



Wyoming Medication Donation Program

Medication Formulary Available in 90 Day Supply

Allergies

Cetirizine 10mg

Asthma & COPD

Albuterol 0.083% nebulizer solution

Ipratropium / Albuterol 0.5mg/3mg neb solution

Ipratropium 0.02% nebulizer solution

Cholesterol

Atorvastatin 10mg

Atorvastatin 20mg

Fenofibrate 54mg

Pravastatin 40mg

Pravastatin 80mg

Rosuvastatin 5mg

Rosuvastatin 10mg

Rosuvastatin 20mg

Rosuvastatin 40mg

Simvastatin 40mg

Simvastatin 40mg

Men's Health

Finasteride 5mg

Gastrointestinal Health

Esomeprazole 20mg

Esomeprazole 40mg

Omeprazole 20mg

Diabetes

Glipizide 5mg

Glipizide 10mg

Metformin 500mg

Metformin 850mg

Depression

Bupropion 75mg

Citalopram 10mg

Citalopram 20mg

Citalopram 40mg

Escitalopram 5mg

Fluoxetine 10mg

Fluoxetine 60mg

Paroxetine 20mg

Paroxetine 40mg

Venlafaxine 37.5mg

Venlafaxine 75mg

Thyroid Conditions

Levothyroxine 25mcg

Levothyroxine 50mcg

Levothyroxine 75mcg

Levothyroxine 88mcg

Levothyroxine 100mcg

Levothyroxine 112mcg

Levothyroxine 125mcg

Levothyroxine 150mcg

Levothyroxine 175mcg

Levothyroxine 200mcg



Heart Health & Blood Pressure

Amlodipine 5mg
Amlodipine 10mg
Aspirin 81mg
Atenolol 25mg
Atenolol 50mg
Atenolol 100mg
Carvedilol 3.125mg
Carvedilol 6.25mg
Carvedilol 25mg
Chlorthalidone 25mg
Digitek/Digoxin 0.125mg
Digitek/Digoxin 0.25mg
Doxazosin 1mg
Doxazosin 2mg
Doxazosin 4mg
Furosemide 80mg
Hydrochlorothiazide 25mg
Metolazone 2.5mg
Metolazone 5mg
Metoprolol 25mg ER
Metoprolol 50mg ER
Metoprolol 100mg ER
Metoprolol Tartrate 25mg
Metoprolol Tartrate 50mg
Metoprolol Tartrate 100mg
Prazosin 1mg
Prazosin 2mg
Prazosin 5mg
Propranolol 10mg
Propranolol 20mg
Propranolol 40mg
Spironolactone 25mg
Spironolactone 50mg
Spironolactone 100mg
Terazosin 1mg
Terazosin 10mg

Women's Health

Estradiol 0.5mg
Estradiol 1mg

Gout

Allopurinol 100mg
Allopurinol 300mg

Vitamins & Supplements

Acidophilus/Risa-Bid
Multivitamin
Potassium Chloride 10mEq
Potassium Chloride 20mEq
Vitamin B-12 1000mcg



1. The patient must have a *current* application on file with the Medication Donation Program. Applicants are eligible for one year and must renew annually. Renewal notices are sent to active patients one month prior to expiration.
2. The patient must have a *complete* application on file at the Medication Donation Program. This includes proof of income, proof of residency, and social security number which is used to verify prescription insurance status.
3. Medications labeled with "DOH" are NOT available for Medicare Part D patients. Medications listed without the "DOH" label ARE available to Medicare Part D patients.
4. Prescriptions using a substitute dosage are not eligible for 90 day supply. For example, if the patient needs atorvastatin 80mg daily and none are available, the prescription may be filled with directions to take two 40mg tablets daily. This will be filled for a 30 day supply.
5. The original Rx must be written for a 6 month supply or longer which indicates to our staff that the patient is stable on the medication.
6. Dispensing Sites cannot order the "DOH" medications to have on hand. However, their patients may access the "DOH" medications via the mail through standard WMDP procedures.
7. This formulary is subject to change. Changes will be posted on the website.