

PRODUCT LIST



GD = Generic Drugs | SD = Similar Drugs | O = Others | FS = Food Supplements

CLASSIFICATION	DESCRIPTION	REGISTER
GD	ACEBROFILINA 25 MG/5 ML XPE INFANTIL 120 ML	1.0535.0196.001-1
GD	ACEBROFILINA 50 MG/5 ML XPE ADULTO 120 ML	1.0535.0196.002-1
GD	ACETATO DE DEXATAMETASONA CREME	1.0535.0195.001-6
GD	ARIPIPRAZOL 10 MG COM C/ 30	1.0535.0234.003-3
GD	ARIPIPRAZOL 15 MG COM C/ 30 (C1)	1.0535.0234.002-5
GD	AZITROMICINA 500 MG COM REV C/ 3	1.0535.0160.002-3
GD	AZITROMICINA 500 MG COM REV C/ 5	1.0535.0160.003-1
GD	CAPTOPRIL 25 MG COM C/30	1.0535.0181.004-4
GD	CAPTOPRIL 50 MG COM C/30	1.0535.0181.006-0
GD	CETOCONAZOL 200 MG COM C/10	1.0535.0182.001-5
GD	CETOCONAZOL 200 MG COM C/30	1.0535.0182.003-1
GD	CICLOPIROX-OLAMINA 10MG/G CREM DERM 20 G	1.0535.0149.001-5
GD	CIPROFIBRATO 100 MG COM C/ 30	1.0535.0225.001-8
GD	CL TRAMADOL+PARACETAMOL COM REV 37,5+325MG C/10 A2	1.0535.0241.002-3
GD	CL TRAMADOL+PARACETAMOL COM REV 37,5+325MG C/20 A2	1.0535.0241.003-1
GD	CLORIDRATO DE AMBROXOL 15 MG/5 ML XPE INFANTIL 120 ML + COP	1.0535.0202.001-2
GD	CLORIDRATO DE AMBROXOL 30 MG/5 ML XPE ADULTO 120 ML + COP	1.0535.0202.002-0
GD	CLORIDRATO DE BROMEXINA 4 MG/5 ML XPE INF 120 ML	1.0535.0141.001-1
GD	CLORIDRATO DE BROMEXINA 8 MG/5 ML XPE AD 120 ML	1.0535.0141.004-6
GD	CLORIDRATO DE CICLOBENZAPRINA 10 MG COM REV C/15	1.0535.0215.005-6
GD	CLORIDRATO DE CICLOBENZAPRINA 10 MG COM REV C/30	1.0535.0215.006-4
GD	CLORIDRATO DE CICLOBENZAPRINA 5 MG COM REV C/15	1.0535.0215.002-1
GD	CLORIDRATO DE CICLOBENZAPRINA 5 MG COM REV C/30	1.0535.0215.003-1
GD	CLORIDRATO DE CIPROFLOXACINO 500 MG COM REV C/14	1.0535.0140.002-4
GD	CLORIDRATO DE FLUOXETINA 20 MG CAP DURA C/30	1.0535.0180.002-2
GD	CLORIDRATO DE HIDROXIZINA 2 MG/ML SOL ORAL 100 ML + COP	1.0535.0170.003-6
GD	CLORIDRATO DE LOPERAMIDA 2 MG COM C/ 12	1.0535.0159.001-1
GD	CLORIDRATO DE LOPERAMIDA 2 MG COM C/ 200	1.0535.0159.003-6
GD	CLORIDRATO DE PIOGLITAZONA 30 MG COM C/ 15	1.0535.0237.009-9
GD	CLORIDRATO DE PIOGLITAZONA 30 MG COM C/ 30	1.0535.0237.011-0
GD	CLORIDRATO DE PIOGLITAZONA 30 MG COM C/ 60	1.0535.0237.012-9
GD	CLORIDRATO DE PROPRANOLOL 40 MG COM C/40	1.0535.0192.001-1
GD	CLORIDRATO DE SERTRALINA 100 MG COM REV C/30	1.0535.0209.002-9
GD	CLORIDRATO DE SERTRALINA 50 MG COM REV C/30	1.0535.0209.001-0
GD	CLORIDRATO DE TRAZODONA 100 MG COM C/ 30	1.0535.0238.015-9
GD	CLORIDRATO DE TRAZODONA 50 MG COM C/ 60	1.0535.0238.008-6
GD	CLORIDRATO DE VENLAFAXINA 75 MG CAP C/ 30	1.0535.0236.004-2
GD	CLOTRIMAZOL 10 MG/G CREM DERM 20 G	1.0535.0199.001-8
GD	DES Loratadina 0,5 MG/ML XPE 100ML	1.0535.0246.002-0
GD	DES Loratadina 0,5 MG/ML XPE 60ML	1.0535.0246.001-2
GD	DES Loratadina 5MG COM C/10	1.0535.0245.001-7
GD	DES Loratadina 5MG COM C/30	1.0535.0245.002-5
GD	DESONIDA 0,5 MG/G CREM DERM C/30 G	1.0535.0148.001-1
GD	DIPIRONA 1G COM C/10	1.0535.0247.005-0
GD	DIPIRONA 500MG COM C/30	1.0535.0247.003-4
GD	FLUCONAZOL 150 MG CAP C/ 01	1.0535.0189.002-1
GD	FLUCONAZOL 150 MG CAP C/ 02	1.0535.0189.001-3
GD	IBUPROFENO 600 MG CAP MOLE C/10	1.0535.0230.002-3
GD	LORATADINA 1 MG/ML XPE 100 ML	1.0535.0143.001-2
GD	MALEATO DE DEXCLORFENIRAMINA + BETAMETASONA 0,4 MG/ML + 0,05 MG/ML XPE 120 ML + COP	1.0535.0142.001-7
GD	MIRTAPAZINA 30 MG COM ORODISP C/ 30	1.0535.0235.008-1
GD	MIRTAPAZINA15 MG COM ORODISP C/ 30	1.0535.0235.007-1
GD	NIMESULIDA 100 MG COM C/12	1.0535.0203.002-6
GD	NIMESULIDA 50 MG/ML SUS GOT 15 ML	1.0535.0228.001-4
GD	NORFLOXACINO 400 MG COM REV C/ 14	1.0535.0164.001-7
GD	OMEPRAZOL 20 MG CAP C/ 28	1.0535.0172.003-7
GD	OMEPRAZOL 20 MG CAP C/ 56	1.0535.0172.012-6
GD	PREDNISONA 20 MG COM C/10	1.0535.0218.001-1
GD	PREDNISONA 20 MG COM C/20	1.0535.0218.002-8
GD	PREGABALINA 150 MG CAP DURA C/ 30	1.0535.0244.002-1
GD	PREGABALINA75 MG CAP DURA C/ 30	1.0535.0244.001-1
GD	RISPERIDONA 1 MG COM REV C/ 30	1.0535.0227.003-5
GD	RISPERIDONA 2 MG COM REV C/ 30	1.0535.0227.006-1
GD	RISPERIDONA 3 MG COM REV C/ 30	1.0535.0227.010-8
GD	SECNIDAZOL 1000 MG COM C/ 02	1.0535.0187.001-2
GD	SECNIDAZOL 1000 MG COM C/ 04	1.0535.0187.002-0
GD	SIN VASTATINA 20 MG COM REV C/ 30	1.0535.0185.006-2
GD	SIN VASTATINA 40 MG COM REV C/ 30	1.0535.0185.010-0
SD	CAPTOCORD 50 MG COMC/30	1.0535.0104.006-0
SD	CAPTOCORD 25 MG COM C/30	1.0535.0104.004-4
SD	CETOMICOSS 200 MG COM C/10	1.0535.0176.001-2
SD	CETOMICOSS 200 MG COM C/30	1.0535.0176.003-9
SD	CIPROFLOXATRIN 500 MG COM REV C/14	1.0535.0179.002-7
SD	DIGLUSS 50 MG COM C/ 28	1.0535.0242.002-9
SD	DIGLUSS 50 MG COM C/ 56	1.0535.0242.003-7
SD	FLAMAPE 20 MG COM C/10	1.0535.0217.001-4
SD	FLAMAPE 20 MG COM C/20	1.0535.0217.002-2
SD	FLUCOLCID CAP 150 MG C/01	1.0535.0193.002-3
SD	FLUCOLCID CAP 150 MG C/02	1.0535.0193.001-5
SD	FUNGISTEN 10 MG/G CREM DERM 20 G.	1.0535.0121.001-2
SD	GLOBOFLU 30 MG CAP C/ 10	1.0535.0240.001-1
SD	GLOBOFLU 45 MG CAP C/ 10	1.0535.0240.003-6
SD	GLOBOFLU 75 MG CAP C/ 10	1.0535.0240.005-2
SD	HOXIDRIN (CLORIDRATO DE HIDROXIZINA) 2 MG/ML SOL ORAL 100 ML + COP	1.0535.0184.003-2
SD	INTESTIN (CLORIDRATO DE LOPERAMIDA) 2 MG COM C/12	1.0535.0156.001-3
SD	INTESTIN (CLORIDRATO DE LOPERAMIDA) 2 MG COM C/200	1.0535.0156.003-1
SD	LERGIDRIN (MALEATO DE DEXCLORFENIRAMINA + BETAMETASONA) 0,4 MG/ML + 0,05 MG/ML XPE 120 ML + COP	1.0535.0177.001-8
SD	LIPFITE (CIPROFIBRATO) COM 100 MG C/ 30	1.0535.0224.001-2
SD	NORXACIN (NORFLOXACINO) 400 MG COM REV C/14	1.0535.0097.002-1
SD	NOVOPRAZOL (OMEPRAZOL) 20 MG CAP C/28	1.0535.0178.003-1
SD	NOVOPRAZOL (OMEPRAZOL) 20 MG CAP C/56	1.0535.0178.009-9
SD	PROPALOL (CLORIDRATO DE PROPRANOLOL) 40 MG COM C/ 40	1.0535.0200.001-1
SD	SCAFLOGIN (NIMESULIDA) 100 MG COM C/ 12	1.0535.0124.005-1
SD	SCAFLOGIN GOTAS (NIMESULIDA) 50 MG/ML SUS GOT 15 ML	1.0535.0226.001-3
SD	SECNIMAX (SECNIDAZOL) 1000 MG COM C/ 02	1.0535.0110.003-9
SD	SECNIMAX (SECNIDAZOL) 1000 MG COM C/ 04	1.0535.0110.004-7
SD	SIN VASMAX (SIN VASTATINA) 20 MG COM REV C/ 30	1.0535.0188.006-9
SD	SIN VASMAX (SIN VASTATINA) 40 MG COM REV C/ 30	1.0535.0188.010-7
SD	SPECTOFUX (CLORIDRATO DE AMBROXOL) 15 MG/5 ML XPE 120 ML + COP	1.0535.0132.005-5
SD	SPECTOFUX (CLORIDRATO DE AMBROXOL) 30 MG/5 ML XPE 120 ML + COP	1.0535.0132.006-3
O	BENZIN 100 MG/G SABONETE 60 G	Notified Medicines - Resolution 576/2021
O	CETOCONAZOL SHAMPOO C/ 100 ML	N/A
O	DIOHESP (DIOSMINA + HESPERIDINA) 450MG + 50MG COM REV C/30	1.0535.0208.001-5
O	DIOHESP (DIOSMINA + HESPERIDINA) 450MG + 50MG COM REV C/60	1.0535.0208.002-3
O	GLICENIX ADULTO (GLICEROL) 2,30 G SUP ADULTO C/6	Notified Medicines - Resolution 576/2021
O	GLICENIX LACTENTE (GLICEROL) 0,92 G SUP LACTENTE C/6	Notified Medicines - Resolution 576/2021
O	GLICENIX PEDIÁTRICO (GLICEROL) 1,40 G SUP PEDIÁTRICO C/6	Notified Medicines - Resolution 576/2021
O	KALOSTOP (ÁCIDO SALICÍLICO + ÁCIDO LÁCTICO) 0,20 G/ML + 0,15 ML/ML SOL 10 ML	Notified Medicines - Resolution 576/2021
O	LAGRIMALIV (HIALURONATO DE SÓDIO 0,10%) SOL OFTÁLMICA C/ 15 ML	80102511828
O	NITRATO DE MICONAZOL 20 MG/G CREM DERM C/ 30 G	Notified Medicines - Resolution 576/2021
O	PARACETAMOL 750 MG COM C /20	Notified Medicines - Resolution 576/2021
O	PERIODENT (GLUCONATO DE CLOREXIDINA) 0,12% SOL BUCAL 250 ML COM ÁLCOOL	N/A
O	PERIODENT (GLUCONATO DE CLOREXIDINA) 0,12% SOL BUCAL 250 ML SEM ÁLCOOL	N/A
O	PROCTGLOBO POMADA C/ 20 G	Notified Medicines - Resolution 576/2021
O	REHIDRAZOL (CLORETO DE SÓDIO + CLORETO DE POTÁSSIO + CITRATO DE SÓDIO DIIDRATADO + GLICOSE) 3,5 G + 1,5 G + 2,9 G + 20,0 G PÓ C/4 ENVELOPES - SABOR NATURAL	Notified Medicines - Resolution 576/2021
O	SIMETICONA 40 MG COM C/20	Notified Medicines - Resolution 576/2021
O	SINTAFLAT (SIMETICONA) 40 MG COM C/ 20	Notified Medicines - Resolution 576/2021
O	SPECDERA (Hedera helix L.) 7 MG/ML XPE 100 ML + COP - SABOR CEREJA	1.0535.0207.001-1
O	SPECDERA (Hedera helix L.) 7 MG/ML XPE 100 ML + COP - SABOR MEL	1.0535.0207.002-8
O	TRANQUIL (Passiflora incarnata L.) 260 MG COM REV C/20	1.0535.0223.00 1-1
O	TRANQUIL (Passiflora incarnata L.) 90 MG/ML SOL ORAL 100 ML + COP	1.0535.0223.001-7
FS	ANEMIPLUS (SULFATO FERROSO) 29 MG COM REV C/30	Product exempt from mandatory registration - Resolution 27/2010
FS	ANEMIPLUS (SULFATO FERROSO) 29 MG COM REV C/50	Product exempt from mandatory registration - Resolution 27/2010
FS	APETISINA BC (VITAMINAS B1, B2, B6, C E Fe) 240 ML SOL ORAL - SABOR MORANGO	Product exempt from mandatory registration - Resolution 27/2010
FS	APETISINA BC (VITAMINAS B1, B2, B6, C E Fe) 240 ML SOL ORAL - SABOR UVA	Product exempt from mandatory registration - Resolution 27/2010
FS	COMPLEXIMED B (VITAMINA B1, B2, B3, B5, B6) COM REV C/ 100	Product exempt from mandatory registration - Resolution 27/2010
FS	COMPLEXIMED B (VITAMINA B1, B2, B3, B5, B6) COM REV C/50	Product exempt from mandatory registration - Resolution 27/2010
FS	NECRORGAN (VITAMINA B6, COLINA, VITAMINA B12, ÁCIDO FÓLICO, BIOTINA) 60 FLACONETES 10 ML - SABOR ABACAXI	Product exempt from mandatory registration - Resolution 27/2010
FS	RARIVIT D 1000 UI COM REV C/ 30	Product exempt from mandatory registration - Resolution 27/2010
FS	RARIVIT D 2000 UI COM REV C/ 30	Product exempt from mandatory registration - Resolution 27/2010
FS	RARIVIT ZINCO 29,59 MG COM REV C/ 30	Product exempt from mandatory registration - Resolution 27/2010
FS	RARIVIT ZINCO 29,59 MG COM REV C/ 60	Product exempt from mandatory registration - Resolution 27/2010
FS	TÔNICO VITAL SOL ORAL 250 ML - SABOR TRADICIONAL	Product exempt from mandatory registration - Resolution 27/2010
FS	TÔNICO VITAL SOL ORAL 500 ML - SABOR TRADICIONAL	Product exempt from mandatory registration - Resolution 27/2010

THE USE OF MEDICATION MAY POSE RISKS. CONSULT A DOCTOR OR PHARMACIST. READ THE PACKAGE INSERT CAREFULLY.