CALCULATIONS, COLOURS & SYMBOLS DEFINED

SYMBOLS
- Canada (We are Canadian)
- Non-formulary in Saskatchewan
- Exception Drug Status (EDS) in Saskatchewan (SK) [1-800-667-2549]
- Not covered by NIHBI (Non-Insured Health Benefits)
- Prior approval required by NIHBI. Coverage for eligible First Nations & Inuit (1-800-580-9090): Co. NIHBI Palliative Care Formulary
- Covered by NIHBI. Found on the OTC charts (pages 139-142) & identified ONLY for those drugs which have SK Formulary restrictions such as EDS or non-formulary status.
- On Saskatchewan Cancer Agency Formulary
- Health Canada Official Indication
- Refrigerate
- Warfarin interactions on the herbal chart
- Adverse Event
- Combination product
- Drug interaction
- Contraindication
- Monitoring
- $ Retail Cost to Consumer based on acquisition cost, markup & dispensing fee in Saskatchewan. Lowest generic price used available.
- C Tablet is scored. Appears as superscript, e.g. 25.5 mg tablet.
- P Porphyria
- * Concern if drug or herbal is given Pre-Op
- g Generic drug available
- Female ♂ Male
- Neutral ↓ / ↑ Decrease / Increase
- Inhibitor
- Tastes good
- Avoid if patient has soybean & peanut allergy
- Check our website for On-line extras (www.RxFiles.ca) on STOPP/START Criteria 2014; on Beers Criteria 2019
- Dose ↓ may be required for liver dysfunction
- Dose ↓ required for renal dysfunction ¹ (if 1) drug ≥ 75% renal excretion 2) toxic if accumulates 3) an active metabolite requiring dose adjustment. [CrCl < 60ml/min indicates impaired renal function]

DRUGS IN PREGNANCY & LACTATION RISK CATEGORIES

**PREGNANCY [P]** (subscript denotes trimester specific info)
- **Safe [P]**
  - Compatible in pregnancy (unproven associations possible)
- **Likely Safe [P]**
  - No (limited) human data – probably compatible
  - Compatible – maternal benefit >> embryo-fetal risk
  - Human data suggest low risk
- **Caution [P]**
  - Human, and or animal, data suggest risk [P]
  - Potential risk in specific trimester(s), as indicated by ‘x’ [P]
- **Contraindicated [P]**
  - Contraindicated in pregnancy [P]
  - Contraindicated in specific trimester(s), as indicated by ‘x’ [P]

**LACTATION [L]**
- **Safe [L]**
  - Compatible in breastfeeding
- **Likely Safe [L]**
  - No (limited) human data – probably compatible in breastfeeding
- **Caution [L]**
  - Human data – potential toxicity in breastfeeding
  - No (limited) human data – potential toxicity
- **Contraindicated [L]**
  - Contraindicated in breastfeeding

**Unknown for Pregnancy [P] and/or Lactation [L]**
- No (limited) human data – no relevant animal data


**COLOURS USED WITHIN THE CHARTS**
- Yellow highlights CLINICAL DIFFERENCES, PRACTICE GAPS & COMMON’S
- Green shading usually indicates HERBAL/LIFESTYLE related
- Light Blue shading usually indicates PEDIATRIC related
- Dark Blue shading usually indicates ADOLESCENT related
- Tan shading usually indicates GERIATRIC related
- Purple shading usually indicates OVERVIEW/GUIDELINE approach
- Red shading usually indicates official FDA black box or HC warning
- Pink script usually indicates TRADE NAMES (® implied)
- Blue script usually indicates MAJOR TRIALS
- Gray script usually indicates PREGNANCY & LACTATION related

**ABBREVIATIONS**
- See pages 241-242 & bottom of charts

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**CALCULATIONS**

Ideal Body Weight (kg) [IBW]

Math: Males = 50kg + 0.906 (Height in cm - 152.4cm) Females = 45.5kg + 0.906 (Height in cm - 152.4cm)

To convert SI units to conventional:

Cholesterol x 38.6 mg/dL; glucose x 18 mg/dL; creatinine x 0.0113 mg/dL; uric acid x 0.017 mg/dL; vitamin D x 0.4 ng/mL


Creatinine Clearance (mL/min) [CrCl]

(mL/min): Male = [(140-age) x ABW weight in kg] / (Scr in umol/L x 0.814) Female = 0.85 xCrCl male; Or:

(mL/sec/70kg) = [(140-age) x 1.5] x (0.85 if female) / (Scr in umol/L)

eGFR = accurate, but need website or app with MedCalc to do the calculation. www.hdcn.com www.kidney.org

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