	120 mg	20 Gm	120 suppositories
			10 mg	120 mg	20 Gm	60 suppositories
			20 mg	120 mg	20 Gm	30 suppositories
			30 mg	120 mg	20 Gm	20 suppositories
Roxanol	II	aaiPharma				
•Morphine Sulfate *			100 mg/5 ml	180 mg	n/a	45 ml oral solution
			20 mg/ml	180 mg	n/a	45 ml oral solution
NABILONE						
Cesamet	II	Meda				
•Nabilone *			1 mg	6 mg	120 Gm	180 capsules
NANDROLONE						
Deca-Durabolin	III	Organon				
•Nandrolone Decanoate *			100 mg/ml	n/a	n/a	16 ml injection
			200 mg/ml	n/a	n/a	16 ml injection
Nandrolone	III	various				
•Nandrolone Decanoate *			100 mg/ml	n/a	n/a	16 ml injection
			200 mg/ml	n/a	n/a	16 ml injection
OPIUM						
B & O No. 15A	II	Amerifit				
•Belladonna Extract 16.2 mg			30 mg	60 mg	20 Gm	10 suppositories
•Opium *						
B & O No. 16A	II	Amerifit				
•Belladonna Extract 16.2 mg			60 mg	120 mg	20 Gm	10 suppositories
•Opium *						
Opium and Belladonna Suppositories	II	Wyeth-Ayerst				

Please be advised that the information contained in this table is compiled solely from reference works recognized and approved by the State Board of Pharmacy pursuant to rule 4729-11-07.

Controlled Substance Reference Table

PRODUCT NAME •INGREDIENTS	C.S.A. SCHEDULE	DISTRIBUTOR	STRENGTH	MAXIMUM DAILY DOSE	--BULK AMOUNTS-- BY WGT	BY DOSE
•Belladonna Extract 15 mg			60 mg	120 mg	20 Gm	10 suppositories
•Opium *						
Opium and Belladonna Suppositories	II	various				
•Belladonna Extract 16.2 mg			30 mg	60 mg	20 Gm	10 suppositories
•Opium *			60 mg	120 mg	20 Gm	10 suppositories
Opium Tincture	II	various				
•Opium (Morphine equivalent) *			10 mg/ml	24 mg	n/a	12 ml
Paregoric	III	various				
•Opium (Morphine equivalent) *			2 mg/5 ml	16 mg	n/a	32 ml oral solution
OXANDROLONE						
Oxandrin	III	Savient				
•Oxandrolone *			2.5 mg	n/a	16 Gm	200 dosage units
			10 mg	n/a	16 Gm	200 dosage units
Oxandrolone	III	various				
•Oxandrolone *			n/a	n/a	16 Gm	200 dosage units
			2.5 mg	n/a	16 Gm	200 dosage units
			10 mg	n/a	16 Gm	200 dosage units
OXAZEPAM						
Oxazepam	IV	various				
•Oxazepam *			10 mg	120 mg	120 Gm	360 capsules
			15 mg	120 mg	120 Gm	240 capsules
			30 mg	120 mg	120 Gm	120 capsules
			10 mg	120 mg	120 Gm	360 tablets
			15 mg	120 mg	120 Gm	240 tablets
			30 mg	120 mg	120 Gm	120 tablets
Serax	IV	Alpharma				
•Oxazepam *			10 mg	120 mg	120 Gm	360 capsules
			15 mg	120 mg	120 Gm	240 capsules
			30 mg	120 mg	120 Gm	120 capsules
			15 mg	120 mg	120 Gm	240 tablets

Please be advised that the information contained in this table is compiled solely from reference works recognized and approved by the State Board of Pharmacy pursuant to rule 4729-11-07.

Controlled Substance Reference Table

PRODUCT NAME •INGREDIENTS	C.S.A. SCHEDULE	DISTRIBUTOR	STRENGTH	MAXIMUM DAILY DOSE	--BULK AMOUNTS-- BY WGT	BY DOSE
OXYBATE						
Xyrem	#	Jazz				
•Sodium Oxybate *	# For criminal purposes, this is a Schedule I Controlled Substance (GHB)			n/a	30 Gm	10 ud
OXYCODONE						
Endocet	II	Endo				
•Acetaminophen 325 mg			2.5 mg	30 mg	20 Gm	60 tablets
•Oxycodone Hydrochloride *						
•Acetaminophen 325 mg			5 mg	60 mg	20 Gm	60 tablets
•Oxycodone Hydrochloride *						
•Acetaminophen 325 mg			7.5 mg	90 mg	20 Gm	60 tablets
•Oxycodone Hydrochloride *						
•Acetaminophen 500 mg			7.5 mg	60 mg	20 Gm	40 tablets
•Oxycodone Hydrochloride *						
•Acetaminophen 325 mg			10 mg	60 mg	20 Gm	30 tablets
•Oxycodone Hydrochloride *						
•Acetaminophen 650 mg			10 mg	60 mg	20 Gm	30 tablets
•Oxycodone Hydrochloride *						
ETH-Oxydose	II	Ethex				
•OxycodoneHydrochloride *			20 mg/ml	90 mg	n/a	23 ml oral solution
Magnacet	II	Shionogi				
•Acetaminophen 400 mg			5 mg	50 mg	20 Gm	50 tablets

Please be advised that the information contained in this table is compiled solely from reference works recognized and approved by the State Board of Pharmacy pursuant to rule 4729-11-07.

Controlled Substance Reference Table

PRODUCT NAME •INGREDIENTS	C.S.A. SCHEDULE	DISTRIBUTOR	STRENGTH	MAXIMUM DAILY DOSE	--BULK AMOUNTS-- BY WGT	BY DOSE
•Oxycodone Hydrochloride *						
•Acetaminophen 400 mg			7.5 mg	75 mg	20 Gm	50 tablets
•Oxycodone Hydrochloride *						
•Acetaminophen 400 mg			10 mg	60 mg	20 Gm	30 tablets
•Oxycodone Hydrochloride *						
. . . . .						
Oxaydo	II	Egalet USA				
•Oxycodone Hydrochloride *			5 mg	90 mg	20 Gm	90 tablets
			7.5 mg	90 mg	20 Gm	60 tablets
. . . . .						
Oxycodone	II	various				
•Oxycodone Hydrochloride *			5 mg	90 mg	20 Gm	90 capsules
			5 mg	90 mg	20 Gm	90 tablets
			10 mg	90 mg	20 Gm	45 tablets
			15 mg	90 mg	20 Gm	30 tablets
			20 mg	90 mg	20 Gm	23 tablets
			30 mg	90 mg	20 Gm	15 tablets
			n/a	n/a	20 Gm powder	n/a
			10 mg	90 mg	20 Gm	45 extended release tablets
			15 mg	90 mg	20 Gm	30 extended release tablets
			20 mg	90 mg	20 Gm	23 extended release tablets
			30 mg	90 mg	20 Gm	15 extended release tablets
			40 mg	90 mg	20 Gm	12 extended release tablets
			60 mg	90 mg	20 Gm	8 extended release tablets
			80 mg	90 mg	20 Gm	6 extended release tablets
			5 mg/5 ml	90 mg	20 Gm	450 ml oral solution
			20 mg/ml	90 mg	20 Gm	23 ml oral solution
. . . . .						
Oxycodone with Ibuprofen	II	various				
•Ibuprofen 400 mg			5 mg	20 mg	20 Gm	20 tablets
•Oxycodone Hydrochloride *						
. . . . .						
Oxycodone with Acetaminophen	II	various				
•Acetaminophen 325 mg			2.5 mg	30 mg	20 Gm	60 tablets
•Oxycodone Hydrochloride *						

Please be advised that the information contained in this table is compiled solely from reference works recognized and approved by the State Board of Pharmacy pursuant to rule 4729-11-07.

Controlled Substance Reference Table

PRODUCT NAME •INGREDIENTS	C.S.A. SCHEDULE	DISTRIBUTOR	STRENGTH	MAXIMUM DAILY DOSE	--BULK AMOUNTS-- BY WGT	BY DOSE
•Acetaminophen 325 mg			5 mg	60 mg	20 Gm	60 tablets
•Oxycodone Hydrochloride *						
•Acetaminophen 500 mg			5 mg	40 mg	20 Gm	40 capsules or tablets
•Oxycodone Hydrochloride *						
•Acetaminophen 325 mg			7.5 mg	90 mg	20 Gm	60 tablets
•Oxycodone Hydrochloride *						
•Acetaminophen 500 mg			7.5 mg	60 mg	20 Gm	40 tablets
•Oxycodone Hydrochloride *						
•Acetaminophen 325 mg			10 mg	60 mg	20 Gm	30 tablets
•Oxycodone Hydrochloride *						
•Acetaminophen 500 mg			10 mg	60 mg	20 Gm	30 tablets
•Oxycodone Hydrochloride *						
•Acetaminophen 650 mg			10 mg	60 mg	20 Gm	30 tablets
•Oxycodone Hydrochloride *						
•Acetaminophen 325 mg			5 mg/5 ml	60 mg	n/a	300 ml oral solution
•Oxycodone Hydrochloride *						
Oxycodone with Aspirin	II	various				
•Aspirin 325 mg				58.02 mg	20 Gm	60 tablets
•Oxycodone Hydrochloride 4.835 mg *						
OxyContin	II	Purdue Pharma				
•Oxycodone Hydrochloride *			10 mg	90 mg	20 Gm	45 extended release tablets
			15 mg	90 mg	20 Gm	30 extended release tablets
			20 mg	90 mg	20 Gm	23 extended release tablets
			30 mg	90 mg	20 Gm	15 extended release tablets
			40 mg	90 mg	20 Gm	12 extended release tablets
			60 mg	90 mg	20 Gm	8 extended release tablets
			80 mg	90 mg	20 Gm	6 extended release tablets

Please be advised that the information contained in this table is compiled solely from reference works recognized and approved by the State Board of Pharmacy pursuant to rule 4729-11-07.

Controlled Substance Reference Table

PRODUCT NAME •INGREDIENTS	C.S.A. SCHEDULE	DISTRIBUTOR	STRENGTH	MAXIMUM DAILY DOSE	--BULK AMOUNTS-- BY WGT	BY DOSE
OxyFAST	II	Purdue Pharma				
•Oxycodone Hydrochloride *			20 mg/ml	90 mg	n/a	23 ml oral solution
OxyIR	II	Purdue Pharma				
•Oxycodone Hydrochloride *			5 mg	90 mg	20 Gm	90 capsules
Percocet	II	Endo				
•Acetaminophen 325 mg			2.5 mg	30 mg	20 Gm	60 tablets
•Oxycodone Hydrochloride *						
•Acetaminophen 325 mg			5 mg	60 mg	20 Gm	60 tablets
•Oxycodone Hydrochloride *						
•Acetaminophen 325 mg			7.5 mg	90 mg	20 Gm	60 tablets
•Oxycodone Hydrochloride *						
•Acetaminophen 500 mg			7.5 mg	60 mg	20 Gm	40 tablets
•Oxycodone Hydrochloride *						
•Acetaminophen 325 mg			10 mg	60 mg	20 Gm	30 tablets
•Oxycodone Hydrochloride *						
•Acetaminophen 650 mg			10 mg	60 mg	20 Gm	30 tablets
•Oxycodone Hydrochloride *						
Perloxx	II	Athlon				
•Acetaminophen 300 mg			2.5 mg	30 mg	20 Gm	60 tablets
•Oxycodone Hydrochloride *						
•Acetaminophen 300 mg			5 mg	60 mg	20 Gm	60 tablets
•Oxycodone Hydrochloride *						
•Acetaminophen 300 mg			7.5 mg	90 mg	20 Gm	60 tablets
•Oxycodone Hydrochloride *						
•Acetaminophen 300 mg			10 mg	60 mg	20 Gm	30 tablets

Please be advised that the information contained in this table is compiled solely from reference works recognized and approved by the State Board of Pharmacy pursuant to rule 4729-11-07.

Controlled Substance Reference Table

PRODUCT NAME •INGREDIENTS	C.S.A. SCHEDULE	DISTRIBUTOR	STRENGTH	MAXIMUM DAILY DOSE	--BULK AMOUNTS-- BY WGT	BY DOSE
•Oxycodone Hydrochloride *						
Primlev	II	Akrimax				
•Acetaminophen 300 mg			5 mg	60 mg	20 Gm	60 tablets
•Oxycodone Hydrochloride *						
•Acetaminophen 300 mg			7.5 mg	90 mg	20 Gm	60 tablets
•Oxycodone Hydrochloride *						
•Acetaminophen 300 mg			10 mg	60 mg	20 Gm	30 tablets
•Oxycodone Hydrochloride *						
Roxicet	II	West-Ward				
•Acetaminophen 325 mg			5 mg	60 mg	20 Gm	60 tablets
•Oxycodone Hydrochloride *						
Roxicet Oral Solution	II	West-Ward				
•Acetaminophen 325 mg			5 mg/5 ml	60 mg	20 Gm	300 ml oral solution
•Oxycodone Hydrochloride *						
Roxicet 5/500	II	Roxane				
•Acetaminophen 500 mg			5 mg	40 mg	20 Gm	40 tablets
•Oxycodone Hydrochloride *						
Roxicodone	II	Mallinckrodt				
•Oxycodone Hydrochloride *			5 mg	90 mg	20 Gm	90 tablets
			15 mg	90 mg	20 Gm	30 tablets
			30 mg	90 mg	20 Gm	15 tablets
Roxicodone Intensol	II	aaiPharma				
•Oxycodone Hydrochloride *			20 mg/ml	90 mg	n/a	23 ml oral solution
Roxicodone Oral Solution	II	aaiPharma				
•Oxycodone Hydrochloride *			5 mg/5 ml	90 mg	n/a	450 ml oral solution
Roxilox	II	Roxane				
•Acetaminophen 500 mg			5 mg	40 mg	20 Gm	40 capsules

Please be advised that the information contained in this table is compiled solely from reference works recognized and approved by the State Board of Pharmacy pursuant to rule 4729-11-07.

Controlled Substance Reference Table

PRODUCT NAME •INGREDIENTS	C.S.A. SCHEDULE	DISTRIBUTOR	STRENGTH	MAXIMUM DAILY DOSE	--BULK AMOUNTS-- BY WGT	BY DOSE
•Oxycodone Hydrochloride *						
Roxiprin	II	Roxane				
•Aspirin 325 mg				30 mg	20 Gm	30 tablets
•Oxycodone Hydrochloride 4.5 mg *						
•Oxycodone Terephthalate 0.38 mg *						
Tylox	II	Janssen				
•Acetaminophen 500 mg			5 mg	40 mg	20 Gm	40 capsules
•Oxycodone Hydrochloride *						
Xartemis XR	II	Mallinckrodt				
•Acetaminophen 325 mg						
•Oxycodone Hydrochloride *			7.5 mg	90 mg	20 Gm	60 extended release tablets
Xolox	II	WraSer				
•Acetaminophen 500 mg			10 mg	60 mg	20 Gm	30 tablets
•Oxycodone Hydrochloride *						
Xtampza ER	II	Collegium				
Oxycodone			9 mg	288 mg	20 Gm	ed release capsule (12 hour abus
			13.5 mg	288 mg	20 Gm	ed release capsule (12 hour abus
			18 mg	288 mg	20 Gm	d release capsule (12 hour abus
			27 mg	288 mg	20 Gm	d release capsule (12 hour abus
			36 mg	288 mg	20 Gm	d release capsule (12 hour abus
OXYMETHOLONE						
Anadrol-50	III	Meda				
•Oxymetholone *			50 mg	n/a	16 Gm	200 dosage units
Oxymetholone	III	various				
•Oxymetholone *			50 mg	n/a	16 Gm	200 dosage units
OXYMORPHONE						
Opana	II	Endo				
•Oxymorphone Hydrochloride *			1 mg/ml	9 mg	n/a	45 ml injection
			5 mg	120 mg	20 Gm	120 tablets

Please be advised that the information contained in this table is compiled solely from reference works recognized and approved by the State Board of Pharmacy pursuant to rule 4729-11-07.

Controlled Substance Reference Table

PRODUCT NAME •INGREDIENTS	C.S.A. SCHEDULE	DISTRIBUTOR	STRENGTH	MAXIMUM DAILY DOSE	--BULK AMOUNTS-- BY WGT	BY DOSE
			10 mg	120 mg	20 Gm	60 tablets
Opana ER	II	Endo				
•Oxymorphone Hydrochloride *			5 mg	120 mg	20 Gm	120 extended release tablets
			7.5 mg	120 mg	20 Gm	80 extended release tablets
			10 mg	120 mg	20 Gm	60 extended release tablets
			15 mg	120 mg	20 Gm	40 extended release tablets
			20 mg	120 mg	20 Gm	30 extended release tablets
			30 mg	120 mg	20 Gm	20 extended release tablets
			40 mg	120 mg	20 Gm	15 extended release tablets
Oxymorphone	II	various				
•Oxymorphone Hydrochloride *			n/a	n/a	20 Gm powder	n/a
			5 mg	120 mg	20 Gm	120 extended release tablets
			7.5 mg	120 mg	20 Gm	80 extended release tablets
			10 mg	120 mg	20 Gm	60 extended release tablets
			15 mg	120 mg	20 Gm	40 extended release tablets
			20 mg	120 mg	20 Gm	30 extended release tablets
			30 mg	120 mg	20 Gm	20 extended release tablets
			40 mg	120 mg	20 Gm	15 extended release tablets
			5 mg	120 mg	20 Gm	120 tablets
			10 mg	120 mg	20 Gm	60 tablets
PARALDEHYDE						
Paral	IV	Forest				
•Paraldehyde *			1000 mg/ml	35 ml	n/a	1050 ml oral solution
Paraldehyde	IV	various				
•Paraldehyde *			1000 mg/ml	35 ml	n/a	1050 ml oral solution
PEMOLINE						
Cylert	IV	Abbott				
•Pemoline *			18.75 mg	75 mg	120 Gm	120 tablets
			37.5 mg	75 mg	120 Gm	60 tablets
			75 mg	75 mg	120 Gm	30 tablets
PENTAZOCINE						

Please be advised that the information contained in this table is compiled solely from reference works recognized and approved by the State Board of Pharmacy pursuant to rule 4729-11-07.

Controlled Substance Reference Table

PRODUCT NAME •INGREDIENTS	C.S.A. SCHEDULE	DISTRIBUTOR	STRENGTH	MAXIMUM DAILY DOSE	--BULK AMOUNTS-- BY WGT	BY DOSE
Pentazocine with Acetaminophen	IV	various				
•Acetaminophen 650 mg			25 mg	150mg	120 Gm	180 tablets
•Pentazocine Hydrochloride *						
Pentazocine with Naloxone	IV	various	50 mg	600 mg	120 Gm	360 tablets
•Naloxone 0.5 mg						
•Pentazocine Hydrochloride *						
Talacen	IV	Sanofi Winthrop				
•Acetaminophen 650 mg			25 mg	150mg	120 Gm	180 tablets
•Pentazocine Hydrochloride *						
Talwin	IV	Hospira				
•Pentazocine Lactate *			30 mg/ml	360 mg	n/a	360 ml injection
Talwin Compound	IV	Sanofi Winthrop				
•Aspirin 325 mg			12.5 mg	100 mg	120 Gm	240 tablets
•Pentazocine Hydrochloride *						
Talwin Nx	IV	Sanofi Winthrop				
•Naloxone 0.5 mg			50 mg	600 mg	120 Gm	360 tablets
•Pentazocine Hydrochloride *						
PENTOBARBITAL						
Cafatine-PB	ExRx	Major				
•Belladonna Alkaloids 0.125 mg			30 mg	n/a	n/a	n/a
•Caffeine 100 mg						
•Ergotamine Tartrate 1 mg						
•Pentobarbital *						
Nembutal	II	Akorn				
•Pentobarbital Sodium *			50 mg/ml	500 mg	n/a	300 ml injection
Pentobarbital	II	various				
•Pentobarbital Sodium *			50 mg	200 mg	120 Gm	120 capsules
			100 mg	200 mg	120 Gm	60 capsules
			50 mg/ml	500 mg	n/a	300 ml injection

Please be advised that the information contained in this table is compiled solely from reference works recognized and approved by the State Board of Pharmacy pursuant to rule 4729-11-07.

Controlled Substance Reference Table

PRODUCT NAME •INGREDIENTS	C.S.A. SCHEDULE	DISTRIBUTOR	STRENGTH	MAXIMUM DAILY DOSE	--BULK AMOUNTS-- BY WGT	BY DOSE
			18.2 mg/5 ml	200 mg	120 Gm	1649 ml oral solution
			30 mg	200 mg	120 Gm	200 suppositories
			60 mg	200 mg	120 Gm	100 suppositories
			120 mg	200 mg	120 Gm	50 suppositories
			200 mg	200 mg	120 Gm	30 suppositories
			n/a	na	120 Gm powder	n/a
PERAMPANEL						
Fycompa	III	Eisai				
•Perampanel*			2 mg	12 mg	120 Gm	180 tablets
			4 mg	12 mg	120 Gm	90 tablets
			6 mg	12 mg	120 Gm	60 tablets
			8 mg	12 mg	120 Gm	45 tablets
			10 mg	12 mg	120 Gm	36 tablets
			12 mg	12 mg	120 Gm	30 tablets
			0.5 mg/ml	12 mg	120 Gm	720 ml oral suspension
PHENCYCLIDINE						
PCP	II	n/a				
•Phencyclidine *			n/a	n/a	5 Gm	10 unit doses
PHENDIMETRAZINE						
Phendimetrazine	III	various				
•Phendimetrazine Tartrate *			35 mg	105 mg	120 Gm	90 tablets
			105 mg	105 mg	120 Gm	30 extended release capsules
Bontril PDM	III	Valeant				
•Phendimetrazine Tartrate *			35 mg	105 mg	120 Gm	90 tablets
Bontril Slow Release	III	Valeant				
•Phendimetrazine Tartrate *			105 mg	105 mg	120 Gm	30 extended release capsules
PHENOBARBITAL						
Luminal	IV	Hospira				
•Phenobarbital *			60 mg/ml	600 mg	n/a	300 ml injection
			130 mg/ml	600 mg	n/a	139 ml injection

Please be advised that the information contained in this table is compiled solely from reference works recognized and approved by the State Board of Pharmacy pursuant to rule 4729-11-07.

Controlled Substance Reference Table

PRODUCT NAME •INGREDIENTS	C.S.A. SCHEDULE	DISTRIBUTOR	STRENGTH	MAXIMUM DAILY DOSE	--BULK AMOUNTS-- BY WGT	BY DOSE
Phenobarbital	IV	various				
•Phenobarbital *			15 mg/5 ml	600 mg	n/a	6000 ml oral solution
			20 mg/5 ml	600 mg	n/a	4500 ml oral solution
			30 mg/ml	600 mg	n/a	600 ml injection
			60 mg/ml	600 mg	n/a	300 ml injection
			65 mg/ml	600 mg	n/a	277 ml injection
			130 mg/ml	600 mg	n/a	139 ml injection
			15 mg	600 mg	120 Gm	1200 tablets
			16 mg	600 mg	120 Gm	1125 tablets
			16.2 mg	600 mg	120 Gm	1112 tablets
			30 mg	600 mg	120 Gm	600 tablets
			32.4 mg	600 mg	120 Gm	556 tablets
			60 mg	600 mg	120 Gm	300 tablets
			64.8 mg	600 mg	120 Gm	278 tablets
			90 mg	600 mg	120 Gm	200 tablets
			97.2 mg	600 mg	120 Gm	186 tablets
			100 mg	600 mg	120 Gm	180 tablets
Solfoton	IV	ECR Pharm.				
•Phenobarbital *			16 mg	600 mg	120 Gm	1125 capsules
			16 mg	600 mg	120 Gm	1125 tablets
PHENTERMINE						
Adipex-P	IV	Teva				
•Phentermine Hydrochloride *			37.5 mg	37.5 mg	120 Gm	30 capsules
			30 mg	30 mg	120 Gm	30 tablets
			37.5 mg	37.5 mg	120 Gm	30 tablets
Fastin	IV	Beecham				
•Phentermine Hydrochloride *			30 mg	30 mg	120 Gm	30 capsules
Ionamin	IV	Celltech				
•Phentermine Resin Complex *			15 mg	30 mg	120 Gm	60 capsules
			30 mg	30 mg	120 Gm	30 capsules
Lomaira	IV	KVK Tech				
•Phentermine Hydrochloride *			8 mg	24 mg	120 Gm	90 tablets

Please be advised that the information contained in this table is compiled solely from reference works recognized and approved by the State Board of Pharmacy pursuant to rule 4729-11-07.

Controlled Substance Reference Table

PRODUCT NAME •INGREDIENTS	C.S.A. SCHEDULE	DISTRIBUTOR	STRENGTH	MAXIMUM DAILY DOSE	--BULK AMOUNTS-- BY WGT	BY DOSE
Phentermine	IV	various				
•Phentermine Hydrochloride *			8 mg	37.5 mg	120 Gm	141 capsules
			15 mg	30 mg	120 Gm	60 capsules
			18.75 mg	37.5 mg	120 Gm	60 capsules
			30 mg	30 mg	120 Gm	30 capsules
			37.5 mg	37.5 mg	120 Gm	30 capsules
			n/a	n/a	120 Gm powder	n/a
			8 mg	37.5 mg	120 Gm	141 tablets
			18.75 mg	37.5 mg	120 Gm	60 tablets
			30 mg	30 mg	120 Gm	30 tablets
			37.5 mg	37.5 mg	120 Gm	30 tablets
Qsymia	IV	Vivus				
•Phentermine Hydrochloride *			3.75 mg	15 mg	120 Gm	120 extended release capsules
•Topiramate 23 mg						
•Phentermine Hydrochloride *			7.5 mg	15 mg	120 Gm	60 extended release capsules
•Topiramate 46 mg						
•Phentermine Hydrochloride *			11.25 mg	15 mg	120 Gm	40 extended release capsules
•Topiramate 69 mg						
•Phentermine Hydrochloride *			15 mg	15 mg	120 Gm	30 extended release capsules
•Topiramate 92 mg						
Suprenza	IV	Akrimax				
•Phentermine Hydrochloride *			15 mg	30 mg	120 Gm	60 orally disintegrating tablets
			30 mg	30 mg	120 Gm	30 orally disintegrating tablets
			37.5 mg	37.5 mg	120 Gm	30 orally disintegrating tablets
PREGABALIN						
Lyrica	V	Pfizer				
•Pregabalin *			25 mg	n/a	250 Gm	n/a
			50 mg	n/a	250 Gm	n/a
			75 mg	n/a	250 Gm	n/a
			100 mg	n/a	250 Gm	n/a

Please be advised that the information contained in this table is compiled solely from reference works recognized and approved by the State Board of Pharmacy pursuant to rule 4729-11-07.

Controlled Substance Reference Table

PRODUCT NAME •INGREDIENTS	C.S.A. SCHEDULE	DISTRIBUTOR	STRENGTH	MAXIMUM DAILY DOSE	--BULK AMOUNTS-- BY WGT	BY DOSE
			150 mg	n/a	250 Gm	n/a
			200 mg	n/a	250 Gm	n/a
			225 mg	n/a	250 Gm	n/a
			300 mg	n/a	250 Gm	n/a
			20 mg/ml	n/a	n/a	250 ml oral solution
PROPOXYPHENE						
Darvocet A500	IV	Xanodyne				
•Acetaminophen 500 mg			100 mg	600 mg	120 Gm	360 tablets
•Propoxyphene Napsylate *						
Darvocet-N 50	IV	Xanodyne				
•Acetaminophen 325 mg			50 mg	600 mg	120 Gm	360 tablets
•Propoxyphene Napsylate *						
Darvocet-N 100	IV	Xanodyne				
•Acetaminophen 650 mg			100 mg	600 mg	120 Gm	180 tablets
•Propoxyphene Napsylate *						
Darvon	IV	Xanodyne				
• Propoxyphene Hydrochloride *			65 mg	390 mg	120 Gm	180 capsules
Darvon Compound - 65	IV	aaiPharma				
• Aspirin 389 mg			65 mg	390 mg	120 Gm	180 capsules
• Caffeine 32.4 mg						
• Propoxyphene Hydrochloride *						
Darvon-N	IV	Xanodyne				
•Propoxyphene Napsylate *			100 mg	600 mg	120 Gm	180 tablets
Propoxyphene	IV	various				
• Propoxyphene Hydrochloride *			65 mg	390 mg	120 Gm	180 capsules
Propoxyphene Compound	IV	various				
•Aspirin 389 mg			32 mg	390 mg	120 Gm	366 capsules
•Caffeine 32.4 mg			65 mg	390 mg	120 Gm	180 capsules
•Propoxyphene Hydrochloride *			65 mg	390 mg	120 Gm	180 tablets

Please be advised that the information contained in this table is compiled solely from reference works recognized and approved by the State Board of Pharmacy pursuant to rule 4729-11-07.

Controlled Substance Reference Table

PRODUCT NAME •INGREDIENTS	C.S.A. SCHEDULE	DISTRIBUTOR	STRENGTH	MAXIMUM DAILY DOSE	--BULK AMOUNTS-- BY WGT	BY DOSE
Propoxyphene Napsylate with APAP	IV	various				
•Acetaminophen (APAP) 325 mg			50 mg	600 mg	120 Gm	360 tablets
•Propoxyphene Napsylate *						
•Acetaminophen (APAP) 325 mg			100 mg	600 mg	120 Gm	180 capsules
•Propoxyphene Napsylate *						
•Acetaminophen (APAP) 500 mg			100 mg	600 mg	120 Gm	180 tablets
•Propoxyphene Napsylate *						
•Acetaminophen (APAP) 650 mg			100 mg	600 mg	120 Gm	180 tablets
•Propoxyphene Napsylate *						
Wygesic	IV	Wyeth-Ayerst				
•Acetaminophen 650 mg			65 mg	390 mg	120 Gm	180 tablets
•Propoxyphene Hydrochloride *						
PSILOCYBIN						
Psilocybin *	I	n/a	n/a	n/a	30 Gm	10 unit doses
PSILOCYN						
Psilocyn *	I	n/a	n/a	n/a	30 Gm	10 unit doses
QUAZEPAM						
Doral	IV	Cutis				
•Quazepam *			7.5 mg	15 mg	120 Gm	60 tablets
			15 mg	15 mg	120 Gm	30 tablets
Quazepam	IV	various				
			15 mg	15 mg	120 Gm	30 tablets
SALVIA DIVINORUM						
Salvia Divinorum *	I	n/a	n/a	n/a	30 Gm	10 unit doses
SALVINORIN A						
Salvinorum A *	I	n/a	n/a	n/a	30 Gm	10 unit doses

Please be advised that the information contained in this table is compiled solely from reference works recognized and approved by the State Board of Pharmacy pursuant to rule 4729-11-07.

Controlled Substance Reference Table

PRODUCT NAME •INGREDIENTS	C.S.A. SCHEDULE	DISTRIBUTOR	STRENGTH	MAXIMUM DAILY DOSE	--BULK AMOUNTS-- BY WGT	BY DOSE
SECOBARBITAL						
Secobarbital	II	various				
•Secobarbital Sodium *			100 mg	300 mg	120 Gm	90 capsules
			n/a	n/a	120 Gm powder	n/a
Seconal	II	Valeant				
•Secobarbital Sodium *			100 mg	300 mg	120 Gm	90 capsules
Tuinal	II	Ranbaxy				
•Amobarbital Sodium 50 mg *						
•Secobarbital Sodium 50 mg *			100 mg	200 mg	120 Gm	60 capsules
SIBUTRAMINE						
Meridia	IV	Abbott				
•Sibutramine *			5 mg	15 mg	120 Gm	90 capsules
			10 mg	15 mg	120 Gm	30 capsules
			15 mg	15 mg	120 Gm	30 capsules
STANOZOLOL						
Winstrol	III	Winthrop Veterinary				
•Stanozolol *			2 mg	n/a	16 Gm	200 dosage units
Winstrol-V	III	Sterling Drug				
•Stanozolol *			50 mg/ml	n/a	n/a	16 ml injection
			2 mg	n/a	16 Gm	200 dosage units
SUFENTANIL						
Sufenta	II	Akorn				
•Sufentanil Citrate *			0.05 mg/ml	2.1 mg	n/a	210 ml injection
Sufentanil	II	various				
•Sufentanil Citrate *			0.05 mg/ml	2.1 mg	n/a	210 ml injection
SUVOREXANT						
Belsomra	IV	Merck Sharp & Dohme				
•Suvorexant *			5 mg	20 mg	120 Gm	120 tablets

Please be advised that the information contained in this table is compiled solely from reference works recognized and approved by the State Board of Pharmacy pursuant to rule 4729-11-07.

Controlled Substance Reference Table

PRODUCT NAME •INGREDIENTS	C.S.A. SCHEDULE	DISTRIBUTOR	STRENGTH	MAXIMUM DAILY DOSE	--BULK AMOUNTS-- BY WGT	BY DOSE
			10 mg	20 mg	120 Gm	60 tablets
			15 mg	20 mg	120 Gm	40 tablets
			20 mg	20 mg	120 Gm	30 tablets
SYNTHETIC CANNABINOID COMPOUNDS						
Synthetic Cannabinoid Compounds	I				e 4729-11-02, OAC & 2925.01, OI	
SYNTHETIC CATHINONES						
Synthetic Cathinones	I				e 4729-11-02, OAC & 2925.01, OI	
TAPENTADOL						
Nucynta	II	Depomed				
•Tapentadol *			20 mg/ml	600 mg	20 Gm	150 ml oral solution
			50 mg	600 mg	20 Gm	60 tablets
			75 mg	600 mg	20 Gm	40 tablets
			100 mg	600 mg	20 Gm	30 tablets
Nucynta ER	II	Depomed				
•Tapentadol *			50 mg	500 mg	20 Gm	50 extended release tablets
			100 mg	500 mg	20 Gm	25 extended release tablets
			150 mg	500 mg	20 Gm	17 extended release tablets
			200 mg	500 mg	20 Gm	13 extended release tablets
			250 mg	500 mg	20 Gm	10 extended release tablets
TEMAZEPAM						
Restoril	IV	Mallinckrodt				
•Temazepam *			7.5 mg	30 mg	120 Gm	120 capsules
			15 mg	30 mg	120 Gm	60 capsules
			22.5 mg	30 mg	120 Gm	40 capsules
			30 mg	30 mg	120 Gm	30 capsules
Temazepam	IV	various				
•Temazepam *			7.5 mg	30 mg	120 Gm	120 capsules
			15 mg	30 mg	120 Gm	60 capsules
			22.5 mg	30 mg	120 Gm	40 capsules
			30 mg	30 mg	120 Gm	30 capsules
TESTOLACTONE						

Please be advised that the information contained in this table is compiled solely from reference works recognized and approved by the State Board of Pharmacy pursuant to rule 4729-11-07.

Controlled Substance Reference Table

PRODUCT NAME •INGREDIENTS	C.S.A. SCHEDULE	DISTRIBUTOR	STRENGTH	MAXIMUM DAILY DOSE	--BULK AMOUNTS-- BY WGT	BY DOSE
Teslac	III	Bristol-Myers Squibb				
•Testolactone *			50 mg	n/a	16 Gm	200 dosage units
TESTOSTERONE						
Androderm	III	Actavis				
•Testosterone *			2 mg/24 hr	n/a	n/a	1650 patches
			2.5 mg/24 hr	n/a	n/a	1312 patches
			4 mg/24 hr	n/a	n/a	821 patches
			5 mg/24 hr	n/a	n/a	659 patches
AndroGel	III	AbbVie				
•Testosterone *			1 %	n/a	n/a	7 - 2.5 Gm packets
			1 %	n/a	n/a	4 - 5 Gm packets
			1.62%	n/a	n/a	13 - 1.25 Gm packets
			1.62%	n/a	n/a	7 - 2.5 Gm packets
			1 %	n/a	n/a	1 - 75 Gm metered pump
			1.62 %	n/a	n/a	1 - 75 Gm metered pump
Aveed	III	Endo				
•Testosterone Undecanoate *			250 mg/ml	n/a	n/a	16 ml injection
Axiron	III	Eli Lilly				
•Testosterone *			1 %	n/a	n/a	1 - 110 ml metered pump
Depo-Testosterone	III	Pfizer				
•Testosterone Cypionate *			100 mg/ml	n/a	n/a	16 ml injection
			200 mg/ml	n/a	n/a	16 ml injection
EC-RX Tesosterone	III	Enovachem				
•Testosterone *			0.2%	n/a	n/a	1 - 30 Gm jar cream
			0.4%	n/a	n/a	1 - 30 Gm jar cream
			10%	n/a	n/a	1 - 30 Gm jar cream
			20%	n/a	n/a	1 - 30 Gm jar cream
First-Tesosterone	III	Cutis Pharma				
•Testosterone Propionate *			2%	n/a	n/a	1 - 60 Gm jar cream

Please be advised that the information contained in this table is compiled solely from reference works recognized and approved by the State Board of Pharmacy pursuant to rule 4729-11-07.

Controlled Substance Reference Table

PRODUCT NAME •INGREDIENTS	C.S.A. SCHEDULE	DISTRIBUTOR	STRENGTH	MAXIMUM DAILY DOSE	--BULK AMOUNTS-- BY WGT	BY DOSE
			2%	n/a	n/a	1 - 60 Gm jar ointment
Fortesta	III	Endo				
•Testosterone *			10 mg/0.5 Gm	n/a	n/a	1 - 60 Gm metered pump
Natesto	III	Aytu Bioscience				
•Testosterone *			5.5 mg/Actuation	n/a	n/a	2 - 11 Gm metered pumps
Striant	III	Endo				
•Testosterone *			30 mg	n/a	n/a	16 Gm
Testim	III	Endo				
•Testosterone *			1 %	n/a	n/a	4 - 5 Gm tubes
Testone CIK	III	Enovachem				
•Testosterone Cypionate *			200 mg/ml	n/a	n/a	16 ml injection
Testopel	III	Endo				
•Testosterone *			75 mg	n/a	n/a	200 solid dosage units
Testosterone	III	various				
•Testosterone *			1 %	n/a	n/a	7 - 2.5 Gm packets
			1 %	n/a	n/a	4 - 5 Gm packets
			1 %	n/a	n/a	1 - 75 Gm metered pump
			10 mg/Actuation	n/a	n/a	1 - 60 Gm canister
Testosterone Transdermal Gel	III	various				
•Testosterone *			25 mg	n/a	n/a	16 Gm
			50 mg	n/a	n/a	16 Gm
Testosterone	III	various				
•Testosterone *			n/a	n/a	n/a	16 ml injection
Testosterone In Oil	III	various				
•Testosterone *			n/a	n/a	n/a	16 ml injection
Testosterone Suspension	III	various				

Please be advised that the information contained in this table is compiled solely from reference works recognized and approved by the State Board of Pharmacy pursuant to rule 4729-11-07.

Controlled Substance Reference Table

PRODUCT NAME •INGREDIENTS	C.S.A. SCHEDULE	DISTRIBUTOR	STRENGTH	MAXIMUM DAILY DOSE	--BULK AMOUNTS-- BY WGT	BY DOSE
•Testosterone *			n/a	n/a	n/a	16 ml injection
Testosterone Cypionate	III	various				
•Testosterone Cypionate *			100 mg/ml	n/a	n/a	16 ml injection
			200 mg/ml	n/a	n/a	16 ml injection
Testosterone Enanthate	III	various				
•Estradiol Valerate 8 mg/ml			180 mg/ml	n/a	n/a	16 ml injection
•Testosterone Enanthate *			200 mg/ml	n/a	n/a	16 ml injection
Testosterone Enanthate	III	various				
•Testosterone Enanthate *			100 mg/ml	n/a	n/a	16 ml injection
			200 mg/ml	n/a	n/a	16 ml injection
Testosterone In Oil	III	various				
•Testosterone Propionate *			100mg/ml	n/a	n/a	16 ml injection
Testosterone Propionate	III	various				
•Testosterone Propionate *			n/a	n/a	n/a	16 ml injection
Vogelxo	III	Upsher-Smith				
•Testosterone *			1 %	n/a	n/a	4 - 5 Gm packets
			1 %	n/a	n/a	1 - 75 Gm metered pump
THIOPENTAL						
Pentothal	III	Abbott				
•Thiopental Sodium *			250 mg/vial	280 mg	n/a	34 vials
			400 mg/vial	280 mg	n/a	21 vials
			500 mg/vial	280 mg	n/a	17 vials
			1000 mg/vial	280 mg	n/a	9 vials
			2500 mg/vial	280 mg	n/a	4 vials
			5000 mg/vial	280 mg	n/a	2 vials
Thiopental	III	various				
•Thiopental Sodium *			250 mg/vial	280 mg	n/a	34 vials
			400 mg/vial	280 mg	n/a	21 vials

Please be advised that the information contained in this table is compiled solely from reference works recognized and approved by the State Board of Pharmacy pursuant to rule 4729-11-07.

Controlled Substance Reference Table

PRODUCT NAME •INGREDIENTS	C.S.A. SCHEDULE	DISTRIBUTOR	STRENGTH	MAXIMUM DAILY DOSE	--BULK AMOUNTS-- BY WGT	BY DOSE
			500 mg/vial	280 mg	n/a	17 vials
			1000 mg/vial	280 mg	n/a	9 vials
			2500 mg/vial	280 mg	n/a	4 vials
			5000 mg/vial	280 mg	n/a	2 vials
TRAMADOL						
ConZip	IV	Vertical Pharmaceuticals				
•Tramadol Hydrochloride			100 mg	300 mg	120 Gm	90 extended release capsules
			200 mg	300 mg	120 Gm	45 extended release capsules
			300 mg	300 mg	120 Gm	30 extended release capsules
Rybix ODT	IV	Shionogi				
•Tramadol Hydrochloride			50 mg	400 mg	120 Gm	240 tablets
Tramadol	IV	various				
•Tramadol Hydrochloride			50 mg	400 mg	120 Gm	240 tablets
Tramadol ER	IV	various				
•Tramadol Hydrochloride			100 mg	300 mg	120 Gm	extended release capsules or tab
			150 mg	300 mg	120 Gm	extended release capsules or tab
			200 mg	300 mg	120 Gm	extended release capsules or tab
			300 mg	300 mg	120 Gm	extended release capsules or tab
Tramadol with Acetaminophen	IV	various				
•Acetaminophen 325 mg						
•Tramadol Hydrochloride*			37.5 mg	300 mg	120 Gm	240 tablets
Ultracet	IV	Janssen				
•Acetaminophen 325 mg						
•Tramadol Hydrochloride*			37.5 mg	300 mg	120 Gm	240 tablets
Ultram	IV	Janssen				
•Tramadol Hydrochloride			50 mg	400 mg	120 Gm	240 tablets
Ultram ER	IV	Janssen				
•Tramadol Hydrochloride			100 mg	300 mg	120 Gm	90 extended release tablets
			200 mg	300 mg	120 Gm	45 extended release tablets

Please be advised that the information contained in this table is compiled solely from reference works recognized and approved by the State Board of Pharmacy pursuant to rule 4729-11-07.

Controlled Substance Reference Table

PRODUCT NAME •INGREDIENTS	C.S.A. SCHEDULE	DISTRIBUTOR	STRENGTH	MAXIMUM DAILY DOSE	--BULK AMOUNTS-- BY WGT	BY DOSE
			300 mg	300 mg	120 Gm	30 extended release tablets
TRENBOLONE						
Finaplix-S Pellets	ExOTC	Hoechst Roussel				
•Trenbolone Acetate *			n/a	n/a	n/a	n/a
Trenbolone	III	various				
•Trenbolone Acetate *			n/a	n/a	n/a	16 ml injection
			n/a	n/a	16 Gm	200 dosage units
TRIAZOLAM						
Halcion	IV	Pfizer				
•Triazolam *			0.125 mg	0.5 mg	120 Gm	120 tablets
			0.25 mg	0.5 mg	120 Gm	60 tablets
Triazolam	IV	various				
•Triazolam *			0.125 mg	0.5 mg	120 Gm	120 tablets
			0.25 mg	0.5 mg	120 Gm	60 tablets
ZALEPLON						
Sonata	IV	Pfizer				
•Zaleplon *			5 mg	20 mg	120 Gm	120 capsules
			10 mg	20 mg	120 Gm	60 capsules
Zaleplon	IV	various				
•Zaleplon *			5 mg	20 mg	120 Gm	120 capsules
			10 mg	20 mg	120 Gm	60 capsules
ZOLPIDEM						
Ambien	IV	Sanofi - Aventis				
•Zolpidem *			5 mg	10 mg	120 Gm	60 tablets
			10 mg	10 mg	120 Gm	30 tablets
Ambien CR	IV	Sanofi - Aventis				
•Zolpidem *			6.25 mg	12.5 mg	120 Gm	60 tablets
			12.5 mg	12.5 mg	120 Gm	30 tablets

Please be advised that the information contained in this table is compiled solely from reference works recognized and approved by the State Board of Pharmacy pursuant to rule 4729-11-07.

Controlled Substance Reference Table

PRODUCT NAME •INGREDIENTS	C.S.A. SCHEDULE	DISTRIBUTOR	STRENGTH	MAXIMUM DAILY DOSE	--BULK AMOUNTS-- BY WGT	BY DOSE
Edluar	IV	Meda				
•Zolpidem *			5 mg	10 mg	120 Gm	60 sublingual tablets
			10 mg	10 mg	120 Gm	30 sublingual tablets
Intermezzo	IV	Purdue				
•Zolpidem *			1.75 mg	3.5 mg	120 Gm	60 sublingual tablets
			3.5 mg	3.5 mg	120 Gm	30 sublingual tablets
Tovalt ODT	IV	Biovail				
•Zolpidem *			5 mg	10 mg	120 Gm	60 tablets
			10 mg	10 mg	120 Gm	30 tablets
Zolpidem	IV	various				
			1.75 mg	3.5 mg	120 Gm	60 sublingual tablets
			3.5 mg	3.5 mg	120 Gm	30 sublingual tablets
			5 mg	10 mg	120 Gm	60 tablets
			10 mg	10 mg	120 Gm	30 tablets
			6.25 mg	12.5 mg	120 Gm	60 extended release tablets
			12.5 mg	12.5 mg	120 Gm	30 extended release tablets
Zolpimist	IV	Magna				
•Zolpidem *			5 mg/actuation	10 mg	120 Gm	1 - 8.2 Gm metered pump

Please be advised that the information contained in this table is compiled solely from reference works recognized and approved by the State Board of Pharmacy pursuant to rule 4729-11-07.