

OXFORDSHIRE TRAFFIC LIGHT CLASSIFICATION FOR PRESCRIBING RESPONSIBILITY Updated following APCO May 2011 & OCCG June 2011

- **Red List** – Specialist Prescribing Only
- **Yellow (Near Patient Testing LES)** – Transfer of prescribing to primary care in line with Shared Care Protocol. Monitoring in Primary Care
- **Yellow** - Transfer of prescribing to primary care. Monitoring in Secondary Care
- **Yellow Continuation List**– Appropriate for Continuation in Primary Care following specialist recommendation
- **Brown** – Prescribe only in restricted circumstances
- **Black** – Not recommended for use

Alphabetical Index of all drugs traffic lighted to date

[TRAFFIC LIGHT CLASSIFICATIONS FOR ANTIMICROBIAL PRESCRIBING RESPONSIBILITIES ARE AVAILABLE ON THE PCT INTRANET AND SHOULD BE REFERRED TO FOR THE PRESCRIBING OF ANTIMICROBIALS.](#)

DRUG	TRAFFIC LIGHT	Rationale
ACETYLCYSTEINE	Black	● Not recommended for prescribing
ACETYLCYSTEINE for paracetamol overdose	Red	● Specialist prescribing only
4 ULCER CARE - MAGNETIC DRESSING	Black	● Not recommended for prescribing
ABACAVIR	Red	● All HIV drugs should be prescribed by specialist centres only
ABATACEPT	Red	● Not recommended in line with NICE TA195
ABNOBAVISCUM (MISTLETOE EXTRACT) for malignant melanoma	Black	● Priorities Forum Statement
ACITRETIN	Red	● Specialist prescribing only
ADALIMUMAB	Red	● Specialist prescribing only in line with local commissioning arrangements and NICE TAG 187, TA195 & TA199
ADEFOVIR for Hepatitis B	Yellow	● Shared Care Protocol
ADEFOVIR for HIV	Red	● All HIV drugs should be prescribed by specialist centres only
AGOMELATINE (Valdoxan®)	Red	● Specialist prescribing only
ALFUZOSIN	Black	● Not accepted on to ORHT formulary due to lack of evidence
ALISKIREN for hypertension	Black	● Lack of comparative clinical and cost effectiveness data and local guidance. Not on ORHT formulary
ALITRETINOIN for the treatment of severe chronic hand eczema	Red	● In line with NICE TAG 177
AMANTADINE for the treatment or prophylaxis of influenza	Black	● Not recommended
AMIFAMPRIDINE FIRDAPSE®	Black	● Not on ORH/NOC Formulary
AMIODARONE	Yellow	● In line with shared care protocol.
AMISULPIRIDE for Behavioural and Psychiatric symptoms of dementia	Brown	● Short term use in line with Antipsychotic Use for Behavioural and Psychiatric Symptoms of Dementia: Prescribing Guidance (2nd line IF antipsychotic required - off license use)
ANAGRELIDE	Red	● Specialist prescribing only until an appropriate Shared Care Protocol agreed
ANAKINRA	Red	● Specialist prescribing only in line with local commissioning arrangements
ANASTRAZOLE	Yellow Continuation	● Only prescribe according to Oxfordshire Guidelines

ANTI-VASCULAR ENDOTHELIAL GROWTH FACTOR (anti-VEGF) as an adjunct to vitrectomy for proliferative diabetic retinopathy- bevacizumab (Avastin) only.	Red		In line with MOBBB Priorities Forum.
APOMORPHINE	Yellow		In line with the APCO approved shared care protocol
ARIPIPRAZOLE	Yellow Continuation		OBMHT consultants only
ARIPIPRAZOLE ORO-DISPERSIBLE	Yellow Continuation		Following recommendation
ARIPIPRAZOLE for Behavioural and Psychiatric symptoms of dementia	Brown		Short term use in line with Antipsychotic Use for Behavioural and Psychiatric Symptoms of Dementia: Prescribing Guidance (2nd line IF antipsychotic required - off license use)
ARIPIPRAZOLE for the treatment of schizophrenia in people aged 15 to 17 years.	Yellow Continuation		In line with TA 213
ATAZANAVIR	Red		All HIV drugs should be prescribed by specialist centres only
ATOMOXETINE	Yellow		OBMHT consultants only. Shared Care Protocol
AURANOFIN	Yellow		Not currently used in Oxfordshire
AZACITIDINE for the treatment of myelodysplastic syndromes, chronic myelomonocytic leukaemia and acute myeloid leukaemia	Red		In line with TA 218
AZATHIOPRINE for inflammatory bowel disease	Yellow (NPT)		Shared Care Protocol
AZATHIOPRINE for inflammatory arthritis	Yellow (NPT)		Shared Care Protocol
AZATHIOPRINE in idiopathic pulmonary fibrosis	Yellow		Shared Care Protocol
AZITHROMYCIN for cystic fibrosis	Yellow Continuation		Detailed information will be provided by the consultant
BACLOFEN INTRATHECAL for spasticity	Red		Specialist prescribing only
BALSALAZIDE	Black		Not currently recommended for prescribing as not on the ORHT formulary
BASILIXIMAB	Red		Specialist initiation and prescribing only
BENDAMUSTINE for relapsed or refractory non-Hodgkin's lymphoma	Black		In line with MOBBB Priorities Forum and with NICE TA206
BENDAMUSTINE for the treatment of chronic lymphocytic leukaemia.	Red		In line with TA 216
BENZODIAZEPINES - should not be used for GAD except as a short-term measure during crises	Brown		In line with CG 113
BETA-INTERFERON	Red		Treatment from ORHT providing patient fits certain criteria
(BETAMETHASONE) 2.250mg medicated plaster (Betasil®)	Black		Lack of comparative clinical and cost effectiveness data
BEVACIZUMAB (first-line) for the treatment of advanced and/or metastatic renal cell carcinoma	Black		In line with NICE TAG 178
BEVACIZUMAB for neo-vascularisation in non wet-AMD conditions and glaucoma prior to laser treatment.	Red		In line with Priorities Forum

BEVACIZUMAB in combination with oxaliplatin and either fluorouracil plus folinic acid or capecitabine for the treatment of metastatic colorectal cancer	Black	●	In line with TA 212
BEVACIZUMAB in combination with a taxane for the first-line treatment of metastatic breast cancer	Black	●	In line with TA 214
BEXAROTENE	Black	●	In line with MOBBB Priorities Forum
BLEOMYCIN	Red	●	Specialist prescribing only
BORTEZOMIB	Red	●	Specialist prescribing only. Low priority for prescribing in Oxfordshire
BORTEZOMIB for dialysis prevention in untreated myeloma	Black	●	In line with MOBBB Priorities Forum
BOSENTAN	Red	●	Should only be prescribed by one of four specialist centres
BOTULINUM TOXIN	Black	●	Low priority for prescribing for axillary hyperhidrosis
BOTULINUM TOXIN	Red	●	Prescribed by specialists only for anal fissure/bladder over activity
Buprenorphine and Naloxone – Suboxone®	Black	●	In line with APCO approved Guidance for Substance Misuse
BUPRENORPHINE PATCHES	Black	●	Not recommended
BUPROPION	Brown	●	APCO approved local guidance for patients intolerant of NRT or where NRT is unsuccessful. Only prescribe in line with Lavender statement.
BUSERELIN for Central precocious puberty (CPP)	Yellow	●	Shared Care Protocol
Busulfan	Red	●	In line with NPSA Rapid Alert on Oral Anticancer Medicines
Calc Folate	Red	●	In line with NPSA Rapid Alert on Oral Anticancer Medicines
Calc Levofolinate	Red	●	Specialist prescribing only
CANNABIS SPRAY	Black	●	In line with Priorities Forum
Capecitabine	Red	●	In line with NPSA Rapid Alert on Oral Anticancer Medicines and NICE TA 191
Capsaicin patch (Qutenza®)	Black	●	lack of clinical and cost effectiveness data
Carboplatin	Red	●	Specialist prescribing only
Carmustine	Red	●	Secondary care prescribing only.
CARMUSTINE IMPLANTS	Red	●	Secondary care prescribing only. In line with lavender statement 83a, NPSA Rapid Alert on Oral Anticancer Medicines and TA 191
CARNITINE	Red	●	Renal physicians only
CAVILON	Yellow Continuation	●	Only on recommendation of Tissue Viability Service or the Continence Service. In line with local guidance
CERAZETTE®	Brown	●	Restricted use for use in women in whom a POP is indicated but who find the strict 3 hour regimen of standard POPs difficult to adhere to.
CERTOLIZUMAB PEGOL for rheumatoid arthritis	Red	●	In line with NICE TA186
CERVARIX Human papillomavirus (HPV) vaccine	Black	●	Not recommended see position statement
CETUXIMAB for the first-line treatment of metastatic colorectal cancer	Red	●	In line with NICE TAG 176
CETUXIMAB (for squamous cell carcinoma)	Black	●	Not recommended as per NICE guidance.
CHOLESTAGEL	Black	●	Not appropriate for prescribing
CHLORAMBUCIL	Red	●	In line with NPSA Rapid Alert on Oral Anticancer Medicines
CHLORMETHINE HYDROCHLORIDE	Red	●	Specialist prescribing only
CIALIS ONCE A DAY (TADALAFIL)	Black	●	Not recommended
CICLOSPORIN for severe inflammatory skin disease	Yellow (NPT)	●	Shared Care Protocol

CICLOSPORIN for psoriasis	Yellow (NPT)	●	Shared Care Protocol
CICLOSPORIN for inflammatory arthritis	Yellow (NPT)	●	Shared Care Protocol
CICLOSPORIN for inflammatory bowel	Yellow (NPT)	●	Shared Care Protocol
CINACALCET	Red	●	In line with NICE TA 117
CISPLATIN	Red	●	Secondary care prescribing only.
CLADRIBINE	Red	●	Specialist prescribing only
CLINDAMYCIN for infective endocarditis	Brown	●	Second line prophylaxis (penicillin allergy) for infective endocarditis.
CLINDAMYCIN - oral	Yellow continuation	●	Following recommendation
CLOFARABINE	Red	●	Specialist prescribing only
CLOPIDOGREL with DYPYRIDAMOLE MR for the prevention of occlusive vascular events	Yellow	●	In line with TA 210
CLOZAPINE	Yellow (NPT)	●	Shared Care Protocol
COLECALCIFEROL	Black	●	In line with Priorities Forum
COLISTIMETHATE SODIUM (PROMIXIN)	Black	●	Not on ORH formulary. Rejected by MAC.
COLISTIMETHATE SODIUM (Nebulised COLOMYCIN)	Yellow	●	Initiation within secondary care
CO-PROXAMOL	Black	●	No longer suitable for prescribing
Crisantaspace	Red	●	Specialist prescribing only
Cyclophosphamide	Red	●	In line with NPSA Rapid Alert on Oral Anticancer Medicines
CYSTISTAT® - puRified Hyaluronic acid	Black	●	Limited clinical benefit, and any benefit demonstrated in published studies appears to be short-term
CYTARABINE	Red	●	Specialist prescribing only
DABIGATRAN	Black	●	Not recommended
DACARBAZINE	Red	●	Specialist prescribing only
DACTINOMYCIN	Red	●	Specialist prescribing only
Dalteparin for perioperative anticoagulation, extended thromboprophylaxis, intermediate risk prgnancy & post-partum	Red	●	Specialist prescribing only. In line with Dalteparin – Guidelines for Prescribing in Primary Care
DALTEPARIN for sub-therapeutic INRS, DVT in patients with cancer, IV drug users & first doses in high risk pregnancy	Yellow	●	In line with Dalteparin – Guidelines for Prescribing in Primary Care
DALTEPARIN for DVT & long haul flight prophylaxis	Brown	●	In line with DVT LES: One off, initial dose only, if outside of DVT clinic hours. Flight prophylaxis rarely required, see Oxfordshire dalteparin guidelines
DAPTOMYCIN	Red	●	For use at the NOC only on advice of ID or Microbiology Consultants in specific situations
DARBOPOETIN	Red	●	All prescribing (and funding) transferred to Renal Unit in September 2005. For secondary care prescribing only
DARIFENACIN for overactive bladder syndrome	Black	●	Not recommended
DASATINIB	Red	●	In line with NPSA Rapid Alert on Oral Anticancer Medicines and MOBBB Priorities Forum review for patients with CML resistant to imatinib
DAUNORUBICIN	Red	●	Specialist prescribing only
DEFERIPRONE	Red	●	Specialist prescribing only
DEGARELIX for tumour flare prevention in prostate cancer	Black	●	In line with MOBBB Priorities Forum; Policy Statement 197

DEHYDROEPIANDOSTERONE SULPHATE (DHEAS)	Black	●	Not recommended
DEFERASIROX	Red	●	Specialist prescribing only
DENOSUMAB for therapy-induced bone loss in non-metastatic prostate cancer	Black	●	In line with NICE TA194
DENOSUMAB for the prevention of osteoporotic fractures in postmenopausal women	Yellow	●	In line with NICE TA204 and the denosumab shared care protocol. Following initiation and prior notification by a specialist.
DERMASILK GARMENTS	Black	●	Lack of evidence or cost-effectiveness data available.
DEFERRIOXAMINE	Red	●	Specialist prescribing only
DESLORATADINE	Black	●	Product patent extension and no advantage over loratadine
DESMOPRESSIN NASAL SPRAY (OCTIM)	Red	●	Specialist prescribing only
DEXAMFETAMINE	Yellow	●	In line with ADHD shared care protocol
DEXRAZOXANE	Red	●	Specialist prescribing only
DICONAL	Black	●	In line with NCAS Report
DIDANOSINE	Red	●	All HIV drugs should be prescribed by specialist centres only
DILTIAZEM 2% OINTMENT	Black	●	Not accepted on to ORHT formulary
DISODIUM FOLINATE	Red	●	Specialist prescribing only
DOCETAXEL	Red	●	Specialist prescribing only
	Yellow	●	In line with TA 217 AND Shared Care Protocol
DONEPEZIL for the treatment of Alzheimers Disease	Red	●	In line with TA 217 BUT outside Shared Care Protocol
DONEPEZIL for the treatment of dementia associated with Parkinson's disease or Lewy Bodies	Yellow Continuation	●	In line with Priorities Forum Statement 134
DOSULEPIN	Brown	●	New patients should not be initiated in general practice
DOXAZOSIN (for BPH)	Black	●	Not recommended
DOXAZOSIN (for hypertension)	Brown	●	In line with NICE guidance for hypertension
DOXAZOSIN MR	Black	●	Not recommended - use standard release doxazosin
DOXORUBICIN HYDROCHLORIDE	Red	●	Specialist prescribing only
DRONEDARONE	Yellow	●	In line with APCO Shared Care Protocol
DROTRECOGIN ALFA (ACTIVATED)	Red	●	To only be prescribed within an intensive care setting
DULOXETINE for depression	Yellow Continuation	●	Prescribe following recommendation from OBMHT only
DULOXETINE for stress incontinence	Yellow Continuation	●	Prescribe following recommendation from specialists only
DULOXETINE for neuropathic pain	Yellow Continuation	●	Prescribe following recommendation from pain specialists only
DUODOPA INTESTINAL GEL	Black	●	In line with Priorities Forum Statement 122 Sept 2008
DURAPHAT HIGH FLOURIDE TOOTHPASTE	Black	●	Included on dental formulary therefore dentists should prescribe where appropriate rather than refer to the GP.
DUTASTERIDE	Black	●	No evidence of advantage over dutasteride or that patients failing on finasteride will benefit from dutasteride
EFALIZUMAB	Black	●	Marketing authorisation suspended
EFAVIRENZ	Red	●	All HIV drugs should be prescribed by specialist centres only
EFLORNITHINE	Black	●	Low priority
ELTROMBOPAG for the treatment of chronic immune or idiopathic thrombocytopenic purpura	Black	●	In line with NICE TA205
EMTRICITABINE	Red	●	All HIV drugs should be prescribed by specialist centres only

ENALAPRIL	Brown	●	No longer recommended for initiation in new patients
ENFUVRTIDE	Red	●	All HIV drugs should be prescribed by specialist centres only
ENOXAPARIN	Black	●	Not appropriate for prescribing
ENTACAPONE	Yellow Continuation	●	Must be initiated and monitored by specialists in secondary care with expertise in management of patients with Parkinson's disease
ENTECAVIR	Red	●	In line with NICE TA153
Epirubicin Hydrochloride	Red	●	Specialist prescribing only
EPLERENONE	Brown	●	Prescribe in restricted circumstances
ERDOSTEINE	Black	●	APCO March 2007
ERECTILE DYSFUNCTION DRUGS	Brown	●	In line with DH and local guidance
ERLOTINIB	Red	●	In line with NPSA Rapid Alert on Oral Anticancer Medicines
ERYTHROPOIETIN for renal disease	Red	●	All prescribing (and funding) transferred to Renal Unit in September 2005. For secondary care prescribing only
ESCITALOPRAM	Black	●	No significant advantage over citalopram
ESOMEPRAZOLE 40mg	Brown	●	Restricted for patients with significant symptoms requiring very high dose PPI treatment.
ESOMEPRAZOLE 20mg	Black	●	Not on ORH1 formulary. Omeprazole and lansoprazole capsules are current first line choices. Omeprazole 40mg is equivalent to Esomeprazole 20mg in terms of bioavailability.
ESTRAMUSTINE PHOSPHATE	Red	●	In line with NPSA Rapid Alert on Oral Anticancer Medicines
ETANERCEPT	Red	●	Specialist prescribing only in line with local commissioning arrangements & NICE TA195 & TA199
ETOGLUCID	Red	●	Specialist prescribing only
ETOPOSIDE	Red	●	In line with NPSA Rapid Alert on Oral Anticancer Medicines
EVEROLIMUS for second-line treatment of advanced renal cell carcinoma	Black	●	In line with TA 219
EXEMESTANE	Yellow Continuation	●	Guidance available
EZETIMIBE	Brown	●	Prescribe second line following guidelines
FEBUXOSTAT	Brown	●	Restricted prescribing in line with NICE TAG 164.
FENTANYL BUCCAL TABLETS (Effentora®)	Black	●	Limited information available re place in therapy. Currently no request to use by Palliative Care Team.
FENTANYL LOZENGES (ACTIQ)	Black	●	Limited information available re place in therapy. Currently no request to use by Palliative Care Team.
FENTANYL IONTOPHORETIC TRANSDERMAL SYSTEM (IONYSIS)	Red	●	Specialist prescribing only
FESOTERODINE	Yellow Continuation	●	In line with PCT Prescribing guidance
FILGRASTIM (RECOMBINANT HUMAN GRANULOCYRE-COLONY STIMULATING FACTOR)	Red	●	Specialist prescribing only
FLAMINAL	Black	●	Not recommended
FLOXURIDINE	Red	●	Specialist prescribing only
FLUDARABINE PHOSPHATE	Red	●	In line with NPSA Rapid Alert on Oral Anticancer Medicines
FLUOROURACIL (ORAL)	Red	●	In line with NPSA Rapid Alert on Oral Anticancer Medicines
FLUTICASONE NASULES	Brown	●	Restricted prescribing for patients with hypo osmia, Aspirin Sensitive Asthma & after 6 week trial of steroid nasal spray for nasal polyps.
FOSAMPRENAVIR	Red	●	All HIV drugs should be prescribed by specialist centres only

FULVESTRANT	Black	●	Not recommended
FUMADERM	Red	●	For prescribing by Dermatologists only
	Yellow	●	In line with TA 217 AND Shared Care Protocol
GALANTAMINE for the treatment of Alzheimers Disease	Red	●	In line with TA 217 BUT outside Shared Care Protocol
GALANTAMINE for the treatment of dementia associated with Parkinson's disease or Lewy Bodies	Yellow Continuation	●	In line with Priorities Forum Statement 134
GAMOLENIC ACID	Black	●	Priorities Forum Lavender Statement
GARDASIL Human papillomavirus (HPV) vaccine	Black	●	In line with Priorities Forum guidance
GEFITINIB for the second-line treatment of locally advanced or metastatic non-small-cell lung cancer	Red	●	In line with NICE TAG 175 and TA 192
GEMCITABINE	Red	●	Specialist prescribing only
GLUCOSAMINE	Black	●	Priorities Forum Lavender Statement
GLUTEN FREE FOODS for treatment of autism	Black	●	Not prescribed on the NHS as defined by DoH
GOLD (SODIUM AUROTHIOMALATE) for inflammatory arthritis	Yellow (NPT)	●	Shared Care Protocol
GOLIMUMAB for the treatment of psoriatic arthritis	Red	●	In line with TA 220
GOSERELIN	Yellow Continuation	●	Licensed for all stages of prostate cancer
GOSERELIN for Central precocious puberty (CPP)	Yellow	●	Shared Care Protocol
GRANISETRON	Black	●	In line with ORH guidance: Surgical antiemetic policy, Cancer antiemetic policy
GROWTH HORMONE IN ADULTS	Yellow (NPT)	●	Shared Care Protocol
GROWTH HORMONE IN CHILDREN	Yellow	●	Updated APCO agreed Shared Care Protocol 09/07
GROWTH HORMONE for "small for gestational age" (SGA) children	Yellow (NPT)	●	Shared Care Protocol NICE TA188
GTN 0.4% ointment	Brown	●	For anal fissure. Consider after lifestyle advice/use of topical anaesthetic prior to specialist referral
HEAD LICE DEVICES as listed in Drug Tariff IXA	Black	●	Not recommended
HOME PARENTERAL NUTRITION	Yellow	●	Shared Care Protocol
HYALURONIC ACID	Red	●	For limited use within NOC as per agreed internal guidelines
HYDROXYCARBAMIDE	Yellow (NPT)	●	Shared Care Protocol & Guidance approved by APCO & CE
HYDROXYCHLOROQUINE for inflammatory arthritis	Yellow	●	Shared Care Protocol
IBANDRONATE	Black	●	Not recommended
ICAPS for age related muscular degeneration	Black	●	Not recommended. In line with Lavender Statement 97
IDARUBICIN HYDROCHLORIDE	Red	●	In line with NPSA Rapid Alert on Oral Anticancer Medicines
Ifosfamide	Red	●	Specialist prescribing only
IMATINIB	Red	●	For prescribing by secondary care oncologists/haematologists only. In line with NICE TA196 TA 209
IMIQUIMOD 5% CREAM for recalcitrant anogenital warts	Red	●	For specialist GUM consultant prescribing only
IMIQUIMOD CREAM for BCC	Yellow Continuation	●	Shared Care Protocol

Immediate release fentanyl intranasal spray for break through cancer pain	Black	●	unclear as to where this product should be used within the pathway, prescribing responsibilities and which patient groups it would be appropriate for use in.
IMMUNOGLOBULINS: intravenous and subcutaneous	Red	●	All should be provided through the ORHT
INDINAVIR	Red	●	All HIV drugs should be prescribed by specialist centres only
INFERTILITY TREATMENT	Red	●	In line with Priorities Forum Statement
INFLIXIMAB	Red	●	Specialist prescribing only in line with local commissioning arrangements NICE TAG 187, TA195 & TA199
INOSINE PRABONEX	Black	●	Not recommended. Not on ORH formulary.
INSULIN DETEMIR	Brown	●	Prescribe following guidelines only
INSULIN GLARGINE	Brown	●	Restricted prescribing in accordance with Lavender Statement
INTRA-NASAL MIDOZOLAM	Red	●	For use by the Oxfordshire Salaried Primary Care Dental Service only for special care adults and adults with needle phobia - subject to the medico-legal aspects being agreed with Oxford Health.
IRINOTECAN HYDROCHLORIDE	Red	●	Specialist prescribing only
ISONIAZID	Red	●	Specialist prescribing only
ISOTRETINOIN – ORAL	Red	●	In line with BNF advice
IVABRADINE – arrhythmia	Red	●	Secondary care prescribing only
IVABRADINE- Chronic stable angina	Black	●	Not recommended
KETAMINE	Red	●	Specialist medicine so should remain under specialist prescribing.
LACOSAMIDE	Yellow	●	In line with the APCO approved shared care protocol
LACTASE DROPS (COLIEF ®)	Black	●	In line with lactose free milk policy and colic treatment pathway. Lack of evidence for effectiveness.
LACTOSE FREE MILK for colic	Black	●	Not recommended in line with lactose free milk policy
LAMIVUDINE FOR HEPATITIS B	Yellow	●	Shared Care Protocol
LAMIVUDINE for HIV	Red	●	All HIV drugs should be prescribed by specialist centres only
LANREOTIDE for acromegaly	Yellow	●	Shared Care Protocol
LANREOTIDE for neuroendocrine tumours	Yellow	●	Only in line with Shared Care Protocol
LANTHANUM	Yellow Continuation	●	Second line a Shared Care Protocol is available
LEFLUNOMIDE for inflammatory arthritis	Yellow (NPT)	●	Shared Care Protocol
LENALIDOMIDE	Red	●	In line with NPSA Rapid Alert on Oral Anticancer Medicines
LETROZOLE	Yellow Continuation	●	In line with local guidance.
LEUPRORELIN for for Central precocious puberty (CPP)	Yellow	●	Shared Care Protocol
LEVOCETIRIZINE	Black	●	Product patent extension and no advantage over cetirizine
LIDOCAINE PLASTER	Black	●	Not recommended
LIDOCAINE PLASTER for neuropathic pain	Yellow Continuation	●	Prescribe following recommendation from pain specialists only
LINEZOLID	Red	●	Secondary care prescribing only
LIRAGLUTIDE 1.8mg (Victoza®) for the treatment of Type 2 diabetes mellitus	Black	●	In line with NICE TA203
LIRAGLUTIDE 1.2mg (Victoza®) for the treatment of Type 2 diabetes mellitus	Yellow	●	In line with APCO Liraglutide Guidance
LITHIUM	Yellow	●	In line with the APCO approved shared care protocol
LOMUSTINE	Red	●	In line with NPSA Rapid Alert on Oral Anticancer Medicines

LOPINAVIR	Red	●	All HIV drugs should be prescribed by specialist centres only
MACUSHIELD® (vitamin prep)	Black	●	In line with lavender statement for Vitamins in AMD
Maraviroc	Red	●	In line with Priorities Forum Lavender Statement
MELATONIN (CIRCADIN) for jet lag or primary insomnia	Black	●	Not recommended
MELATONIN for sleep EEG	Red	●	Secondary care prescribing only
MELATONIN for circadian rhythm sleep disorder	Red	●	Secondary care prescribing only
MELATONIN for primary insomnia	Black	●	Not recommended
MELATONIN paediatric use	Yellow	●	A Shared Care Protocol will be issued each time melatonin is recommended for children depending on the indication
MELPHALAN	Red	●	In line with NPSA Rapid Alert on Oral Anticancer Medicines
MEMANTINE for the treatment of Alzheimers disease	Red	●	In line with TA 217 - no APCO agreed Shared Care Protocol
MEMANTINE	Red	●	Not recommended to be prescribed on the NHS for new patients. (NICE) Patients should be referred to the memory clinics at the OBMHT for consideration of private prescriptions. No prescribing should be initiated in General Practice
MEPITEL , MEPILEX & MEPITAC	Red	●	In line with local Wound Management Guidance
MERCAPTOPYRINE for inflammatory bowel disease	Yellow (NPT)	●	Shared Care Protocol
MESNA	Red	●	Secondary care prescribing only
METHADONE CONCENTRATE	Black	●	In line with APCO approved Guidance for Substance Misuse
METHADONE TABLETS	Black	●	In line with APCO approved Guidance for Substance Misuse
METHOTREXATE for dermatology	Yellow (NPT)	●	Shared Care Protocol
METHOTREXATE for inflammatory bowel disease	Yellow (NPT)	●	Shared Care Protocol
METHOTREXATE for inflammatory eye conditions	Yellow (NPT)	●	Shared Care Protocol
METHOTREXATE for neurology	Yellow (NPT)	●	Shared Care Protocol
METHOTREXATE SUBCUTANEOUS for inflammatory arthritis	Yellow (NPT)	●	Shared Care Protocol
METHOTREXATE TABLETS for inflammatory arthritis	Yellow (NPT)	●	Shared Care Protocol
METHOTREXATE ORAL for paediatric gastroenterology	Red	●	Secondary care prescribing only
METHOTREXATE SUBCUTANEOUS For paediatric rheumatology	Yellow	●	Shared Care Protocol
METHOTREXATE 10MG TABLETS	Red	●	Secondary care prescribing only
METHYLNALTREXONE	Black	●	Not appropriate for prescribing
METHYLPHENIDATE	Yellow	●	To be used following recommendations from OBMHT consultants only. A Shared Care Protocol is available
MIDAZOLAM BUCCAL (Epistatus - Unlicensed)	Yellow Continuation	●	Shared Care Protocol
MIDODRINE	Red	●	Secondary care prescribing only
MITOBRONITOL	Red	●	In line with NPSA Rapid Alert on Oral Anticancer Medicines
MITOMYCIN	Red	●	Specialist prescribing only
MITOTANE	Red	●	In line with NPSA Rapid Alert on Oral Anticancer Medicines

MITOXANTRONE	Red	●	Specialist prescribing only
MODAFINIL	Yellow	●	
MODAFINIL	Continuation	●	Prescribe only following recommendation from local specialist in sleep disorders
MOVICOL	Brown	●	Should only be second/third line for patients who cannot tolerate lactulose/fybogel
MYCOPHENOLATE (non transplant)	Yellow	●	Shared Care Protocol
MYCOPHENOLATE for rheumatology	Yellow	●	Shared Care Protocol
MYCOPHENOLATE in Renal Transplant	Red	●	Renal transplant drug for specialist initiation and prescribing only
NALTREXONE	Yellow	●	
NALTREXONE	Continuation	●	May be initiated by a consultant hepatologist for cholestatic itching
NALTREXONE low dose for multiple sclerosis	Black	●	Unlicensed with little supporting evidence – should not be prescribed
NATALIZUMAB for treatment of MS	Black	●	Low priority for prescribing – Priorities Forum Statement
NAPROXEN & ESOMEPRAZOLE (Vimovo®)	Black	●	Not recommended for prescribing
NELARABINE	Red	●	Specialist prescribing only
NELFINAVIR	Red	●	All HIV drugs should be prescribed by specialist centres only
NEVIRAPINE	Red	●	All HIV drugs should be prescribed by specialist centres only
NICOTINE REPLACEMENT THERAPY	Brown	●	Priorities Forum Lavender Statement
NILOTINIB	Red	●	In line with MOBBB Priorities Forum review for patients with CML resistant to imatinib
NUTRITIONAL SUPPLEMENTS 1kcal/ml (eg ENSURE®, FRESUBIN®)	Black	●	Use 1.5kcal/ml supplements (such as Complan Shake) where a nutritional supplement is appropriate to prescribe. In line with local Guidelines for the Management of Undernutrition.
NUTRITIONAL SUPPLEMENTS 2kcal/ml (eg Twocal®, Ensure Twocal®)	Brown	●	Restricted for use only where a patient is under a specialist/dietitian. 2kcal/ml supplements can be used to reduce the volume in bolus feeding via PEG tube or in fluid restricted patients, such as ascites in liver disease. In line with local Guidelines for the Management of Undernutrition.
NUTRITIONAL SUPPLEMENTS – dessert style supplements (eg Forticreme, Fresublin Crème)	Brown	●	Restricted for use only where recommended by a dietitian / Speech & Language therapist in dysphagia. In line with local Guidelines for the Management of Undernutrition.
NUVARING	Brown	●	2 nd or 3 rd line option in line with specific patient criteria.
OCTREOTIDE for acromegaly	Yellow	●	Only in line with Shared Care Protocol
OCTREOTIDE for neuroendocrine tumours	Yellow	●	Only in line with Shared Care Protocol
OCUVITE for age related muscular degeneration	Black	●	Not recommended. In line with Lavender Statement 97
OFATUMUMAB for the treatment of chronic lymphocytic leukaemia refractory to fludarabine and alemtuzumab	Black	●	In line with NICE TA202
OLANZAPINE for Behavioural and Psychiatric symptoms of dementia	Brown	●	Short term use in line with Antipsychotic Use for Behavioural and Psychiatric Symptoms of Dementia: Prescribing Guidance (2nd line IF antipsychotic required - off license use)
OLANZAPINE IM	Red	●	OBMHT specialists only
OMALIZUMAB for adults and children over 12	Red	●	Specialist prescribing only in line with NICE TA133
OMALIZUMAB for the treatment of severe persistent allergic asthma in children aged 6-11	Black	●	In line with NICE TA201
OMEGA 3 SUPPLEMENTS	Brown	●	Prescribe only in certain circumstances
OMEGA 3 SUPPLEMENTS for hypertriglyceridaemia	Brown	●	In line with Guideline for the Management of Hypertriglyceridaemia in Primary Care
ONDANSETRON	Yellow	●	In line with ORH guidance: Surgical antiemetic policy, Cancer antiemetic policy
ORAL GRASS POLLEN VACCINE (GRAZAX)	Black	●	Low priority
ORLISTAT	Brown	●	Only prescribe following NICE CG43
OSELTAMIVIR – for the treatment or prophylaxis of influenza	Brown	●	Only prescribe according to guidelines
OXALIPLATIN	Red	●	Specialist prescribing only
OXYBUTYNIN PATCH	Brown	●	In line with PCT Prescribing guidance, for patients with swallowing difficulties

OXYCODONE	Yellow	●	Following specialist recommendation
OXCODONE 50mg/5mL	Brown	●	Restricted use – within syringe drivers where volume is an issue
OXYCODONE plus NALoxone (Targinact)	Black	●	Lack of evidence of cost-effectiveness
PACLITAXEL	Red	●	Specialist prescribing only
NANO-PARTICLE BOUND PACLITAXEL for metastatic breast cancer	Black	●	In line with MOBBB Priorities Forum
PALIFERMIN	Red	●	Specialist prescribing only
PALIPERIDONE	Black	●	APCO September 2007
PALIVIZUMAB	Red	●	In line with MOBBB Priorities Forum Statement 28
PANITUMUMAB	Red	●	Specialist prescribing only
PARACETAMAL INJECTION	Red	●	Used selectively in ORHT
Parachlorophenylolamine	Red	●	Specialist prescribing only
PAZOPANIB for the first line treatment of metastatic renal cell carcinoma	Red	●	In line with TA 215
PEG INTERFERON	Red	●	Secondary care prescribing only
PEGINTERFERON alfa and ribavirin (Virateronpeg®) for the treatment of chronic hepatitis C. (part review of TAGs 75 and 106)	Red	●	In line with NICE TA200
PEGAPTANIB	Black	●	Not recommended in line with NICE TA155
PEGVISOMANT	Black	●	Low priority
PEMETREXED	Red	●	In line with NPSA Rapid Alert on Oral Anticancer Medicines NICE TAG 190
PENICILLAMINE	Yellow (NPT)	●	Shared Care Protocol
PENTOSTATIN	Red	●	Specialist prescribing only
PENTOSAN POLYSULFATE SODIUM - ELMERON®	Black	●	Not on ORH formulary , unlicensed & no cost- efficacy data
PERINDOPRIL ARGININE PLUS INDAPAMIDE (COVERSYL)	Black	●	In line with ORH MAC decision
PIMECROLIMUS ointment	Black	●	This has not been considered by ORHT MAC and so should not be prescribed
PLERIXAFOR for non-Hodgkin lymphoma	Red	●	In line with MOBBB Priorities Forum.
PLERIXAFOR for Mutiple myeloma	Black	●	In line with MOBBB Priorities Forum.
Porfimer Sodium	Red	●	Specialist prescribing only
POSACONAZOLE	Red	●	Specialist prescribing only
PRAMIPEXOLE for Idiopathic Restless Leg Syndrome	Yellow	●	Shared Care Protocol
PRASUGREL (EFIENT)	Red	●	Secondary care prescribing only. Awaiting ORH guidance prior to APCO review.
PREDNISOLONE EC tabs	Black	●	Lack of evidence of cost-efficacy
PREDNISOLONE 0.01%,0.03% & 0.1% EYE DROPS	Red	●	All specially prepared eye drops to be prescribed and dispensed by the ORHT
PREDNISOLONE 0.03% & 0.3% PRESERVATIVE FREE EYE DROPS	Red	●	All specially prepared eye drops to be prescribed and dispensed by the ORHT
PRASUGREL	Yellow	●	In line with NICE TA 182 – patient should be stabilised by ORH and length of treatment should be advised when primary care is requested to take over prescribing.
PREGABALIN for neuropathic pain	Yellow Continuation	●	Prescribe following recommendation from pain specialists only
PRISTINAMICIN	Red	●	Specialist prescribing only
PRO-BIOTICS	Black	●	In line with Priorities Forum statement Sept 2008
PROCARBAZINE HYDROCHLORIDE	Red	●	In line with NPSA Rapid Alert on Oral Anticancer Medicines
PROPIVERINE	Black	●	In line with PCT Prescribing guidance

PRUCALOPRIDE for chronic constipation in women	Red	●	In line with TA 211
PYRAZINAMIDE	Red	●	Specialist prescribing only
TROPISETRON	Black	●	In line with ORH formulary
QLAIRA phased combined hormonal contraceptive	Black	●	No evidence of clinical benefit over alternatives and more expensive, no long term safety data.
QUETIAPINE for Behavioural and Psychiatric symptoms of dementia	Brown	●	Short term use in line with Antipsychotic Use for Behavioural and Psychiatric Symptoms of Dementia: Prescribing Guidance (2nd line IF antipsychotic required - off license use)
QUETIAPINE XL	Red	●	No clinical evidence of increased tolerability compared to immediate release therapy. Only anecdotal evidence of benefit in titration.
RALTEGRAVIR	Red	●	In line with Priorities Forum Lavender Statement
RALTITREXED	Red	●	Specialist prescribing only
RAMELTEON	Black	●	Currently unlicensed - No Prescribing
RANIBIZUMAB	Red	●	Specialist prescribing only in line with NICE TA 155
RASAGILINE	Black	●	Classified as black in-line with ORH formulary
RAZOXANE	Red	●	Specialist prescribing only
RECOMBINANT HUMAN GRANULOCYTE-COLONY STIMULATING FACTOR	Red	●	Specialist prescribing only
RETAPAMULIN OINTMENT	Black	●	Not recommended
RETIN-A for stretch marks	Black	●	Not recommended in line with Priorities Forum statement 6
RIFAMPICIN for TB	Red	●	Specialist prescribing only
RIFAMPICIN	Yellow Continuation	●	Following Microbiology/Infectious Diseases recommendation
RILUZOLE	Yellow	●	In line with NICE TA20
RIMONABANT	No Prescribing		Suspensions of marketing authorisation
RISPERIDONE for Behavioural and Psychiatric symptoms of dementia	Brown	●	Short term use in line with Antipsychotic Use for Behavioural and Psychiatric Symptoms of Dementia: Prescribing Guidance (1st line IF antipsychotic required)
RISPERIDONE IM	Red	●	Secondary care prescribing only
RITONAVIR	Red	●	All HIV drugs should be prescribed by specialist centres only
RITUXIMAB	Red	●	Specialist prescribing only in line with local commissioning arrangements and TA 193 & TA195
RIVAROXYBAN	Red	●	To be used by Independent Treatment Centres only. Awaiting ORH MAC decision prior to review by APCO/PF.
RIVASTIGMINE (EXELON) PATCH	Yellow Continuation	●	Only if patient unable to tolerate oral therapy, clinical evidence not sufficient to recommend first line.
RIVASTIGMINE for the treatment of Alzheimers Disease	Yellow	●	In line with TA 217 AND Shared Care Protocol
	Red	●	In line with TA 217 BUT outside Shared Care Protocol
RIVASTIGMINE for the treatment of dementia associated with Parkinson's disease or Lewy Bodies	Yellow Continuation	●	In line with Priorities Forum Statement 134
ROFECOXIB INJECTION	Black	●	Not on ORHT formulary for acute pain due to lack of evidence
ROMIPLOSTIM for the treatment of chronic immune or idiopathic thrombocytopenic purpura	Red	●	In line with TA 221
ROPINIROLE for restless legs - mild to moderate	Black	●	In line with Priorities Forum
ROPINIROLE for restless legs – severe & persistent	Red	●	Specialist prescribing only

ROSUVASTATIN	Brown	●	For use only where other first and second line statins have not been tolerated, or for very high risk secondary prevention patients where first and second line agent have not been effective.
ROTIGOTINE PATCH	Brown	●	Following specialist diagnosis in line with the recommendations for the management of Parkinson disease in NICE Clinical Guideline 35 and <ul style="list-style-type: none"> In patients unable to tolerate ropinerole or In patient with an insufficient response to ropinerole or In patient unable to swallow oral medicines
RUFINAMIDE	Red	●	Specialist only in Lennox Gastaut Syndrome
SAQUINAVIR	Red	●	All HIV drugs should be prescribed by specialist centres only
SATIVIX®	Black	●	Effect size of reducing spasticity is small, with very little translation into patient benefit. No cost effectiveness studies. Few long term cannabinoids studies.
SAXAGLIPTIN	Brown	●	For use in line with In line with NICE Type 2 Diabetes Mellitus clinical guideline
SEVELAMER	Yellow	●	Shared Care Protocol
Sildenafil (for pulmonary artery hypertension)	Red	●	Specialist prescribing only
SITAGLIPTIN (Januvia®)	Brown	●	For use in line with NICE Type 2 Diabetes Mellitus clinical guideline
SODIUM CLODRONATE	Yellow Continuation	●	Only for treatment of hypercalcaemia associated skeletal metastases in patients with breast cancer or multiple myeloma following recommendation from specialists
SODIUM OXYBATE	Black	●	Priorities Forum Lavender Statement
SOLIFENACIN 5mg	Brown	●	2nd line - in line with PCT Prescribing Guidance
SOLIFENACIN 10MG	Yellow continuation	●	In line with PCT Prescribing guidance
SOMATROPIN for the treatment of growth failure in children	Yellow (NPT)	●	Shared Care Protocol NICE TA 188
SORAFENIB (first- and second-line) for the treatment of advanced and/or metastatic renal cell carcinoma	Black	●	In line with NICE TA178
carcinoma	Black	●	In line with NICE TA189
SUNITINIB for the treatment of gastrointestinal stromal tumours	Red	●	In line with NICE TA179
STAVUDINE	Red	●	All HIV drugs should be prescribed by specialist centres only
STIRIPENTOL	Red	●	Specialist prescribing only by paediatric neurologists
STRONTIUM	Brown	●	Follow NICE guidelines.
SULPHASALAZINE for inflammatory arthritis	Yellow (NPT)	●	Shared Care Protocol
SULPIRIDE for Behavioural and Psychiatric symptoms of dementia	Brown	●	Short term use in line with Antipsychotic Use for Behavioural and Psychiatric Symptoms of Dementia: Prescribing Guidance (2nd line IF antipsychotic required - off license use)
SUMATRIPTAN RADIS	Black	●	Not recommended
SUNITINIB	Red	●	Secondary care prescribing only for the first line treatment of advanced and/or metastatic renal cell carcinoma
SYLK® Paraben free personal lubricant	Black	●	Not recommended for prescribing, available for OTC purchase
TACROLIMUS for liver transplantation	Yellow	●	Shared Care Protocol
TACROLIMUS for renal transplantation	Red	●	Specialist initiation and prescribing only
TACROLIMUS ointment	Yellow Continuation	●	On recommendation from Dermatologists only

Tadalafil (for pulmonary artery hypertension)	Red	●	Specialist prescribing only
TEGAFUR	Red	●	In line with NPSA Rapid Alert on Oral Anticancer Medicines
TEICOPLANIN	Red	●	Secondary care prescribing only
TELBIVUDINE	Black	●	In line with NICE TA154
TEMOPORFIN	Red	●	Specialist prescribing only
TEMOZOLOMIDE for malignant glioma	Red	●	Specialist prescribing only Priorities Forum Lavender Statement
TEMOZOLOMIDE - dose-dense in recurrent glioblastoma multiforme	Red	●	In line with MOBBB Priorities Forum: Policy Statement 198
TEMSIROLIMUS (first-line) for the treatment of advanced and/or metastatic renal cell carcinoma	Black	●	In line with NICE TA 178
TEMSIROLIMUS for the treatment of relapsed or refractory mantle cell lymphoma (terminated appraisal)	Black	●	In line with NICE TA207
TENOFIVIR	Red	●	All HIV drugs should be prescribed by specialist centres only
TENOFIVIR DISOPROXIL for chronic hepatitis B	Red	●	In line with NICE TA 173
TERBINAFINE	Brown	●	Follow recommendations from Priorities Forum Lavender Statement. Patient Information leaflet available – CTRL & click here
TERIPARATIDE	Yellow	●	Shared Care Protocol
TESTOSTERONE (ANDROPATCH) PATCH	Black	●	Not recommended for use as no more clinically effective than testogel, testim and sustanon but more expensive
TESTOSTERONE (INTRINSA) PATCH for hypoactive sexual disorder	Black	●	For hypoactive sexual disorder in the general female population (out of license use) Lavender statement
TESTOSTERONE (INTRINSA) PATCH for surgically induced menopause with concomitant oestrogen therapy	Black	●	Not recommended
TESTOSTERONE (STRIANT) BUCCAL TABLETS	Black	●	For hypoactive sexual disorder in the general female population (out of license use)
TESTOSTERONE GEL (Testim & Testogel)	Yellow (NPT)	●	Prescribe for males only within licensed indications according to shared care protocols
TESTOSTERONE GEL (Tostran)	Black	●	Not recommended
TESTOSTERONE UNDECANOATE (Nebido)	Black	●	Not on ORH formulary. No newly initiated prescriptions should be generated.
THALIDOMIDE	Yellow Continuation	●	For RA patients this will be initiated in secondary care
THICKENERS for dysphasia	Yellow Continuation	●	Only on recommendation of Speech and Language Therapy
THIOTEPA	Red	●	Specialist prescribing only
TINZAPARIN	Black	●	Not appropriate for prescribing
TIOGUANINE	Red	●	In line with NPSA Rapid Alert on Oral Anticancer Medicines
TIOTROPIUM	Brown	●	Restricted in line with local guidelines
TIOTROPIUM RESPIMAT	Brown	●	Restricted for patients unable to use Handihaler
TOBRAMYCIN (INHALED) (Tobi & Bamitop)	Yellow	●	Shared Care Protocol
TOCILIZUMAB for rheumatoid arthritis	Red	●	RED in line with TA 198
TOLCAPONE	Black	●	Not recommended. Awaiting consideration by ORHT MAC
TOLTERODINE MR	Brown	●	2nd line - in line with PCT Prescribing guidance
TOLTERODINE immediate release	Black	●	In line with PCT Prescribing guidance
TOPOTECAN	Red	●	Specialist prescribing only. NICE TA 184 gives guidance for the treatment of relapsed small-cell lung cancer
TRABECTEDIN	Red	●	Specialist prescribing only in line with NICE TA185.

HOLDING LIST - NO PRESCRIBING

The following medicines are awaiting further consideration prior to being placed on the traffic light list. No prescribing of these medicines should take place in the meantime.

Drug	Traffic Light	Rationale
Degarelix (Firmagon®)	Holding List	Awaiting ORH/NOC MAC review
INDacaterol (Onbrez Breezhaler®)	Holding List	Awaiting ORH/NOC MAC review
Roflumilast (Daxas®)	Holding List	Awaiting ORH/NOC MAC review
TICAGRELOR	Holding List	Awaiting ORH/NOC MAC review