

Netformulary

KNoW

Traffic Light Classifications

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	(L-) Carnitine	(Various - Carnitor®)	Carnitine Deficiency	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
Double Red	(Para-)aminosalicylic acid	(Granupas®)	Tuberculosis	Not recommended for routine use	NICE has not issued any guidance.
RED	Abacavir	(Ziagen®)	HIV infection in combination with other antiretroviral drugs	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Abacavir + dolutegravir + lamivudine	(Triumeq®)	HIV infection in combination with other antiretroviral drugs	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Abacavir and lamivudine	(Generics are available)	HIV infection in combination with other antiretroviral drugs	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
Double Red	Abaloparatide	(Eladynos®)	Male and juvenile osteoporosis	Not recommended for routine use	NICE has not issued any guidance.
NICE approved	Abaloparatide	Eladynos®)	osteoporosis after menopause	NWICB are committed to fund positive NICE TAs. Awaiting clarification of place in pathway and commissioning arrangements. Further guidance to be issued when available.	TA991 – August 2024
RED	Abatacept	(Orencia®)	Rheumatoid arthritis - 1st line biologic after failure of non-biologic DMARDs - as per NICE TA 280	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA280 - Apr 13

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RED	Abatacept	(Orencia®)	Treatment of Juvenile Idiopathic Arthritis (JIA) as per NICE TA 373	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA373 - Dec 15
RED	Abatacept	(Orencia®)	Rheumatoid arthritis - after other DMARDs including a TNF inhibitor - as per NICE TA 195	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA375 - Jan 16
BLACK	Abatacept	(Orencia®)	Psoriatic arthritis after DMARDs as per NICE TA 568 terminated appraisal	Not commissioned. No NHS prescribing in primary or secondary care	TA568 - Mar 19
BLACK	Abatacept	various, plus biosimilars	moderate rheumatoid arthritis after conventional DMARDs have failed	Not commissioned. No NHS prescribing in primary or secondary care	TA715 – July 2021
RED	Abatacept (subcutaneous)	(Orencia® (subcutaneous))	First line biologic option for moderate to severe active rheumatoid arthritis in adults who responded inadequately to one or more DMARDs (including MTX)	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Abemaciclib	(Verzenios ®)	Locally advanced or metastatic hormone receptor-positive, human epidermal growth factor receptor 2 (HER2)-negative breast cancer as first endocrine-based therapy in adults - as per NICE TA 563	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA563 - Feb 19
RED	Abemaciclib	(Verzenios ®)	Breast cancer	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA579 - May 2019

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RED	Abemaciclib	Verzenios®	®) with endocrine therapy for adjuvant treatment of hormone receptor-positive, HER2-negative, node-positive early breast cancer at high risk of recurrence	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA810 – July 2022
RED	Abemaciclib (Verzenios®) with fulvestrant	Verzenios®	hormone receptor-positive, HER2-negative advanced breast cancer after endocrine therapy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA725 – September 2021
RED	Abiraterone	(Zytiga®)	Metastatic hormone-relapsed prostate cancer before chemotherapy is indicated (in combination with prednisone or prednisolone) - as per NICE TA 387	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA387 - Apr 16
BLACK	Abiraterone	Zytiga®	newly diagnosed high-risk hormone-sensitive metastatic prostate cancer	Not commissioned. No NHS prescribing in primary or secondary care	TA721 – August 2021
RED	Abiraterone acetate	(Zytiga®)	Castration resistant metastatic prostate cancer previously treated with docetaxel - as per NICE TA 259	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA259 - Jun 12
NICE approved	Abrocitinib	Cibinqo®	moderate to severe atopic dermatitis	NWICB are committed to fund positive NICE TAs. Awaiting clarification of place in pathway and commissioning arrangements. Further guidance to be issued when available.	TA814 – August 2022
RED	Acalabrutinib	Calquence®	chronic lymphocytic leukaemia	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA689 – April 2021

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RED	Acamprosate	<i>(Campral EC / generics are available)</i>	Maintenance of abstinence in alcohol-dependent patients. Prescribing of treatments for alcohol misuse, including acamprosate and disulfiram (and also nalmefene) are the responsibility of the specialist since local alcohol misuse services are not commissioned from GPs practices	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	CG115 - Feb 11
Double Red	ACE Inhibitors - cor pulmonale	<i>(Various)</i>	Treatment of cor pulmonale - as per NICE CG 101 - NICE Do Not Do (x).	Not recommended for routine use	CG101 - Jul 10
Double Red	ACE inhibitors with Angiotensin-II Receptor Antagonists (ARBs)	<i>(Various)</i>	NICE Do Not Do (Not a licensed indication).	Not recommended for routine use. Specialist prescribing only	CG182 - Jul 14
RED	Acetazolamide	generics / Diamox®	idiopathic intracranial hypertension in adults	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Acitretin	<i>(Neotigason®)</i>	All indications	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
BLACK	ActiPatch®	<i>(ActiPatch®)</i>	Relief of musculoskeletal pain	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.
RED	Adalimumab	<i>(Humira® / Biosimilar)</i>	Treatment of adults with psoriasis - as per NICE TA 146 and the local treatment pathway	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA146 - Jun 08

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RED	Adalimumab	(Humira® / Biosimilar)	Severe active Crohn's disease which has not responded to conventional therapy - as per NICE TA 187	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA187 - May 10
RED	Adalimumab	(Humira® / Biosimilar)	Rheumatoid arthritis - after other DMARDs including a TNF inhibitor - as per local treatment pathway	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA195 - Aug 10
RED	Adalimumab	(Humira® / Biosimilar)	Treatment of psoriatic arthritis (including switching between treatments) - as per local treatment pathway	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA199 - Aug 10
RED	Adalimumab	(Humira® / Biosimilar)	Moderate to severe ulcerative colitis (primary) - as per NICE TA 329	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA329 - Feb 15
RED	Adalimumab	(Humira® / Biosimilar)	Juvenile idiopathic rheumatoid arthritis (JIA) - option in children with chronic anterior uveitis - as per NHS England policy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA373 - Dec 15
RED	Adalimumab	(Humira® / Biosimilar)	Treatment of children and young people with polyarticular juvenile idiopathic arthritis and for enthesitis-related juvenile idiopathic arthritis as per NICE TA 373	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA373 - Dec 15
RED	Adalimumab	(Humira® / Biosimilar)	Ankylosing spondylitis - as per local treatment pathway	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA383 - Feb 16

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RED	Adalimumab	(Humira® / Biosimilar)	2nd line anti-TNF in patients with joint or skin autoimmune disease who develop IBD on etanercept - as per local treatment pathway	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA383 - Feb 16
RED	Adalimumab	(Humira® / Biosimilar)	Treatment of (non-radiographic) axial spondyloarthritis - as per local treatment pathway	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA383 - Feb 16
RED	Adalimumab	(Humira® / Biosimilar)	Moderate to severe hidradenitis suppurativa - as per NICE TA 392	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA392 - Jun 16
RED	Adalimumab	(Humira® / Biosimilar)	Plaque psoriasis in children and young people - as per NICE TA 455	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA455 - Jul 17
RED	Adalimumab	(Humira® / Biosimilar)	Anti-TNF Alpha treatment option for paediatric patients with severe refractory uveitis (Not a licensed indication).	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA460 - Jul 17
RED	Adalimumab	(Humira®)	Anti-TNF treatment option for adult patients with severe refractory uveitis - as per NHS England policy and NICE TA 460 (Not a licensed indication).	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA460 - Jul 17
RED	Adalimumab	various, plus biosimilars	moderate rheumatoid arthritis after conventional DMARDs have failed	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA715 – July 2021

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RED	Adalimumab	<i>(Humira® / Biosimilar)</i>	Behcet's syndrome (Not a licensed indication).	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Adalimumab	<i>(Humira® / Biosimilar)</i>	Children with Severe Refractory Uveitis with onset in childhood (age 2 or more up to 18 or less) - as per NHS England policy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Adalimumab	<i>(Humira® / Biosimilar)</i>	Weekly use for treatment of psoriasis in adults	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE TA146 does not cover weekly use
RED	Adalimumab (biosimilar)	<i>(Imraldi® / Amjevita®)</i>	Peripheral spondyloarthritis - following use of 3 DMARDs, as per local pathway	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Adalimumab (biosimilar)	various	weekly use for dose escalations in NICE-approved rheumatology indications	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Adefovir	<i>Hepsera®</i>	Hepatitis B	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	CG165 - Oct 17
Double Red	ADHD drugs - various	<i>(Various)</i>	First-line use in children and adolescents with ADHD - as per NICE CG 72 - Do Not Do (Not a licensed indication).	Not recommended for routine use - Specialist initiation only	CG72 - Feb 16
Double Red	ADHD drugs - various	<i>(Various)</i>	Use in pre-school children - as per NICE CG 72 - Do Not Do (Not a licensed indication).	Not recommended for routine use - Specialist initiation only	CG72 - Feb 16

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BLACK	Afamelanotide	Scenesse®	erythropoietic protoporphyria	Not commissioned. No NHS prescribing in primary or secondary care	HST27 – July 2023
RED	Afatinib ▼	(Giotrif® ▼)	Treatment of epidermal growth factor receptor mutation-positive locally advanced or metastatic non-small-cell lung cancer - as per NICE TA 310	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA310 - April 2014
BLACK	Afatinib ▼	(Giotrif® ▼)	Advanced squamous non-small-cell lung cancer after platinum-based chemotherapy - as per NICE TA 444 (terminated appraisal)	Not commissioned. No NHS prescribing in primary or secondary care	TA444 - May 17
BLACK	Aflibercept	(Zaltrap®)	Treatment of metastatic colorectal cancer that has progressed following prior oxaliplatin-based chemotherapy (along with irinotecan and fluorouracil-based therapy) - as per NICE TA 307 - NICE Do Not Do	Not commissioned. No NHS prescribing in primary or secondary care	TA307 - Mar 14
RED	Aflibercept (switched to Ranibizumab (Lucentis®))	(Eylea®)	Switching between products in the treatment of Wet Age-related Macular Degeneration (AMD) in previously treated patients who have not responded adequately to, or who have intolerance to aflibercept (Eylea®) - as per locally commissioned pathway	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NG82 - Jan 18

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Aflibercept 2mg	(Eylea®)	Treatment of Wet Age-related Macular Degeneration	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA294 - Jul 13
RED	Aflibercept 2mg	(Eylea®)	Wet Age-related Macular Degeneration (AMD)	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA294 - Jul 13
RED	Aflibercept 2mg	(Eylea®)	Wet Age-related Macular Degeneration (AMD) in new patients	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA294 - Jul 13
RED	Aflibercept 2mg	(Eylea®)	Visual impairment caused by macular oedema secondary to central retinal vein occlusion (CRVO) - as per NICE TA 305 and local treatment pathway	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA305 - Feb 14
RED	Aflibercept 2mg	(Eylea®)	Treatment of visual impairment caused by diabetic macular oedema (DMO)	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA346 - Jul 15
RED	Aflibercept 2mg	(Eylea®)	Visual impairment caused by macular oedema after branch retinal vein occlusion - as per NICE TA 409 and local treatment pathway	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA409 - Sep 16
RED	Aflibercept 2mg	(Eylea®)	Treatment of visual impairment due to myopic choroidal neovascularisation in adults - as per NICE TA 486	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA486 - Nov 17

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RED	Aflibercept 2mg	(Eylea®)	Treatment of Diabetic Macular Oedema (DMO) as part of a treat and extend regimen in line with the locally commissioned treatment pathway	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Aflibercept 2mg	(Eylea®)	Treatment of Wet Age-related Macular Degeneration (AMD) as part of a treat and extend regimen in line with the locally commissioned treatment pathway	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Agalsidase alfa and beta	(Replagal® (alpha) / Fabrazyme® (beta))	Fabry disease (α-galactosidase A deficiency)	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
BLACK	Agomelatine	(Valdoxan®)	4th line use in depression where other treatments have failed or not been tolerated (terminated appraisal)	Not commissioned. No NHS prescribing in primary or secondary care	TA231 - Sep 11
RED	Albumin bound paclitaxel	Abraxane®	with gemcitabine for untreated metastatic pancreatic cancer	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA476 - Sep 17
RED	Albutrenpenonacog alfa	(Idelvion)	Haemophilia B - as per NHS England policy SSC1652	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Aldesleukin	(Proleukin)	Cancer - metastatic renal cancer	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.

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RED	Alectinib	(Alecensa®)	Untreated ALK-positive advanced non-small-cell lung cancer - as per NICE TA 536	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA536 - Aug 18
RED	Alectinib	Alecensa®	adjuvant treatment of ALK-positive non-small-cell lung cancer	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA1014 – November 2024
BLACK	Alectinib ▼	(Alecensa® ▼)	Previously treated anaplastic lymphoma kinase-positive advanced non-small-cell lung cancer as per NICE TA 438 (terminated appraisal)	Not commissioned. No NHS prescribing in primary or secondary care	TA438 - Mar 17
RED	Alemtuzumab	(Lemtrada®)	Chronic lymphocytic leukaemia (CLL) - as per NHS England policy 2013	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Alemtuzumab	(Lemtrada®)	Pre-transplant immunosuppression	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Alemtuzumab	(MabCampath®)	Behcet's syndrome	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Alemtuzumab ▼	(Lemtrada® ▼)	Treatment of adults with relapsing-remitting multiple sclerosis (RRMS) - as per NICE TA 312	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA312 – May 2014, updated May 2024
Double Red	Alendronate / Vitamin D3 combination	(Fosavance®)	Treatment of post menopausal osteoporosis in women at risk of vitamin D deficiency	Not recommended for routine use	NICE has not issued any guidance.

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ADVICE	Alfacalcidol	(AlfaD®, One-Alpha®)	Preparation for hyperparathyroidectomy	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	NICE has not issued any guidance.
RED	Alglucosidase alfa	(Myozyme®)	Pompe disease (a lysosomal storage disorder caused by deficiency of acid alpha-glucosidase) - as per NHS England	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
BLACK	Alimemazine (Trimeprazine)	(Generics)	Sedative in children / general antihistamine	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.
RED	Alipogene tiparvovec	(Glybera®)	(Gene therapy treatment for) Lipoprotein lipase deficiency - as per NHSE policy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Alirocumab ▼	(Praluent® ▼)	Treating primary hypercholesterolaemia and mixed dyslipidaemia - as per NICE TA 393	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA393 - Jun 16
BLACK	Aliskiren ▼	(Rasilez® ▼)	Treatment of essential hypertension - as per NICE CG 127	Not commissioned. No NHS prescribing in primary or secondary care	CG127 - Sep 11
Double Red	Alisporivir	((aka Debio 025 / DEB025 / UNIL-025))	Viral Hepatitis C - as per NHSE policy	Not recommended for routine use	NICE has not issued any guidance.
RED	Alitretinoin	(Toctino®)	Treatment of severe chronic hand eczema - as per NICE TA 177	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA177 - Aug 09

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BLACK	Alpelisib	Piqray®	with fulvestrant for treating hormone-receptor positive, HER2-negative, PIK3CA-positive advanced breast cancer (terminated appraisal)	Not commissioned. No NHS prescribing in primary or secondary care	TA652 – October 2020
RED	Alpelisib	Piqray®	with fulvestrant for treating hormone receptor-positive, HER2-negative, PIK3CA-mutated advanced breast cancer	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA816 – August 2022
Double Red	Alpha blockers - various	(Various)	Treatment of cor pulmonale - as per NICE CG 101 .	Not recommended for routine use	CG101 - Jul 10
RED	Alpha-mannosidase - recombinant human	(Lamazym®)	Alpha Mannosidase deficiency - as per NHSE policy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Alteplase	(Actilyse®)	Treatment of acute ischaemic stroke - as per NICE TA 264	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA264 - Sep 12
Double Red	Amantadine Hydrochloride	(Lysovir®)	Treatment and prophylaxis of influenza	Not recommended for routine use	TA168 - Feb 09
RED	Ambrisentan	(Volibris® ▼)	Pulmonary Arterial Hypertension - specialist centre only	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Amifampridine (phosphate) ▼	(Firdapse® ▼)	Treatment of myasthenias - Lambert-Eaton syndrome - as per NHS England policy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Amikacin - liposomal for inhalation	(Arikace®)	Gram-negative bacterial infection in Cystic Fibrosis .	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.

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Double Red	Amikacin (for inhalation)	(Amikin®)	Gram-negative bacterial infection in Cystic Fibrosis	Not recommended for routine use	NICE has not issued any guidance.
BLACK	Aminobenzoic acid (capsules and powder)	(Potaba®)	Peyronie's disease, Scleroderma	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.
FULL SCA	Amiodarone	(Cordarone X®)	Supraventricular and ventricular arrhythmias	Shared Care Agreement Level 2 - Prescribe the drug and perform a more intense level of monitoring, e.g. quarterly	CG180 - Jun 14
BLACK	Amivantamab	n/a	EGFR exon 20 insertion mutation-positive advanced non-small-cell lung cancer after platinum-based chemotherapy	Not commissioned. No NHS prescribing in primary or secondary care	TA850 – December 2022
BLACK	Amorolfine	(Loceryl and other equivalent preparations)	Fungal nail infections	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.
RED	Amphotericin B, itraconazole & voriconazole	(Various)	Chronic Pulmonary Aspergillosis (CPA) - specialist centre only	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
FULL SCA	Anagrelide ▼	(Xagrid® ▼ / Agrelin® / Agrylin®)	Thrombocythaemia	Prescribe the drug and perform a basic level of monitoring, e.g. a standard annual review	NICE has not issued any guidance.
RED	Anakinra	Kineret®	Still's disease	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA685 – March 2021
RED	Anakinra	(Kineret®)	Cryopyrin-associated periodic syndrome (CAPS)	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Anakinra	(Kineret®)	Rheumatoid arthritis	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NG100 - Oct 2020

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RED	Anakinra	(Kineret®)	Juvenile Idiopathic Arthritis (JIA)	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Anakinra	(Kineret®)	Periodic fevers and autoinflammatory conditions	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
ADVICE	Anastrozole	(Arimidex®)	Breast cancer - as per NICE CG81	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	CG81 - Nov 06
ADVICE	Anastrozole	(Arimidex®)	Post menopausal Women at moderate or High or moderate risk of breast Cancer unless they have severe osteoporosis	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	CG164 - updated Nov 2019
BLACK	Andexanet alfa	Ondexxya®	for reversing anticoagulation from edoxaban	Not commissioned. No NHS prescribing in primary or secondary care	TA697 – May 2021
RED	Andexanet alfa	Ondexxya®	for reversing anticoagulation from apixaban or rivaroxaban (this covers bleed in the gastrointestinal tract)	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA697 – May 2021
BLACK	Andexanet alfa	Ondexxya®	reversing anticoagulation in people with intracranial haemorrhage (terminated appraisal)	Not commissioned. No NHS prescribing in primary or secondary care	TA1029 – January 2025
BLACK	Angiotensin II	Giapreza®	vasosuppressor-resistant hypotension caused by septic or distributive shock (terminated appraisal)	Not commissioned. No NHS prescribing in primary or secondary care	TA859 – Jan 2023

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Double Red	Angiotensin-II receptor antagonists with ACE inhibitors	(Various)	with ACE inhibitors (Not a licensed indication).	Not recommended for routine use	CG182 - Jul 14
RED	Anhydrous sodium thiosulfate	Pedmarqsi®	preventing hearing loss caused by cisplatin chemotherapy in people 1 month to 17 years with localised solid tumours	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA1034 – January 2025
RED	Anidulafungin	(Ecalta®)	Fungal infection - invasive candidiasis	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
BLACK	Anifrolumab	N/A	active autoantibody-positive systemic lupus erythematosus (terminated appraisal)	Not commissioned. No NHS prescribing in primary or secondary care	TA793 – June 2022
Double Red	Antacids - various	(Various)	Long term frequent use in functional dyspepsia - as per NICE CG 184 - Do Not Do	Not recommended for routine use	CG184 - Aug 04
Double Red	Antibiotic prophylaxis	(Various)	Infective endocarditis and interventional procedure (dental/non dental) - as per NICE CG 64	Not recommended for routine use	CG64 - Jul 16
RED	Antibiotics - intravenous / inhalation	(Various)	Cystic fibrosis	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
Double Red	Antibiotics (oral for children)	(Various)	Fever in children without apparent source - as per NICE CG 160 - Do Not Do	Not recommended for routine use	NG143 - Nov 19
RED	Anti-D immunoglobulin	(Various)	Routine anti-D prophylaxis (RAADP) - as per NICE TA 156	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA156 - Aug 08

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
Double Red	Antidepressants (including SSRIs)	<i>(Various)</i>	(Routine use) for the treatment of alcohol misuse alone - as per NICE CG 115 - Do Not Do	Not recommended for routine use	CG115 - Feb 11
RED	Antihaemophilic Factor	<i>((von Willebrand Factor Complex))</i>	As per BCSH Guidelines	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
Double Red	Antihistamines (oral)	<i>(Various)</i>	(Routine use) for Atopic eczema in children - as per NICE CG 57	Not recommended for routine use	CG57 - Dec 07
RED	Antilymphocyte globulin		Aplastic anaemia, as per BCSH guidelines	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
BLACK	Antioxidant - ubiquinone aka ubidecarenone	<i>(Co Enzyme Q10)</i>	Any indication (Various indications).	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.
BLACK	Antioxidant nutritional supplements (many brands)	<i>(Ocuvite PreserVision ICAPS MacuLEH, Viteyes Vitalux)</i>	Eye health - including to prevent or slow the progression of AMD, or prevent cataracts (Not a licensed indication).	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.
RED	Anti-Pseudomonas aeruginosa antibody	<i>()</i>	Cystic fibrosis - NHSE policy - IFR approval	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
Double Red	Antipsychotics	<i>(Various)</i>	Combined use (except for short periods) - as per NICE CG 178	Not recommended for routine use	CG178 - Mar 14
BLACK	Antipsychotics	<i>(Various)</i>	Borderline personality disorder (medium to long term treatment) - as per NICE CG 78 - Do Not Do	Not commissioned. No NHS prescribing in primary or secondary care	CG78 - Jan 09

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
BLACK	Antipsychotics	(Various)	Treatment of ADHD in children, young people and adults - as per NICE CG 72 - Do Not Do (Not a licensed indication).	Not commissioned. No NHS prescribing in primary or secondary care	CG72 - Feb 16
Double Red	Antipsychotics	(Various)	Generalised Anxiety Disorder - as per NICE CG 113 - Do Not Do (Not a licensed indication).	Not recommended for routine use	CG113 - Jan 11
BLACK	Antipsychotics	(Various)	Loading doses of antipsychotic medication (aka 'rapid neuroleptisation')	Not commissioned. No NHS prescribing in primary or secondary care	CG178 - Mar 14
RED	Antiretroviral therapy (ART)	(Various)	Treatment as Prevention (TasP) - as per NHS England policy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Antithrombin III	()	As per BCSH Guidelines	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	BCSH guidelines
RED	Antithymocyte immunoglobulin	(Thymoglobuline®)	Aplastic anaemia, organ transplant - as per BCSH guidelines	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	BCSH guidelines
BLACK	Antivirals	(Various)	Chronic fatigue syndrome/myalgic encephalomyelitis (or encephalopathy) - as per NICE CG 53 - Do Not Do (Not a licensed indication).	Not commissioned. No NHS prescribing in primary or secondary care	CG53 - Aug 07

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Apalutamide	Erleada®	with androgen deprivation therapy for treating high-risk hormone-relapsed non-metastatic prostate cancer	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA740 – October 2021
RED	Apalutamide	Erleada®	with androgen deprivation therapy for treating hormone-sensitive metastatic prostate cancer	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA741 – October 2021
RED	Apixaban	(Eliquis®)	Thromboprophylaxis post hip and knee surgery	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA245 - Jan 12
RED	Apixaban	(Eliquis®)	Treatment of calf vein deep vein thrombosis (as per NICE TA 341)	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA341 - Jun 15
ADVICE	Apixaban	(Eliquis®)	Treatment and secondary prevention of DVT & PE	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	TA341 - Jun 15
Double Red	Apixaban	(Eliquis®)	Combined use with dual antiplatelet therapy in people who otherwise need anticoagulation, who have had an MI - as per NICE CG 172 - Do Not Do (Not a licensed indication).	Not recommended for routine use	NG185 - Nov 2020
RED	Apomorphine	(APO-go®)	Patients with Parkinson's disease with disabling motor fluctuations	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
NICE approved	AposHealth		knee osteoarthritis	NWICB are committed to fund positive NICE TAs. Awaiting clarification of place in pathway and commissioning arrangements. Further guidance to be issued when available.	MTG76 - April 2023
RED	Apraclonidine eye drops	(Iopidine®)	Short-term adjunctive therapy of chronic glaucoma in patients on maximally tolerated medical therapy who require additional intraocular pressure (IOP) reduction to delay laser treatment or glaucoma surgery.	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Apremilast	(Otezla® ▼)	Paediatric indications - NHSE policy (Not a licensed indication).	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Apremilast ▼	(Otezla® ▼)	Treatment of moderate to severe plaque psoriasis that has not responded to systemic therapy, or where systemic therapy is contraindicated or not tolerated - as per NICE TA 419 and the local treatment pathway	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA419 - Nov 16
RED	Apremilast ▼	(Otezla® ▼)	Active psoriatic arthritis in adults - as per NICE TA 433	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA433 - Feb 17

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Aprepitant	(Emend®)	Prevention of nausea and vomiting in patients on highly emetogenic chemotherapy - as per NHS England policy (A licensed indication).	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
ADVICE	Aripiprazole	(Abilify®)	Moderate to severe manic episodes in adolescents with bipolar I disorder - as per NICE TA 292	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	TA292 - Jul 13
ADVICE	Aripiprazole	(Abilify®)	Schizophrenia and bipolar mood disorder - as per NICE CG 82 and TA 213	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	CG82 - Mar 09
BLACK	Armour Thyroid / any unlicensed thyroid products	(Armour Thyroid)	Any indication	Not commissioned. No NHS prescribing in primary or secondary care	RMOG guidance - June 2019
ADVICE	Aromatase inhibitors (Various)	(Various)	Adjuvant hormonal treatment of early oestrogen-receptor-positive breast cancer in post menopausal women - as per local protocol	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	CG81 - Nov 06
RED	Arsenic trioxide	(Trisenox®)	Acute promyelocytic leukaemia (characterised by the presence of the t[15;17] translocation or the PML/RAR-alpha gene) in adults - as per NICE TA 526	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA526 - Jun 18
RED	Asciminib	Scemblix®	chronic myeloid leukaemia after 2 or more tyrosine kinase inhibitors	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA813 – August 2022

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Asfotase alfa	Strensiq®	paediatric-onset hypophosphatasia	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	HST23 – March 2023
Double Red	Aspirin	()	Primary prevention of CVD in T1 or T2 Diabetes - as per NG17 and NG 28 Do Not Do's	Not recommended for routine use	NG17 - May 17
Double Red	Aspirin	()	Primary prevention of CVD in T1 or T2 Diabetes - as per NG17 and NG 28 Do Not Do's	Not recommended for routine use	NG28 - May 17
Double Red	Asunaprevir (with Daclatasvir)	()	Viral Hepatitis (B&C) and Respiratory Syncytial Virus	Not recommended for routine use	NICE has not issued any guidance.
RED	Atacicept	()	Systemic Lupus Erythematosus (SLE)	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Ataluren ▼	(<i>Translarna</i> ® ▼)	Duchenne muscular dystrophy with a nonsense mutation in the dystrophin gene in people aged ≥5 years who can walk - as per NHS England policy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	HST22 - Feb 2023
RED	Atazanavir	(<i>Reyataz</i> ®)	HIV infection in combination with other antiretroviral drugs - as per BHIVA Guidelines	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Atazanavir and Cobicistat	(<i>Evotaz</i> ®)	HIV infection in combination with other antiretroviral drugs - as per BHIVA guidelines	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Atezolizumab	(Tecentriq®)	Locally advanced or metastatic non-small-cell lung cancer after chemotherapy - as per NICE TA 520	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA520 - May 18
RED	Atezolizumab	(Tecentriq®)	Locally advanced or metastatic urothelial carcinoma after platinum-containing chemotherapy - as per NICE TA 525	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA525 - Jun 18
RED	Atezolizumab	Tecentriq®	monotherapy for untreated advanced non-small-cell lung cancer	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA705 – June 2021
RED	Atezolizumab	Tecentriq®	untreated PD-L1-positive advanced urothelial cancer when cisplatin is unsuitable	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA739 – October 2021
BLACK	Atezolizumab	Tecentriq®	untreated advanced or recurrent non-small-cell lung cancer when platinum-doublet chemotherapy is unsuitable (terminated appraisal)	Not commissioned. No NHS prescribing in primary or secondary care	TA1047 – March 2025
BLACK	Atezolizumab	TECENTRIQ®	with carboplatin and nab-paclitaxel for untreated advanced non-squamous non-small-cell lung cancer as per TA618 (terminated appraisal)	Not commissioned. No NHS prescribing in primary or secondary care	TA618 - Jan 20
RED	Atezolizumab	Tecentriq®	adjuvant treatment of resected non-small-cell lung cancer	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA823 – October 2022

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Atezolizumab ▼	(Tecentriq® ▼)	with carboplatin and etoposide for untreated extensive-stage small-cell lung cancer	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA638 - July 2020
RED	Atezolizumab ▼	(Tecentriq® ▼)	with nab-paclitaxel for untreated PD-L1-positive, locally advanced or metastatic, triple-negative breast cancer	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA639 - July 2020
RED	Atezolizumab ▼	(Tecentriq® ▼)	with bevacizumab for treating advanced or unresectable hepatocellular carcinoma	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA666 – December 2020
RED	Atezolizumab ▼	(Tecentriq® ▼)	Cancer - various (Various indications).	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Atidarsagene autotemcel	Libmeldy	metachromatic leukodystrophy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	HST18 - March 2022
ADVICE	Atogepant	Aquipta®	preventing migraine	Specialist will initiate and provide the first 12 weeks of medication to the patient.	TA973 – May 2024
FULL SCA	Atomoxetine	(Strattera®)	Attention Deficit Hyperactivity Disorder in Adults for new treatment of symptoms that can be confirmed from childhood	Shared Care Agreement Level 1 - Prescribe the drug and perform a higher level of monitoring, e.g. 6-monthly	NG87 - Mar 18
FULL SCA	Atomoxetine	(Strattera® ▼)	Attention Deficit Hyperactivity Disorder in Children & Adolescents	Shared Care Agreement Level 3 - Prescribe the drug and perform significant monitoring including measurements such as height, weight, blood pressure and ECG	NG87 - Mar 18

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
ADVICE	Atypical antipsychotics (except clozapine)	(Various (except Clozaril® (Red))	Psychosis and schizophrenia in adults - As per NICE CG 178	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation Consultant should prescribe for an initial period of one month.	CG82 - Mar 09
RED	Autologous anti-CD19-transduced CD3+ cells	Tecartus®	Relapsed or refractory mantle cell lymphoma	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA677 – February 2021
RED	Autologous chondrocyte implantation	(Spherox®)	For treating symptomatic articular cartilage defects of the knee - as per NICE TA 508	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA508 - Mar 18
RED	Autologous serum eye drops	()	Dry eye	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Avacopan	Tavneos®	Anca-positive vasculitis	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Avacopan	Tavneos®	severe active granulomatosis with polyangiitis or microscopic polyangiitis	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA825 – September 2022
RED	Avalglucosidase alfa	AVAL®	Pompe disease	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA821 – August 2022
BLACK	Avanafil ▼	(Spedra® ▼)	Use of regular, daily doses for penile rehabilitation in prostate cancer/post radical prostatectomy	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Avapritinib	Ayvakyt®	advanced systemic mastocytosis	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA1012 – November 2024
BLACK	Avapritinib	N/A	unresectable or metastatic gastrointestinal stromal tumours (terminated)	Not commissioned. No NHS prescribing in primary or secondary care	TA730 – September 2021
RED	Avatrombopag	(Doptelet®)	treating thrombocytopenia in people with chronic liver disease needing a planned invasive procedure	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA626 - Jun 2020
RED	Avatrombopag	Doptelet®	primary chronic immune thrombocytopenia	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA853 – December 2022
RED	Avelumab	(Bavencio®)	Metastatic Merkel cell carcinoma - as per NICE TA 517	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA517 - Apr 18
RED	Avelumab	(Bavencio®)	axitinib for untreated advanced renal cell carcinoma	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA645 – September 2020
RED	Avelumab	Bavencio®	untreated metastatic Merkel cell carcinoma	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA691 – April 2021
RED	Avelumab	Bavencio®	maintenance treatment of locally advanced or metastatic urothelial cancer after platinum-based chemotherapy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA788 – May 2022

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Avorlastat	()	Hereditary angioedema	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Axicabtagene ciloleucel	Yescarta®	diffuse large B-cell lymphoma and primary mediastinal large B-cell lymphoma after 2 or more systemic therapies	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA872 – February 2023
BLACK	Axicabtagene ciloleucel	(Yescarta®)	relapsed or refractory follicular lymphoma	Not commissioned. No NHS prescribing in primary or secondary care	TA894 – June 2023
RED	Axicabtagene ciloleucel	(Yescarta®)	relapsed or refractory diffuse large B-cell lymphoma after first-line chemoimmunotherapy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA895 – June 2023
RED	Axitinib	(Inlyta®)	Advanced renal cell carcinoma after failure of prior systemic treatment - as per NICE TA 333	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA333 - Feb 2015
BLACK	Axonics sacral neuromodulation system		Overactive bladder and faecal incontinence	Not commissioned. No NHS prescribing in primary or secondary care	MIB 164 - December 2018
Double Red	Aymes Actagain protein shot	Aymes Actagain	hypoproteinaemia	Not recommended for routine use.	NICE has not issued any guidance.
RED	Azacitidine	(Vidaza®)	Myelodysplastic syndromes, chronic myelomonocytic leukaemia and acute myeloid leukaemia - as per NICE 218	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA218 - Mar 11

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
BLACK	Azacitidine	(Vidaza®)	Acute myeloid leukaemia with more than 30% bone marrow blasts in people of 65 years or older who are not eligible for haematopoietic stem cell transplant - as per NICE TA 399	Not commissioned. No NHS prescribing in primary or secondary care	TA399 - July 16
RED	Azacitidine (oral)	Onureg®	maintenance treatment of acute myeloid leukaemia after induction therapy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA827 – October 2022
FULL SCA	Azathioprine	(Imuran®)	As a steroid-sparing effect in patients with Autoimmune Diseases in whom steroids cannot be reduced or are contraindicated, and for maintaining remission in vasculitis	Shared Care Agreement Level 2 - Prescribe the drug and perform a more intense level of monitoring, e.g. quarterly	NICE has not issued any guidance.
FULL SCA	Azathioprine	(Generics are available)	Steroid-sparing effect in ulcerative colitis and Crohn's disease (Not a licensed indication).	Shared Care Agreement Level 2 - Prescribe the drug and perform a more intense level of monitoring, e.g. quarterly	NICE has not issued any guidance.
RED	Azelastine and Fluticasone nasal spray	Dymista®	moderate to severe seasonal and perennial rhinitis if monotherapy with antihistamine or corticosteroid is inadequate	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
BLACK	Azilsartan	(Edarbi®)	Essential hypertension	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.
RED	Aztreonam (nebulised)	(Cayston®)	Gram negative infections in cystic fibrosis - as per NHS England policy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NG78 - Oct 17

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
BLACK	B Braun Diveen	()	Urinary stress incontinence	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.
RED	Baclofen (via intrathecal pump)	(Lioresal®)	Muscle spasm in neurological conditions as per NICE guidance	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	CG145 - Jul 12
BLACK	Baloxavir marboxil	N/A	acute uncomplicated influenza (terminated appraisal)	Not commissioned. No NHS prescribing in primary or secondary care	TA732 – October 2021
BLACK	Bamboo bedding (incl sheets, pillow cases)	(Symmetrikit® bamboo sheet and cushion covers)	Care of very disabled patients with severe physical needs	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.
RED	Bardoxolone Methyl		Pulmonary arterial hypertension	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Baricitinib	Olumiant®	Moderate to severe atopic dermatitis	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA681 – March 2021
BLACK	Baricitinib	Olumiant®	severe alopecia areata	Not commissioned. No NHS prescribing in primary or secondary care	TA926 – October 2023
BLACK	Baricitinib	Olumiant®	juvenile idiopathic arthritis in people 2 years and over	Not commissioned. No NHS prescribing in primary or secondary care	TA982 – June 2024
RED	Baricitinib ▼	(Olumiant® ▼)	(with or without methotrexate) for active moderate to severe rheumatoid arthritis in adults - as per NICE TA 466 and locally commissioned treatment	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA466 - Aug 17

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Basiliximab	(Simulect®)	Option for induction therapy in the prophylaxis of acute organ rejection in adults, children and adolescents undergoing renal transplantation - as per NICE TAs 481 and 482	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA481 - Oct 17
RED	Basiliximab	(Simulect®)	Option for induction therapy in the prophylaxis of acute organ rejection in adults, children and adolescents undergoing renal transplantation - as per NICE TAs 481 and 482	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA482 - Oct 17
Double Red	Bazedoxifene plus conjugated oestrogens	(Duavive®)	Management of oestrogen deficiency symptoms in postmenopausal women with a uterus for whom treatment with progestin-containing therapy is not appropriate	Not recommended for routine use	NICE has not issued any guidance.
Double Red	Beclabuvir	()	Hepatitis C	Not recommended for routine use	NICE has not issued any guidance.
ADVICE	Beclometasone dipropionate 5mg MR tablets	(Clipper®)	Second-line oral corticosteroid option in the treatment of flares in mild-moderate ulcerative colitis in adults - as per local pathway	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	NICE has not issued any guidance.
RED	Bedaquiline ▼	(Sirturo® ▼)	Multidrug-Resistant and Extensively Drug-Resistant Tuberculosis - as per NHS England policy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Bee and wasp venom	(Pharmalgen®)	Bee and wasp venom allergy - as per NICE TA 246 - specialist centre only	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA246 - Feb 12
RED	Begelomab	(Begedina®)	Graft versus Host Disease (GvHD)	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
BLACK	Belatacept	(Nulojix®)	Initial treatment to prevent organ rejection in adults, children and young people having a kidney transplant as per NICE TAs 481 & 482	Not commissioned. No NHS prescribing in primary or secondary care	TA481 - Oct 17
BLACK	Belatacept	(Nulojix®)	Initial treatment to prevent organ rejection in adults, children and young people having a kidney transplant as per NICE TAs 481 & 482	Not commissioned. No NHS prescribing in primary or secondary care	TA482 - Oct 17
BLACK	Belimumab	N/A	lupus nephritis (terminated appraisal)	Not commissioned. No NHS prescribing in primary or secondary care	TA806 – July 2022
RED	Belimumab	Benlysta®	active autoantibody-positive systemic lupus erythematosus (replaces TA397)	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA752 – December 2021
BLACK	Belladonna adhesive plaster	()	As a counter irritant for pain relief	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.
RED	Belumosudil	Rezurock®	chronic graft-versus-host disease after 2 or more systemic treatments in people 12 years and over	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA949 – February 2024

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Belzutifan	Welireg®	tumours associated with von Hippel-Lindau disease	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA1011 – October 2024
ADVICE	Bempedoic acid (alone or with ezetimibe)	Nilemdo® (bempedoic acid) or Nustendi® (combination product)	primary hypercholesterolaemia or mixed dyslipidaemia	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	TA694 – April 2021
BLACK	Bendamustine	(Levact®)	Treatment of indolent (low grade) non-Hodgkin's lymphoma that is refractory to rituximab - as per NICE TA 206 (terminated)	Not commissioned. No NHS prescribing in primary or secondary care	TA206 - Oct 10
RED	Bendamustine	(Levact®)	First-line treatment of chronic lymphocytic leukaemia (binet stage B or C) - as per NICE TA 216 / NHS England policy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA216 - Feb 11
RED	Benralizumab	(Fasenra®)	Severe eosinophilic asthma (specialist use only) - as per NICE TA 565 (NHSE commissioning responsibility)	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA565 - Mar 19
BLACK	Benzodiazepines	(Various)	Augmentation of an antidepressant with a benzodiazepine for more than 2 weeks - as per NICE CG 90 - Do Not Do (Not a licensed indication).	Not commissioned. No NHS prescribing in primary or secondary care	CG90 - Oct 09
BLACK	Benzodiazepines	(Various)	Panic disorder - as per NICE CG 113 - Do Not Do	Not commissioned. No NHS prescribing in primary or secondary care	CG113 - Jan 11

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
BLACK	Benzodiazepines	(Various)	Ongoing treatment of alcohol dependence - as per NICE CG 115	Not commissioned. No NHS prescribing in primary or secondary care	CG115 - Feb 11
BLACK	Benzodiazepines	(Various)	Generalised Anxiety Disorder (long term use) - as per NICE CG 113 - Do Not Do	Not commissioned. No NHS prescribing in primary or secondary care	CG113 - Jan 11
RED	Beractant	(Survanta®)	Respiratory distress syndrome neonates	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Berotralstat	Orladeyo®	preventing recurrent attacks of hereditary angioedema	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA738 – October 2021
BLACK	Beta-carotene (supplements containing)	(Various)	Secondary prevention of MI / reduce cardiovascular risk post MI - as per NICE CG 172 - Do Not Do (Not a licensed indication).	Not commissioned. No NHS prescribing in primary or secondary care	CG172 - Nov 13
RED	Betaine	(Cystadane® oral powder (orphan drug))	Homocystinuria	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
BLACK	Betamethasone plaster	BETESIL®	Treatment of inflammatory skin disorders that do not respond to less potent corticosteroids	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.
BLACK	Bevacizumab	(Avastin®)	Treatment of non-small-cell lung cancer - as per NHS England policy (terminated appraisal)	Not commissioned. No NHS prescribing in primary or secondary care	TA148 - Jun 08

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
BLACK	Bevacizumab	(Avastin®)	First-line treatment of advanced and/or metastatic renal cell carcinoma - as per NHS England policy	Not commissioned. No NHS prescribing in primary or secondary care	TA178 - Aug 09
RED	Bevacizumab	(Avastin®)	With oxaliplatin and either 5-FU plus folinic acid or capecitabine for metastatic colorectal cancer - as NHS England policy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA212 - Dec 10
RED	Bevacizumab	(Avastin®)	First-line treatment of metastatic breast cancer (in combination with a taxane) - as per NHS England policy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA214 - Feb 11
RED	Bevacizumab	(Avastin®)	Treatment of metastatic colorectal cancer after 1st-line chemotherapy - as per NHS England policy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA242 - Jan 12
BLACK	Bevacizumab	(Avastin®)	First-line treatment of metastatic breast cancer	Not commissioned. No NHS prescribing in primary or secondary care	TA263 - Aug 12
RED	Bevacizumab	(Avastin®)	(with paclitaxel & carboplatin) 1st-line for advanced ovarian cancer - as per NHS England policy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA284 - May 13
RED	Bevacizumab	(Avastin®)	(with gemcitabine & carboplatin) - treatment of the first recurrence of platinum-sensitive advanced ovarian cancer - as per NHS England policy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA285 - May 13

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
BLACK	Bevacizumab	(Avastin®)	Treatment for relapsed, platinum resistant epithelial ovarian, fallopian tube or primary peritoneal cancer - as per NICE TA 353 (terminated appraisal)	Not commissioned. No NHS prescribing in primary or secondary care	TA353 - Aug 15
	Bevacizumab	(Avastin®)	Epidermal growth factor receptor mutation-positive non-small-cell lung cancer - as per NICE TA 436 (terminated appraisal)	Not commissioned. No NHS prescribing in primary or secondary care	TA436 - Mar 17
	Bevacizumab	(Avastin®)	(with carboplatin, gemcitabine and paclitaxel) for first recurrence of platinum-sensitive advanced ovarian cancer - as per NICE TA 560 (terminated appraisal)	Not commissioned. No NHS prescribing in primary or secondary care	TA560 - Feb 19
RED	Bevacizumab	(Avastin®)	pre-treatment before vitrectomy for proliferative diabetic retinopathy (neovascular)	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
BLACK	Bevacizumab	(Avastin®)	Early (pre-NICE criteria) treatment of wet AMD and related conditions (Not a licensed indication).	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.
RED	Bevacizumab	(Avastin®)	Neurofibromatosis (Not a licensed indication).	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Bevacizumab	(Avastin®)	Choroidal neovascularisation (CNV) secondary to conditions other than age-related macular degeneration (AMD) or pathological myopia (PM) - as per local agreement during 2014-15 (Not a licensed indication).	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Bevacizumab	(Avastin®)	(Short term) treatment of neovascular glaucoma in rubeosis iridis - as per locally commissioned agreement (Not a licensed indication).	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Bevacizumab	(Avastin®)	Radiation retinopathy macular oedema	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Bevacizumab gamma	Lytenava®	wet age-related macular degeneration	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA1022 – December 2024
RED	Bexarotene	(Targretin®)	All indications	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
Double Red	Bezafibrate	(Bezalip; Fibrzate)	Prevention of CVD - as per NICE CG 181 "Do Not Do"	Not recommended for routine use	CG181 - Jul 14
BLACK	Bezlotoxumab	(Zinplava®)	Prevention of recurrent clostridium difficile infection (terminated appraisal)	Not commissioned. No NHS prescribing in primary or secondary care	TA601 - Sep 19

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
ADVICE	Bicalutamide	Casodex®	prostate cancer	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	NICE has not issued any guidance.
RED	Bictecravir (in combination with emtricitabine and tenofivir alafenamide)	Biktarvy®	HIV	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Bimagrumab	((BYM338))	Inclusion body myositis	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Bimekizumab	Bimzelx®	active psoriatic arthritis	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA916 – October 2023
RED	Bimekizumab	Bimzelx®	axial spondyloarthritis	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA918 – October 2023
BLACK	Bimekizumab	Bimzelx®	moderate to severe hidradenitis suppurativa (terminated appraisal)	Not commissioned. No NHS prescribing in primary or secondary care	TA1028 – January 2025
RED	Bimekizumab	Bimzelx®	moderate to severe plaque psoriasis	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA723 – September 2021
RED	Binimetinib	(Mektovi®)	(with encorafenib (Braftovi®)) for treating unresectable or metastatic BRAF V600 mutation-positive melanoma in adults - as per NICE TA 562	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA562 - Feb 19

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
BLACK	Bioidentical HRT	<i>(Bioidentical hormone replacement therapy)</i>	Menopausal symptoms	Not commissioned. No NHS prescribing in primary or secondary care	NG23 - Nov 13
RED	Biotin (vitamin H)	<i>(Qizenday®, Cerenday®, MD1003)</i>	various	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Birch bark extract	n/a	epidermolysis bullosa	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	HST28 – September 2023
RED	Bivalirudin	<i>(Angiox®)</i>	Treatment of ST-segment-elevation myocardial infarction - as per NICE TA 230	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA230 - Jul 11
RED	Blinatumomab	<i>(Blincyto®)</i>	Acute lymphoblastic leukaemia in remission with minimal residual disease activity	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA589 - Jul 19
BLACK	Blinatumomab	N/A	previously treated Philadelphia-chromosome-positive acute lymphoblastic leukaemia (terminated appraisal)	Not commissioned. No NHS prescribing in primary or secondary care	TA686 – March 2021
RED	Blinatumomab	Blincyto®	with chemotherapy for consolidation treatment of Philadelphia-chromosome-negative CD19-positive minimal residual disease-negative B-cell precursor acute lymphoblastic leukaemia	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA1049 – March 2025

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Blinatumomab ▼	(Blincyto® ▼)	Philadelphia-chromosome-negative relapsed or refractory precursor B-cell acute lymphoblastic leukaemia in adults - as per NICE TA 450	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA450 - Jun 17
RED	Blisibimod	()	Systemic lupus erythematosus (SLE)	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Boceprevir	(Victrelis®)	Treatment of genotype 1 chronic hepatitis C - as per NICE TA 253	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA253 - Apr 12
RED	Bortezomib	(Velcade®)	Multiple myeloma (first line) - as per NICE 228	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA228 - Jul 11
RED	Bortezomib	(Velcade®)	Induction therapy in multiple myeloma before high-dose chemotherapy and autologous stem cell transplantation - as per NICE TA 311	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA311 - Apr 14
RED	Bortezomib	(Velcade®)	Previously untreated mantle cell lymphoma in adults for whom haematopoietic stem cell transplantation is unsuitable as per NICE TA 370	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA370 - Dec 15
BLACK	Bortezomib	(Velcade®)	Relapsed Multiple Myeloma - as per NHS England policy & NICE TA 453 (terminated appraisal)	Not commissioned. No NHS prescribing in primary or secondary care	TA453 - Jul 17

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Bortezomib	(Velcade®)	Treatment of refractory antibody mediated rejection post kidney transplant - as per NHS England policy (Not a licensed indication).	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Bosentan	(Tracleer®)	Treatment of digital ulceration in systemic sclerosis - as per NHS England policy (A licensed indication).	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Bosentan	(Tracleer®)	Pulmonary arterial hypertension - - as per NHS England policy - specialist centres only	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Bosutinib	(Bosulif®)	Previously treated chronic myeloid leukaemia - as per NHS England policy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA401 - Aug 16
BLACK	Bosutinib	(Bosulif®)	Untreated chronic myeloid leukaemia in adults - as per NICE TA 576 (terminated appraisal) (Not a licensed indication).	Not commissioned. No NHS prescribing in primary or secondary care	TA576 - Apr 19
RED	Botulinum neurotoxin type A	(Xeomin®)	Chronic sialorrhoea	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA605 - Oct 19
RED	Botulinum Toxin Type A	(Botox®)	Prophylaxis of headaches in adults with chronic migraine - as per locally agreed policy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA260 - Jun 12

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Botulinum Toxin Type A	(Dysport®)	Neurogenic and non neurogenic detrusor overactivity in paediatric patients who have not responded to antimuscarinic treatment - as per locally agreed policy (Not a licensed indication).	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Botulinum Toxin Type A	(Botox®)	Oesophageal spasm and nutcracker oesophagus - as per locally agreed policy (Not a licensed indication).	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Botulinum Toxin Type A	(Botox®)	(severe) Focal hyperhidrosis - as per locally agreed policy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Botulinum Toxin Type A	(Botox®)	Overactive bladder / detrusor overactivity - as per locally agreed policy (Not a licensed indication).	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Botulinum Toxin Type A	(Botox®)	Chronic anal fissure - as per locally agreed policy (Not a licensed indication).	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Botulinum Toxin Type A	(Botox® - 200 units injection)	Treatment of achalasia and gastroparesis - as per locally agreed policy (Not a licensed indication).	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Botulinum Toxin Type A	(Dysport®)	Muscle spasticity in neuromuscular conditions - cerebral palsy - as per locally agreed policy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Botulinum Toxin Type A	(Botox®, Dysport®)	Treatment of focal spasticity in Multiple Sclerosis or following stroke or brain injury - as per locally agreed policy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Botulinum Toxin Type A and B	(Botox®)	Intravesical use in spinal cord injury	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Botulinum Toxin Type A and B	(Botox®)	Focal spasticity in children	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Brentuximab vedotin	(Adcetris®)	CD30-positive Hodgkin lymphoma in adults with relapsed or refractory disease - as per NICE TA 524	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA524 - Jun 18
RED	Brentuximab vedotin	(Adcetris®)	Treating CD30-positive cutaneous T-cell lymphoma (CTCL) after at least 1 systemic therapy in adults, only if they have mycosis fungoides stage IIB or over, primary cutaneous anaplastic large cell lymphoma or Sézary syndrome - as per NICE TA 577 (NHSE comm	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA577 - Apr 19
RED	Brentuximab vedotin	(Adcetris®)	in combination for untreated systemic anaplastic large cell lymphoma	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA641 – August 2020

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Brentuximab vedotin	(Adcetris®)	in combination for untreated stage 3 or 4 CD30-positive Hodgkin lymphoma	Not commissioned. No NHS prescribing in primary or secondary care	TA1059 – May 2025
RED	Brentuximab vedotin ▼	(Adcetris® ▼)	CD30-positive Hodgkin lymphoma - as per NICE TA 446	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA446 - Jun 17
RED	Brentuximab vedotin ▼	(Adcetris® ▼)	For treating relapsed or refractory systemic anaplastic large cell lymphoma in adults, only if they have an Eastern Cooperative Oncology Group (ECOG) performance status of 0 or 1 - as per NICE TA 478	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA478 - Oct 17
RED	Brexucabtagene autoleucel	Tecartus®	relapsed or refractory B-cell acute lymphoblastic leukaemia in people 26 years and over	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA893 – June 2023
RED	Brigatinib	(Alunbrig®)	For treating ALK-positive advanced non-small-cell lung cancer in adults, after crizotinib - as per NICE TA 571	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA571 - Mar 19
RED	Brigatinib	Alunbrig®	ALK-positive advanced non-small-cell lung cancer that has not been previously treated with an ALK inhibitor	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA670 – January 2021
RED	Brimapitide		Acute sensorineural hearing loss	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
BLACK	Brimonidine tartrate gel	(Mirvaso®)	Treatment of facial erythema (rosacea)	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.
RED	Brincidofovir	((CMX001))	CMV infection	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
ADVICE	Brivaracetam	Briviact	epilepsy as alternative to levetiracetam	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	NICE has not issued any guidance.
RED	Brodalumab	(Kyntheum®)	Moderate to severe plaque psoriasis - as per NICE TA 511	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA511 - Mar 18
RED	Brolucizumab	Beovu®	Wet age-related macular degeneration	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA672 – February 2021
NICE approved	Brolucizumab	Beovu®	diabetic macular oedema	NWICB are committed to fund positive NICE TAs. Awaiting clarification of place in pathway and commissioning arrangements. Further guidance to be issued when available.	TA820 – August 2022
BLACK	Bromocriptine	()	Pharmacological neuroprotective therapy in Parkinson's disease (Not a licensed indication).	Not commissioned. No NHS prescribing in primary or secondary care	NG71 -Sep 17
BLACK	Bromocriptine mesilate	(Parlodel®)	First-line use in Parkinson's disease - as per NICE NG 17	Not commissioned. No NHS prescribing in primary or secondary care	NG71 -Sep 17

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
ADVICE	Budenofalk	(Budenofalk®)	Crohn's disease in adults	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	NICE has not issued any guidance.
ADVICE	Budenofalk (Budesonide 3mg caps & 9mg granules)	(Budenofalk®)	Collagenous colitis in adults	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	NICE has not issued any guidance.
RED	Budesonide (oral viscous slurry)	Pulmicort respules	eosinophilic oesophagitis in paediatrics	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance
BLACK	Budesonide orodispersible tablets	(Jorveza®)	Eosinophilic oesophagitis in adults - treatment for maintenance of remission	Not commissioned. No NHS prescribing in primary or secondary care	TA708 – June 2021
ADVICE	Budesonide orodispersible tablets	(Jorveza®)	Eosinophilic oesophagitis in adults (GP may issue a SINGLE follow-up treatment (NOT for repeat) only if deemed necessary following assessment of response to initial treatment by given the hospital)	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation Consultant/Specialist responsible for the first script.	TA708 – June 2021
RED	Budesonide orodispersible tablets	(Jorveza®)	Eosinophilic oesophagitis in adults (first treatment with follow-up assessment of effectiveness by the hospital)	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA708 – June 2021
RED	Bulevirtide	Hepcludex®	chronic hepatitis D	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA896 – June 2023

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
ADVICE	Buprenorphine (transdermal)	<i>(Butec®, Transtec® patches)</i>	Patients with renal impairment (eGFR 15-30, CKD 4) who have an accumulation of opiates and a resulting potential for toxicity	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	NICE has not issued any guidance.
BLUE	Buprenorphine Long-Acting Injection	Buvidal®)	opioid substitution treatment	Formulary application and discussion required prior to addition to formulary	RMOC - April 2021
ADVICE	Bupropion	<i>(Zyban®)</i>	GP prescribable after consultant/specialist recommendation where the specialist is a smoking cessation adviser (level 2 or 3).	Formulary - Drugs that can be initiated by Prescriber in Primary Care	NG92 - Mar 18
BLACK	Bupropion	<i>(Zyban®)</i>	ADHD and other mental health conditions	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.
RED	Burosumab	Crysvita®)	X-linked hypophosphataemia in adults	Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA993 – August 2024
RED	Burosumab	Crysvita®)	X-linked hypophosphataemia in children and young people	Prescribing to remain with the hospital or specialist service. No prescribing in primary care	HST8 – October 2018, updated April 2025
Double Red	Buspirone	<i>(Generics are available)</i>	Augmentation of an antidepressant - as per NICE CG 90 - Do Not Do	Not recommended for routine use	CG90 - Oct 09
RED	Busulfan	<i>(Myleran®)</i>	All indications	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
BLACK	Butyrophenones (benperidol and haloperidol)	<i>(Various)</i>	NICE Do Not Do - Use in Parkinson's disease - as per NG 71 (Not a licensed indication).	Not commissioned. No NHS prescribing in primary or secondary care	NG71 -Sep 17

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	C1 Esterase Inhibitors		Hereditary angioedema treatment and prophylaxis	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
BLACK	Cabazitaxel	(Jevtana®)	Hormone-refractory metastatic prostate cancer previously treated with a docetaxel-containing regimen - as per NICE TA 255	Not commissioned. No NHS prescribing in primary or secondary care	TA255 - May 12
RED	Cabazitaxel	(Jevtana®)	Metastatic hormone relapsed prostate cancer in people whose disease has progressed during or after docetaxel chemotherapy - as per NICE TA 391	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA391 - Aug 16
BLACK	Cabergoline	(Cabaser®)	First-line use in Parkinson's disease - as per NICE NG 71 (Not a licensed indication).	Not commissioned. No NHS prescribing in primary or secondary care	NG71 -Sep 17
RED	Cabotegravir	Vocabria®	with rilpivirine for treating HIV-1	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA757 – January 2022
RED	Cabozantinib	(Cometriq®)	For treating medullary thyroid cancer - as per NICE TA 516	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA516 - Mar 18
RED	Cabozantinib	(Cabometyx®)	Untreated advanced renal cell carcinoma in adults under defined circumstances - as per NICE TA 542	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA542 - Oct 18

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Cabozantinib	Cabometyx®	previously treated advanced hepatocellular carcinoma	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA849 – December 2022
BLACK	Cabozantinib	Cabometyx®	previously treated advanced differentiated thyroid cancer unsuitable for or refractory to radioactive iodine	Not commissioned. No NHS prescribing in primary or secondary care	TA928 – November 2023
RED	Cabozantinib	Cabometyx®	with nivolumab for untreated advanced renal cell carcinoma	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA964 – April 2024
RED	Cabozantinib ▼	(Cabometyx® ▼)	Previously treated advanced renal cell carcinoma in adults after vascular endothelial growth factor (VEGF)-targeted therapy - as per NICE TA 463	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA463 - Aug 17
RED	Calcifidiol		Inborn errors in primary bile acid synthesis	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
BLACK	Calcium and Ergocalciferol combi tablets	(Generic tablets)	Prevention of osteoporosis-related fractures and falls	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.
Double Red	Calcium channel blockers - various	(Various)	Treatment of cor pulmonale - as per NICE CG 101 - NICE Do Not Do	Not recommended for routine use	CG101 - Jul 10
ADVICE	Canagliflozin ▼	(Invokana® ▼)	In combination therapy for treating type 2 diabetes - as per NICE TA 315	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	TA315 - Jun 14

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
ADVICE	Canagliflozin ▼	(Invokana® ▼)	As a 4th monotherapy option for treating type 2 diabetes - as per NICE TA 390	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	TA390 - May 16
BLACK	Canakinumab	(Ilaris®)	Treatment of gouty arthritis attacks and reducing the frequency of subsequent attacks - as per NICE TA 281 (terminated appraisal)	Not commissioned. No NHS prescribing in primary or secondary care	TA281 - Apr 13
BLACK	Canakinumab	(Ilaris®)	Treatment of systemic juvenile idiopathic arthritis - as per NHS England policy (terminated appraisal)	Not commissioned. No NHS prescribing in primary or secondary care	TA302 - Nov 13
BLACK	Cangrelor ▼	(Kengrexal® ▼)	Treatment for reducing atherothrombotic events in people undergoing percutaneous coronary intervention or awaiting surgery requiring interruption of anti platelet therapy - as per NICE TA 351 (terminated appraisal)	Not commissioned. No NHS prescribing in primary or secondary care	TA351 - Jul 15
RED	Cannabidiol	Epidyolex®	seizures caused by tuberous sclerosis complex	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA873 – March 2023
RED	Cannabidiol with clobazam	(Epidyolex®)	Seizures associated with Dravet syndrome	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA614 - Dec 19

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Cannabidiol with clobazam	(Epidyolex®)	Seizures associated with Lennox–Gastaut syndrome	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA615 - Dec 19
RED	Cannabidiol with Dronabinol oromucosal spray	(Sativex®)	adult patients with moderate to severe spasticity due to multiple sclerosis (MS) who have not responded adequately to other anti-spasticity medication and who demonstrate clinically significant improvement in spasticity related symptoms during an initial trial of therapy.	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
BLACK	Cannabis (all forms, including nabilone)	(excluding sativex)	All indications - as per local policy (July 2011) and PAC guidance Jan 2020	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.
RED	Capecitabine	(Xeloda®)	All indications	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA191 - Apr 06
RED	Capivasertib	Truqap®	with fulvestrant for treating hormone receptor-positive HER2-negative advanced breast cancer after endocrine treatment	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA1063 – May 2025
RED	Caplacizumab	Cablivi®	with plasma exchange and immunosuppression for treating acute acquired thrombotic thrombocytopenic purpura	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA667 – December 2020
BLACK	Capmatinib	n/a	advanced non-small-cell lung cancer with MET exon 14 skipping	Not commissioned. No NHS prescribing in primary or secondary care	TA884 – May 2023

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Capsaicin transdermal patches (Qutenza®)	(Qutenza®)	Peripheral neuropathic pain in non-diabetic patients (specialist use only)	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
Double Red	Carbamazepine	(Tegretol®, Carbagen®)	Augmentation of an antidepressant - as per NICE CG 90 - Do Not Do (Not a licensed indication).	Not recommended for routine use	CG90 - Oct 09
RED	Carfilzomib (®) with dexamethasone and lenalidomide)	Kyprolis®	previously treated multiple myeloma	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA695 – April 2021
RED	Carfilzomib ▼	(Kyprolis® ▼)	(with dexamethasone) for previously treated multiple myeloma where the patient has had only 1 previous therapy, which did not include bortezomib - as per NICE 457	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA457 - Jul 17
RED	Carfilzomib ▼	(Kyprolis® ▼)	with dexamethasone for multiple myeloma in adults, only if they have had only 1 previous therapy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA657 – November 2020
BLACK	Carfilzomib with daratumumab and dexamethasone	Kyprolis®	relapsed or refractory multiple myeloma (terminated appraisal)	Not commissioned. No NHS prescribing in primary or secondary care	TA841 – November 2022
RED	Carglumic acid	(Carbaglu®)	Treatment hyperammonaemia in urea cycle disorder	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
BLACK	Carmustine implants	(Gliadel®)	Treatment of recurrent glioblastoma multiforme - as per NICE TA 149 and NHS England policy (terminated appraisal)	Not commissioned. No NHS prescribing in primary or secondary care	TA149 - Jun 08

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
BLACK	Casirivimab and Imdevimab	Ronapreve	monoclonal antibody treatment for COVID-19	Not commissioned. No NHS prescribing in primary or secondary care	TA878 – March 2023, updated June 2023
RED	Caspofungin	(<i>Cancidas</i> ®)	Systemic candidiasis - - as per NHS England policy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Catridecacog	(<i>NovoThirteen</i> ®)	Congenital factor XIII A-subunit deficiency	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Ceftriaxone	(<i>Rocephin</i> ®)	Cellulitis - as per local policy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Cemiplimab	(<i>Libtayo</i> ®)	Metastatic or locally advanced cutaneous squamous cell carcinoma	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA592 - Aug 19
BLACK	Cemiplimab	Libtayo ®	untreated PD-L1-positive advanced or metastatic non-small-cell lung cancer (terminated appraisal)	Not commissioned. No NHS prescribing in primary or secondary care	TA848 – December 2022
BLACK	Cemiplimab	(<i>Libtayo</i> ®)	recurrent or metastatic cervical cancer (terminated appraisal)	Not commissioned. No NHS prescribing in primary or secondary care	TA901 – June 2023
RED	Cemiplimab	Libtayo®	advanced cutaneous squamous cell carcinoma	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA802 – June 2022
BLACK	Cenegermin eye drops ▼	(<i>Oxervate</i> ▼)	Treatment of moderate or severe neurotrophic keratitis - as per NICE TA 532	Not commissioned. No NHS prescribing in primary or secondary care	TA532 - July 18

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
AI	Cenobamate	Ontozry®	focal onset seizures in epilepsy	Consultant / Specialist to initiate and retain until stable. Prescribing will switch to primary care as per commissioning agreement or when clinically appropriate.	TA753 – December 2021
RED	Ceralifimod	((ONO-4641))	Multiple sclerosis	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
BLACK	Cerebrotech Visor	(Cerebrotech Visor)	For detecting stroke	Not commissioned. No NHS prescribing in primary or secondary care	MIB165 - Dec 18
RED	Ceritinib	(Zykadia®)	Anaplastic lymphoma kinase positive non-small-cell lung cancer in adults previously treated with crizotinib - as per NICE TA 395	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA395 - Jun 16
RED	Ceritinib ▼	(Zykadia® ▼)	Untreated ALK-positive non-small-cell lung cancer in adults	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA500 - Jan 18
RED	Cerliponase	(Brineura®)	Neuronal Ceroid Lipofuscinosis, type 2 (CLN2) from birth, also known as tripeptidyl peptidase 1 (TPP1) deficiency	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	HST12 - Nov 2019
RED	Certolizumab pegol	(Cimzia®)	for rheumatoid arthritis not previously treated with DMARDs or after conventional DMARDs only have failed	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA375 - Jan 16

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Certolizumab Pegol	(Cimzia®)	Treatment of severe (non-radiographic) axial spondyloarthritis - as per NICE TA 383 and locally agreed pathway	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA383 - Feb 16
RED	Certolizumab pegol	(Cimizia®)	Ankylosing spondylitis - as per NICE TA 383 and locally agreed pathway	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA383 - Feb 16
RED	Certolizumab pegol	(Cimzia®)	For treating moderate to severe plaque psoriasis in adults - as per NICE TA 574 and local treatment pathway	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA574 - Apr 19
RED	Certolizumab pegol (with and without MTX)	(Cimzia®)	Active rheumatoid arthritis in adults after inadequate response or intolerance to other disease-modifying antirheumatic drugs (DMARDs) including at least one tumour necrosis factor-alpha (TNF-alpha) inhibitor	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA415 - Oct 16
RED	Certolizumab pegol (with or without MTX)	(Cimzia ®)	Psoriatic arthritis (including switching between treatments) after inadequate response to DMARDs - as per NICE TA 445 and locally agreed pathway	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA445 - May 17
RED	Cetuximab	(Erbix®)	Locally advanced squamous cell cancer of the head and neck - as per NICE TA 145 and NHS England policy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA145 - Jun 08

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Cetuximab	(Erbix [®])	Treatment of metastatic colorectal cancer after 1st-line chemotherapy - as per NICE TA 242 and NHS England policy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA242 - Jan 12
RED	Cetuximab	(Erbix [®])	First-line treatment of metastatic colorectal cancer under specified circumstances	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA439 - Mar 17
RED	Cetuximab	(Erbix [®])	Recurrent or metastatic squamous cell head and neck cancer in adults only if started in the mouth - as per NICE TA 473 and NHS England policy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA473 - Aug 17
RED	Chenodeoxycholic acid	(Chenodeoxycholic acid sigma-tau)	Primary biliary cirrhosis	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Chenodeoxycholic acid	(Chenodeoxycholic acid sigma-tau)	Cerebrotendinous xanthomatosis (CTX)	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
ADVICE	Chloral hydrate 500mg/5ml oral solution	n/a	off-label use in treatment of	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	NICE has not issued any guidance.
RED	Chlorambucil	(Leukeran [®])	All indications	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
BLACK	Chlorhexidine Mouthwash	(Various)	prophylaxis against infective endocarditis to people at risk of infective endocarditis undergoing dental procedures - as per NICE CG 64 - Do Not Do	Not commissioned. No NHS prescribing in primary or secondary care	CG64 - Jul 16
RED	Chlormethine gel	Ledaga®	mycosis fungoides-type cutaneous T-cell lymphoma	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA720 – August 2021
BLACK	Cholesterol and Simvastatin cream	n/a	disseminated superficial actinic porokeratosis	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.
RED	Cholic acid	(Orphacol®, Kolbam®)	Inborn errors in primary bile acid synthesis	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
BLACK	Chondroitin	(Various)	Osteoarthritis - as per NICE CG 177 - Do Not Do	Not commissioned. No NHS prescribing in primary or secondary care	CG177 - Feb 14
ADVICE	Ciclosporin	(Ikervis®)	Severe keratitis in adult patients with dry eye disease that has not improved despite treatment with tear substitutes (Consultant recommendation only) - as per NICE TA 369	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	TA369 - Dec 15
FULL SCA	Ciclosporin	(Various brands - to be specified by prescribers)	Rheumatic and dermatological diseases.	Shared Care Agreement Level 2 - Prescribe the drug and perform a more intense level of monitoring, e.g. quarterly	NG100 - Jul 18

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Cidofovir	(Vistide®)	Cytomegalovirus (CMV) infection	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
BLACK	Cilostazol	(Pletal®)	Treatment of intermittent claudication in people with peripheral arterial disease - as per NICE TA 223	Not commissioned. No NHS prescribing in primary or secondary care	TA223 - May 11
BLACK	Ciltacabtagene autoleucel	n/a	relapsed or refractory multiple myeloma	Not commissioned. No NHS prescribing in primary or secondary care	TA889 – May 2023
RED	Cinacalcet	(Mimpara®)	Refractory secondary hyperparathyroidism in patients with end-stage renal disease under specific criteria - as per NICE TA 117 and NHS England policy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA117 - Jan 07
RED	Cinacalcet	(Mimpara®)	Secondary hyperparathyroidism & parathyroid cancer - as per NHS England policy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA117 - Jan 07
FULL SCA	Cinacalcet	(Mimpara®)	Primary hyperparathyroidism where parathyroidectomy is contraindicated, refused by patient or not suitable as per NHSE Commissioning Policy 16034/P	Shared Care Agreement Level 2 - Prescribe the drug and perform a more intense level of monitoring, e.g. quarterly	NICE has not issued any guidance.
RED	Cipaglucosidase alfa	Pombiliti®	with miglustat for treating late-onset Pompe disease	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA912 – August 2023

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
Double Red	Ciprofibrate	<i>(Generics are available)</i>	Prevention of CVD - as per NICE CG 181 "Do Not Do" (Not a licensed indication).	Not recommended for routine use	CG181 - Jul 14
RED	Ciprofloxacin (inhalation)	()	Cystic Fibrosis	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Ciprofloxacin liposomal (inhaled)	()	Cystic Fibrosis	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Cladribine	<i>(Mavenclad®; Leustat®; Litak®)</i>	Pulmonary Langerhans histiocytosis (Not a licensed indication).	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Cladribine	<i>(Mavenclad®)</i>	Relapsing-remitting multiple sclerosis - as per NICE TA616	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA616 – December 2019, updated May 2024
RED	Cladribine	Mavenclad®	active relapsing forms of multiple sclerosis	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA1053 – April 2025
RED	Clazakizumab		Antibody mediated rejection	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Clofarabine	<i>(Evoltra®)</i>	Cancer (Various indications).	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
Double Red	Clomethiazole	<i>(Heminevrin®)</i>	Community-based assisted alcohol withdrawal - as per NICE CG 115 - Do Not Do	Not recommended for routine use	CG115 - Feb 11

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Clopidogrel	(Plavix®, generics approved for use - Sept 2009)	Prophylaxis pre-elective PCI	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
Double Red	Clopidogrel	(Plavix®, generics approved for use - Sept 2009)	Primary prevention of CVD in T1 or T2 Diabetes - as per NG17 and NG 28 Do Not Do's	Not recommended for routine use	NG17 - May 17
Double Red	Clopidogrel	(Plavix®, generics approved for use - Sept 2009)	Primary prevention of CVD in T1 or T2 Diabetes - as per NG17 and NG 28 Do Not Do's	Not recommended for routine use	NG28 - May 17
ADVICE	Clopidogrel (with low dose aspirin)	(Plavix®, generics approved for use - Sept 2009)	Acute Coronary Syndrome without ST-segment elevation (NSTEMI) (with aspirin)	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation Consultant responsible for the first script.	TA80 - Jul 04
ADVICE	Clopidogrel (with low dose aspirin)	(Plavix®, generics approved for use - Sept 2009)	Post elective percutaneous coronary intervention (PCI) - bare metal stent (Not a licensed indication).	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation Consultant should prescribe for an initial period of in-patient stay.	NICE has not issued any guidance.
ADVICE	Clopidogrel (with low dose aspirin)	(Plavix®, generics approved for use - Sept 2009)	ST-elevation myocardial infarction (STEMI) (Not a licensed indication).	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation Consultant should prescribe for an initial period of in patient stay; max one month.	NICE has not issued any guidance.

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Clozapine	(Clozaril®, Denzapine®, Zaponex®)	Schizophrenia	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	CG82 - Mar 09
RED	Cobicistat ▼	(Tybost® ▼)	Use as a booster in treatment of HIV positive adults and adolescents - as per NHS England policy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
BLACK	Cobimetinib ▼ (in combination with vemurafenib)	(Cotellic® ▼)	Unresectable or metastatic BRAF V600 mutation-positive melanoma - as per NICE TA 414	Not commissioned. No NHS prescribing in primary or secondary care	TA414 - Oct 16
RED	Co-careldopa intestinal gel	(Duodopa® ▼)	Severe Parkinson's disease inadequately controlled by other preparations - as per NHS England policy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Cochlear implants	(Various)	For children and adults with severe to profound deafness - specialist commissioned use only as per NHSE policy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA566 - Mar 19
Double Red	Codeine linctus	generic	Cough suppressant	Not recommended for routine use	NICE has not issued any guidance
BLACK	Co-enzyme Q10	(Healthcrafts, Nature's Best, Lamb, Natrahealth etc)	All indications - as per NICE NG 71 & CG181 Do Not Do	Not commissioned. No NHS prescribing in primary or secondary care	CG181 - Jul 17
BLACK	Co-enzyme Q11	(Healthcrafts, Nature's Best, Lamb, Natrahealth etc)	All indications - as per NICE NG 71 & CG181 Do Not Do	Not commissioned. No NHS prescribing in primary or secondary care	NG71 -Sep 17

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
BLACK	Colecalciferol (Vitamin D)	(Various)	To increase adherence to statin treatment - as per NICE CG 181 - Do Not Do	Not commissioned. No NHS prescribing in primary or secondary care	CG181 - Jul 14
ADVICE	Colesevelam HCl	(Cholestage ^l ®)	Third-line option for (unlicensed) use in bile salt malabsorption causing diarrhoea (for patients under the NNUH only) (Not a licensed indication).	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation Consultant/Specialist should prescribe for an initial period of 8 weeks (for new patients).	NICE has not issued any guidance.
Double Red	Colesevelam HCl ▼	(Cholestage ^l ® ▼)	Hypercholesterolaemia - as per NICE CG 181 Do Not Do	Not recommended for routine use	CG181 - Jul 14
Double Red	Colesevelam hydrochloride	(Cholestage ^l ®)	Prevention of CVD, alone or added to a statin - as per NICE CG 181 - Do Not Do	Not recommended for routine use	CG181 - Jul 14
RED	Colestilan	()	Management of hyperphosphataemia in adults on renal dialysis	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
Double Red	Colestipol hydrochloride	(Colestid [®])	Prevention of CVD, alone or added to a statin - as per NICE CG 181 - Do Not Do (Not a licensed indication).	Not recommended for routine use	CG181 - Jul 14
Double Red	Colestyramine	(Questran [®])	Prevention of CVD, alone or added to a statin - as per NICE CG 181 - Do Not Do (Not a licensed indication).	Not recommended for routine use	CG181 - Jul 14

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Colistimethate sodium (nebulised)	(Colomycin®, Promixin®)	Pseudomonas lung infection in Cystic Fibrosis (new patients from 1st April 2013) - as per NHS England policy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA276 - Mar 13
FULL SCA	Colistimethate sodium (Nebulised)	(Colomycin®, Promixin®)	Ps. aeruginosa infection in non-Cystic Fibrosis bronchiectasis	Prescribe the drug and perform a basic level of monitoring, e.g. a standard annual review	NICE has not issued any guidance.
RED	Colistimethate sodium Dry Powder Inhaler	(Colobreathe® Dry Powder Inhaler)	Pseudomonas lung infection in cystic fibrosis - as per NICE TA 276 and NHS England policy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA276 - Mar 13
BLACK	Combination analgesics with caffeine	()	Pain relief	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.
Double Red	Combination products - new co-drugs	(Various)	Various (Various indications).	Not recommended for routine use	NICE has not issued any guidance.
RED	Conestat alfa	(Ruconest®)	Hereditary angiodema - acute treatment only - as per NHS England policy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
BLACK	Co-proxamol	(Distalgesic)	Pain - as per N&W DROP List (Not a licensed indication).	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.
RED	Corneal epithelial cells (human) with stem cells	(Holoclar)	(Holoclar for) Limbal stem cell deficiency after eye burns - as per NICE TA 467	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA467 - Aug 17
BLACK	Crisaborole		mild to moderate atopic dermatitis in people 2 years and older (terminated appraisal)	Not commissioned. No NHS prescribing in primary or secondary care	TA701 – May 2021

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Crizanlizumab	Adakveo®	preventing sickle cell crises in sickle cell disease	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA743 – November 2021
RED	Crizotinib	(Xalkori®)	ROS1-positive advanced non-small-cell lung cancer	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA1021 – December 2024
RED	Crizotinib ▼	(Xalkori® ▼)	Untreated anaplastic lymphoma kinase-positive advanced non-small-cell lung cancer - as per NICE TA 406	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA406 - Sep 16
RED	Crizotinib ▼	(Xalkori® ▼)	Previously treated non-small-cell lung cancer associated with an anaplastic lymphoma kinase fusion gene - as per NICE TA 422	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA422 - Dec 16
RED	Crovalimab	Piasky®	paroxysmal nocturnal haemoglobinuria in people 12 years and over	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA1019 – November 2024
RED	Cyclic Pyranopterin Monophosphate		Molybdenum cofactor deficiency	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
BLACK	Cycloidal vibration accessories (Vibro-pulse)	(Vibro-pulse® accessories)	Therapy for cellulitis, venous leg ulcers and lower limb oedema	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.
RED	Cyclophosphamide	(Endoxana®)	Use in Cancer	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Cysteamine (Mercaptamine)	(Cystagon®; Procysbi®)	Neuropathic cystinosis	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
ADVICE	Cytisinicline ▼	Cytisine	Smoking cessation. GP prescribable after consultant/specialist recommendation where the specialist is a smoking cessation adviser (level 2 or 3)	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	
ADVICE	Dabigatran	(Pradaxa®)	Treatment and secondary prevention of pulmonary embolism as per NICE TA 327 (where warfarin is not appropriate - see Full Guidance)	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	TA327 - Dec 14
Double Red	Dabigatran	(Pradaxa®)	Combined use with dual antiplatelet therapy in people who otherwise need anticoagulation, who have had an MI - as per NICE CG 172 - Do Not Do (Not a licensed indication).	Not recommended for routine use	CG172 - Nov 13
RED	Dabigatran etexilate	(Pradaxa®)	Prevention of venous thromboembolism after hip or knee surgery in adults (as per NICE TA 157)	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA157 - Sep 08

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
ADVICE	Dabigatran etexilate	(Pradaxa®)	Treatment and secondary prevention of proximal deep vein thrombosis in specified patient groups as per NICE TA 327 and local policy (see Full TAG Guidance)	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation Consultant/Specialist should prescribe for an initial period of 3 weeks.	TA327 - Dec 14
RED	Dabigatran etexilate	(Pradaxa®)	Treatment and secondary prevention of calf vein deep vein thrombosis (as per NICE TA 327)	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA327 - Dec 14
RED	Dabrafenib	(Tafinlar®)	plus trametinib for treating BRAF V600 mutation-positive advanced non-small-cell lung cancer	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA898 – June 2023
RED	Dabrafenib	Finlee®	with trametinib for treating BRAF V600E mutation-positive glioma in children and young people aged 1 year and over	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA977 – May 2024
RED	Dabrafenib ▼	(Tafinlar® ▼)	Treatment of unresectable or metastatic BRAF V600 mutation-positive melanoma (alone or with trametinib)	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA396 - Jun 16
RED	Dabrafenib with trametinib	(Tafinlar® with Mekinist®)	Adjuvant treatment of resected BRAF V600 mutation-positive melanoma - as per NICE TA 544	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA544 - Oct 18

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Daclatasvir ▼	(Daklinza® ▼)	For treating chronic hepatitis C in adults (with sofosbuvir or peginterferon alfa, and with ribavirin) as per NICE TA 364	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA364 - Nov 15
BLACK	Daclizumab	(Zinbryta®)	Relapsing-remitting multiple sclerosis in adults - as per NICE TA 441 Specialist centre only - currently suspended	Not commissioned. No NHS prescribing in primary or secondary care	TA441 - Apr 17
RED	Dacomitinib	(Vizimpro®)	Untreated EGFR mutation-positive non-small-cell lung cancer	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA595 - Aug 19
BLACK	Danazol	(Danol®)	Heavy menstrual bleeding - as per NICE CG 44 - Do Not Do	Not commissioned. No NHS prescribing in primary or secondary care	CG44 - Aug 16
RED	Danicopan	Voydeya®	with ravulizumab or eculizumab for treating paroxysmal nocturnal haemoglobinuria	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA1010 – October 2024
ADVICE	Dapagliflozin	(Forxiga®)	Triple therapy for treating type 2 diabetes in adults - as per NICE TA 418	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	TA418 - Nov 16
BLACK	Dapagliflozin	(Forxiga®)	With insulin for treating type 1 diabetes	Not commissioned. No NHS prescribing in primary or secondary care	TA597 - Nov 19
ADVICE	Dapagliflozin	Forxiga®	Chronic heart failure with reduced ejection fraction	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	TA679 – February 2021

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
ADVICE	Dapagliflozin	Forxiga®	chronic heart failure with preserved or mildly reduced ejection fraction	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	TA902 – June 2023
ADVICE	Dapagliflozin ▼	(Forxiga® ▼)	Limited use in Type 2 diabetes mellitus - as per NICE TA 288	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	TA288 - Jun 13
ADVICE	Dapagliflozin ▼	(Forxiga® ▼)	As monotherapy for treating type 2 diabetes - as per NICE TA 390	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	TA390 - May 16
BLACK	Dapoxetine	(Priligy®)	For diagnosed premature ejaculation	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.
BLACK	Daratumumab	N/A	with bortezomib, melphalan and prednisone for untreated multiple myeloma (terminated appraisal)	Not commissioned. No NHS prescribing in primary or secondary care	TA771 – February 2022
RED	Daratumumab	(Darzalex®)	As monotherapy for treating relapsed and refractory multiple myeloma - as per NICE TA783	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA783 – April 2022
RED	Daratumumab	(Darzalex®)	with bortezomib and dexamethasone for previously treated multiple myeloma	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA897 – June 2023

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Daratumumab	Darzalex®	with lenalidomide and dexamethasone for untreated multiple myeloma when a stem cell transplant is unsuitable	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA917 – October 2023
RED	Daratumumab	Darzalex®)	combination for treating newly diagnosed systemic amyloid light-chain amyloidosis	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA959 – March 2024
RED	Daratumumab	Darzalex®	in combination for untreated multiple myeloma when a stem cell transplant is suitable	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA763 – February 2022
RED	Daratumumab (with bortezomib and dexamethasone)	(Darzalex®)	Previously treated multiple myeloma in people who have had 1 previous treatment - as per NICE TA 573	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA573 - Apr 19
BLACK	Daratumumab (with lenalidomide and dexamethasone)	n/a	untreated multiple myeloma (terminated appraisal)	Not commissioned. No NHS prescribing in primary or secondary care	TA634 – June 2020
BLACK	Daratumumab ▼	(Darzalex® ▼)	(with lenalidomide and dexamethasone) for relapsed or refractory multiple myeloma - as per NICE TA 454 (terminated appraisal)	Not commissioned. No NHS prescribing in primary or secondary care	TA454 - Jul 17
BLACK	Daratumumab with pomalidomide and dexamethasone	N/A	relapsed or refractory multiple myeloma (terminated)	Not commissioned. No NHS prescribing in primary or secondary care	TA726 – September 2021
RED	Darbepoetin alfa	(Aranesp®)	Treatment of anaemia in people with cancer having chemotherapy - as per NICE TA 323	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA323 - Nov 14

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Darbepoetin alfa	(Aranesp®)	Treatment of anaemia renal dialysis as per CG114	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	CG114 - Nov 11
FULL SCA	Darbepoetin alfa	Aranesp®	anaemia in chronic kidney disease	Shared Care Agreement Level 2 - Prescribe the drug and perform a more intense level of monitoring, e.g. quarterly	NICE has not issued any guidance.
RED	Darolutamide	Nubeqa®	with androgen deprivation therapy for treating hormone-relapsed non-metastatic prostate cancer	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA660 – November 2020
RED	Darolutamide	Nubeqa®	with androgen deprivation therapy and docetaxel for treating hormone-sensitive metastatic prostate cancer	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA903 – June 2023
RED	Darunavir	(Prezista®)	HIV infection in combination with other antiretroviral drugs - as per BHIVA Guidelines	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Darunavir and Cobicistat (Rezolsta®)	(Rezolsta®)	HIV infection in combination with other antiretroviral drugs - as per BHIVA Guidelines	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
BLACK	Darvadstrocel	(Alofisel®)	Complex perianal fistulas in adults with non-active or mildly active luminal Crohn's disease - as per NICE TA 556	Not commissioned. No NHS prescribing in primary or secondary care	TA556 - Jan 19
Double Red	Dasabuvir	(Exviera®)	Viral Hepatitis C	Not recommended for routine use	NICE has not issued any guidance.

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Dasatinib	(Sprycel®)	Chronic myeloid leukaemia (CML) - as per NHS England policy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA425 - Dec 16
RED	Dasatinib	(Sprycel®)	Untreated chronic-phase Philadelphia-chromosome-positive chronic myeloid leukaemia in adults - as per NICE TA 426	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA426 - Dec 16
BLACK	Dasatinib	n/a	Philadelphia-chromosome-positive acute lymphoblastic leukaemia (terminated appraisal)	Not commissioned. No NHS prescribing in primary or secondary care	TA714 – July 2021
BLACK	Decitabine	(Dacogen®)	Acute Myeloid Leukaemia - as per NICE TA 270 (terminated appraisal)	Not commissioned. No NHS prescribing in primary or secondary care	TA270 - Dec 12
BLACK	Decitabine	(Dacogen®)	Untreated acute myeloid leukaemia - as per NICE TA 548 (terminated appraisal)	Not commissioned. No NHS prescribing in primary or secondary care	TA548 - Dec 18
BLACK	Decitabine–cedazuridine	N/A	untreated acute myeloid leukaemia when intensive chemotherapy is unsuitable	Not commissioned. No NHS prescribing in primary or secondary care	TA932 – November 2023
RED	Deep Brain Stimulation (DBS)	(Deep Brain Stimulation (DBS))	Treatment of refractory epilepsy - as per NHS England policy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Deep Brain Stimulation (DBS)	(Deep Brain Stimulation (DBS))	Treatment of Chronic Neuropathic Pain - as per NHS England policy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
Double Red	Deferasirox	(Exjade®)	For blood transfusion related iron overload in patients with myelodysplastic syndrome (MDS) (Not a licensed indication).	Not recommended for routine use	NICE has not issued any guidance.
RED	Deferasirox	(Exjade®)	Iron chelation in thalassaemia and sickle cell	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Deferasirox	(Exjade®)	Treatment of chronic iron overload due to frequent blood transfusions (but not for use in MDS) - as per NHS England policy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
Double Red	Deferiprone	(Ferriprox®)	For blood transfusion related iron overload in patients with myelodysplastic syndrome (MDS) (Not a licensed indication).	Not recommended for routine use	NICE has not issued any guidance.
RED	Deferiprone	(Ferriprox®)	Chronic iron overload related to frequent blood transfusions (not for use in MDS) - as per NHS England policy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Deferiprone	(Ferriprox®)	Iron chelation in thalassaemia and sickle cell	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Defibrotide	(Defitelio®)	Treatment of hepatic veno-occlusive disease in adults and children undergoing haematopoietic stem cell transplant - as per NHS England policy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Degarelix	(Firmagon®)	Advanced hormone-dependent prostate cancer - as per NICE TA 404	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA404 - Aug 16
ADVICE	DEKAs essential/plus		for use when recommended by specialists for patients with cystic fibrosis	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	NICE has not issued any guidance.
RED	Delamanid	(Deltysba®)	Multidrug-Resistant and Extensively Drug-Resistant Tuberculosis - as per NHS England policy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
BLACK	Denosumab	(Prolia®)	Treatment of therapy-induced bone loss in non-metastatic prostate cancer - as per NICE TA 194 (terminated appraisal)	Not commissioned. No NHS prescribing in primary or secondary care	TA194 - Jan 14
FULL SCA	Denosumab	(Prolia®)	Prevention of osteoporotic fractures in postmenopausal women as per NICE TA 204	Shared Care Agreement Level 2 - Prescribe the drug and perform a more intense level of monitoring, e.g. quarterly	TA204 - Oct 10
RED	Denosumab	(Prolia®)	Prevention of osteoporotic fractures in men	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
BLACK	Denosumab	(XGEVA®)	Preventing skeletal-related events in multiple myeloma - as per NICE TA 549 (Not a licensed indication).	Not commissioned. No NHS prescribing in primary or secondary care	TA549 - Dec 18

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Denosumab ▼	(XGEVA® ▼)	Prevention of skeletal-related events in adults with bone metastases from solid tumours	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA265 - Oct 12
BLACK	Deodorants (stoma)	(Various)	Odour management related to stoma	Not commissioned. No NHS prescribing in primary or secondary care	Norfolk and Waveney Fair Usage Policy
	Depigmenting cream	(Pigmanorm®)	Melasma (Chloasma)	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.
Double Red	Desferrioxamine	(Desferal®)	For blood transfusion related iron overload in patients with myelodysplastic syndrome (MDS) (Not a licensed indication).	Not recommended for routine use	NICE has not issued any guidance.
RED	Desferrioxamine mesilate	(Desferal®)	Anaemia related to chronic iron overload (not for use in MDS) - as per NHS England policy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Desferrioxamine mesilate	(Desferal®)	Iron chelation in thalassaemia and sickle cell	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
Double Red	Desloratadine	(Generics are available)	Allergy (not for NHS provision - self care recommended)	Not recommended for routine use	NICE has not issued any guidance.
RED	Deucravacitinib	SOTYKTU®	moderate to severe plaque psoriasis	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA907 – June 2023
RED	Dexamethasone	n/a	To prevent prescribing in primary care as a treatment for covid-19	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.

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RED	Dexamethasone intravitreal implant	(Ozurdex®)	Non-infectious uveitis in the posterior segment of the eye in adults - as per NICE TA 460	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA460 - Jul 17
RED	Dexamethasone intravitreal implant	(Ozurdex®)	Treatment of diabetic macular oedema (DMO) in line with NICE TA824	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA824 – September 2022
RED	Dexamethasone intravitreal implant ▼	(Ozurdex®)	Macular oedema secondary to retinal vein occlusion - as per NICE TA 229	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA229 - Jul 11
FULL SCA	Dexamfetamine sulfate ▼	(see Shared Care Agreement)	Narcolepsy in adults - All patients will be initiated by specialist centre in Cambridge. No new initiations in Norfolk and Waveney	Shared Care Agreement Level 1 - Prescribe the drug and perform a higher level of monitoring, e.g. 6-monthly	NICE has not issued any guidance.
FULL SCA	Dexamfetamine sulfate ▼	(Use generic)	Attention Deficit Hyperactivity Disorder in Adults for new treatment of symptoms that can be confirmed from childhood (Not a licensed indication).	Shared Care Agreement Level 1 - Prescribe the drug and perform a higher level of monitoring, e.g. 6-monthly	NG87 - Mar 18
FULL SCA	Dexamfetamine sulfate ▼ (currently under review)	(Generic)	Attention Deficit Hyperactivity Disorder in children and adolescents	Shared Care Agreement Level 3 - Prescribe the drug and perform significant monitoring including measurements such as height, weight, blood pressure and ECG	NG87 - Mar 18
BLACK	Dexamfetamine sulphate ▼	(Generics are available)	Chronic fatigue syndrome/myalgic encephalomyelitis (or encephalopathy) - as per NICE CG 53 - Do Not Do (Not a licensed indication).	Not commissioned. No NHS prescribing in primary or secondary care	CG53 - Aug 07

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
BLACK	Dexibuprofen	(Seractil®)	Analgesia / musculoskeletal pain	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.
RED	Dexrazoxane (Cardioxane®)	(Cardioxane®)	Anthracycline cardiotoxicity	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Dexrazoxane (Savene®)	(Savene®)	Anthracycline extravasation	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Diaminopyridine (-3,4) (amifampridine base)	(Generic)	Treatment of myasthenias - as per NHS England policy (Not a licensed indication).	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Diaminopyridine (-3,4) (amifampridine base)	(Generic)	Lambert Eaton Myasthenic Syndrome	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
Double Red	Diazepam	(Generic)	Chronic use for spasticity in adults with cerebral palsy - NICE Do Not Do as per NG 119	Not recommended for routine use	NG119 - Jan 19
RED	Dibotermin alfa	(InductOs®)	Complex spinal surgery - as per NHS England Policy 16063/P	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Dibotermin alfa (RH bone morphogenetic protein-2)	(InductOs 12)	Acute tibial fractures with Grade IIIB fractures	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Dichlorphenamide		Primary hypo and hyperkalaemic periodic paralysis	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
Double Red	Diclofenac medicated plaster	<i>(Flector Tissugel medicated plaster 140mg)</i>	Pain relief	Not recommended for routine use	NICE has not issued any guidance.
Double Red	Dicycloverine	<i>(Generics available)</i>	GI indications	Not recommended for routine use	NICE has not issued any guidance.
ADVICE	Diethylstilboestrol	various	treatment of prostate cancer	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	NICE has not issued any guidance.
RED	Difelikefalin	Kapruvia®	pruritus in people having haemodialysis	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA890 – May 2023
Double Red	Digoxin	<i>(Generics available)</i>	Cor pulmonale	Not recommended for routine use	CG101 - Jul 10
RED	Dimethyl fumarate (Skilarence®)	<i>(Skilarence®)</i>	Treatment of moderate to severe plaque psoriasis in adults - as per NICE TA 475 and locally commissioned pathway	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA475 - Sep 17
RED	Dimethyl Fumarate (Tecfidera®)	<i>(Tecfidera®)</i>	For treatment of adults with active relapsing-remitting multiple sclerosis (RRMS) - as per NICE TA 320	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA320 - Aug 14
RED	Dinutuximab beta	<i>(Qarziba®)</i>	High-risk neuroblastoma in people aged 12 months and over - as per NICE TA538	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA538 - Aug 18
BLACK	Dipipanone 10mg / cyclizine 30mg	Diconal®	treatment of acute pain	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Diroximel fumarate	Vumerity®	relapsing–remitting multiple sclerosis	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA794 – June 2022
RED	Disulfiram	(Generics are available)	Maintenance of abstinence in alcohol-dependent patients. Prescribing of treatments for alcohol misuse, including acamprosate and disulfiram (and also nalmefene) are the responsibility of the specialist since local alcohol misuse services are not commissioned from GPs practices	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	CG115 - Feb 11
RED	Docetaxel	(Taxotere®)	Non-small cell lung cancer - as per NHS England policy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Docetaxel	(Taxotere®)	Substitute for paclitaxel causing peripheral neuropathy in ovarian cancer - as per NHS England policy (Not a licensed indication).	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Docetaxel	(Taxotere®)	Advanced breast cancer - as per NICE CG 80	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	CG80 - Feb 09
RED	Dolutegravir ▼	(Tivicay® ▼)	(in combination with other antiretroviral drugs) Treatment of HIV-1 infection in adults and adolescents - as per NHS England policy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.

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RED	Domagrozumab		Duchenne muscular dystrophy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
FULL SCA	Donepezil	(Aricept®; Generics available)	Mild to moderate Alzheimer's dementia - as per NICE TA 217	Prescribe the drug and perform a basic level of monitoring, e.g. a standard annual review	TA217 - Mar 11
RED	Doravirine	()	HIV infection in combination with other antiretroviral drugs	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Dornase alfa	(Pulmozyme®)	Cystic fibrosis - as per NHS England policy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
BLACK	Dornase alfa	(Pulmozyme®)	Primary Ciliary Dyskinesia (Not a licensed indication).	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.
RED	Dostarlimab	Jemperli®	previously treated advanced or recurrent endometrial cancer with high microsatellite instability or mismatch repair deficiency	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA779 – March 2022
RED	Dostarlimab	Jemperli®	with platinum-based chemotherapy for treating primary advanced or recurrent endometrial cancer with high microsatellite instability or mismatch repair deficiency	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA1064 – May 2025
BLACK	Dosulepin hydrochloride	(Prothiaden®)	Depression - as per NICE CG 90 - Do Not Do	Not commissioned. No NHS prescribing in primary or secondary care	CG90 - Oct 09

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
Double Red	Doxepin	()	Antidepressant	Not recommended for routine use	NICE has not issued any guidance.
Double Red	Doxepin	(Xepin)	Urticaria in dermatology	Not recommended for routine use	NICE has not issued any guidance.
RED	Doxorubicin HCl (pegylated liposomal) (PLDH)	(Caelyx)	As monotherapy or with platinum for treatment of advanced recurrent ovarian cancer - as per NICE TA 389	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA389 - Apr 16
ADVICE	Doxylamine succinate + Pyridoxine	(Xonvea®)	(with pyridoxine hydrochloride 10mg in a delayed-release formulation) for the treatment of nausea and vomiting in pregnancy in women who do not respond to conservative management (third-line option)	Only to be initiated in hospital. Can continue in primary care once patient is stable and treatment has been proven to be effective. Not to be initiated in primary care	NICE has not issued any guidance.
RED	Dried Prothrombin (complex)	()	Licensed indications incl treatment and peri-operative prophylaxis of haemorrhage in patients with congenital deficiency of factors II, VII, IX, or X if purified specific coagulation factors not available	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Drisapersen	((PRO051 / GSK2402968))	Duchenne Muscular Dystrophy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
FULL SCA	Dronedarone	(<i>Multaq®</i>)	Non-permanent Atrial Fibrillation - for use only where amiodarone is contraindicated or has previously not been tolerated (except lung toxicity due to amiodarone)	Shared Care Agreement Level 2 - Prescribe the drug and perform a more intense level of monitoring, e.g. quarterly	TA197 - Aug 10
ADVICE	Dulaglutide ▼	(<i>Trulicity®</i> ▼)	Type 2 diabetes mellitus - third line option	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	NICE has not issued any guidance.
ADVICE	Duloxetine	(<i>Yentreve®</i>)	Moderate to Severe Stress Urinary Incontinence (SUI) - (but not first- line as per NICE CG 171 - Do Not Do)	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	CG171 - Oct 06
BLUE	Dundee sunscreen	n/a	photosensitivity disorders where the patient is sensitive to visible light, most commonly solar urticaria and porphyrias, particularly erythropoietic protoporphyria	Formulary application and discussion required prior to addition to formulary	NICE has not issued any guidance.
RED	Dupilumab	Dupixent®	severe asthma with type 2 inflammation	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA751 – December 2021
BLACK	Dupilumab	N/A	eosinophilic oesophagitis in people 12 years and over	Not commissioned. No NHS prescribing in primary or secondary care	TA938 – December 2023
BLACK	Dupilumab	N/A	moderate to severe prurigo nodularis	Not commissioned. No NHS prescribing in primary or secondary care	TA955 – March 2024

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Dupilumab ▼	(Dupixent® ▼)	For adults with severe atopic dermatitis who have failed to respond, or who are intolerant of or ineligible for all approved therapies - as per NICE TA 534	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA534 - Aug 18
BLACK	Dupilumab ▼	(Dupixent® ▼)	chronic rhinosinusitis with nasal polyps (terminated appraisal)	Not commissioned. No NHS prescribing in primary or secondary care	TA648 – September 2020
RED	Dupilumab ▼	(Dupixent® ▼)	Asthma	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
BLACK	Durvalumab		in combination for untreated extensive-stage small-cell lung cancer (terminated appraisal)	Not commissioned. No NHS prescribing in primary or secondary care	TA662 – November 2020
RED	Durvalumab	Imfinzi®	maintenance treatment of unresectable non-small-cell lung cancer after platinum-based chemoradiation	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA798 – June 2022
RED	Durvalumab	Imfinzi®	with gemcitabine and cisplatin for treating unresectable or advanced biliary tract cancer	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA944 – Jan 2024
RED	Durvalumab	Imfinzi®	with chemotherapy before surgery (neoadjuvant) then alone after surgery (adjuvant) for treating resectable non-small-cell lung cancer	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA1030 – January 2025
RED	Durvalumab	Imfinzi®	with etoposide and either carboplatin or cisplatin for untreated extensive-stage small-cell lung cancer	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA1041 – February 2025

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
BLACK	Duvelisib	N/A	relapsed follicular lymphoma after 2 or more systemic therapies (terminated appraisal)	Not commissioned. No NHS prescribing in primary or secondary care	TA717 – July 2021
	Duvelisib	N/A	relapsed or refractory chronic lymphocytic leukaemia after 2 or more treatments (terminated appraisal)	Not commissioned. No NHS prescribing in primary or secondary care	TA811 – July 2022
RED	Ecallantide	(Kalbitor®)	Hereditary angiodema - acute treatment only	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
BLACK	Eculizumab	(Soliris®)	treating refractory myasthenia gravis (terminated appraisal)	Not commissioned. No NHS prescribing in primary or secondary care	TA636 – June 2020
BLACK	Eculizumab	(Soliris®)	relapsing neuromyelitis optica (terminated appraisal)	Not commissioned. No NHS prescribing in primary or secondary care	TA647 – September 2020
RED	Eculizumab	(Soliris®)	C3 glomerulopathy (post transplant) - as per NHSE policy (Not a licensed indication).	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Eculizumab	(Soliris®)	Paroxysmal nocturnal haemoglobinuria	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Eculizumab	(Soliris®)	Treatment of refractory antibody mediated rejection post kidney transplant - as per NHS England policy (Not a licensed indication).	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Eculizumab	(Soliris®)	Atypical haemolytic uremic syndrome (aHUS)	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	HST1 - Jan 2015
RED	Edasalonexent		Duchenne muscular dystrophy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
ADVICE	Edoxaban ▼	(Lixiana® ▼)	Treatment and secondary prevention of pulmonary embolism as per NICE TA 354 (where warfarin is not appropriate - see Full Guidance)	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	TA354 - Aug 15
ADVICE	Edoxaban ▼	(Lixiana® ▼)	Treatment and prevention of proximal deep vein thrombosis in specified patient groups (see Full Guidance)	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation Consultant/Specialist should prescribe for an initial period of 3 weeks.	TA354 - Aug 15
RED	Edoxaban ▼	(Lixiana® ▼)	Treatment of calf vein deep vein thrombosis (as per NICE TA 354)	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA354 - Aug 15
Double Red	Edoxaban ▼	(Lixiana® ▼)	Combined use with with dual antiplatelet therapy in people who otherwise need anticoagulation, who have had an MI - as per NICE CG 172 - Do Not Do (Not a licensed indication).	Not recommended for routine use	CG172 - Nov 13

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Edtratide	((hCDR1))	Systemic lupus erythematosus (SLE)	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
BLACK	Efalex	(Efalex)	Dyslexia - (Not a licensed indication).	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.
RED	Efanesoctocog alfa	Altuvoc®	treating and preventing bleeding episodes in haemophilia A in people 2 years and over	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA1051 – April 2025
RED	Efavirenz	(Sustiva®)	HIV infection in combination with other antiretroviral drugs	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Efraloctocog alfa	()	Haemophilia A - as per NHS England policy SSC1652	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Eftrenonacog alfa	()	Haemophilia B - as per NHS England SSC1652	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Elacestran	Korserdu®	oestrogen receptor-positive HER2-negative advanced breast cancer with an ESR1 mutation after endocrine treatment	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA1036 – February 2025
RED	Eladocagene exuparvovec	Upstaza®	aromatic L-amino acid decarboxylase deficiency	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	HST26 – April 2023
RED	Elafibranor	Iqirvo®	previously treated primary biliary cholangitis	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA1016 – November 2024

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Elbasvir-grazoprevir ▼	(Zepatier® ▼)	Genotype 1 or 4 chronic hepatitis C in adults - as per NICE TA 413	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA413 - Oct 16
BLACK	Electronic cigarettes	(e-cigarettes)	Tobacco dependence / smoking reduction or cessation - as per Public Health guidance (Not a licensed indication).	Not commissioned. No NHS prescribing in primary or secondary care	NG92 - Mar 18
RED	Eliglustat ▼	(Cerdelga® ▼)	Treatment of Type 1 Gaucher disease	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	HST5 - Jun 17
RED	Elosulfase alpha ▼	(Vimizim® ▼)	Treatment of Mucopolysaccharidosis IV Type A (MPS IVA) (Morquio A syndrome) - as per NHS England policy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	HST19 - April 2022
BLACK	Elotuzumab ▼	(Empliciti® ▼)	Multiple myeloma - as per NICE TA 434 (Terminated appraisal)	Not commissioned. No NHS prescribing in primary or secondary care	TA434 - Mar 17
RED	Elranatamab	Elrexio®	relapsed and refractory multiple myeloma after 3 or more treatments	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA1023 – December 2024
RED	Eltrombopag	(Revolade®)	Treatment of chronic immune (idiopathic) thrombocytopenic purpura - as per NICE TA 293	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA293 - Jul 13
RED	Eltrombopag	(Revolade®)	ITP in children	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA293 - Jul 13

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
BLACK	Eltrombopag	(Revolade®)	Severe aplastic anaemia refractory to immunosuppressive therapy - as per NICE TA 382 (terminated appraisal)	Not commissioned. No NHS prescribing in primary or secondary care	TA382 - Jan 16
BLUE	Eltrombopag	(Revolade®)	Thrombocytopenia which affects the initiation or maintenance of optimal interferon therapy in adults with chronic Hepatitis C	Formulary application and discussion required prior to addition to formulary	NICE has not issued any guidance.
RED	Elvitegravir	(Part of Genvoya®; Stribild®)	HIV infection in combination with other antiretroviral drugs - as per NHS England Policy 16043/P	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Elvitegravir/cobicistat /emtricitabine/tenofovir ▼	(Stribild® ▼)	HIV infection - as per NHS England policy 16043/P	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Elvucitabine	()	HIV infection in combination with other antiretroviral drugs	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Emapalumab		Haemophagocytic lymphohistiocytosis	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Emicizumab		As per BCSH guidelines for specialised indications	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
BLACK	Empagliflozin	(Jardiance ▼)	treating type 2 diabetes in people 10 to 17 years (terminated appraisal)	Not commissioned. No NHS prescribing in primary or secondary care	TA1006 – September 2024

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
ADVICE	Empagliflozin	Jardiance®	chronic heart failure with reduced ejection fraction	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	TA773 – March 2022
ADVICE	Empagliflozin	Jardiance®	chronic heart failure with preserved or mildly reduced ejection fraction	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	TA929 – November 2023
ADVICE	Empagliflozin ▼	(Jardiance® ▼)	In combination therapy for treating type 2 diabetes - as per NICE TA 336	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	TA336 - Mar 15
ADVICE	Empagliflozin ▼	(Jardiance ▼)	As 4th line monotherapy option for treating type 2 diabetes - as per NICE TA 390	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	TA390 - May 16
RED	Emricasan	()	Non alcoholic steatohepatitis (NASH) fibrosis	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Emtricitabine	(Emtriva®)	HIV infection in combination with other antiretroviral drugs	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Emtricitabine and tenofovir	(Truvada®)	HIV infection in combination with other antiretroviral drugs	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Emtricitabine and Tenofovir alafenamide fumarate	(Descovy®)	HIV infection in combination with other antiretroviral drugs	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Emtricitabine, Rilpivirine, tenofovir alafenamide	(Odefsey®)	HIV infection in combination with other antiretroviral drugs - as per NHSE policy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Encorafenib	(Braftovi®)	(with binimetinib (Mektovi®)) for treating unresectable or metastatic BRAF V600 mutation-positive melanoma in adults - as per NICE TA 562	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA562 - Feb 19
RED	Encorafenib	Braftovi®	Plus cetuximab for previously treated BRAF V600E mutation-positive metastatic colorectal cancer	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA668 – January 2021
BLACK	Enfortumab vedotin	N/A	previously treated locally advanced or metastatic urothelial cancer (terminated appraisal)	Not commissioned. No NHS prescribing in primary or secondary care	TA797 – June 2022
RED	Enfuvirtide	(Fuzeon®)	HIV infection in combination with other antiretroviral drugs	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Entecavir	(Baraclude®)	Chronic hepatitis B - as per NHS England policy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	CG165 - Jun 13
RED	Entrectinib	Rozlytrek®)	ROS1-positive advanced non-small-cell lung cancer	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA643 – August 2020
RED	Entrectinib	Rozlytrek®)	NTRK fusion-positive solid tumours	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA644 – August 2020

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Enzalutamide	(<i>Xtandi</i> ®)	Metastatic hormone relapsed prostate cancer previously treated with a docetaxel-containing regimen - as per NICE TA 316	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA316 - Jul 14
RED	Enzalutamide	(<i>Xtandi</i> ®)	Metastatic hormone-relapsed prostate cancer before chemotherapy is indicated - as per NICE TA 377	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA377 - Jan 16
BLACK	Enzalutamide		non-metastatic prostate cancer after radical prostatectomy or radiotherapy	Not for prescribing in primary or secondary care	TA994 – August 2024
RED	Enzalutamide	Xtandi®	hormone-sensitive metastatic prostate cancer	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA712 – July 2021
RED	Epcoritamab	Tepkinly®	relapsed or refractory diffuse large B-cell lymphoma after 2 or more systemic treatments	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA954 – March 2024
BLACK	Epifix®	(<i>Epifix</i> ®)	Chronic wounds (A licensed indication).	Not commissioned. No NHS prescribing in primary or secondary care	MIB139 - Jan 18
BLACK	Epinephrine (Adrenaline) inhaler (Primatene Mist®)	(<i>Primatene Mist</i> ®)	Asthma - reliever therapy (Not a licensed indication).	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.
RED	Eplontersen	Wainzua®	hereditary transthyretin-related amyloidosis	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA1020 – November 2024

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Epoetin alpha, beta, theta and zeta		Dialysis-induced anaemia (renal dialysis only)	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
BLACK	Epoprostenol	(Flolan®)	Acute respiratory distress syndrome (ARDS) (Not a licensed indication).	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.
RED	Epoprostenol (prostacyclin)	(Flolan®)	Primary pulmonary hypertension - as per NHS England policy - specialist centre only	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Epratuzumab	(Epratucyn®)	Systemic lupus erythematosus (SLE)	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Eprodinate	(Kiacta® (formerly Fibrillex))	Amyloidosis	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Eptifibatide	(Integrilin®)	Prevention of MI in unstable angina - as per NICE TA 47	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA47 - Sep 02
RED	Eptinezumab	VYEPTI®	preventing migraine	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA871 – March 2023
RED	Eptotermin alfa	()	Complex spinal surgery	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Erdafitinib	Balversa®	unresectable or metastatic urothelial cancer with FGFR3 alterations after a PD-1 or PD-L1 inhibitor	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA1062 – May 2025

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Erectile dysfunction drugs	(Various)	Severe distress from erectile dysfunction seeking treatment on the NHS	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
NICE approved	Erenumab	Aimovig®	Preventing migraine	NWICB are committed to fund positive NICE TAs. Awaiting clarification of place in pathway and commissioning arrangements. Further guidance to be issued when available.	TA682 – March 2021
ADVICE	Ergocalciferol / Vitamin D Injections		Vitamin D deficiency	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	NICE has not issued any guidance.
RED	Eribulin	(Halaven®)	Locally advanced or metastatic breast cancer after 2 or more chemotherapy regimens only when it has progressed after at least 2 chemotherapy regimens (which may include an anthracycline or a taxane, and capecitabine) - as per NICE TA 423	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA423 - Dec 16
RED	Eribulin	(Halaven®)	Treatment of locally advanced or metastatic breast cancer - as per NICE TA 423 and NHS England policy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA423 - Dec 16
BLACK	Eribulin	(Halaven®)	Locally advanced or metastatic breast cancer after 1 chemotherapy regimen - as per NICE TA 515	Not commissioned. No NHS prescribing in primary or secondary care	TA515 - Mar 18

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
BLACK	Erlotinib	(Tarceva®)	Monotherapy for maintenance treatment of non-small-cell lung cancer - as per NICE TA 227 and NHS England policy	Not commissioned. No NHS prescribing in primary or secondary care	TA227 - Jun 11
RED	Erlotinib	(Tarceva®)	First-line treatment of locally advanced or metastatic EGFR-TK mutation-positive non-small-cell lung cancer - as per NICE TA 258 and NHS England policy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA258 - Jun 12
BLACK	Erlotinib	(Tarceva®)	Treatment of non-small-cell lung cancer (NSCLC) as per NICE TA 374 - as per NHS England policy	Not commissioned. No NHS prescribing in primary or secondary care	TA374 - Dec 15
BLACK	Erlotinib	(Tarceva®)	Treating locally advanced or metastatic NSCLC that doesn't test positive for the EGFR TK mutation (as per NICE TA 374) (Not a licensed indication).	Not commissioned. No NHS prescribing in primary or secondary care	TA374 - Dec 15
ADVICE	Ertugliflozin	(Steglatro®)	As monotherapy or with metformin for treating type 2 diabetes - as per NICE TA 572	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	TA572 - Mar 19
RED	Erythropoietin (epoetin / darbepoetin)	(Various)	Treatment of anaemia in people with cancer having chemotherapy - as per NICE TA 323 and NHS England policy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA323 - Nov 14
RED	Erythropoietin / Epoetin	(Eprex)	Treatment of transfusion-dependent anaemia in myelodysplasia	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Erythropoietin / Epoetin	(Eprex®, NeoRecormon® and others)	Dialysis-induced anaemia	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	CG114 - Nov 11
Double Red	Erythropoietin / Epoetin	(Eprex®, NeoRecormon® and others)	Anaemia in renal failure pre-dialysis.	Not recommended for routine use	NG8 - Jun 15
BLACK	Esketamine	Spravato®	nasal spray for treatment-resistant depression	Not commissioned. No NHS prescribing in primary or secondary care	TA854 – December 2022
BLACK	Esketamine	Spravato®	major depressive disorder in adults at imminent risk of suicide (terminated appraisal)	Not commissioned. No NHS prescribing in primary or secondary care	TA899 – June 2023
BLACK	Eslicarbazepine	Zebinix®	Epilepsy	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.
BLACK	Eslicarbazepine	Zebinix®	Trigeminal neuralgia	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.
ADVICE	Esomeprazole	(Generic)	Limited use where other PPI options have been ineffective; Barrett's oesophagus	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	NICE has not issued any guidance.
Double Red	Esomeprazole	(Nexium®, Emozul®, Generic available)	First line PPI option for licensed indications -	Not recommended for routine use	NICE has not issued any guidance.
BLACK	Estradiol / Dienogest	(Qlaira®)	Contraception	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.
RED	Estramustine phosphate	(Estracyt®)	All indications	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
BLACK	Etamsylate	(Dicynene®)	Heavy menstrual bleeding - as per NICE CG 44 and the BNF	Not commissioned. No NHS prescribing in primary or secondary care	NG88 - Mar 18
RED	Etanercept	(Enbrel® / Benepali® ▼)	Psoriasis - as per NICE TA 103 and the local treatment pathway	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA103 - Jul 06
RED	Etanercept	(Enbrel® / Benepali® ▼)	Rheumatoid arthritis - after other DMARDs including a TNF inhibitor - as per NICE TA 195 and local policy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA195 - Aug 10
RED	Etanercept	(Enbrel® / Benepali® ▼)	Active and progressive psoriatic arthritis - as per NICE 199 and local policy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA199 - Aug 10
RED	Etanercept	(Enbrel® / Benepali® ▼)	Idiopathic juvenile arthritis - polyarticular, psoriatic and enthesitis-related JIA as per NICE TA 373 and NHS England policy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA373 - Dec 15
RED	Etanercept	(Enbrel® / Benepali® ▼)	For rheumatoid arthritis not previously treated with DMARDs or after conventional DMARDs only have failed - as per NICE TA 375 and local policy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA375 - Jan 16
RED	Etanercept	(Enbrel® / Benepali® ▼)	Ankylosing spondilitis - as per NICE TA 383	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA383 - Feb 16

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Etanercept	(Enbrel® / Benepali® ▼)	Axial spondyloarthritis (severe, non-radiographic) where NSAIDs not effective or not tolerated - as per NICE TA 383 and local policy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA383 - Feb 16
RED	Etanercept	(Enbrel® / Benepali® ▼)	Plaque psoriasis in children and young people - as per NICE TA 455	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA455 - Jul 17
RED	Etanercept	various, plus biosimilars	moderate rheumatoid arthritis after conventional DMARDs have failed	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA715 – July 2021
RED	Etanercept	(Enbrel® / Benepali® ▼)	Behcet's Disease (Not a licensed indication).	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Etelcalcetide ▼	(Parsabiv® ▼)	Secondary hyperparathyroidism in adults with chronic kidney disease on haemodialysis - as per NICE TA 448	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA448 - Jun 17
RED	Eteplirsen	(Exondys 51)	Duchenne Muscular Dystrophy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
ADVICE	Ethambutol	various	Non-TB related mycobacterium infections	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation Consultant responsible for the first script.	NICE has not issued any guidance.

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
BLACK	Etilefrine		Priapism in sickle cell crisis	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.
ADVICE	Etonogestrel / ethinylestradiol	(NuvaRing®)	Medium acting reversible contraception where oral and transdermal options are not suitable	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation Consultant/Specialist responsible for the first script.	NICE has not issued any guidance.
RED	Etoposide	(Vepesid®)	All indications	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Etranacogene dezaparvovec	Hemgenix®	moderately severe or severe haemophilia B	Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA989 – July 2024
RED	Etrasimod	Velsipity	moderately to severely active ulcerative colitis in people aged 16 and over	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA956 - March 2024
RED	Etravirine	(Intence)	HIV infection in combination with other antiretroviral drugs	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Etrolizumab	((RG7413))	Paediatric indications (IBD) where adult TA available	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
BLACK	Everolimus	(Certican®)	Treatment for preventing organ rejection in liver transplantation - as per NICE TA 348	Not commissioned. No NHS prescribing in primary or secondary care	TA348 - Jul 15

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Everolimus	(Afinitor®)	(with exemestane) for advanced HER2-negative, hormone-receptor-positive breast cancer in postmenopausal women - as per NICE TA 421 and NHS England policy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA421 - Dec 16
RED	Everolimus	(Afinitor tablets® ▼)	2nd line for advanced renal cell carcinoma - as per NICE TA 432	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA432 - Feb 17
RED	Everolimus	(Afinitor®)	Unresectable or metastatic neuroendocrine tumours in people with progressive disease in adults - as per NICE TA 449	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA449 - Jun 17
BLACK	Everolimus	(Certican®)	Initial treatment to prevent organ rejection in adults, children and young people having a kidney transplant as per NICE TAs 481 & 482	Not commissioned. No NHS prescribing in primary or secondary care	TA481 - Oct 17
BLACK	Everolimus	(Certican®)	Initial treatment to prevent organ rejection in adults, children and young people having a kidney transplant as per NICE TAs 481 & 482	Not commissioned. No NHS prescribing in primary or secondary care	TA482 - Oct 17
RED	Everolimus	(Votubia®)	Subependymal giant cell astrocytoma (SEGA) associated with tubular sclerosis	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Everolimus	(Votubia®)	Renal angiomyolipoma associated with tubular sclerosis	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Evinacumab		Homozygous familial hypercholesterolaemia	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Evinacumab	Evkeeza®	homozygous familial hypercholesterolaemia in people 12 years and over	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA1002 – September 2024
RED	Evolocumab	(<i>Repatha</i> ® ▼)	Homozygous familial hypercholesterolaemia	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Evolocumab ▼	(<i>Repatha</i> ® ▼)	For treating primary hypercholesterolaemia and mixed dyslipidaemia - as per NICE TA 394	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA394 - Jun 16
RED	Exagamglogene autotemcel	Casgevy®	transfusion-dependent beta-thalassaemia in people 12 years and over	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA1003 – September 2024
RED	Exagamglogene autotemcel	Casgevy®	severe sickle cell disease in people 12 years and over	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA1044 – February 2025
ADVICE	Exemestane	(<i>Aromasin</i> ®)	Adjuvant treatment of oestrogen-receptor-positive early breast cancer - as per NICE TA 112 and CG80/81	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	TA112 - Nov 06
ADVICE	Exemestane	(<i>Aromasin</i> ®)	Advanced breast cancer in postmenopausal women in whom anti-oestrogen therapy has failed - as per NICE CG 81	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	NICE has not issued any guidance.

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
ADVICE	Exenatide	(Byetta®)	Co-use with insulin under specified criteria for T2DM - as per local policy	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	NICE has not issued any guidance.
ADVICE	Exenatide	(Byetta® and Bydureon® ▼)	3rd line use in Type 2 diabetes with metformin + sulphonylurea - as per NICE CG 28	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	NG28 - Dec 15
ADVICE	Exenatide (prolonged release)	(Bydureon®)	in combination with oral antidiabetic therapy for type-2 diabetes - as per NICE TA 248	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	TA248 - Feb 12
RED	Ex-vivo expanded autologous human corneal epithelial cells containing stem cells (Holoclar)		Treatment of adult patients with moderate to severe limbal stem cell deficiency (LSCD), unilateral or bilateral, due to physical or chemical ocular burns	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA467 - Aug 17
RED	Factor IX		Specialist indications	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Factor VII		Specialist indications	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Factor VIIA	NovoSeven	Specialist indications	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Factor VIII	<i>NovoEight®</i>	Specialist indications	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Factor VIII and IX	<i>(Various)</i>	Deficiency states (A licensed indication).	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Factor X (Coagadex)		Hereditary factor X deficiency	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Factor XIII		Specialist indications	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	FactorR VIII Inhibitor Bypassing Factor (FEIBA)		Specialist indications	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
BLACK	Fampridine	<i>(Fampyra®)</i>	Improvement of walking in adults with Multiple Sclerosis with walking disability (EDSS 4-7) - as per NHS England policy	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.
BLACK	Farco-fill Protect		Indwelling urinary catheterisation	Not commissioned. No NHS prescribing in primary or secondary care	MIB 121 – September 2017
RED	Faricimab	Vabysmo®	visual impairment caused by macular oedema after retinal vein occlusion	Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA1004 – September 2024
RED	Faricimab	Vabysmo®	diabetic macular oedema	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA799 – June 2022

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Faricimab	Vabysmo®	wet age-related macular degeneration	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA800 – June 2022
RED	Fedratinib	Inrebic®	disease-related splenomegaly or symptoms in myelofibrosis	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA1018 – November 2024
RED	Fenfluramine	Fintepla®	seizures associated with Lennox–Gastaut syndrome in people 2 years and over	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA1050 – March 2025
RED	Fenfluramine	Fintepla®	seizures associated with Dravet syndrome	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA808 – July 2022
Double Red	Fenofibrate	(<i>Lipantil®</i> ; <i>Supralip®</i> ; <i>Cholib®</i>)	Prevention of CVD - as per NICE CG 181 "Do Not Do" (Not a licensed indication).	Not recommended for routine use	CG181 - Jul 14
Double Red	Fentanyl I-R - buccal tabs, loz, nasal sprays	(<i>Effentora®</i> , <i>Actiq®</i> , <i>Instanyl®</i> , <i>PecFent®</i>)	(Acute) breakthrough pain in cancer	Not recommended for routine use	CG140 - July 12
RED	Fentanyl I-R sublingual tabs (Abstral®)	(<i>Abstral®</i>)	3rd line option for (Acute) breakthrough pain in cancer as part of an agreed pathway of care	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
Double Red	Ferric maltol (Feraccru®)	(<i>Feraccru®</i>)	Treatment of iron-deficiency anaemia in adults (see separate Red entry regarding use in IBD)	Not recommended for routine use	NICE has not issued any guidance.

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Ferric maltol (Feraccru®)	(Feraccru®)	Treatment of iron-deficiency anaemia in adults with Inflammatory Bowel Disease that are intolerant of at least 2 other oral iron products	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Fibrin sealants	(Fibrin sealants)	Haemostatic / tissue glue	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Fibrinogen, dried (Human)	()	Treatment of haemorrhage in congenital hypofibrinogenaemia or afibrinogenaemia - as per BCSH guidelines	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Fibroblast growth factor 1 (FGF1) gene therapy	()	All indications	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
ADVICE	Fidaxomicin	(Dificlir®)	Treatment of mild to moderate C. difficile infection (CDI) in patients who have had two previous episodes in the last 3 months under consultant microbiologist recommendation - as per local policy	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	NICE has not issued any guidance.
RED	Filgotinib	Jyseleca®)	Moderate to severe rheumatoid arthritis	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA676 – February 2021
RED	Filgotinib	()	Paediatric indications (where adult TA available) - specialist centres only	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Filgotinib	Jyseleca®	moderately to severely active ulcerative colitis	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA792 – June 2022
RED	Filgrastim	()	Barth Syndrome - specialist centres only	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Filgrastim	(Various ▼)	Reduction in the duration of neutropenia and the incidence of febrile neutropenia in patients treated with established cytotoxic chemotherapy for malignancy - as per NHS England policy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
Double Red	Filibuvir	()	Viral Hepatitis (B&C) and Respiratory Syncytial Virus	Not recommended for routine use	NICE has not issued any guidance.
RED	Fingolimod ▼	(Gilenya® ▼)	Highly active relapsing remitting multiple sclerosis as per NICE TA 254	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA254 - Apr 12
RED	Fingolimod ▼	(Gilenya® ▼)	Highly active, or rapidly evolving severe, relapsing-remitting multiple sclerosis outside NICE TA 254	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA254 - Apr 12
BLACK	Fish oils (omega-3 fatty acids)	(e.g. Omacor®, Maxepa®, Equazen®)	Prevention of CVD, alone or added to a statin - as per NICE CG 181 - Do Not Do	Not commissioned. No NHS prescribing in primary or secondary care	CG181 - Jul 14
BLACK	Fish oils (omega-3 fatty acids)	(Various - e.g. Equazen®, Omacor®, Maxepa®)	Treatment of attention deficit hyperactivity disorder (ADHD) (Not a licensed indication).	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Fitusiran		Haemophilia A and B	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
BLACK	Flavoxate hydrochloride	(Urispas®)	Overactive bladder and urinary incontinence in women - as per NICE CG 171 - Do Not Do	Not commissioned. No NHS prescribing in primary or secondary care	CG171 - Nov 15
BLACK	Fluconazole (Oral)	(Generics available)	Vaginal candidiasis in pregnancy - as per NICE CG 62 - Do Not Do (Not a licensed indication).	Not commissioned. No NHS prescribing in primary or secondary care	CG62 - Jan 17
RED	Fludarabine	(Fludara®)	B-cell Chronic Lymphocytic Leukaemia - 2nd line treatment - as per NICE TA 29	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA29 - Sep 01
BLACK	Fludarabine	(Fludara®)	B-cell Chronic Lymphocytic Leukaemia - 1st line treatment - as per NICE TA 119	Not commissioned. No NHS prescribing in primary or secondary care	TA119 - Feb 07
ADVICE	Fludroxycortide tape	(previously Haelan)	Adjunctive therapy for chronic, localised, recalcitrant dermatoses that may respond to topical corticosteroids and particularly dry, scaling lesions	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	NICE has not issued any guidance
BLACK	Fludroxycortide tape	(previously Haelan)	All unlicensed uses including hypertrophic scars and keloids	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance
RED	Fluocinolone acetonide intravitreal implant	(Iluvien®)	Recurrent non-infectious uveitis	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA590 - Jul 19

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Fluocinolone acetonide intravitreal implant	(Iluvien®)	chronic diabetic macular oedema	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA953 – March 2024
RED	Fluoride supplements - Toothpaste; dental products	(Duraphat 0.619% DPF; 1.1% DPF Toothpaste)	Prevention of dental caries in at-risk patients (where the specialist is a dentist)	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
BLACK	Folic acid	(Generics are available)	Secondary prevention of MI / reduce cardiovascular risk post MI - as per NICE CG 172 - Do Not Do (Not a licensed indication).	Not commissioned. No NHS prescribing in primary or secondary care	CG172 - Nov 13
BLACK	Folic Acid	(Generics are available)	For preventing hypertensive disorders during pregnancy - as per NICE CG 107 - Do Not Do (Not a licensed indication).	Not commissioned. No NHS prescribing in primary or secondary care	CG107 - Aug 10
RED	Fomepizole	(Antizol®)	Methanol and ethylene glycol poisoning (Poison Centre prescribing only)	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Fondaparinux sodium	(Arixtra®)	Treatment of unstable angina or non-ST segment elevation myocardial infarction (UA/NSTEMI) in adults for whom urgent (< 120 mins) invasive management i.e. percutaneous coronary intervention (PCI) is not indicated - as per regional network policy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	CG94 - Mar 10

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
BLACK	Fondaparinux sodium	(Arixtra®)	Prophylaxis of venous thromboembolism in those undergoing major orthopaedic surgery of the legs - as per NICE DoNotDo recommendation	Not commissioned. No NHS prescribing in primary or secondary care	NG89 - Mar 18
RED	Forigerimod acetate	(Lupuzor®)	Systemic lupus erythematosus (SLE)	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Fosamprenavir	(Telzir®)	HIV infection in combination with other antiretroviral drugs- with low-dose ritonavir	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Foscarnet	(Foscavir®)	CMV infection	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Foslevodopa–foscarbidopa	Produodopa®	advanced Parkinson's with motor symptoms	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA934 – November 2023
Double Red	Fosphenytoin sodium	(Pro-Epanutin®)	Status epilepticus, seizures with head injury, etc.	Not recommended for routine use	NICE has not issued any guidance.
RED	Fostamatinib	Tavlesse®	refractory chronic immune thrombocytopenia	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA835 – October 2022
Double Red	Fostemsavir	()	HIV infection in combination with other antiretroviral drugs	Not recommended for routine use	NICE has not issued any guidance.

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	FreeStyle Libre BGS device (sensors are "Advice")	(FreeStyle Libre)	Blood Glucose Monitoring in diabetes - as per NHSE criteria March 2019	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
ADVICE	FreeStyle Libre BGS sensors (BGS device is "Red")	(FreeStyle Libre)	Blood Glucose Monitoring in diabetes - as per NHSE criteria March 2019	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation Consultant/Specialist responsible for the first script.	NICE has not issued any guidance.
RED	Fremanezumab	Ajovy®	preventing migraine	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA764 – February 2022
BLACK	Fulvestrant	(Faslodex®)	Treatment of locally advanced or metastatic breast cancer - as per NICE TA 503	Not commissioned. No NHS prescribing in primary or secondary care	TA503 - Jan 18
RED	Fumaric acid ester	(Fumaderm (unlicensed product))	Severe psoriasis - specialist use only	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Futibatinib	Lytgobi®	previously treated advanced cholangiocarcinoma with FGFR2 fusion or rearrangement	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA1005 – September 2024
FULL SCA	Galantamine	(Reminyl®)	Mild to moderate Alzheimer's dementia - as per NICE TA 217	Prescribe the drug and perform a basic level of monitoring, e.g. a standard annual review	TA217 - Mar 11
BLACK	Galaxy UNYCO	(Galaxy UNYCO)	for temporary stabilisation of lower limb fractures	Not commissioned. No NHS prescribing in primary or secondary care	MIB166 - Dec 18

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Galcanezumab	Emgality®	preventing migraine	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA659 – November 2020
RED	Galsufase	()	Mucopolysaccharidosis VI - specialist centre only	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Galunisertib		Cancer	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
BLACK	Gamolenic Acid (Evening Primrose Oil)	(Various - Epogam (Blacklisted))	All - not for NHS prescribing (Various indications).	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.
BLACK	Ganaxolone	Ztalmy®	seizures caused by CDKL5 deficiency disorder in people 2 years and over	Not commissioned. No NHS prescribing in primary or secondary care	TA1033 – February 2025
RED	Ganciclovir sodium	(Cymevene)	Cytomegalovirus infection	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Ganetespiib	()	Cancer	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
BLACK	Gefapixant	Lyfnua®	refractory or unexplained chronic cough (terminated appraisal)	Not commissioned. No NHS prescribing in primary or secondary care	TA969 – April 2024
RED	Gefitinib	(Iressa®)	First-line treatment of locally advanced or metastatic non-small-cell lung cancer	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA192 - Jul 10

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
BLACK	Gefitinib	(Iressa®)	Treating NSCLC that has progressed after chemotherapy (as per NICE TA 374) (Not a licensed indication).	Not commissioned. No NHS prescribing in primary or secondary care	TA374 - Dec 15
BLACK	Geko wound therapy		treatment of venous insufficiency and ischemia	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.
RED	Gemcitabine	(Gemzar®)	Pancreatic cancer	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA25 - May 01
BLACK	Gemcitabine	(Gemzar®)	Treatment of the first recurrence of platinum sensitive ovarian cancer	Not commissioned. No NHS prescribing in primary or secondary care	TA389 - Apr 16
RED	Gemcitabine	(Gemzar®)	Non-small cell lung carcinoma	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
Double Red	Gemfibrozil	(Lopid®)	Prevention CVD - as per NICE CG 181 "Do Not Do"	Not recommended for routine use	CG181 - Jul 14
RED	Gemtuzumab ozogamicin	(Mylotarg®)	Untreated de novo CD33-positive acute myeloid leukaemia in people aged ≥15 years - as per NICE TA 545	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA545 - Nov 18
RED	Gentamicin (nebulised)	()	Ps. aeruginosa infection in non-Cystic Fibrosis bronchiectasis (Not a licensed indication).	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Gevokizumab	()	Uveitis	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.

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RED	Gilteritinib	Xospata®	relapsed or refractory acute myeloid leukaemia	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA642 – August 2020
RED	Givosiran	Givlaari	Hepatic porphyria	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	HST16 - Nov 2021
BLACK	Glasdegib	()	with chemotherapy for untreated acute myeloid leukaemia (terminated appraisal)	Not commissioned. No NHS prescribing in primary or secondary care	TA646 – September 2020
RED	Glatiramer	(Copaxone®)	Multiple Sclerosis - as per NICE TA 527	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA527 - Jun 18
RED	Glecaprevir-pibrentasvir ▼	(Maviret® ▼)	Chronic hepatitis C	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA499 - Jan 18
BLACK	Gliclazide modified release	(Diamicron® MR)	Type 2 diabetes mellitus	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.
RED	Glofitamab	Columvi®	relapsed or refractory diffuse large B-cell lymphoma after 2 or more systemic treatments	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA927 – October 2023
RED	Glucarpidase	(Voraxase)	Urgent treatment of methotrexate-induced renal dysfunction in patients receiving high-dose MTX chemotherapy - as per NHSE policy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.

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BLACK	Glucocorticoids (inc hydrocortisone, prednisolone)	<i>(Generics are available)</i>	Chronic fatigue syndrome/myalgic encephalomyelitis (or encephalopathy) - as per NICE CG 53 - Do Not Do	Not commissioned. No NHS prescribing in primary or secondary care	CG53 - Aug 07
BLACK	Glucosamine	<i>(Various)</i>	Osteoarthritis - as per NICE CG 177 - Do Not Do	Not commissioned. No NHS prescribing in primary or secondary care	CG177 - Feb 14
BLACK	Glucosamine, Glucosamine & Chondroitin	<i>(Alateris and various)</i>	Osteoarthritis	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.
BLACK	Gluten-free foods	<i>(Various)</i>	Gluten sensitive enteropathies in all patients across N+W	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.
RED	Glycerol phenylbutyrate	<i>(Ravicti® 1.1 g/ml oral liquid)</i>	Urea cycle disorders (specialist use only)	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	GlycoPEGylated Factor IX	<i>(Rebinyn®)</i>	Haemophilia B	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
ADVICE	Glycopyrronium bromide	Glycobromag	Hyperhidrosis	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	NICE has not issued any guidance.
ADVICE	Glycopyrronium bromide	Adults - Glycobromag first line, Assicco second line. Children - Assicco first line, sialanar second line	Hypersalivation	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	NICE has not issued any guidance.

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Glycopyrronium bromide 2% in cetomacrogol cream	N/A	craniofacial hyperhidrosis	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Golimumab	(Simponi®)	Treatment of psoriatic arthritis (including switching between treatments) - as per NICE TA 220 and local treatment pathway	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA220 - Apr 11
BLACK	Golimumab	(Simponi®)	Treatment of methotrexate-naïve rheumatoid arthritis - as per NICE TA 224 (Not a licensed indication).	Not commissioned. No NHS prescribing in primary or secondary care	TA224 - Jun 11
RED	Golimumab	(Simponi®)	Treatment of rheumatoid arthritis after the failure of previous disease-modifying anti-rheumatic drugs	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA225 - Jun 11
RED	Golimumab	(Simponi®)	2nd line (Biologic) treatment option for moderately to severely active ulcerative colitis after the failure of conventional therapy - as per NICE TA 329 and the local treatment pathway	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA329 - Feb 15
RED	Golimumab	(Simponi®)	For rheumatoid arthritis not previously treated with DMARDs or after conventional DMARDs only have failed	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA375 - Jan 16
RED	Golimumab	(Simponi®)	Ankylosing spondilitis	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA383 - Feb 16

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
NICE approved	Golimumab	(Simponi®)	Severe non-radiographic axial spondyloarthritis in adults whose disease has responded inadequately to, or who cannot tolerate, nonsteroidal anti-inflammatory drugs	NWICB are committed to fund positive NICE TAs. Awaiting clarification of place in pathway and commissioning arrangements. Further guidance to be issued when available.	TA497 - Jan 18
BLACK	Golimumab	(Simponi®)	For induction of remission, with or without steroids, in patients with Crohn's disease colitis with moderate-severe disease as a third-line anti-TNF after failure of or adverse reaction to two previous agents (Not a licensed indication).	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.
FULL SCA	Goserelin	(Zoladex®)	Management of endometriosis; pre-operative management of uterine fibroids	Shared Care Agreement Level 2 - Prescribe the drug and perform a more intense level of monitoring, e.g. quarterly	NG73 - Sep 17
ADVICE	Goserelin	(Zoladex®)	Prostate cancer	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	NICE has not issued any guidance.
RED	Gosuranemab		Supranuclear palsy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Granulocyte-macrophage colony-stimulating factor (leukine® - import)		Antibody-positive pulmonary alveolar proteinosis	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
BLACK	Grass pollen allergen extract	(Grazax®)	Seasonal allergic hay fever due to grass pollen	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.
BLACK	Grass pollen extract	Grazax	adults and children (5 years and older) with severe seasonal allergic rhino conjunctivitis (hay fever)	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.
RED	Grazoprevir		Hepatitis C	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
BLACK	GTN patches		Achilles Tendinopathy	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance
FULL SCA	Guanfacine Prolonged-Release ▼	(Intuniv® ▼)	For children aged 6-17yr with ADHD for whom stimulants are not suitable, not tolerated or have been shown to be ineffective	Prescribe the drug and perform a higher level of monitoring, e.g. 6-monthly	NICE has not issued any guidance.
RED	Guselkumab	(Tremfya®)	Moderate to severe plaque psoriasis in adults	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA521 - Jun 18
RED	Guselkumab	Tremfya®	active psoriatic arthritis after inadequate response to DMARDs	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA711 – June 2021
RED	Guselkumab	Tremfya®	treating active psoriatic arthritis after inadequate response to DMARDs	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA815 – August 2022

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Haem Arginate	<i>(Normosang®)</i>	Hepatic porphyria	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
BLACK	Haem iron tablets (GlobiFer)	<i>(GlobiFer®, also Forte and Plus)</i>	Anaemia	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.
BLACK	Heparin - Low molecular weight (LMWH)	<i>(Various)</i>	Prevention of DVT during flights (Not a licensed indication).	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.
RED	Heparin - Low Molecular Weight (LMWH)	<i>(Various)</i>	Use in obstetrics for management of VTE in high risk patients (e.g. overweight, multiparous, or who smoke) and require LMWH post partum (Not a licensed indication).	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Heparin - Low Molecular Weight (LMWH)	<i>(Various)</i>	Unstable angina/coronary artery disease/NSTEMI	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
FULL SCA	Heparin - Low Molecular Weight (LMWH) (currently under review)	<i>(Various)</i>	For patients requiring long term anticoagulation in whom warfarin is contraindicated or inappropriate	Shared Care Agreement Level 2 - Prescribe the drug and perform a more intense level of monitoring, e.g. quarterly	NICE has not issued any guidance.
Double Red	Heparinised saline	<i>(Saline (heparinised))</i>	Central venous catheter lock in adults - as per RMOG guidance (Feb 2019)	Not recommended for routine use	NICE has not issued any guidance.
BLACK	Heparinoid Cream / Gel	<i>Hirudoid 0.3%, Bruiseze 0.8%, Lasonil</i>	Improving circulation in bruising, superficial thrombophlebitis, chilblains, varicose veins	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
BLACK	Heylo™	Heylo™	Digital leakage notification s	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.
BLACK	HGH - Saizen®, Zomacton®, Nordiflex®, Nutropin® Aq	(Saizen®, Zomacton®, Nordiflex®, Nutropin Aq)	Growth hormone deficiency (GHD) - as per East of England PAC policy	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.
BLACK	HidraWear dressings	n/a	Hidradenitis Suppurativa (HS)	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.
BLACK	HidraWear underwear	n/a	Hidradenitis Suppurativa (HS)	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.
RED	HIV vaccine	(HIV vaccine)	HIV infection prophylaxis	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	HIV/AIDS treatments	(Various)	HIV infection / post exposure prophylaxis (PEP)	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
BLACK	Hormone Replacement Therapy (HRT) - systemic	(Various)	Treatment of urinary incontinence - as per NICE CG 171 - NICE Do Not Do (Not a licensed indication).	Not commissioned. No NHS prescribing in primary or secondary care	CG171 - Nov 15
BLACK	Human alpha1-proteinase inhibitor		emphysema	Not commissioned. No NHS prescribing in primary or secondary care	TA965 – March 2024
RED	Human heterologous liver cells (HHLivC)	(Heparesc®)	Urea cycle disorders	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Human Normal Immunoglobulin (Aragam®)	(Aragam®)	As per National Demand Management Plan - NHSE policy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Human Normal Immunoglobulin (Flebogamma®)	(Flebogamma®)	As per National Demand Management Plan	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Human normal immunoglobulin (Gammagard®)	(Gammagard®)	As per National Demand Management Plan - NHSE policy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Human normal immunoglobulin (Gammanorm®)	(Gammanorm®)	As per National Demand Management Plan - NHSE policy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Human normal immunoglobulin (Gammaplex®)	(Gammaplex®)	As per National Demand Management Plan - NHSE policy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Human normal immunoglobulin (Gamunex®)	(Gamunex®)	As per National Demand Management Plan - NHSE policy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Human Normal Immunoglobulin (Hizentra)	(Hizentra®)	As per National Demand Management Plan - NHSE policy Plan - NHSE policy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Human normal immunoglobulin (Intratect®)	(Intratect®)	As per National Demand Management Plan - NHSE policy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Human normal immunoglobulin (IVlg)	(Privigen®)	As per National Demand Management Plan	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Human Normal Immunoglobulin (Kiovig)	(Kiovig®)	As per National Demand Management Plan - NHSE policy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Human Normal Immunoglobulin (Octagam)	(Octagam®)	As per National Demand Management Plan - NHSE policy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Human Normal Immunoglobulin (Subcuvia®)	(Subcuvia®)	As per National Demand Management Plan - NHSE Policy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Human Normal Immunoglobulin (Subgam®)	(Subgam®)	As per National Demand Management Plan - NHSE policy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Human Normal Immunoglobulin (Vigam®)	(Vigam®)	As per National Demand Management Plan - NHSE policy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Human Normal Immunoglobulin (Vivaglobin®)	(Vivaglobin® (for s-c infusion) (discontinued 2011))	As per National Demand Management Plan - NHSE policy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Human parathyroid hormone-related protein analogue	Natpar® s/c injection	Male and juvenile osteoporosis	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
BLACK	Hyaluronate	various	Intra-articular injection in osteoarthritis (Not a licensed indication).	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.
RED	Hybrid closed loop systems	N/A	managing blood glucose levels in type 1 diabetes	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA943 – December 2023

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Hydrocortisone	<i>various</i>	To prevent prescribing in primary care as a treatment for covid-19	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
ADVICE	Hydrocortisone granules in capsules	<i>(Alkindi®)</i>	Cortisol replacement therapy for children (0-6 years) with adrenal insufficiency	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	NICE has not issued any guidance.
BLACK	Hydrocortisone MR	<i>(Plenadren® MR tablets)</i>	Treatment of adrenal insufficiency in adults	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.
BLACK	Hydrocortisone MR caps	Efmody	congenital adrenal hyperplasia (CAH) in patients 12 years old and above.	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.
RED	Hydroxycarbamide (hydroxyurea) - generic	<i>(Generic)</i>	Sickle Cell disease (Not a licensed indication).	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
FULL SCA	Hydroxycarbamide (Hydroxyurea) 500mg capsules	<i>(Generics are available - 500mg capsules only)</i>	CML / Myeloproliferative disorders requiring cytoreduction (A licensed indication).	Shared Care Agreement Level 1 - Prescribe the drug and perform a higher level of monitoring, e.g. 6-monthly	NICE has not issued any guidance.
BLACK	Hydroxycarbamide (hydroxyurea) as Siklos® ▼	<i>(Siklos® (not funded by NHS Norfolk))</i>	Sickle-cell disease	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.
RED	HyQvia (HN Immunoglobulin & Hyalurnidase)	<i>(HyQvia®)</i>	As per national Demand Management Plan	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
Double Red	Ibalizumab	<i>(Trogarzo®)</i>	HIV in combination with other anti-retroviral drugs	Not recommended for routine use	NICE has not issued any guidance.

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
ADVICE	Ibandronate / Ibandronic acid	(Oral 50mg tablets - various manufacturers)	Daily use for two years to improve survival in post-menopausal women with breast cancer receiving chemotherapy (Not a licensed indication).	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	NICE has not issued any guidance.
RED	Ibandronic acid	(Bonviva® Injection)	Treatment of osteoporosis in postmenopausal women	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA464 - Aug 17
ADVICE	Ibandronic Acid, Ibandronate	(Oral product - Bondronat®)	Reduction of bone damage in bone metastases in breast cancer	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	NICE has not issued any guidance.
BLACK	Ibrutinib	Imbruvica®	Waldenstrom's macroglobulinaemia	Not commissioned. No NHS prescribing in primary or secondary care	TA795 – June 2022
RED	Ibrutinib	Imbruvica®	with venetoclax for untreated chronic lymphocytic leukaemia	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA891 – May 2023
RED	Ibrutinib ▼	(Imbruvica® ▼)	Previously treated adults with chronic lymphocytic leukaemia and untreated chronic lymphocytic leukaemia with 17p deletion or TP53 mutation - as per NICE TA 429	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA429 - Jan 17
BLACK	Ibrutinib ▼	(Imbruvica® ▼)	Untreated chronic lymphocytic leukaemia without a 17p deletion or TP53 mutation - as per NICE TA 452 (terminated appraisal)	Not commissioned. No NHS prescribing in primary or secondary care	TA452 - Jul 17

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Ibrutinib ▼	(Imbruvica® ▼)	Waldenstrom's macroglobulinaemia	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA491 - Nov 17
RED	Ibrutinib ▼	(Imbruvica® ▼)	Relapsed or refractory mantle cell lymphoma	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA502 - Jan 18
BLACK	Ibrutinib ▼ (with bendamustine and rituximab)	(Imbruvica® ▼)	Relapsed or refractory chronic lymphocytic leukaemia after systemic therapy (terminated appraisal)	Not commissioned. No NHS prescribing in primary or secondary care	TA437 - Mar 17
BLACK	Ibrutinib with obinutuzumab		untreated chronic lymphocytic leukaemia and small lymphocytic lymphoma (terminated appraisal)	Not commissioned. No NHS prescribing in primary or secondary care	TA702 – May 2021
BLACK	Ibrutinib with rituximab	(Imbruvica®)	Waldenstrom's macroglobulinaemia (terminated appraisal)	Not commissioned. No NHS prescribing in primary or secondary care	TA608 - Oct 19
BLACK	Ibrutinib with rituximab	(Imbruvica®)	untreated chronic lymphocytic leukaemia (terminated appraisal)	Not commissioned. No NHS prescribing in primary or secondary care	TA703 – May 2021
RED	Icatibant	(Firazyr®)	Hereditary angioedema - acute treatment	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Icatibant	(Firazyr®)	Hereditary angiodema - prophylactic treatment - as per NHSE policy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
ADVICE	Icosapent ethyl	Vazkepa®	with statin therapy for reducing the risk of cardiovascular events in people with raised triglycerides	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	TA805 – July 2022
RED	Idarubicin HCl	(Zavedos®)	All indications	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Idebenone	(Raxone®)	Duchenne muscular dystrophy (Not a licensed indication).	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
BLACK	Idecabtagene vicleucel	N/A	relapsed and refractory multiple myeloma after 3 or more treatments	Not commissioned. No NHS prescribing in primary or secondary care	TA936 – November 2023
BLACK	Idelalisib	(Zydelig®)	Refractory follicular lymphoma that has not responded to 2 prior lines of treatment in adults	Not commissioned. No NHS prescribing in primary or secondary care	TA604 - Oct 19
BLACK	Idelalisib ▼	(Zydelig® ▼)	Treatment of follicular lymphoma that is refractory to two prior treatments (terminated appraisal)	Not commissioned. No NHS prescribing in primary or secondary care	TA328 - Dec 14
RED	Idelalisib ▼	(Zydelig® ▼)	Chronic lymphocytic leukaemia for adults (in combination with rituximab)	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA359 - Oct 15
BLACK	Idelalisib ▼	(Zydelig® ▼)	Chronic lymphocytic leukaemia (with ofatumumab (Arzerra®)) - as per NICE TA 469 (terminated appraisal)	Not commissioned. No NHS prescribing in primary or secondary care	TA469 - Aug 17

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Idursulfase	(Elaprase®)	Mucopolysaccharidosis - highly specialised criteria	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Iloprost	(Ventavis®)	Pulmonary arterial hypertension	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Imatinib ▼	(Glivec® ▼)	Kit-positive unresectable and /or metastatic GIST	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA209 - Nov 10
RED	Imatinib ▼	(Glivec® ▼)	Adjuvant treatment of gastrointestinal stromal tumours (GIST) after surgery	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA326 - Nov 14
RED	Imatinib mesylate (high dose) ▼	(Glivec® ▼)	Imatinib-resistant or intolerant chronic myeloid leukaemia	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA425 - Dec 16
RED	Imatinib mesylate ▼	(Glivec® ▼)	Untreated chronic-phase Philadelphia-chromosome-positive chronic myeloid leukaemia in adults	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA426 - Dec 16
RED	Imatinib mesylate ▼	(Glivec® ▼)	Chronic graft versus host disease	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
BLACK	Imatinib mesylate ▼ (high dose)	(Glivec® ▼)	Imatinib-resistant Chronic Myeloid Leukaemia	Not commissioned. No NHS prescribing in primary or secondary care	TA425 - Dec 16
RED	Imatinib mesylate ▼ (standard dose)	(Glivec® ▼)	Chronic myeloid leukaemia (CML)	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA425 - Dec 16

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Imetelstat		Cancer	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Imiglucerase	(Cerezyme®)	Gaucher's disease	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
BLACK	Imipramine	(Generics available)	Overactive bladder and urinary incontinence in women - as per NICE CG 171 - NICE Do Not Do (Not a licensed indication).	Not commissioned. No NHS prescribing in primary or secondary care	CG171 - Nov 15
ADVICE	Imiquimod Cream	(Aldara® & Zyclara®)	Non-hypertrophic actinic keratosis	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	NICE has not issued any guidance.
RED	Imlifidase	Idefirix®	desensitisation treatment before kidney transplant in people with chronic kidney disease	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA809 – July 2022
ADVICE	Inclisiran	Leqvio®	hypercholesterolaemia or mixed dyslipidaemia	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	TA733 - Oct 2021
BLACK	Independence wound protection pouch and related products	(Rapidcare)	Haemodialysis patients - protection of line when washing	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.
RED	Inebilizumab		Multiple Sclerosis	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Infertility drugs	<i>(Various)</i>	Infertility treatment	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Infliximab	<i>(Various brands available)</i>	Psoriasis - use in children, aligning with NICE TA 134 (Not a licensed indication).	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA134 - Jan 08
RED	Infliximab	<i>(Various brands available)</i>	Ankylosing spondylitis - use in children, aligning with NICE TA 143 (Not a licensed indication).	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA143 - May 2008
RED	Infliximab	<i>(Various brands available)</i>	Acute exacerbations of ulcerative colitis - use in children, aligning with NICE TA 163.	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA163 - Dec 2008
RED	Infliximab	<i>(Various brands available)</i>	Crohn's disease - use in children, aligning with NICE TA 187	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA187 - May 10
RED	Infliximab	<i>(Various brands available)</i>	Treatment of psoriatic arthritis - use in children, aligning with NICE TA 199 (Not a licensed indication).	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA199 - Aug 10
RED	Infliximab	<i>(Various brands available)</i>	Moderately to severely active ulcerative colitis after the failure of conventional therapy - use in children, aligning with NICE TA 329	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA329 - Feb 15
RED	Infliximab	<i>(Various brands available)</i>	Rheumatoid arthritis - use in children, aligning with NICE TA 130 (Not a licensed indication).	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA375 - Jan 16

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Infliximab	various, plus biosimilars	moderate rheumatoid arthritis after conventional DMARDs have failed	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA715 – July 2021
RED	Infliximab	(Various brands available)	Graft versus host disease (Not a licensed indication).	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Infliximab	(Various brands available)	Sarcoidosis (Not a licensed indication).	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Infliximab	(Various brands available)	Hidradenitis Suppurativa (Not a licensed indication).	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Infliximab	(Various)	Connective tissue disease interstitial lung disease (Not a licensed indication).	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Infliximab	(Various brands available)	Renal indications (Not a licensed indication).	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Infliximab	(Remicade®; Biosimilars also available)	Behcet's Disease (Not a licensed indication).	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Infliximab	(Remicade®, Inflectra® ▼, Remsima® ▼)	Anti-TNF Alpha treatment option for paediatric patients with severe refractory uveitis	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Infliximab	(Remicade® (until end Mar16 only); Remsima® ▼)	Treatment of Juvenile Idiopathic Arthritis (JIA) - in patients with uveitis only if etanercept or adalimumab not appropriate or are ineffective (Not a licensed indication).	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Infliximab	(Cost effective biosimilars available)	Anti-TNF treatment option for adult patients with severe refractory uveitis - as per NHSE policy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Infliximab (Biosimilar to be used 1st line)	Cost effective biosimilar to be used	Rheumatoid arthritis - after other DMARDs including a TNF inhibitor - as per NICE TA 195	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA195 - Aug 10
RED	Infliximab (biosimilar)	(Remicade® (until end Mar16 only); Remsima® ▼)	Treatment of psoriasis in adults - as per NICE TA 134 and local treatment pathway	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA134 - Jan 08
RED	Infliximab (biosimilar)	(As cost-effective biosimilar of choice)	Crohn's disease which has not responded to conventional therapy - as per NICE TA 187	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA187 - May 10
RED	Infliximab (biosimilar)	(Remicade® (until end Mar16 only); Remsima® ▼)	Active and progressive psoriatic arthritis - as per NICE TA 199	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA199 - Aug 10
RED	Infliximab (biosimilar)	(Remicade® (until end Mar16 only); Remsima® ▼)	Subacute manifestations of moderately to severely active ulcerative colitis - as per NICE TA 329 and the local treatment pathway	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA329 - Feb 15

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Infliximab (biosimilar)	<i>(Cost effective biosimilar to be used)</i>	Rheumatoid arthritis not previously treated with DMARDs or after conventional DMARDs only have failed - as per NICE TA 375 and local treatment pathway	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA375 - Jan 16
RED	Infliximab (biosimilar)	<i>(Lowest acquisition cost product to be used)</i>	Ankylosing spondilitis - severe active, where NSAIDs are not effective or not tolerated - as per NICE TA 383	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA383 - Feb 16
RED	Infliximab (biosimilar)	<i>(Cost effective biosimilars available))</i>	Axial spondyloarthritis (non-radiographic) - as per NICE TA 383 and NNUH application	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA383 - Feb 16
RED	Infliximab (biosimilar)	<i>(Cost -effective biosimilar to be used)</i>	Immunotherapy toxicity (causing colitis)	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Infliximab (biosimilar)	<i>(Remicade® (until end Mar16 only); Remsima® ▼)</i>	Acute exacerbations of ulcerative colitis - as per the local treatment pathway	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	Dec-08
RED	Infliximab (biosimilar)	<i>(Cost effective product to be used)</i>	Psoriatic arthritis (switching between treatments)	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Infliximab (Remicade®)	<i>(Remicade®)</i>	Anti-TNF Alpha treatment option for paediatric patients with severe refractory uveitis	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
BLACK	Influenza vaccination	<i>(Various)</i>	Vaccination of non-target patients on the NHS	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
BLACK	Influenza vaccine - intradermal	(<i>Intanza®</i>)	Influenza vaccination	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.
BLACK	Ingenol mebutate topical gel	(<i>Picato®</i>)	Non-hypertrophic actinic keratosis	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.
BLACK	Inhaled corticosteroids	(<i>Various</i>)	Children who wheeze with a cold (viral wheeze / bronchiolitis) (Not a licensed indication).	Not commissioned. No NHS prescribing in primary or secondary care	NG9 - May 15
BLACK	Inositol nicotinate	(<i>Hexopal®</i>)	Treatment of intermittent claudication in people with peripheral arterial disease	Not commissioned. No NHS prescribing in primary or secondary care	TA223 - May 11
RED	Inotersen	Tegsedi®	Amyloidosis	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	HST9 - May 2019
RED	Inotuzumab ozogamicin	(<i>Besponsa®</i>)	Relapsed or refractory B-cell acute lymphoblastic leukaemia - as per NICE TA 541	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA541 - Sep 18
BLACK	Insert for female stress incontinence	(<i>All brands including Contiform®, Diveen, Efemia and Contrelle Activgard</i>)	Female stress urinary incontinence - as per NICE CG 171 - Do Not Do	Not commissioned. No NHS prescribing in primary or secondary care	CG171 - Nov 15
RED	Inspiratory muscle training devices	(<i>POWERbreathe® Medic, Threshold IMT®, Ultrabreathe®</i>)	Inspiratory muscle training in COPD, non-CF bronchiectasis, upper spinal cord injuries, Cystic fibrosis, asthma	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NG115 - Dec 18
BLACK	Inspiratory muscle training devices	(<i>POWERbreathe® Medic, Threshold IMT®, Ultrabreathe®</i>)	Fitness / Sports use	Not commissioned. No NHS prescribing in primary or secondary care	NG115 - Dec 18

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
BLACK	Insulin - Non-basal-bolus regimens	(Various)	Newly diagnosed Type 1 diabetes - NICE Do Not Do	Not commissioned. No NHS prescribing in primary or secondary care	NG17 - May 17
BLACK	Insulin analogues (rapid acting)	(Various)	Routine use after meals in T1 Diabetes - NICE Do Not Do	Not commissioned. No NHS prescribing in primary or secondary care	NG17 - May 17
ADVICE	Insulin Aspart (Fiasp®) ▼	(Fiasp® ▼)	Diabetes mellitus	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	NICE has not issued any guidance.
Double Red	Insulin degludec	(Tresiba®)	ROUTINE use in Type 1 and Type 2 diabetes mellitus - see separate entry regarding RESTRICTED USE	Not recommended for routine use	NICE has not issued any guidance.
ADVICE	Insulin degludec	(Tresiba®)	RESTRICTED use in Type 1 and Type 2 Diabetes mellitus - consultant initiation only	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	NG17 - Aug 15
BLACK	Insulin degludec / liraglutide combi (Xultophy®)	(Xultophy®)	Diabetes mellitus	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.
ADVICE	Insulin detemir	(Levemir®)	Diabetes in adults & children >1 yrs	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	NG18 - Nov 16
ADVICE	Insulin glargine	(Lantus®)	Diabetes mellitus	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	NG18 - Nov 16

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
ADVICE	Insulin glargine 300 units/ml (Toujeo®)	(Toujeo®)	Restricted use in adults aged ≥18 years with diabetes mellitus under specified criteria - see full guidance	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	NICE has not issued any guidance.
BLACK	Insulin Glargine and Lixisenatide solution	(Suliqua®)	Diabetes mellitus	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.
ADVICE	Insulin glargine biosimilar 100iu/ml (Abasaglar®)	(Abasaglar®)	Diabetes mellitus	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	NICE has not issued any guidance.
ADVICE	Insulin glulisine	(Apidra®)	Diabetes mellitus	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	NICE has not issued any guidance.
ADVICE	Insulin Lispro	Lyumjev®	adults with type 1 and type 2 diabetes	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	NICE has not issued any guidance.
ADVICE	Insulin Lispro ▼ 200units/ml (Humalog KwikPen®)	(Humalog KwikPen®)	A specific group of adults with diabetes mellitus who require more than 20 units of quick-acting insulin per day	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	NICE has not issued any guidance.
RED	Insulin pump therapy	(Continuous Subcutaneous Insulin Infusion (CSII))	Type 1 Diabetes under specified circumstances	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Interferon alfa	(Roferon-A®, Viraferon®)	In combination with ribavirin for Hepatitis C, and for Hepatitis B - as per NICE 75 and CG 165	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA75 - Sep 10

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Interferon alfa	(Roferon-A®, Viraferon®)	Adjunct to surgery in malignant melanoma	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Interferon alfa	(Roferon-A®, Viraferon®)	Metastatic renal cell carcinoma	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Interferon alfa	(Roferon-A®, Viraferon®)	Chronic myelogenous leukaemia	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Interferon beta 1a	(Avonex®, Rebif®)	Multiple Sclerosis - as per NICE TA 527	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA527 - Jun 18
BLACK	Interferon beta 1b (Betaferon®)	(Betaferon®)	Multiple sclerosis - as per NICE TA 527	Not commissioned. No NHS prescribing in primary or secondary care	TA527 - Jun 18
RED	Interferon beta 1b (Extavia®)	(Extavia®)	Multiple Sclerosis - as per NICE TA 527	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA527 - Jun 18
RED	Intrathecal drug delivery	(Procedure)	Treatment of severe cancer pain	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Intrathecal pumps	(Intrathecal pumps)	Treatment of severe chronic (non-cancer) pain	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Intravenous nutrition	(SMOFlipid®)	Total Parenteral Nutrition in premature infants with intestinal failure	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Ipilimumab	(Yervoy®)	Previously treated advanced (unresectable or metastatic) melanoma (stage III or IV) in previously treated people	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA268 - Dec 12
RED	Ipilimumab	(Yervoy®)	Previously untreated advanced (unresectable or metastatic) melanoma	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA319 - Jul 14
BLACK	i-Port advance	n/a	Blood glucose monitoring as per PAC policy March 2020	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.
RED	Iptacopan	Fabhalta®	paroxysmal nocturnal haemoglobinuria	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA1000 – September 2024
BLACK	IQoro neuromuscular training device	()	Hiatus hernia - improving symptoms	Not commissioned. No NHS prescribing in primary or secondary care	MIB 176 - March 2019
BLACK	IQoro neuromuscular training device	()	Stroke-related dysphagia	Not commissioned. No NHS prescribing in primary or secondary care	MIB175 - Mar 19
RED	Irinotecan	(Campto®)	Colorectal cancer 2nd line	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA93 - Aug 05
RED	Isatuximab	Sarclisa®	with pomalidomide and dexamethasone for treating relapsed and refractory multiple myeloma	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA658 – November 2020
BLACK	Isatuximab with carfilzomib and dexamethasone	N/A	relapsed or refractory multiple myeloma (terminated)	Not commissioned. No NHS prescribing in primary or secondary care	TA727 – September 2021

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Isavuconazole	(Cresemba®)	Systemic fungal infections	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
ADVICE	Isoniazid	various	Non-TB related mycobacterium infections	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation Consultant responsible for the first script.	NICE has not issued any guidance.
RED	Isotretinoin	(Roaccutane®)	All indications	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
ADVICE	Ivabradine ▼	(Procoralan® ▼)	Treatment of chronic heart failure	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation Consultant/Specialist should prescribe for an initial period until the patient is stabilise.	TA267 - Nov 12
RED	Ivacaftor ▼	(Kalydeco® ▼)	Cystic Fibrosis	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Ivacaftor–tezacaftor– elexacaftor, tezacaftor–ivacaftor and lumacaftor–ivacaftor	(IVA–TEZ–ELX; Kaftrio, Vertex®), (TEZ–IVA; Symkevi, Vertex®) and (LUM–IVA; Orkambi, Vertex®)	cystic fibrosis	Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA988 – July 2024

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
ADVICE	Ivermectin (oral)		Scabies	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	NICE has not issued any guidance.
RED	Ivosidenib	Tibsovo®	for treating advanced cholangiocarcinoma with an IDH1 R132 mutation after 1 or more systemic treatments	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA948 – January 2024
RED	Ivosidenib	Tibsovo®	with azacitidine for untreated acute myeloid leukaemia with an IDH1 R132 mutation	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA979 – June 2024
RED	Ixazomib	(Ninlaro®)	Amyloidosis	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Ixazomib	Ninlaro®	with lenalidomide and dexamethasone for treating relapsed or refractory multiple myeloma	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA870 – February 2023
RED	Ixekizumab	(Taltz®)	Active psoriatic arthritis after inadequate response to DMARDs, used alone or with methotrexate - as per NICE TA 537	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA537 - Aug 18
RED	Ixekizumab	Taltz®	axial spondyloarthritis	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA718 – July 2021

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Ixekizumab ▼	(Taltz® ▼)	3rd line biologic option in moderate to severe plaque psoriasis under certain conditions - as per NICE TA 442 and local treatment pathway	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA442 - Apr 17
RED	Jaw rehabilitation devices	(Therabite®)	Following head and neck radiotherapy or head and neck surgery when recommended by an appropriate Secondary Care Specialist	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Ketamine		use in palliative care	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
ADVICE	Ketogenic Diet Therapy	various	ketogenic diets, epilepsy & neurometabolic disorders as part of tertiary service provided by Addenbrookes	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	NICE has not issued any guidance
BLACK	Ketoprofen/omeprazole	(Axorid®)	Patients requiring ketoprofen for OA, RA and ankylosing spondylitis who are at risk of NSAID-associated DU or GU	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.
ADVICE	Lacosamide	(Vimpat®)	Adjunctive therapy in the treatment of partial-onset seizures with or without secondary generalisation in patients with epilepsy aged 16 years and older	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	NICE has not issued any guidance.
RED	Lamivudine	(Epivir, Zeffix (generic also available))	Chronic hepatitis B	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	CG165 - Jun 13

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Lamivudine	<i>(Epivir, Zeffix (generic also available))</i>	HIV	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
Double Red	Lamotrigine	<i>(Lamictal®; Generics are available)</i>	Augmentation of an antidepressant - as per NICE CG 90 - Do Not Do (Not a licensed indication).	Not recommended for routine use	CG90 - Oct 09
ADVICE	Lamotrigine	<i>(Lamictal®)</i>	(Relapse of) Bipolar Depression (as alternative to, or in addition to lithium)	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation Consultant should recommend, but GP can take responsibility for all scripts 4 weeks.	NICE has not issued any guidance.
RED	Lanadelumab	<i>(Takhzyro®)</i>	Prevention of recurrent attacks of hereditary angioedema	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA606 - Oct 19
BLACK	Lancet (single use, safety)	<i>All brands except neon-verifine (see above)</i>	Single use safety lancet	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.
ADVICE	Lanreotide	<i>(Somatuline LA®)</i>	Reducing vomiting in terminal bowel obstruction	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	NICE has not issued any guidance.
RED	Lanreotide	<i>(Somatuline®)</i>	Congenital hyperinsulinism (Not a licensed indication).	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Lanreotide	(Somatuline® LA)	Acromegaly	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Lanreotide	(Somatuline LA®)	Carcinoid and other neuroendocrine tumours - for new patients	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
ADVICE	Lanthanum carbonate	(Fosrenol®)	Hyperphosphataemia in end-stage chronic renal failure - if on treatment before 1st April 2013	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	NICE has not issued any guidance.
BLACK	Lapatinib	(Tyverb®)	1st-line treatment of metastatic hormone-receptor-positive breast cancer that overexpresses HER2	Not commissioned. No NHS prescribing in primary or secondary care	TA257 - Jun 12
RED	Laquinimod	(Nerventra® (not licensed in the UK))	Multiple sclerosis	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Laronidase	(Aldurazyme®)	Treatment of non-neurological manifestations of mucopolysaccharidosis I - as per NHSE policy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Larotrectinib	(Vitrakvi®)	treating NTRK fusion-positive solid tumours	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA630 – May 2020

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
AI	Latanoprost–netarsudil	Roclanda®	previously treated primary open-angle glaucoma or ocular hypertension	Consultant / Specialist to initiate and retain until stable. Prescribing will switch to primary care as per commissioning agreement or when clinically appropriate. Consultant should initiate treatment before transferring prescribing to primary care	TA1009 – October 2024
RED	Lebrikizumab		Asthma	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Lebrikizumab	Ebglyss®	moderate to severe atopic dermatitis in people 12 years and over	Red/Hospital - Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA986 – July 2024
RED	Ledipasvir-sofosbuvir ▼	(Harvoni® ▼)	For treating chronic hepatitis C as per NICE TA 363	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA363 - Nov 15
FULL SCA	Leflunomide	(Arava®)	Rheumatoid arthritis and psoriatic arthritis	Shared Care Agreement Level 2 - Prescribe the drug and perform a more intense level of monitoring, e.g. quarterly	CG79 - Feb 09
BLACK	Lenalidomide	(Revlimid®)	With bortezomib and dexamethasone for untreated multiple myeloma (terminated appraisal)	Not commissioned. No NHS prescribing in primary or secondary care	TA603 - Sep 19
RED	Lenalidomide	Revlimid®	After an autologous stem cell transplant for newly diagnosed multiple myeloma	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA680 – March 2021

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
BLACK	Lenalidomide	n/a	relapsed or refractory mantle cell lymphoma (terminated appraisal)	Not commissioned. No NHS prescribing in primary or secondary care	TA774 – March 2022
RED	Lenalidomide	(Revlimid®)	POEMS syndrome - as per NHSE policy (Not a licensed indication).	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Lenalidomide	(Revlimid®)	Cancer - as per NHSE policy / Cancer Drugs Fund (Various indications).	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Lenalidomide ▼	(Revlimid® ▼)	Treatment of multiple myeloma in people who have received at least two prior therapies - as per NICE TA 171	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA171 - Jun 09
RED	Lenalidomide ▼	(Revlimid® ▼)	Treatment of myelodysplastic syndromes associated with an isolated deletion 5q cytogenetic abnormality - as per NICE TA 322	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA322 - Sep 14
RED	Lenalidomide plus dexamethasone	(Revlimid®)	Multiple myeloma after 1 treatment with bortezomib	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA586 - Jun 19
RED	Lenalidomide plus dexamethasone	(Revlimid®)	Previously untreated multiple myeloma	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA587 - Jun 19
RED	Lenalidomide with rituximab	REVLIMID®	With rituximab for previously treated follicular lymphoma as per TA627	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA627 - April 20

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Leniolisib	Joenja®	activated phosphoinositide 3-kinase delta syndrome in people 12 years and over	Prescribing to remain with the hospital or specialist service. No prescribing in primary care	HST33 – April 2025
RED	Lenograstim	(Granocyte®)	Barth Syndrome - Highly specialised criteria by Specialist centres only (Not a licensed indication).	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Lenograstim	(Granocyte®)	Reduction in the duration of neutropenia and the incidence of febrile neutropenia in patients treated with established cytotoxic chemotherapy for malignancy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Lenvatinib	(Lenvima®)	Untreated advanced, unresectable hepatocellular carcinoma in adults - as per NICE TA 551	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA551 - Dec 18
RED	Lenvatinib	Kisplyx®	with pembrolizumab (Keytruda®) for untreated advanced renal cell carcinoma	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA858 – Jan 2023
RED	Lenvatinib (with sorafenib)	(Lenvima® (used with Nexavar®))	Progressive, locally advanced or metastatic differentiated thyroid cancer - as per NICE TA 535	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA535 - Aug 18

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Lenvatinib ▼ (with everolimus)	(Kisplyx® ▼)	Previously treated advanced renal cell carcinoma in adults who have had 1 previous vascular endothelial growth factor (VEGF)-targeted therapy - as per NICE TA 498	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA498 - Jan 18
RED	Leronlimab		HIV	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
BLACK	Lesinurad ▼ (with a xanthine oxidase inhibitor	(Zurampic® ▼)	Chronic hyperuricaemia in people with gout whose serum uric acid is above the target level despite an adequate dose of a xanthine oxidase inhibitor alone	Not commissioned. No NHS prescribing in primary or secondary care	TA506 - Feb 18
RED	Letermovir	(Prevymis®)	Prophylaxis of cytomegalovirus (CMV) reactivation and disease in adult CMV-seropositive recipients of an allogeneic haematopoietic stem cell transplant (HSCT) - NHSE responsibility	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA591 - Jul 19
ADVICE	Letrozole	(Femara®)	Adjuvant treatment of early oestrogen-receptor-positive breast cancer in postmenopausal women	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	CG81 - Nov 06
ADVICE	Leuprorelin acetate	(Prostap®; Lutrate®)	Prostate cancer	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	NICE has not issued any guidance.

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
FULL SCA	Leuprorelin acetate	(Prostap® SR)	Management of endometriosis; pre-operative management of uterine fibroids	Shared Care Agreement Level 2 - Prescribe the drug and perform a more intense level of monitoring, e.g. quarterly	NG73 - Sep 17
Double Red	Levocetirizine	(Xyzal®)	Symptomatic relief of allergy such as hay fever, urticaria	Not recommended for routine use	NICE has not issued any guidance.
Double Red	Levodopa	(Generic / various)	Management of dystonia in adults with cerebral palsy - as per NG 119 - NICE Do Not Do (Not a licensed indication).	Not recommended for routine use	NG119 - Jan 19
RED	Levofloxacin (inhaled)	Quinsair®	Cystic fibrosis	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Levoketoconazole		Cushing's disease	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
BLACK	Lidocaine / Prilocaine Spray	(Fortacin®)	Primary premature ejaculation in adult men	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.
ADVICE	Lidocaine 5% medicated plasters	(Versatis®)	Localised neuropathic pain when first line systemic therapies are ineffective or not tolerated as per the local Neuropathic Pain Pathway	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation Specialist to prescribe first month supply	CG173 - Nov 13
RED	Lidocaine/Hydrocortisone mouthwash	n/a	restricted specialist prescribing only for mouth pain and inflammation in autoimmune diseases and oncology	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
BLACK	Lift products including juice shots and chew tabs	(previously Glucojuice)	hypoglycaemia	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.
RED	Linezolid	(Zyvox®)	Pneumonia, complicated skin and soft tissue infections caused by G+ve bacteria (Not a licensed indication).	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
NICE approved	Linzagolix	Yseltly®	moderate to severe sympto	NWICB are committed to fund positive NICE TAs. Awaiting clarification of place in pathway and commissioning arrangements. Further guidance to be issued when available.	TA996 – August 2024
BLACK	Liothyronine	(Generics)	Augmentation of an antidepressant - as per NICE CG 90 - Do Not Do (Not a licensed indication).	Not commissioned. No NHS prescribing in primary or secondary care	NG90 - Oct 09
BLACK	Liothyronine / L-tri-iodothyronine sodium (T3)	(Cytomel, Triostat (U.S.))	ROUTINE use of liothyronine as monotherapy or in combination with levothyroxine to treat hypothyroidism	Not commissioned. No NHS prescribing in primary or secondary care	RMOC guidance - June 2019
RED	Liothyronine / L-tri-iodothyronine sodium (T3)	(Cytomel, Triostat (U.S.))	Niche, short-term use for up to three months in patients awaiting surgery pre-cancer therapy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	RMOC guidance - June 2019
ADVICE	Liothyronine / L-tri-iodothyronine sodium (T3)	(Cytomel / Triostat (U.S.))	RESTRICTED use for long term treatment in rare cases of levothyroxine-induced liver injury, and are assessed by an NHS consultant as requiring treatment - as per RMOC guidance	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation Consultant/Specialist should prescribe for an initial period of 3 months for new patients.	RMOC guidance - June 2019

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
ADVICE	Liothyronine / L-tri-iodothyronine sodium (T3)	(Cytomel, Triostat (U.S.))	RESTRICTED use for patients in place of levothyroxine who continue to suffer with symptoms despite adequate biochemical correction, and are assessed by an NHS consultant as requiring treatment	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation Consultant/Specialist should prescribe for an initial period of 3 months for new patients.	RMOG guidance - June 2019
BLACK	Liothyronine/L-tri-iodothyronine sodium (T3)	(Cytomel, Triostat (US))	Resistant depression - as per RMOG guidance	Not commissioned. No NHS prescribing in primary or secondary care	RMOG guidance - June 2019
RED	Liothyronine/L-tri-iodothyronine sodium (T3)	(Cytomel, Triostat (US))	Patients with thyroid cancer following thyroid surgery, pre- and post radio iodine ablation	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	RMOG guidance - June 2019
RED	Liposomal cytarabine-daunorubicin	(Vyxeos®)	Untreated therapy-related acute myeloid leukaemia or acute myeloid leukaemia with myelodysplasia-related changes in adults - as per NICE TA 552	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA552 - Dec 18
ADVICE	Liraglutide	(Victoza®)	Adjunctive use in Type 2 diabetes	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	TA203 - Oct 10
BLACK	Liraglutide	(Saxenda® ▼)	managing obesity in people aged 12 to 17 years (terminated appraisal)	Not commissioned. No NHS prescribing in primary or secondary care	TA749 – December 2021

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
ADVICE	Liraglutide	(Victoza®)	1.8 mg dose for Type 2 diabetes mellitus	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	NG28 - June 2022
RED	Liraglutide (marketed as Saxenda®) ▼	(Saxenda® ▼)	Treatment of obesity	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA664 - Dec 2020
FULL SCA	Lisdexamfetamine Mesilate ▼	(Elvanse®)	Attention Deficit Hyperactivity Disorder in adults (if continued from childhood)	Shared Care Agreement Level 1 - Prescribe the drug and perform a higher level of monitoring, e.g. 6-monthly	NG87 - Mar 18
FULL SCA	Lisdexamfetamine Mesilate ▼ (currently under review)	(Elvanse® ▼)	ADHD in children aged 6 years and over, up to 17 years when response to previous methylphenidate treatment is considered clinically inadequate	Shared Care Agreement Level 3 - Prescribe the drug and perform significant monitoring including measurements such as height, weight, blood pressure and ECG	NG87 - Mar 18
RED	Lisocabtagene maraleucel	(liso-cel; Breyanzi®)	relapsed or refractory large B-cell lymphoma after first-line chemoimmunotherapy when a stem cell transplant is suitable	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA1048 – March 2025
BLACK	Lisocabtagene maraleucel		relapsed or refractory aggressive B-cell non-Hodgkin lymphoma	Not for prescribing in primary or secondary care	TA987 – July 2024
FULL SCA	Lithium	(Various - prescribe branded only)	Treatment and prophylaxis of mania, bipolar disorder, and recurrent depression; aggressive or self-mutilating behaviour	Shared Care Agreement Level 1 - Prescribe the drug and perform a higher level of monitoring, e.g. 6-monthly	NICE has not issued any guidance.

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
ADVICE	Lixisenatide	(Lyxumia®)	Treatment of Type 2 diabetes, HbA1c ≥ 58mmol/mol (7.5%), BMI ≥35 kg/m2	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	NICE has not issued any guidance.
RED	Lixivaptan (Unlicensed drug)	((unlicensed drug))	Hyponatraemia and other endocrine uses - NHSE responsibility	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Lomitapide	(Lojuxta®)	Homozygous familial hypercholesterolemia	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Lomustine	(CCNU®)	All indications	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
Double Red	Lonafarnib	(Sarasar®)	Hepatitis D infection (with ritonavir)	Not recommended for routine use	NICE has not issued any guidance.
RED	Loncastuximab tesirine	Zynlonta®	for treating relapsed or refractory diffuse large B-cell lymphoma and high-grade B-cell lymphoma after 2 or more systemic treatments	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA947 – January 2024
RED	Lopinavir (with ritonavir)	(Kaletra®)	HIV infection in combination with other antiretroviral drugs	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Lorlatinib	(Lorviqua®)	previously treated ALK-positive advanced non-small-cell lung cancer	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA628 – May 2020
BLACK	Lorlatinib	Lorviqua®	untreated ALK-positive advanced non-small-cell lung cancer	Not commissioned. No NHS prescribing in primary or secondary care	TA909 – July 2023

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
BLACK	Loxapine inhalation	(Adasuve®)	Acute agitation and disturbed behaviours associated with schizophrenia and bipolar disorder (terminated appraisal)	Not commissioned. No NHS prescribing in primary or secondary care	TA286 - May 14
	Lumacaftor-ivacaftor ▼	(Orkambi® ▼)	For treating cystic fibrosis in people 12 years and older who are homozygous for the F508del mutation in the cystic fibrosis transmembrane conductance regulator (CFTR) gene	Not commissioned. No NHS prescribing in primary or secondary care	TA398 - Jul 16
RED	Lumasiran	Oxlumo®	hyperoxaluria type 1	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	HST25 – April 2023
ADVICE	Lurasidone ▼	Latuda®	Third antipsychotic option for schizophrenia in adults aged 18 years and over	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	NICE has not issued any guidance.
ADVICE	Lurasidone ▼	Latuda®	Treatment of schizophrenia in adults aged 18 years and over - third-line option under the Early Intervention Treatment Pathway	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation Consultant/Specialist should prescribe for an initial period of 4 weeks.	NICE has not issued any guidance.
BLACK	Lurasidone ▼	Latuda®	Off-label use to manage hallucinations/aggression relating to dementia	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Luspatercept		Cancer	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
BLACK	Luspatercept	n/a	anaemia caused by beta-thalassaemia (terminated appraisal)	Not commissioned. No NHS prescribing in primary or secondary care	TA843 – November 2022
BLACK	Luspatercept	n/a	anaemia caused by myelodysplastic syndromes (terminated appraisal)	Not commissioned. No NHS prescribing in primary or secondary care	TA844 – November 2022
RED	Lusutrombopag	MULPLEO®	Treating thrombocytopenia in people with chronic liver disease needing a planned invasive procedure as per TA617	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA617 - Jan 20
RED	Lutetium(177Lu) oxodotreotide	(Lutathera®)	Unresectable or metastatic, progressive, well-differentiated (grade 1 or grade 2), somatostatin receptor-positive gastroenteropancreatic neuroendocrine tumours in adults - as per NICE TA 539	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA539 - Aug 18
BLACK	Lutetium-177 vipivotide tetraxetan	Pluvicto®	PSMA-positive hormone-relapsed metastatic prostate cancer after 2 or more treatments	Not commissioned. No NHS prescribing in primary or secondary care	TA930 – November 2023
RED	Macimorelin	(Macrilen®)	Growth hormone deficiency in adults (diagnostic test)	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Macitentan	(Opsumit®)	Pulmonary Arterial Hypertension	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
ADVICE	Magnesium lactate MR (prescribe as Magnalac SR 84mg tabs)	Magnalac SR 84mg tabs	Gitelman's syndrome	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	NICE has not issued any guidance
BLACK	Malaria prophylaxis	(Choroquine Malarone® Mefloquine Primaquine Proguan)	Malaria chemoprophylaxis	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.
RED	Mannitol (dry powder for inhalation)	(Bronchitol®)	(Adjunctive) treatment of cystic fibrosis (CF)	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA266 - Nov 12
RED	Maralixibat		Alagille syndrome	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Maraviroc	(Celsentri®)	HIV infection in combination with other antiretroviral drugs	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Maribavir	Livtency®	refractory cytomegalovirus infection after transplant	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA860 – Jan 2023
RED	Masitinib	(Masipro®)	Pancreatic cancer / GIST	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Mavacamten	Camzyos®	symptomatic obstructive hypertrophic cardiomyopathy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA913 – September 2023
RED	Mecasermin		Growth failure	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
BLACK	Melanorm-HC®	(Melanorm-HC®)	Melasma / Chloasma	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.
BLACK	Melatonin	SLENYTO®	Various indications	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.
BLACK	Melatonin	(Colonis®, Ceyesto®, Syncrodin®)	Jet lag (Not a licensed indication).	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.
FULL SCA	Melatonin	Standard release - Adaflex®, Ceyesto® Prolonged release - Circadin®, Film coated - Syncrodin® Melatonin 2mg modified release tablets (generic)	Management of sleep disorders in children. Melatonin should not be initiated in patients 18 years and above; however, treatment can be continued in adults if initiated when the patient was a child, providing the continued need for treatment is reviewed regularly and 6 monthly drug holidays introduced.	Prescribe the drug and perform a basic level of monitoring, e.g. a standard annual review	NICE has not issued any guidance.

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Melatonin liquid preparations	Various	Only for use in patients with fine bore enteral feeding tubes or where there is risk of tube occlusion. Only to be prescribed in secondary care. Not commissioned for use in primary care	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Melatonin Prolonged Release (Circadin)	(Circadin®)	Monotherapy in short term management of primary insomnia characterised by poor quality of sleep in patients aged 55 years or over whilst at the Julian Hospital, Norwich	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
BLACK	Melatonin prolonged-release tablets ▼ (Circadin) ▼	(Circadin® ▼)	Management of sleep disorders in adults aged 18-55	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.
BLACK	Melatonin prolonged-release tablets ▼ (Circadin) ▼	(Circadin® ▼)	Short term treatment of primary insomnia in adults aged 55 years and over	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.
BLACK	Melphalan	(Alkeran®)	haematological diseases before allogeneic haematopoietic stem cell transplant (terminated appraisal)	Not commissioned. No NHS prescribing in primary or secondary care	TA822 – September 2022
BLACK	Melphalan flufenamide	Alkeran®	with dexamethasone for treating relapsed or refractory multiple myeloma (terminated appraisal)	Not commissioned. No NHS prescribing in primary or secondary care	TA968 – April 2024
FULL SCA	Memantine	(Ebixa® (generics also available))	Moderate to severe dementia in Alzheimer's Disease - as per NICE TA 217	Prescribe the drug and perform a basic level of monitoring, e.g. a standard annual review	TA217 - Mar 11

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Mepolizumab	Nucala®	Severe eosinophilic asthma	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA671 – February 2021
BLACK	Mepolizumab	Nucala	eosinophilic granulomatosis with polyangiitis (terminated appraisal)	Not commissioned. No NHS prescribing in primary or secondary care	TA845 – November 2022
	Mepolizumab	Nucala	severe hypereosinophilic syndrome (terminated appraisal)	Not commissioned. No NHS prescribing in primary or secondary care	TA846 – November 2022
	Mepolizumab	Nucala	severe chronic rhinosinusitis with nasal polyps (terminated appraisal)	Not commissioned. No NHS prescribing in primary or secondary care	TA847 – November 2022
RED	Mepolizumab ▼	(Nucala® ▼)	Severe refractory eosinophilic asthma in adults - as per NICE TA 431	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA431 - Jan 17
BLACK	Meptazinol	Meptid	pain relief	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.
RED	Mercaptopurine	(Puri-Nethol®)	Acute leukaemias and chronic myeloid leukaemia	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
FULL SCA	Mercaptopurine 50mg tablets	(Puri-Nethol®)	Steroid-sparing effect in ulcerative colitis and Crohn's disease (Not a licensed indication).	Shared Care Agreement Level 2 - Prescribe the drug and perform a more intense level of monitoring, e.g. quarterly	NICE has not issued any guidance.
RED	Mesenchymal stem cells (Prochymal®)	(Prochymal®)	Acute Graft vs Host Disease (GVHD) & other indications	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
ADVICE	Methadone	various	pain relief in palliative care	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	NICE has not issued any guidance.
ADVICE	Methadone	various	refractory neuropathic pain, severe, iatrogenic opioid dependence patients, patients with chronic pain response to doses of strong opioid	Formulary - suitable for prescribing in primary care following specialist advice from a Pain Management Service	NICE has not issued any guidance.
ADVICE	Methenamine	Hiprex®	prophylaxis of uncomplicated lower urinary tract infections	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	NICE has not issued any guidance.
RED	Methotrexate (Oral and injectable))	()	High doses used in malignant disease	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
FULL SCA	Methotrexate (oral)	(Matrex® - generics are available)	Rheumatoid Arthritis, Juvenile Arthritis, Connective Tissue Disease, Felty's Syndrome, Psoriasis, Crohn's Disease and Sarcoidosis	Shared Care Agreement Level 3 - Prescribe the drug and perform significant monitoring including measurements such as height, weight, blood pressure and ECG	NG100 - Jul 18
FULL SCA	Methotrexate (Parenteral)	(Metoject/Nordimet pens; Zlatal syringes)	Rheumatoid Arthritis, Juvenile Arthritis, Connective Tissue Disease, Felty's Syndrome, Psoriasis, Crohn's Disease and Sarcoidosis	Shared Care Agreement Level 3 - Prescribe the drug and perform significant monitoring including measurements such as height, weight, blood pressure and ECG	NG100 - Jul 18

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Methoxy polyethylene glycol-eprotein beta ▼	(Mircera® ▼)	Symptomatic anaemia associated with Chronic Kidney Disease (dialysis patients only)	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	CG114 - Nov 11
BLACK	Methylnaltrexone bromide ▼	(Relistor® ▼)	Opioid-induced bowel dysfunction in palliative care - as per NICE TA 468 (terminated appraisal)	Not commissioned. No NHS prescribing in primary or secondary care	TA468 - Aug 17
FULL SCA	Methylphenidate HCl	(see Shared Care Agreement)	Narcolepsy in adults - All patients will be initiated by specialist centre in Cambridge. No new initiations in Norfolk and Waveney	Shared Care Agreement Level 1 - Prescribe the drug and perform a higher level of monitoring, e.g. 6-monthly	NICE has not issued any guidance.
FULL SCA	Methylphenidate HCl	(Various - see Shared Care Agreement)	ADHD in adults	Shared Care Agreement Level 1 - Prescribe the drug and perform a higher level of monitoring, e.g. 6-monthly	NG87 - Mar 18
FULL SCA	Methylphenidate HCl (currently under review)	(Various - see Shared Care Agreement)	Attention Deficit Hyperactivity Disorder in Children and Adolescents	Shared Care Agreement Level 3 - Prescribe the drug and perform significant monitoring including measurements such as height, weight, blood pressure and ECG	NG87 - Mar 18
Double Red	Methylphenidate Hydrochloride	(Various)	Chronic fatigue syndrome/myalgic encephalomyelitis (or encephalopathy) - as per NICE CG 53 - Do Not Do (Not a licensed indication).	Not recommended for routine use	CG53 - Aug 07
RED	Metreleptin	(Myalepta®)	Dyslipidaemia - Generalised lipodystrophy and partial lipodystrophy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	HST14 - Feb 2021

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Metyrapone	Metopirone®)	Cushing's syndrome	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Mexiletine (imported generic) unlicensed in the UK	<i>(Unlicensed generic product in the UK)</i>	Ventricular tachycardia only (Not a licensed indication).	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
BLACK	Mexiletine (imported generic) unlicensed in the UK	<i>(Unlicensed in the UK)</i>	NOT recommended for any indication (EXCEPT ventricular tachycardia - Hospital / Specialist use only) (Not a licensed indication).	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.
	Mexiletine (Namuscla®)	<i>(Namuscla®)</i>	NOT recommended for any indication (EXCEPT myotonia in adults with non-dystrophic myotonic disorders - as per NHSE commissioning policy - Hospital / Specialist use only)	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.
RED	Mexiletine (Namuscla®)	<i>(Namuscla® (licensed High Cost Drug))</i>	Treatment of myotonia in adults with non-dystrophic myotonic disorders (NDMD) - as per NHSE policy - specialist use only	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA748 – December 2021
Double Red	Micafungin	<i>(Mycamine®)</i>	Systemic fungal infections	Not recommended for routine use	NICE has not issued any guidance.
ADVICE	Midodrine	<i>(Bramox®, Midotense®)</i>	Treatment of severe orthostatic hypotension due to autonomic dysfunction - second line use after fludrocortisone	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	NICE has not issued any guidance.

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Midostaurin	(Rydapt®)	Untreated FLT3-mutation-positive acute myeloid leukaemia in adults - as per NICE TA 523	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA523 - July 2018
RED	Midostaurin	Rydapt®	advanced systemic mastocytosis	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA728 – September 2021
RED	Mifamurtide	(Mepact®)	Treatment of osteosarcoma	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA235 - Oct 11
RED	Migalastat ▼	(Galafold® ▼)	Fabry disease in people over 16 years of age with an amenable mutation, and only if enzyme replacement therapy (ERT) (with agalsidase alfa or agalsidase beta) would otherwise be offered - as per NICE HST4	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	HST4 - Feb 17
RED	Miglustat ▼	(Zavesca® ▼)	Mild to moderate type I Gaucher's disease for whom enzyme replacement therapy is unsuitable / Niemann-Pick	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
BLACK	Mineralocorticoids (such as fludrocortisone)	(Generic s are available)	Chronic fatigue syndrome/myalgic encephalomyelitis (or encephalopathy) - as per NICE CG 53 - Do Not Do (x).	Not commissioned. No NHS prescribing in primary or secondary care	CG53 - Aug 07
Double Red	Minocycline	(Acnamino®, Minocin®, Sebomin®)	Acne vulgaris	Not recommended for routine use	NICE has not issued any guidance.

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
BLACK	Minoxidil	(Regaine®)	Androgenetic alopecia	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.
RED	Mirikizumab	OmvoH®	moderately to severely active ulcerative colitis	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA925 – October 2023
BLACK	Mitapivat	Pyrukynd®	pyruvate kinase deficiency (terminated appraisal)	Not commissioned. No NHS prescribing in primary or secondary care	TA867 – February 2023
RED	Mitotane	(Lysodren®)	Adrenocortical carcinoma	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Mobocertinib	EXKIVITY®	EGFR exon 20 insertion mutation-positive advanced non-small-cell lung cancer after platinum-based chemotherapy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA855 – Jan 2023
BLACK	Modafinil	(Provigil®)	All unlicensed indications, including excess sleepiness in MS, Parkinson's Disease, obstructive sleep apnoea, or chronic shift work sleep disorder. (Not a licensed indication).	Not commissioned. No NHS prescribing in primary or secondary care	CG186 - Oct 14
FULL SCA	Modafinil	(see Shared Care Agreement)	Narcolepsy in adults - All patients will be initiated by specialist centre in Cambridge. No new initiations in Norfolk and Waveney	Shared Care Agreement Level 1 - Prescribe the drug and perform a higher level of monitoring, e.g. 6-monthly	NICE has not issued any guidance.
RED	Mogamulizumab	Poteligeo®	previously treated mycosis fungoides and Sézary syndrome	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA754 – December 2021

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Molgramostim (rhGM-CSF)	(Molgradex®)	Autoimmune (acquired) pulmonary alveolar proteinosis	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Momelotinib	()	Cancer	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Momelotinib	Omjjara®)	myelofibrosis-related splenomegaly or symptoms	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA957 – March 2024
BLACK	Monoamine oxidase inhibitors (MAOIs)	(Various)	Chronic fatigue syndrome/myalgic encephalomyelitis (or encephalopathy) - as per NICE CG 53 - Do Not Do (Not a licensed indication).	Not commissioned. No NHS prescribing in primary or secondary care	CG53 - Aug 07
BLACK	Mosunetuzumab	Lunsumio®	relapsed or refractory follicular lymphoma	Not commissioned. No NHS prescribing in primary or secondary care	TA892 – May 2023
RED	Motavizumab	(Numax®)	Respiratory syncytial virus (RSV) prophylaxis	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Moxifloxacin	(Avelox®)	Respiratory infection, including resistant TB	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
FULL SCA	Mycophenolate Mofetil	(Generic)	For use as an immunosuppressive agent in the treatment of connective tissue disease and other autoimmune conditions managed by Rheumatology, Gastroenterology, Dermatology, Neurology and Nephrology (Not a licensed indication).	Shared Care Agreement Level 2 - Prescribe the drug and perform a more intense level of monitoring, e.g. quarterly	NG100 - Jul 18
FULL SCA	Mycophenolate mofetil / Mycophenolic acid	(Arzip®, CellCept® / Myfortic®)	Immunosuppression in adult solid organ transplant patients - as per NICE TA 481	Shared Care Agreement Level 1 - Prescribe the drug and perform a higher level of monitoring, e.g. 6-monthly	TA481 - Oct 17
BLACK	Mycophenolate sodium	(Ceptava®, Myfortic®)	Initial treatment to prevent organ rejection in adults, children and young people having a kidney transplant as per NICE TAs 481 & 482	Not commissioned. No NHS prescribing in primary or secondary care	TA481 - Oct 17
BLACK	Mycophenolate sodium	(Ceptava®, Myfortic®)	Initial treatment to prevent organ rejection in adults, children and young people having a kidney transplant as per NICE TAs 481 & 482	Not commissioned. No NHS prescribing in primary or secondary care	TA482 - Oct 17
RED	Nabilone	(Nabilone®)	Pain and spasticity in Multiple Sclerosis (Not a licensed indication).	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
Double Red	N-acetylcysteine	()	Idiopathic pulmonary fibrosis (Not a licensed indication).	Not recommended for routine use	NG115 - Dec 18

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
ADVICE	Naftidrofuryl oxalate	(Praxilene® (generic available))	Treatment of intermittent claudication in people with peripheral arterial disease	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	TA223 - May 11
BLACK	Nail lacquer- Amorolfine & Ticonazole	(Loceryl® & Trosyl®)	Fungal nail infections	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.
RED	Nalmefene	(Selincro®)	Reduction of alcohol consumption in those aged ≥18 years with alcohol dependence that have a high drinking risk level, without physical withdrawal symptoms and who do not require immediate detoxification. Prescribing of treatments for alcohol misuse, including acamprosate and disulfiram (and also nalmefene) are the responsibility of the specialist since local alcohol misuse services are not commissioned from GPs practices	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA325 - Nov 14
RED	Naltrexone	(Nalorex® / Opizone®)	Alcohol misuse disorder - controlled drinking (continued use) (Not a licensed indication).	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
FULL SCA	Naltrexone	(Nalorex® / Opizone®)	Alcohol Use Disorder - maintenance of abstinence only (under an approved shared care agreement) (Not a licensed indication).	Prescribe the drug and perform a basic level of monitoring, e.g. a standard annual review	CG115 - Feb 11

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Naltrexone	(Nalorex® / Opizone®)	Management of opioid dependence. Commissioned by Public Health England/other health and social care departments eg Norfolk County Council - Specialist Prescribing Only. Not for GP prescribing	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA115 - Jan 07
BLACK	Naltrexone - low dose	(Several low strength options available)	Use of a Low Dose in Multiple Sclerosis (Not a licensed indication).	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.
BLACK	Naltrexone and Bupropion (Mysimba®) ▼	(Mysimba® ▼)	Treatment of obesity	Not commissioned. No NHS prescribing in primary or secondary care	TA494 - Dec 17
RED	Natalizumab ▼	(Tysabri® ▼)	Highly active relapsing-remitting multiple sclerosis in adults - as per NHS England policy and NICE TA 127	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA127 – August 2007, updated May 2024
BLACK	NBTXR-3	n/a	treating advanced soft tissue sarcoma	Not commissioned. No NHS prescribing in primary or secondary care	TA745 – November 2021
BLACK	Necitumumab ▼	(Portrazza® ▼)	Adults with locally advanced or metastatic epidermal growth factor receptor (EGFR)-expressing squamous non-small-cell lung cancer that has not been treated with chemotherapy - as per NICE TA 411	Not commissioned. No NHS prescribing in primary or secondary care	TA411 - Sep 16
BLACK	Needle free injection devices	(Insujet® and Injex®)	Insulin needle free injection device	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
Double Red	Nefopam	Acupan	pain relief	Not recommended for routine use.	NICE has not issued any guidance.
RED	Nelarabine	(Atriance®)	Cancer - lymphoblastic leukaemia - as per Cancer Drug Fund policy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Neratinib	(Nerlynx®)	Extended adjuvant treatment of hormone receptor-positive, HER2-positive early stage breast cancer after adjuvant trastuzumab	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA612 - Nov 19
RED	Nevirapine	(Viramune®)	HIV infection in combination with other antiretroviral drugs	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
BLACK	Nicotinic acid (niacin) and derivatives	(Various)	All indications including prevention in CVD, alone or added to a statin - as per NICE CG 181 - Do Not Do (Not a licensed indication).	Not commissioned. No NHS prescribing in primary or secondary care	CG181 - Jul 14
RED	Nilotinib	(Tasigna®)	Untreated chronic-phase Philadelphia-chromosome-positive chronic myeloid leukaemia in adults - as per NICE TA 426	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA426 - Dec 16
RED	Nilotinib ▼	(Tasigna® ▼)	Chronic myeloid leukaemia in adults resistant or intolerant to imatinib as per NICE TA 425	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA425 - Dec 16
RED	Nintedanib	Ofev®	progressive fibrosing interstitial lung diseases	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA747 – November 2021

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Nintedanib	(Vargatef®)	Ovarian cancer (Not a licensed indication).	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Nintedanib	Ofev®	Idiopathic pulmonary fibrosis when forced vital capacity is above 80% predicted	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA864 – February 2023
RED	Nintedanib ▼	(Vargatef® ▼)	Previously treated locally advanced, metastatic, or locally recurrent non small cell lung cancer - as per NICE TA 347	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA347 - Jul 15
RED	Nintedanib ▼	(Ofev® ▼)	Idiopathic pulmonary fibrosis - as per NICE TA 379	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA379 - Jan 16
RED	Niraparib	Zejula®	Maintenance treatment of advanced ovarian, fallopian tube and peritoneal cancer after response to first-line platinum-based chemo	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA673 – February 2021
RED	Niraparib	(Zejula®)	Maintenance treatment of relapsed, platinum-sensitive ovarian, fallopian tube and peritoneal cancer - as per NICE TA784	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA784 – April 2022
BLACK	Niraparib	Zejula®	with abiraterone acetate and prednisone for untreated hormone-relapsed metastatic prostate cancer (terminated appraisal)	Not commissioned. No NHS prescribing in primary or secondary care	TA1032 – January 2025

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Nitazoxanide	(Alinia®)	Viral Hepatitis C (Not a licensed indication).	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Nitisinone	(Nitisinone Dipharma®, Orfadin®)	Hereditary tyrosinemia type 1 (HT-1) in combination with dietary restriction of tyrosine and phenylalanine	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Nitisinone	(Nitisinone Dipharma®, Orfadin®)	Alkaptonuria	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Nitric oxide	()	Pulmonary Arterial Hypertension	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
BLACK	Nivolumab	(Opdivo®)	Locally advanced unresectable or metastatic urothelial cancer after platinum-containing chemotherapy - as per NICE TA 530	Not commissioned. No NHS prescribing in primary or secondary care	TA530 - Jul 18
RED	Nivolumab	(Opdivo®)	Adjuvant treatment of completely resected melanoma in adults with lymph node involvement or metastatic disease - as per NICE TA 558	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA558 - Jan 19
RED	Nivolumab	(Opdivo®)	advanced squamous non-small-cell lung cancer after chemotherapy as per TA655	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA655 – October 2020

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Nivolumab	Opdivo®	adjuvant treatment of completely resected melanoma with lymph node involvement or metastatic disease	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA684 – March 2021
RED	Nivolumab	Opdivo®	previously treated unresectable advanced or recurrent oesophageal cancer	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA707 – June 2021
RED	Nivolumab	Opdivo®	advanced non-squamous non-small-cell lung cancer after chemotherapy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA713 – July 2021
RED	Nivolumab	Opdivo®	recurrent or metastatic squamous cell carcinoma of the head and neck after platinum-based chemotherapy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA736 – October 2021
RED	Nivolumab	Opdivo®	with ipilimumab for untreated advanced renal cell carcinoma	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA780 – March 2022
RED	Nivolumab	Opdivo®	adjuvant treatment of invasive urothelial cancer at high risk of recurrence	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA817 – August 2022
RED	Nivolumab	Opdivo®	with ipilimumab for untreated unresectable malignant pleural mesothelioma	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA818 – August 2022

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Nivolumab	Opdivo®	with platinum- and fluoropyrimidine-based chemotherapy for untreated HER2-negative advanced gastric, gastro-oesophageal junction or oesophageal adenocarcinoma	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA857 – Jan 2023
RED	Nivolumab	Opdivo®	with fluoropyrimidine- and platinum-based chemotherapy for untreated unresectable advanced, recurrent, or metastatic oesophageal squamous cell carcinoma	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA865 – February 2023
BLACK	Nivolumab	Opdivo®	adjuvant treatment of completely resected melanoma at high risk of recurrence in people 12 years and over	Not commissioned. No NHS prescribing in primary or secondary care	TA980 – June 2024
RED	Nivolumab	Opdivo®	adjuvant treatment of resected oesophageal or gastro-oesophageal junction cancer	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA746 – November 2021
BLACK	Nivolumab	Opdivo	with cabozantinib for untreated advanced renal cell carcinoma (terminated appraisal) as per TA785	Not commissioned. No NHS prescribing in primary or secondary care	TA785 – April 2022
RED	Nivolumab	Opdivo®	chemotherapy for neoadjuvant treatment of resectable non-small-cell lung cancer	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA876 – March 2023

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Nivolumab	Opdivo®	plus ipilimumab for untreated unresectable or metastatic colorectal cancer with high microsatellite instability or mismatch repair deficiency	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA1065 – May 2025
RED	Nivolumab ▼	(Opdivo® ▼)	Advanced (unresectable or metastatic) melanoma - as per NICE TA 384	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA384 - Feb 16
RED	Nivolumab ▼	(Opdivo® ▼)	Previously treated advanced renal cell carcinoma in adults - as per NICE TA 417	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA417 - Nov 16
RED	Nivolumab ▼	(Opdivo® ▼)	Relapsed or refractory classical Hodgkin lymphoma in adults after autologous stem cell transplant and treatment with brentuximab vedotin - as per NICE TA 462	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA462 - Jul 17
RED	Nivolumab ▼	(Opdivo® ▼)	For previously treated local advanced or metastatic squamous non-small-cell lung cancer in adults after chemotherapy only if nivolumab is stopped at 2 years of uninterrupted treatment, or earlier in the event of disease progression - as per NICE TA 483	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA483 - Nov 17

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Nivolumab ▼	(Opdivo® ▼)	For previously treated locally advanced or metastatic non-squamous non-small-cell lung cancer in adults after chemotherapy, only if their tumours are PD L1 positive and nivolumab is stopped at 2 years of uninterrupted treatment, or earlier in the event of disease	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA484 - Nov 17
RED	Nivolumab ▼	(Opdivo® ▼)	Squamous cell carcinoma of the head and neck after platinum-based chemotherapy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA490 - Nov 17
RED	Nivolumab ▼ in combination with ipilimumab	(Opdivo® ▼ in combination with Yervoy®)	Advanced (unresectable or metastatic) melanoma in adults, only when the company provides ipilimumab with discount agreed under PAS - as per NICE TA 400	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA400 - Jul 16
RED	Nivolumab relatlimab	Opdualag®	untreated unresectable or metastatic melanoma in people 12 years and over	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA950 – February 2024
RED	Nivolumab with ipilimumab	Opdivo and Yervoy®	previously treated metastatic colorectal cancer with high microsatellite instability or mismatch repair deficiency	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA716 – July 2021
BLACK	Nivolumab with ipilimumab	Opdivo® with Yervoy®	and chemo for untreated metastatic non-small-cell lung cancer	Not commissioned. No NHS prescribing in primary or secondary care	TA724 – September 2021

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Nonacog alpha	()	Haemophilia - as per BCSH Guidelines	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Nonacog beta pegol	(Refixia®)	Haemophilia B (congenital factor IX deficiency).	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Nusinersen	(Spinraza®)		Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA588 - Jul 19
RED	Obeticholic acid ▼	(Ocaliva® ▼)	Primary biliary cholangitis - as per NICE TA 443	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA443 - Apr 17
RED	Obinutuzumab	(Gazyvaro®)	Untreated advanced follicular lymphoma - as per NICE TA 513	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA513 - Mar 18
RED	Obinutuzumab ▼	(Gazyvaro® ▼)	For untreated chronic lymphocytic leukaemia for adults who have comorbidities that make full-dose fludarabine based therapy unsuitable for them - as per NICE TA 343	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA343 - Jun 15

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Obinutuzumab ▼	(Gazyvaro® ▼)	(with bendamustine, then as maintenance) for follicular lymphoma in adults that did not respond or progressed during or up to 6 months after treatment with rituximab or a rituximab-containing regimen - as per NICE TA 472 Updated to TA629 in May 2020	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA629 – May 2020
BLACK	Occlusive dressings and dry bandages	(Various)	Treatment of infected atopic eczema in children - as per NICE CG 57 - Do Not Do	Not commissioned. No NHS prescribing in primary or secondary care	CG57 - Dec 07
RED	Ocrelizumab ▼	(Ocrevus® ▼)	Relapsing-remitting multiple sclerosis in adults in line with NICE TA 533	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA533 - Jul 18
RED	Ocrelizumab ▼	(Ocrevus® ▼)	Multiple sclerosis in adults - as per NHS England policy (under review post NICE 533)	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Ocriplasmin intravitreal injection ▼	(Jetrea® ▼)	Treatment of vitreomacular traction in adults - as per NICE TA 297	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA297 - Oct 13
RED	Octocog alfa	(Advate®, Kogenate Bayer®)	Haemophilia A (congenital factor VIII deficiency)	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Octreotide	(Sandostatin® - Generics are available)	Congenital hyperinsulinism (Not a licensed indication).	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
ADVICE	Octreotide	(Sandostatin®)	Reducing vomiting in terminal bowel obstruction (Not a licensed indication).	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	NICE has not issued any guidance.
RED	Octreotide	(Sandostatin®)	Carcinoid and other neuroendocrine tumours	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Octreotide	(Sandostatin®)	Acromegaly	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
Double Red	Octreotide (Oral) Octreolin®	(Octreolin®)	Acromegaly	Not recommended for routine use	NICE has not issued any guidance.
RED	Odevixibat	Bylvay	progressive familial intrahepatic cholestasis	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	HST17 - Feb 2022
RED	Ofatumumab	(Arzerra®)	For untreated chronic lymphocytic leukaemia in combination with chlorambucil or bendamustine - as per NICE TA 344	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA344 - Jun 15
BLACK	Ofatumumab	(Arzerra®)	Chronic lymphocytic leukaemia (with chemotherapy) - as per NICE TA 470 (terminated appraisal)	Not commissioned. No NHS prescribing in primary or secondary care	TA470 - Aug 17
RED	Ofatumumab	Kesimpta®	treating relapsing multiple sclerosis	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA699 – May 2021

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Ofatumumab ▼	(Arzerra® ▼)	Treatment of chronic lymphocytic leukaemia refractory to fludarabine and alemtuzumab	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA202 - Oct 10
ADVICE	Olanzapine	(Zalasta®, Zyprexa®, ZypAdhera® IM)	Schizophrenia - 1st line	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation Consultant should prescribe for an initial period of three months.	TA43 - Jun 02
ADVICE	Olanzapine	(Zalasta®, Zyprexa®, ZypAdhera® IM)	Maintenance in Bipolar Mania	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation Consultant should prescribe for an initial period of three month.	NICE has not issued any guidance.
BLACK	Olanzapine	(Zalasta®, Zyprexa®, ZypAdhera® IM)	For hallucinations and delusions in Parkinson's disease, where no cognitive impairment (Not a licensed indication).	Not commissioned. No NHS prescribing in primary or secondary care	NG71 -Sep 17
RED	Olaparib	LYNPARZA®	for maintenance treatment of relapsed platinum-sensitive ovarian, fallopian tube or peritoneal cancer as per TA620	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA620 - Jan 20
BLACK	Olaparib	N/A	maintenance treatment of BRCA mutation-positive metastatic pancreatic cancer after platinum-based chemotherapy (terminated appraisal)	Not commissioned. No NHS prescribing in primary or secondary care	TA750 – December 2021

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
BLACK	Olaparib	Lynparza®	previously treated BRCA mutation-positive hormone-relapsed metastatic prostate cancer	Not commissioned. No NHS prescribing in primary or secondary care	TA831 – October 2022
RED	Olaparib	Lynparza®	adjuvant treatment of BRCA mutation-positive HER2-negative high-risk early breast cancer after chemotherapy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA886 – May 2023
RED	Olaparib	Lynparza®	maintenance treatment of relapsed, platinum-sensitive ovarian, fallopian tube or peritoneal cancer after 2 or more courses of platinum-based chemotherapy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA908 – July 2023
RED	Olaparib	Lynparza®	with bevacizumab for maintenance treatment of advanced high-grade epithelial ovarian, fallopian tube or primary peritoneal cancer	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA946 – January 2024
RED	Olaparib	Lynparza®	with abiraterone for untreated hormone-relapsed metastatic prostate cancer	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA951 – February 2024
RED	Olaparib	N/A	BRCA mutation-positive HER2-negative advanced breast cancer after chemotherapy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA1040 – February 2025
RED	Olaparib	Lynparza®	previously treated BRCA mutation-positive hormone-relapsed metastatic prostate cancer	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA887 – May 2023

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Olaparib (replaced TA598)	(Lynparza®)	Maintenance treatment of BRCA mutation-positive advanced ovarian, fallopian tube or peritoneal cancer after response to first-line platinum-based chemotherapy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA962 – March 2024
RED	Olaparib (with bevacizumab)	Lynparza®	maintenance treatment of advanced ovarian, fallopian tube or primary peritoneal cancer	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA693 – April 2021
RED	Olaparib ▼	(Lynparza® ▼)	Maintenance treatment of relapsed, platinum-sensitive, BRCA mutation-positive ovarian, fallopian tube and peritoneal cancer after response to second-line or subsequent platinum-based chemotherapy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA381 - Jan 16
RED	Olaratumab ▼	(Lartruvo® ▼)	(in combination with duxorubicin) for treating advanced soft tissue sarcoma in adults - as per NICE TA 465	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA465 - Aug 17
RED	Olesoxime	()	Spinal muscular atrophy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Olipudase alfa	(Xenpozyme®)	Acid Sphingomyelinase deficiency	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
BLACK	Olipudase alfa	Xenpozyme®)	acid sphingomyelinase deficiency (Niemann–Pick disease) type AB and type B	Not commissioned. No NHS prescribing in primary or secondary care	HST32 – April 2025
RED	Olopatadine and Mometasone furoate nasal spray	Ryaltris®	moderate to severe seasonal and perennial rhinitis if monotherapy with antihistamine or corticosteroid is inadequate	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Omalizumab	(Xolair®)	Severe persistent allergic asthma in patients aged 12 years and over	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA133 - Nov 07
RED	Omalizumab	(Xolair®)	Treatment of severe persistent allergic asthma in children aged 6 to under 12 years	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA278 - Apr 13
RED	Omalizumab	(Xolair®)	For previously treated severe chronic spontaneous urticaria in adults and young people aged 12 years and over	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA339 - Jun 15
BLACK	Omalizumab	N/A	Chronic rhinosinusitis with nasal polyps (terminated appraisal)	Not commissioned. No NHS prescribing in primary or secondary care	TA678 – February 2021
BLACK	Omaveloxolone	n/a	Friedreich's ataxia in people 16 years and over (terminated appraisal)	Not commissioned. No NHS prescribing in primary or secondary care	TA1061 – May 2025
RED	Ombitasvir-paritaprevir-ritonavir ▼	(Viekirax® ▼)	Genotype 1 or 4 chronic hepatitis C in adults (with or without dasabuvir (Exviera®) as per NICE TA 365	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA365 - Nov 15

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
BLACK	Omeprazole oral solution unit dose sugar free 10mg/15ml and 20mg/15ml	n/a	Gastro protection	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.
RED	Onasemnogene abeparvovec	Zolgensma®	spinal muscular atrophy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	HST15 – July 2021, updated April 2023
RED	Onasemnogene abeparvovec	Zolgensma®	presymptomatic spinal muscular atrophy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	HST24 – April 2023
ADVICE	Ondansetron (generic plain tablets)	<i>(Generic plain tablets)</i>	Second line option in hyperemesis gravidarum (Not a licensed indication).	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	NICE has not issued any guidance.
ADVICE	Ondansetron (generic plain tablets)	<i>(Generic plain tablets)</i>	Drug-induced nausea and vomiting in palliative care (Not a licensed indication).	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	NICE has not issued any guidance.
RED	Ondansetron + other 5HT3 antagonists	<i>(Zofran®, various)</i>	Nausea & vomiting associated with chemotherapy and other hospital-led treatments	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
ADVICE	Opicapone ▼	<i>(Ongentys® ▼)</i>	Adjunctive therapy to preparations of levodopa/ DOPA decarboxylase inhibitors (DDCI) in adult patients with Parkinson's disease (PD) and end-of-dose motor fluctuations who cannot be stabilised on those combinations	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	NICE has not issued any guidance.

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Orlistat	(Xenical®)	Identification, assessment and management of overweight and obesity in children (Not a licensed indication).	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	CG189 - Nov 14
BLACK	Orphenadrine	(Generics available)	NICE Do Not Do - Dyskinesia and/or motor fluctuations in Parkinson's disease - as per NG 71	Not commissioned. No NHS prescribing in primary or secondary care	NG71 -Sep 17
Double Red	Oscillating Positive Expiratory Pressure devices	(eg Acapella/Flutter/Lung flute/Pari O-PEP/RCCornet)	Mucus clearance in Chronic Bronchitis, Bronchiectasis, Emphysema, Asthma, Cystic Fibrosis	Not recommended for routine use	NICE has not issued any guidance.
RED	Osilodrostat	()	Cushing's Disease	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Osimertinib	TAGRISSO®	Untreated EGFR mutation-positive non small-cell lung cancer as per TA654	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA654 – October 2020
RED	Osimertinib	Tagrisso®	adjuvant treatment of EGFR mutation-positive non-small-cell lung cancer after complete tumour resection	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA1043 – February 2025
RED	Osimertinib	Tagrisso®	with pemetrexed and platinum-based chemotherapy for untreated EGFR mutation-positive advanced non-small-cell lung cancer	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA1060 – May 2025

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Osimertinib ▼	(Tagresso® ▼)	Locally advanced or metastatic EGFR T790M mutation-positive non-small-cell lung cancer in adults whose disease has progressed only after first-line treatment with an EGFR tyrosine kinase inhibitor	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA416 - Oct 16
RED	Osimertinib ▼	(Tagresso® ▼)	treating EGFR T790M mutation-positive advanced non-small-cell lung cancer	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA653 – October 2020
Double Red	Ospemifene	(Senshio®)	Moderate to Severe Symptomatic Vulvar And Vaginal Atrophy (VVA) In Post-Menopausal Women Who Are Not Candidates For Local Vaginal Oestrogen Therapy	Not recommended for routine use	NICE has not issued any guidance.
BLACK	Ostomy underwear	(Various)	Any use other than for parastomal hernia assessed by a specialist	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.
ADVICE	Ostomy underwear	(Various)	Support following stoma surgery for parastomal hernia	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	NICE has not issued any guidance.
RED	Oxaliplatin	(Eloxatin®)	Colorectal cancer	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA93 - Aug 05

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
ADVICE	Oxcarbazepine	(Trileptal®)	Epilepsy	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	NICE has not issued any guidance.
BLACK	Oxycodone / Naloxone (Targinact®) ▼	(Targinact® ▼)	Pain / opioid-induced constipation	Not commissioned. No NHS prescribing in primary or secondary care	CG140 - July 12
BLACK	Ozanimod	Zeposia®	relapsing–remitting multiple sclerosis	Not commissioned. No NHS prescribing in primary or secondary care	TA706 – June 2021
RED	Ozanimod	Zeposia®	moderately to severely active ulcerative colitis	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA828 – October 2022
BLACK	Paclitaxel	(Abraxane®)	For untreated non-small-cell lung cancer (as albumin-bound nanoparticles with carboplatin) (terminated appraisal)	Not commissioned. No NHS prescribing in primary or secondary care	TA362 - Oct 15
RED	Paclitaxel	(Taxol®)	In combination with platinum or as monotherapy for treatment of advanced recurrent ovarian cancer	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA389 - Apr 16
RED	Paclitaxel	(Abraxane®)	As albumin-bound nanoparticles in combination with gemcitabine (Gemzar®) for previously untreated metastatic adenocarcinoma of the pancreas in adults - as per NICE TA 476	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA476 - Sep 17

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Paclitaxel	(Taxol®)	Non-small cell lung cancer	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
BLACK	Paclitaxel	(Taxol®)	Lymph node positive breast cancer	Not commissioned. No NHS prescribing in primary or secondary care	CG80 - Feb 09
RED	Paclitaxel albumin	(Abraxane®)	As monotherapy for metastatic breast cancer in patients who have not or are unlikely to tolerate first-line treatment with standard taxanes	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Pacritinib	(Enpaxiq®)	Myelofibrosis	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
BLACK	Padeliporfin	(Tookad®)	Untreated localised (unilateral, low-risk) prostate cancer - as per NICE TA 546	Not commissioned. No NHS prescribing in primary or secondary care	TA546 - Nov 18
RED	Palbociclib	Ibrance®	with fulvestrant for treating hormone receptor-positive, HER2-negative advanced breast cancer after endocrine therapy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA836 – October 2022
RED	Palbociclib ▼ (with an aromatase inhibitor)	(Ibrance® ▼)	Previously untreated, hormone receptor-positive, HER2-negative, locally advanced or metastatic breast cancer	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA495 - Nov 17
RED	Palforzia	n/a	peanut allergy in children and young people	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA769 – February 2022

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Paliperidone	Invega	mental health conditions - injections and oral formulations	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Palivizumab	(Synagis®)	Prevention of Respiratory Syncytial Virus (RSV) in infants	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Palovarotene		Fybrodysplasia ossificans progressiva	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
BLACK	Panitumumab	(Vectibix®)	Treatment of metastatic colorectal cancer after first-line chemotherapy	Not commissioned. No NHS prescribing in primary or secondary care	TA242 - Jan 12
RED	Panitumumab	(Vectibix®)	Previously untreated metastatic colorectal cancer (with chemo)	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA439 - Mar 17
RED	Panobinostat ▼	(Farydak® ▼)	Treatment of multiple myeloma (in combination with bortezomib and dexamethasone) after at least 2 previous treatments, including bortezomib and an immunomodulatory agent.	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA380 - Jan 16
RED	Para-aminosalicylic acid		Multi drug resistant TB	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Parathyroid hormone	(Natpar®)	Specialist endocrinology conditions	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
ADVICE	Paravit CF		for use when recommended by specialists for patients with cystic fibrosis	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	NICE has not issued any guidance.
RED	Parenteral nutrition		Intestinal failure	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Paricalcitol		Hyperparathyroidism	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Paritaprevir-ombitasvir-ritonavir ▼	(Viekirax®)	Genotype 1 or 4 chronic hepatitis C in adults (with or without dasabuvir (Exviera®) as per NICE TA 365	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA365 - Nov 15
BLACK	Paroxetine	(Generics available)	Depression in children and young people - as per NICE CG 28 "Do Not Do" (Not a licensed indication).	Not commissioned. No NHS prescribing in primary or secondary care	CG28 - Sep 17
RED	Pasireotide	(Signifor®)	Acromegaly	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Pasireotide	(Signifor®)	Cushing's Disease - as per NHS England Policy 16052/P	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
BLACK	Path Finder laser shoe attachment	(Path Finder)	Walking aid for freezing of gait in Parkinson's disease	Not commissioned. No NHS prescribing in primary or secondary care	MIB170 - Jan 19

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Patiiran		Amyloidosis	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
NICE approved	Patiromer	VELTASSA®	Hyperkalaemia	NWICB are committed to fund positive NICE TAs. Awaiting clarification of place in pathway and commissioning arrangements. Further guidance to be issued when available.	TA623 - Feb 20
RED	Patisiran	Onpattro	hereditary transthyretin amyloidosis	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	HST10 - Aug 2019
RED	Pazopanib	(Votrient®)	First-line treatment of advanced renal cell carcinoma (A licensed indication).	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA215 - Feb 11
BLACK	Pegaptanib sodium	(Macugen®)	Neovascular (wet) age-related macular degeneration	Not commissioned. No NHS prescribing in primary or secondary care	TA155 - Aug 08
RED	Pegaspargase ▼	(Oncaspar® ▼)	Acute lymphoblastic leukaemia in children, young people and adults only when they have untreated newly diagnosed disease	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA408 - Sep 16
RED	Pegcetacoplan	Aspaveli®	paroxysmal nocturnal haemoglobinuria	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA778 – March 2022

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Pegfilgrastim	(Neulasta®)	Reduction in the duration of neutropenia and the incidence of febrile neutropenia in patients treated with established cytotoxic chemotherapy for malignancy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Peginterferon alfa	(Pegasys®, PegIntron®, ViraferonPeg®)	Treatment of mild chronic hepatitis C (with ribavirin)	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA106 - Aug 06
RED	Peginterferon alfa	(Pegasys®, PegIntron®, ViraferonPeg®)	Treatment of chronic hepatitis C (with ribavirin)	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA200 - Sep 10
RED	Peginterferon alfa	(Pegasys® /ViraferonPeg®)	Treating children and young people with chronic hepatitis C (with ribavirin)	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA300 - Nov 13
RED	Peginterferon alfa-2a	(Pegasys, ViraferonPeg)	Chronic Hepatitis B	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	CG165 - Jun 13
RED	Peginterferon Beta-1a	(Plegridy®)	Treating relapsing–remitting multiple sclerosis as per TA624	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA624 - Feb 20
RED	Peginterferon Beta-1a	(Plegridy®)	Multiple sclerosis - as per NHS England policy SSC1534	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Peginterferon Lambda-1a	()	Hepatitis C .	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
BLACK	Pegloticase	(Krystexxa®)	Severe debilitating chronic tophaceous gout	Not commissioned. No NHS prescribing in primary or secondary care	TA291 - Jun 13
RED	Pegunigalsidase alfa	Elfabrio®	Fabry disease	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA915 – October 2023
RED	Pegvaliase		Phenylketonuria	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Pegvisomant	(Somavert®)	Acromegaly (where other treatments failed / not tolerated) - as per NHS England Policy 16050/P	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Pegylated liposomal doxorubicin	Caelyx	Cancer - as per NHS England / Cancer Drug Fund policy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
BLACK	Pegylated liposomal irinotecan	(Onivyde®)	For treating metastatic adenocarcinoma of the pancreas in adults whose disease has progressed after gemcitabine-based therapy	Not commissioned. No NHS prescribing in primary or secondary care	TA440 - Apr 17
BLACK	Pegylated liposomal irinotecan	n/a	in combination for untreated metastatic pancreatic cancer (terminated appraisal)	Not commissioned. No NHS prescribing in primary or secondary care	TA1052 – April 2025
BLACK	Pelvic floor muscle toning devices	(Incl. PelvicToner®, Kegel8®, Aquaflex®)	Pelvic floor muscle training	Not commissioned. No NHS prescribing in primary or secondary care	NG123 - Apr 19

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Pembrolizumab	(Keytruda®)	Locally advanced or metastatic urothelial carcinoma after platinum-containing chemotherapy - as per NICE TA 519	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA519 - Apr 18
RED	Pembrolizumab	(Keytruda®)	Untreated locally advanced or metastatic urothelial cancer when cisplatin is unsuitable - as per NICE TA 522	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA522 - Jul 18
RED	Pembrolizumab	(Keytruda®)	Untreated, metastatic, non-squamous non-small-cell lung cancer (NSCLC) in adults whose tumours have no epidermal growth factor receptor (EGFR) or anaplastic lymphoma kinase (ALK)-positive mutations - as per NICE TA 557	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA557 - Jan 19
BLACK	Pembrolizumab	(Keytruda®)	For treating recurrent or metastatic squamous cell carcinoma of the head and neck after platinum-based chemotherapy - as per NICE TA 570 (terminated appraisal)	Not commissioned. No NHS prescribing in primary or secondary care	TA570 - Mar 19
RED	Pembrolizumab	Keytruda®	untreated metastatic colorectal cancer with high microsatellite instability or mismatch repair deficiency	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA709 – June 2021
RED	Pembrolizumab	Keytruda®	adjuvant treatment of completely resected stage 3 melanoma	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA766 – February 2022

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Pembrolizumab	Keytruda®	adjuvant treatment of resected stage 2B or 2C melanoma	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA837 – October 2022
RED	Pembrolizumab	Keytruda®	plus chemotherapy with or without bevacizumab for persistent, recurrent or metastatic cervical cancer	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA885 – May 2023
RED	Pembrolizumab	Keytruda®	with lenvatinib for previously treated advanced or recurrent endometrial cancer	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA904 – June 2023
RED	Pembrolizumab	Keytruda®	previously treated endometrial, biliary, colorectal, gastric or small intestine cancer with high microsatellite instability or mismatch repair deficiency	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA914 – September 2023
RED	Pembrolizumab	Keytruda®	plus chemotherapy with or without bevacizumab for persistent, recurrent or metastatic cervical cancer	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA939 – December 2023
BLACK	Pembrolizumab	(Keytruda®)	with gemcitabine and cisplatin for untreated advanced biliary tract cancer	Not commissioned. No NHS prescribing in primary or secondary care	TA966 – April 2024
BLACK	Pembrolizumab	(Keytruda®)	Relapsed or refractory classical Hodgkin lymphoma in adults who have had autologous stem cell transplant and brentuximab vedotin - as per NICE TA 540	Not commissioned. No NHS prescribing in primary or secondary care	TA540 - Sept 18 - updated May 2024

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Pembrolizumab	(Keytruda®)	relapsed or refractory classical Hodgkin lymphoma in people 3 years and over	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA967 – May 2024
BLACK	Pembrolizumab	(Keytruda®)	with gemcitabine and cisplatin for untreated advanced biliary tract cancer (terminated appraisal)	Not commissioned. No NHS prescribing in primary or secondary care	TA966 – April 2024
RED	Pembrolizumab	Keytruda®	with platinum- and fluoropyrimidine-based chemotherapy for untreated advanced oesophageal and gastro-oesophageal junction cancer	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA737 – October 2021, updated Aug 2024
RED	Pembrolizumab	Keytruda®	platinum- and fluoropyrimidine-based chemotherapy for untreated advanced HER2-negative gastric or gastro-oesophageal junction adenocarcinoma	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA997 - August 2024
RED	Pembrolizumab	Keytruda®	adjuvant treatment of resected non-small-cell lung cancer	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA1037 – February 2025
BLACK	Pembrolizumab	N/A	untreated PD-L1-positive, locally advanced or metastatic urothelial cancer when cisplatin is unsuitable (terminated appraisal)	Not commissioned. No NHS prescribing in primary or secondary care	TA674 – February 2021

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Pembrolizumab	Keytruda®	with pemetrexed and platinum chemotherapy for untreated, metastatic, non-squamous non-small-cell lung cancer	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA683 – March 2021
BLACK	Pembrolizumab	Keytruda®	locally advanced or metastatic urothelial carcinoma after platinum-containing chemotherapy	Not commissioned. No NHS prescribing in primary or secondary care	TA692 – April 2021
RED	Pembrolizumab	Keytruda®	with carboplatin and paclitaxel for untreated metastatic squamous non-small-cell lung cancer	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA770 – February 2022
RED	Pembrolizumab	Keytruda®	relapsed or refractory classical Hodgkin lymphoma after stem cell transplant or at least 2 previous therapies	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA772 – February 2022
RED	Pembrolizumab	Keytruda®	plus chemotherapy for untreated, triple-negative, locally recurrent unresectable or metastatic breast cancer	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA801 - June 2022
RED	Pembrolizumab	Keytruda®	adjuvant treatment of renal cell carcinoma	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA830 – October 2022
RED	Pembrolizumab	Keytruda®	neoadjuvant and adjuvant treatment of triple-negative early or locally advanced breast cancer	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA851 – December 2022

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
BLACK	Pembrolizumab	Keytruda®	with trastuzumab and chemotherapy for untreated locally advanced unresectable or metastatic HER2-positive gastric or gastro-oesophageal junction adenocarcinoma	Not commissioned. No NHS prescribing in primary or secondary care	TA983 – June 2024
RED	Pembrolizumab	Keytruda®	with chemotherapy before surgery (neoadjuvant) then alone after surgery (adjuvant) for treating resectable non-small-cell lung cancer	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA1017 – November 2024
RED	Pembrolizumab ▼	(Keytruda® ▼)	Advanced melanoma after disease progression with ipilimumab in adults - as per NICE TA 357	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA357 - Oct 15
RED	Pembrolizumab ▼	(Keytruda® ▼)	Advanced (unresectable or metastatic) melanoma in adults not previously treated with ipilimumab as per NICE TA 366	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA366 - Nov 15
RED	Pembrolizumab ▼	(Keytruda® ▼)	Locally advanced or metastatic PD-L1-positive non-small-cell lung cancer after chemotherapy - as per NICE TA 428	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA428 - Jan 17
RED	Pembrolizumab ▼	(Keytruda® ▼)	Untreated PD-L1-positive metastatic non-small-cell lung cancer - as per NICE TA 447	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA447 - Jun 17

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Pembrolizumab ▼	(Keytruda®)	untreated PD-L1-positive metastatic non-small-cell lung cancer (NSCLC) in adults whose tumours express PD L1 (with at least a 50% tumour proportion score) and have no epidermal growth factor receptor- or anaplastic lymphoma kinase-positive mutations	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA531 - Jul 18
RED	Pembrolizumab ▼	(Keytruda® ▼)	with axitinib for untreated advanced renal cell carcinoma	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA650 – September 2020
RED	Pembrolizumab ▼	(Keytruda® ▼)	untreated metastatic or unresectable recurrent head and neck squamous cell carcinoma	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA661 – November 2020
RED	Pemetrexed	(Alimta®)	Treatment of malignant pleural mesothelioma	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA135 - Jan 08
RED	Pemetrexed	(Alimta®)	First-line treatment of non-small-cell lung cancer	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA181 - Aug 07
RED	Pemetrexed	(Alimta®)	Non-small-cell lung cancer - patients who have had prior chemotherapy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA181 - Aug 07
RED	Pemetrexed	(Alimta®)	Maintenance treatment of non-small-cell lung cancer	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA190 - Aug 17

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Pemetrexed	(Alimta®)	Maintenance treatment of locally advanced or metastatic non-squamous non-small-cell lung cancer (NSCLC) following induction therapy with pemetrexed and cisplatin	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA402 - Aug 16
RED	Pemigatinib	Pemaryze®	relapsed or refractory advanced cholangiocarcinoma with FGFR2 fusion or rearrangement	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA722 – August 2021
BLACK	Pen needle and remover (Unifine Pentips Plus)	(Unifine® Pentips® Plus)	Insulin administration	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.
RED	Penicillamine	(Distamine®)	Wilson's disease (as recommended by a specialist centre - Cambs Universty Hospitals /Addenbrooke's Hospital)	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Pentosan polysulfate sodium 100mg capsules	(Elmiron®)	Bladder pain syndrome / Interstitial Cystitis characterised by either glomerulations or Hunner's lesions in adults with moderate to severe pain, urgency and frequency of micturition	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
BLACK	Pentoxifylline (Oxpentifylline)	(Trental®)	Treatment of intermittent claudication in people with peripheral arterial disease	Not commissioned. No NHS prescribing in primary or secondary care	TA223 - May 11
RED	Peptide receptor radionucleotide therapy	()	Cancer	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
ADVICE	Perampanel	(Fycompa®)	Second line adjunctive treatment of patients over the age of 12 years with partial seizures with or without secondary generalisation	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation Consultant/Specialist responsible for the first script until the dose is stable.	NICE has not issued any guidance.
BLACK	Pergolide	()	First-line use in Parkinson's disease	Not commissioned. No NHS prescribing in primary or secondary care	NG71 -Sep 17
BLACK	Pergolide	()	Pharmacological neuroprotective therapy in Parkinson's disease (Not a licensed indication).	Not commissioned. No NHS prescribing in primary or secondary care	NG71 -Sep 17
BLACK	Perindopril arginine	(Coversyl® Arginine tablets)	All indications	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.
RED	Pertuzumab	(Perjeta®)	In combination with trastuzumab and chemotherapy for the neoadjuvant treatment of adults with HER2-positive, locally advanced, inflammatory or early-stage breast cancer at high risk of recurrence	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA424 - Dec 16
RED	Pertuzumab	(Perjeta®)	(with trastuzumab and docetaxel) for treating HER2-positive breast cancer - as per NICE TA 509	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA509 - Mar 18

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Pertuzumab	(Perjeta®)	For adjuvant treatment of HER2-positive early stage breast cancer in adults, only if they have lymph node-positive disease - as per NICE TA 569 (NHSE commissioning responsibility)	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA569 - Mar 19
BLACK	Phenothiazines	(Various)	NICE Do Not Do - Use in Parkinson's disease - as per NG 71 (Not a licensed indication).	Not commissioned. No NHS prescribing in primary or secondary care	NG71 -Sep 17
BLACK	Pholcodine linctus	generic	Cough suppressant	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance
RED	Phytomenadione (Vitamin K Nutritional Supplement)	NeoKay Oral Drops	Limited to use in preterm-born babies (<37 weeks gestation) who are cared for in NNUH (mainly NICU but will include some preterm babies cared for on postnatal ward) and who are discharged home breastfeeding	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Pibrentasvir	(Maviret® (Combi product with glecaprevir))	Chronic hepatitis C - as per NICE TA 499	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA499 - Jan 18

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
ADVICE	Pimecrolimus 1% Cream	(Elidel® cream)	Option for 2nd line treatment of moderate atopic eczema on the face and neck in children aged 2 to 16 years not controlled by topical steroids or where there is serious risk of important ADRs from further use of topical steroids - as per NICE CG 57	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	CG57 - Aug 04
Double Red	Pindolol	(Visken®)	Augmentation of an antidepressant - as per NICE CG 90 - Do Not Do (Not a licensed indication).	Not recommended for routine use	CG90 - Oct 09
RED	Pirfenidone	(Esbriet®)	Idiopathic Pulmonary Fibrosis	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA504 - Feb 18
BLACK	Pitolisant hydrochloride	Ozawade®	excessive daytime sleepiness caused by obstructive sleep apnoea	Not commissioned. No NHS prescribing in primary or secondary care	TA776 – March 2022
RED	Pixantrone ▼	(Pixuvri® ▼)	Monotherapy treatment of multiply relapsed or refractory aggressive non-Hodgkin's B-cell lymphoma	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA306 - Feb 14
ADVICE	Plantar pressure offloading devices	(Various)	Prevention and management of diabetic foot problems	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	NICE has not issued any guidance.
RED	Plerixafor	(Mozobil®)	Mobilisation of stem cells in Bone Marrow Transplant	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Polatuzumab vedotin	Polivy®	with rituximab and bendamustine - relapsed or refractory diffuse large B-cell lymphoma	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA649 – September 2020
RED	Polatuzumab vedotin	Polivy®	combination for untreated diffuse large B-cell lymphoma	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA874 – March 2023
BLACK	Pomalidomide	(Imnovid®)	With bortezomib and dexamethasone for treating relapsed or refractory multiple myeloma	Not commissioned. No NHS prescribing in primary or secondary care	TA602 - Sep 19
RED	Pomalidomide ▼	(Imnovid® ▼)	In combination with dexamethasone - treatment of relapsed and refractory multiple myeloma previously treated with lenalidomide and bortezomib as per NICE TA 427	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA427 - Jan 17
RED	Pomalidomide ▼	(Imnovid ▼)	Myelofibrosis (Not a licensed indication).	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Ponatinib ▼	(Iclusig® ▼)	Chronic myeloid leukaemia and acute lymphoblastic leukaemia in adults - as per NICE TA 451	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA451 - Jun 17
RED	Ponesimod	Ponvory®	relapsing–remitting multiple sclerosis	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA767 – February 2022

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Poractant alfa	(Curosurf®)	Respiratory distress syndrome	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Posaconazole	(Noxafil®)	Systemic fungal infections as per Trust Guidelines & NHSE policy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
BLACK	Potassium aminobenzoate (capsules and powder)	(Potaba®)	Peyronie's disease, Scleroderma	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.
BLACK	Potassium bicarbonate slow release–potassium citrate	n/a	distal renal tubular acidosis (terminated appraisal)	Not commissioned. No NHS prescribing in primary or secondary care	TA838 – November 2022
BLACK	Potassium hydroxide solution 5%	Molludab / Molutrex	Molluscum contagiosum (Not a licensed indication).	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.
BLACK	Pralsetinib	Gavreto®	RET fusion-positive advanced non-small-cell lung cancer	Not commissioned. No NHS prescribing in primary or secondary care	TA812 – August 2022
BLACK	Pramipexole	()	Pharmacological neuroprotective therapy in Parkinson's disease (Not a licensed indication).	Not commissioned. No NHS prescribing in primary or secondary care	NG71 -Sep 17
ADVICE	Pramipexole - Immediate Release	(Mirapexin®)	Idiopathic Parkinson's disease, alone (without levodopa) or in combination with levodopa	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation Consultant/Specialist responsible for the first script.	NICE has not issued any guidance.

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
ADVICE	Pramipexole - Prolonged Release	(Mirapexin® Prolonged Release)	Idiopathic Parkinson's disease - alone or with levodopa, for patients initiated on treatment prior to mid March 2011 only - no new patients to be started on Pramipexole PR after this date.	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation Consultant/Specialist responsible for all scripts.	NICE has not issued any guidance.
BLACK	Pramipexole - Prolonged Release	(Mirapexin® Prolonged Release)	Idiopathic Parkinson's disease, alone (without levodopa) or in combination with levodopa - Not commissioned from mid March 2011 onwards	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.
BLACK	Prasterone	INTRAROSA®	Vulvar and vaginal atrophy (in post-menopausal women with moderate to severe symptoms)	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.
BLACK	Prasugrel	(Efient®)	Targeted use in diabetics: In combination with aspirin, prevention of atherothrombotic events in patients with acute coronary syndrome (ACS) undergoing primary or delayed percutaneous coronary intervention (PCI)	Not commissioned. No NHS prescribing in primary or secondary care	TA182 - Oct 09

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
ADVICE	Prasugrel	(Efient®)	In combination with aspirin: Prevention of atherothrombotic events in patients with acute coronary syndrome (ACS) undergoing percutaneous coronary intervention (PCI) with known intolerance to clopidogrel or who have restenosed whilst on clopidogrel.	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	TA317 - Jul 14
BLACK	PredictSure-IBD - prognostic tool	(PredictSure-IBD)	Prediction of prognosis in Inflammatory bowel disease	Not commissioned. No NHS prescribing in primary or secondary care	MIB178 - Mar 19
ADVICE	Pregabalin	(Lyrica®; generic also available)	Generalised anxiety disorder (GAD) - for use only where all other options have failed.	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	NICE has not issued any guidance.
ADVICE	Pregabalin	(Lyrica®, generic also available)	Control of epilepsy	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	NICE has not issued any guidance.
Double Red	Pretomanid	()	Multi drug resistant tuberculosis (TB)	Not recommended for routine use	NICE has not issued any guidance.
BLACK	Pridinol	Myopridin	central and peripheral muscle spasms, lumbar pain, torticollis and general muscle pain in adults	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.
RED	Procarbazine	()	All indications	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
BLACK	Pro-gest cream	<i>(Pro-gest®)</i>	Hormone replacement therapy (Not a licensed indication).	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.
ADVICE	Progesterone (micronised) 400mg vaginal pessaries	Cyclogest	threatened miscarriage in those with confirmed intrauterine pregnancy with vaginal bleeding and history of previous miscarriage, or history of recurrent miscarriage	ADVICE - Hospital will stabilise patient, initiate treatment and give 2 weeks supply, then primary care will be asked to provide the remainder of the 16 week course	NG126 - Aug 2023
BLACK	Progestogens (oral)	<i>(Various)</i>	(given during the luteal phase only) for treatment of Heavy Menstrual Bleeding - as per NICE CG 44 - Do Not Do	Not commissioned. No NHS prescribing in primary or secondary care	CG144 - Aug 16
BLACK	Prolonged release oxycodone (Onexila XL)	<i>(Onexila® XL)</i>	Analgesia	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.
BLACK	Prontoderm bacterial decolonisation foam/nasal gel	<i>(Prontoderm® foam and Prontoderm® nasal gel)</i>	Topical decolonisation of MRSA carriers	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.
RED	Propafenone	Arythmol	cardiovascular indications	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
Double Red	Prosource Jelly	<i>(Prosource® Jelly)</i>	hypoproteinaemia	Not recommended for routine use.	NICE has not issued any guidance.
RED	Protein C concentrate	<i>(Ceprotrin®)</i>	Congenital protein C deficiency - as per B(C)SH Guidelines	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Protein Kinase Inhibitors	<i>(Various)</i>	Endocrinology non-malignant conditions (Not a licensed indication).	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Prothrombin Complex	(Beriplex®, Octaplex®)	As per B(C)SH Guidelines	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
ADVICE	Pyridostigmine	Mestinon®	Myasthenia gravis	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	NICE has not issued any guidance.
ADVICE	Quetiapine	(Generics are available)	Schizophrenia - 1st line	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation Consultant should prescribe for an initial period of three months	CG82 - Mar 09
BLACK	Quetiapine	(Seroquel)	Generalised anxiety disorder (Not a licensed indication).	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.
RED	Quizartinib	Vanflyta®	induction, consolidation and maintenance treatment of newly diagnosed FLT3-ITD-positive acute myeloid leukaemia	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA1013 – October 2024
BLACK	Rabbit anti-human thymocyte immunoglobulin	(Thymoglobuline®)	INITIAL treatments to prevent organ rejection in adults, children and young people having a kidney transplant - as per NICE TAs 481 and 482 (Not a licensed indication).	Not commissioned. No NHS prescribing in primary or secondary care	TA481 - Oct 17

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
BLACK	Rabbit anti-human thymocyte immunoglobulin	(Thymoglobuline®)	INITIAL treatments to prevent organ rejection in adults, children and young people having a kidney transplant - as per NICE TAs 481 and 482 (Not a licensed indication).	Not commissioned. No NHS prescribing in primary or secondary care	TA482 - Oct 17
RED	Radium-223 dichloride ▼	(Xofigo® ▼)	Hormone-relapsed prostate cancer with bone metastases.	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA412 - Sep 16
BLACK	Raloxifene	(Evista®)	Primary prevention of osteoporotic fragility fractures in postmenopausal women	Not commissioned. No NHS prescribing in primary or secondary care	TA160 - Oct 08
ADVICE	Raloxifene	(Evista®)	Chemoprophylaxis for no more than 5 years for pre- or post-menopausal women at either high or moderate risk of developing breast cancer (Not a licensed indication).	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	CG164 - Jun 13
RED	Raltegravir	(Isentress®)	HIV infection in combination with other antiretroviral drugs - as per BHIVA Guidelines	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Raltitrexed	(Tomudex®)	Advanced colorectal cancer	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA93 - Aug 05
BLACK	Ramucirumab	(Cyramza®)	Unresectable hepatocellular carcinoma after sorafenib (terminated appraisal)	Not commissioned. No NHS prescribing in primary or secondary care	TA609 - Oct 19

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
BLACK	Ramucirumab (with erlotinib)	(Cyramza® ▼)	untreated EGFR-positive metastatic non-small-cell lung cancer (terminated appraisal)	Not commissioned. No NHS prescribing in primary or secondary care	TA635 – June 2020
	Ramucirumab ▼	(Cyramza® ▼)	Advanced gastric cancer or gastro-oesophageal junction adenocarcinoma previously treated with chemotherapy.	Not commissioned. No NHS prescribing in primary or secondary care	TA378 - Jan 16
	Ramucirumab ▼ in combination with doxetaxel	(Cyramza® ▼)	Locally advanced or metastatic non-small-cell lung cancer in adults whose disease has progressed after platinum-based chemotherapy	Not commissioned. No NHS prescribing in primary or secondary care	TA403 - Aug 16
	Ranibizumab	(Lucentis®)	treating diabetic retinopathy (terminated appraisal)	Not commissioned. No NHS prescribing in primary or secondary care	TA637 – June 2020
RED	Ranibizumab	(Lucentis®)	Treatment of Wet Age-related Macular Degeneration (AMD) as part of a treat and extend regimen in line with the locally commissioned treatment pathway	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NG82 - Jan 18
RED	Ranibizumab	(Lucentis®)	Treatment of Diabetic Macular Oedema (DMO) as part of a treat and extend regimen in line with the locally commissioned treatment pathway	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Ranibizumab	(Lucentis®)	Visual impairment due to diabetic macular oedema	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA274 - Feb 13 updated Oct 2023

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Ranibizumab	(Lucentis®)	Neovascular (wet) age-related macular degeneration	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA155 - Aug 08 - updated May 2024
RED	Ranibizumab	(Lucentis®)	Treatment of visual impairment caused by macular oedema secondary to retinal vein occlusion (RVO)	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA283 - May 13 - updated May 2024
RED	Ranibizumab	(Lucentis®)	Choroidal neovascularisation associated with pathological myopia	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA298 - Nov 13 - updated May 2024
ADVICE	Ranolazine	(Ranexa®)	Adjunctive use in stable angina unresponsive to other treatments	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	CG126 - Jul 11
ADVICE	Rasagiline	(Azilect®)	Idiopathic Parkinson's Disease	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	NICE has not issued any guidance.
BLACK	Rasagiline	(Generics available)	NICE Do Not Do - Pharmacological neuroprotective therapy in Parkinson's disease - as per NG 71 (Not a licensed indication).	Not commissioned. No NHS prescribing in primary or secondary care	NG71 -Sep 17
RED	Rasburicase	(Fasturtec®)	Prophylaxis & treatment of acute hyperuricaemia to prevent renal failure in patients with high tumour burden who are at risk of tumour lysis syndrome	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Ravulizumab	Ultomiris®	paroxysmal nocturnal haemoglobinuria	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA698 – May 2021
RED	Ravulizumab	Ultomiris®	Parxysmal nocturnal haemoglobinuria	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
BLACK	Ravulizumab	N/A	generalised myasthenia gravis	Not commissioned. No NHS prescribing in primary or secondary care	TA940 – December 2023
BLACK	Ravulizumab	N/A	AQP4 antibody-positive neuromyelitis optica spectrum disorder	Not commissioned. No NHS prescribing in primary or secondary care	TA941 – December 2023
RED	Ravulizumab	Ultomiris®	treating atypical haemolytic uraemic syndrome	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA710 – June 2021
RED	Raxibacumab		Inhaled anthrax	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
BLACK	Reagent Pad (Neuropad)	(Neuropad)	Diagnostic test for peripheral neuropathy	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.
BLACK	Recombinant human parathyroid hormone	Natpar® s/c injection	Hypoparathyroidism as per TA625 (terminated appraisal)	Not commissioned. No NHS prescribing in primary or secondary care	TA625 - Mar 20
RED	Refenalin		Prevention of delayed graft function	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
BLACK	Regorafenib	(Stivarga®)	Previously treated advanced hepatocellular carcinoma - as per NICE TA 514	Not commissioned. No NHS prescribing in primary or secondary care	TA514 - Mar 18

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Regorafenib	(Stivarga®)	Advanced unresectable hepatocellular carcinoma in adults who have had sorafenib - as per NICE TA 555	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA555 - Jan 19
RED	Regorafenib	Stivarga®	previously treated metastatic colorectal cancer	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA866 – February 2023
BLACK	Regorafenib ▼	(Stivarga® ▼)	Metastatic colorectal cancer after treatment for metastatic disease	Not commissioned. No NHS prescribing in primary or secondary care	TA334 - Feb 15
RED	Regorafenib ▼	(Stivarga® ▼)	Previously treated unresectable or metastatic gastrointestinal stromal tumours	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA488 - Nov 17
RED	Relugolix	Orgovyx®	hormone-sensitive prostate cancer	Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA995 – August 2024
NICE approved	Relugolix–estradiol–norethisterone	Ryeqo®	symptoms of endometriosis	NWICB are committed to fund positive NICE TAs. Awaiting clarification of place in pathway and commissioning arrangements. Further guidance to be issued when available.	TA1057 – April 2025
ADVICE	Relugolix–estradiol–norethisterone acetate	Ryeqo®	moderate to severe symptoms of uterine fibroids	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation Consultant should prescribe for an initial period of three months	TA832 – October 2022
RED	Remdesivir	Veklury	for use in hospitalised patients with covid-19 who meet the criteria defined in the NICE TA	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA971 – May 2024

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
ADVICE	Repaglinide	PRANDIN®	To treat CF patients who have diabetes, as an alternative to insulin	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	NICE has not issued any guidance.
RED	Reparixin		Prevention of delayed graft function	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Reslizumab ▼	(Cinqaero® ▼)	Treatment of severe eosinophilic asthma inadequately controlled in adults despite maintenance therapy with high-dose inhaled corticosteroids plus another drug - as per NICE TA 479	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA479 - Oct 17
BLACK	RESPeRATE®	(RESPeRATE®)	Device used to lower BP by changing breathing rates	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.
RED	Reveglucosidase alfa	()	Pompe Disease	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Ribavirin	(Copegus®, Rebetol®)	Chronic hepatitis C	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA200 - Sep 10
RED	Ribociclib (with fulvestrant)	Kisqali®	hormone receptor-positive, HER2-negative advanced breast cancer after endocrine therapy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA687 – March 2021

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Ribociclib with fulvestrant	(Kisqali®)	Hormone receptor-positive, HER2-negative, advanced breast cancer	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA593 - Aug 19
RED	Ribociclib ▼ (with an aromatase inhibitor)	(Kisqali® ▼)	Previously untreated, hormone receptor-positive, HER2-negative, locally advanced or metastatic breast cancer	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA496 - Dec 17
ADVICE	Rifampicin	various	Non-TB related mycobacterium infections	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation Consultant responsible for the first script.	NICE has not issued any guidance.
RED	Rifaximin	(Targaxan®)	Treatment and prophylaxis of secondary hepatic encephalopathy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA337 - Mar 15
BLACK	Rifaximin	(Xifaxanta®)	For treatment of traveller's diarrhoea	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.
BLACK	Rifaximin	((Targaxan® / Xifaxanta®))	Chronic diarrhoea in G-I disorders (including Crohn's disease, Ulcerative Colitis, Diverticular disease, IBS, recurrent C. diff infection, small intestinal bacterial overgrowth)	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.
RED	Rifaximin	((Targaxan® / Xifaxanta®))	UC with pouchitis only when other treatment options have failed	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.

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RED	Rigosertib	(Estybon®)	Refractory myelodysplastic syndromes (MDS), high-risk / Pancreatic cancer	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Rilpivirine	(Edurant®)	HIV infection in combination with other antiretroviral drugs	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
FULL SCA	Riluzole	(Rilutek®)	Amyotrophic Lateral Sclerosis (Motor Neurone Disease)	Prescribe the drug and perform a basic level of monitoring, e.g. a standard annual review	NICE has not issued any guidance.
ADVICE	Rimegepant	Vydura	preventing migraine	Specialist will initiate and provide the first 12 weeks of medication to the patient.	TA906 - July 2023
RED	Rimeporide		Duchenne muscular dystrophy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Riociguat ▼	(Adempas® ▼)	Treatment chronic thromboembolic Pulmonary Hypertension in adults	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
BLACK	Ripretinib	Qinlock®	advanced gastrointestinal stromal tumour after 3 or more treatments	Not commissioned. No NHS prescribing in primary or secondary care	TA881 – May 2023
RED	Risankizumab	(Skyrizi®)	Psoriasis	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA596 - Aug 19
RED	Risankizumab	(Skyrizi®)	active psoriatic arthritis after inadequate response to DMARDs	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA803 – July 2022

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Risankizumab	Skyrizi®	previously treated moderately to severely active Crohn's disease	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA888 – May 2023
RED	Risankizumab	Skyrizi®	moderately to severely active Crohn's disease	Red/Hospital - Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA998 – August 2024
RED	Risdiplam	Evrysdi®	spinal muscular atrophy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA755 – December 2021 updated Dec 2023
RED	Risperidone	(<i>Risperdal® (tablets)</i>)	Unresponsive conduct disorder in ADHD	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	CG158 - Mar 13
RED	Risperidone (Depot injection) ▼	(<i>Risperdal Consta® ▼</i>)	Schizophrenia and other psychoses in patients tolerant to risperidone by mouth.	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Ritlecitinib	Litfulo®	severe alopecia areata in people 12 years and over	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA958 – March 2024
RED	Ritonavir	(<i>Norvir®</i>)	HIV infection in combination with other antiretroviral drugs - as per BHIVA Guidelines	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Ritonavir-paritaprevir-ombitasvir ▼	(<i>Viekirax®</i>)	Genotype 1 or 4 chronic hepatitis C in adults (with or without dasabuvir (Exviera®) as per NICE TA 365	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA365 - Nov 15

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Rituximab	(MabThera®)	Relapsed or refractory stage III or IV follicular non-Hodgkin's Lymphoma	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA137 - Feb 08
RED	Rituximab	(MabThera®)	Option for first-line treatment of chronic lymphocytic leukaemia	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA174 - Jul 09
RED	Rituximab	(MabThera®)	Treatment of relapsed or refractory chronic lymphocytic leukaemia	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA193 - Jul 10
RED	Rituximab	(MabThera®)	1st-line maintenance treatment of follicular non-Hodgkin's Lymphoma	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA226 - Jun 11
RED	Rituximab	(MabThera®)	1st-line treatment of stage III-IV follicular lymphoma	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA243 - Jan 12
RED	Rituximab	(Mabthera®)	Splenic B cell non Hodgkin's Lymphoma (Not a licensed indication).	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Rituximab	(MabThera®, Rixathon®, Truxima®)	Option for treatment of Immune (Idiopathic) Thrombocytopenic Purpura (ITP) (Not a licensed indication).	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Rituximab	(MabThera)	Splenic marginal zone (B cell non Hodgkin) lymphoma	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Rituximab	(<i>MabThera</i> ®)	Aggressive non-Hodgkin's lymphoma	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Rituximab	(<i>MabThera</i> ®)	Connective tissue disease (Not a licensed indication).	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Rituximab	(<i>MabThera</i> ®)	Treatment for relapsing Steroid Sensitive Nephrotic Syndrome (SSNS) in children (Not a licensed indication).	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Rituximab	(<i>MabThera</i> ®)	Treatment of Steroid Resistant Nephrotic Syndrome (SRNS) in paediatric patients (Not a licensed indication).	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Rituximab	(<i>MabThera</i> ®)	Membranous nephropathy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Rituximab	(<i>MabThera</i> ®)	Focal segmental glomerulosclerosis	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Rituximab	(<i>MabThera</i> ®)	Myasthenia gravis	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Rituximab	(<i>MabThera</i> ®)	Anti-nmdar autoimmune encephalitis	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Rituximab	(MabThera®)	Dermatomyositis and polymyositis (adults)	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Rituximab	(MabThera & biosimilars)	Steroid sensitive nephrotic syndrome - as per NHS England policy E03/P/c and b (Not a licensed indication).	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Rituximab - subcutaneous injection	(MabThera®)	Follicular Lymphoma maintenance - NHS England policy Lymphoma maintenance	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Rituximab (biosimilar)	(Truxima®, Rixathon®)	Rheumatoid arthritis - with MTX after DMARDs including a TNF inhibitor	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA195 - Aug 10
RED	Rituximab (biosimilar)	(Truxima®, Rixathon®)	Anti-neutrophil cytoplasmic antibody-associated (ANCA) vasculitis (Not a licensed indication).	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA308 - Mar 14
RED	Rituximab (biosimilar)	(Truxima®, Rithaxon®)	RhF +ve Poly-Articular Juvenile Idiopathic Arthritis (Not a licensed indication).	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Rituximab (biosimilar)	(Truximab®, Rithaxon®)	treatment of autoimmune haemolytic anaemia (AIHA) in adults	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Rituximab (biosimilar)	(Truximab®, Rithaxon®)	ANCA associated vasculitis - as per NICE TA 308 and NHS England policy A13/P/a (Not a licensed indication).	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Rituximab (biosimilar)	(Truxima®, Rixathon®)	Eradication of inhibitors in patients with Acquired Haemophilia (2nd line option) (Not a licensed indication).	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Rituximab (biosimilar)	(Truxima®, Rixathon®)	Nephritis (Not a licensed indication).	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Rituximab (biosimilar)	(Truxima®, Rixathon®)	Connective tissue disease interstitial lung disease (Not a licensed indication).	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Rituximab (biosimilar)	(Truxima®, Rixathon®)	Primary Sjogren's syndrome (PSS) (Not a licensed indication).	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Rituximab (biosimilar)	(Truxima®, Rixathon®)	Chronic inflammatory demyelinating polyneuropathy (Not a licensed indication).	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Rituximab (biosimilar)	(Truximab®, Rithaxon®)	Immunoglobulin G4 related disease - as per NHS England policy (Not a licensed indication).	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Rituximab (biosimilar)	(Truximab®, Rithaxon®)	Myositis - as per NHS England Policy 16035/P (Not a licensed indication).	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Rituximab (biosimilar)	(Truximab®, Rithaxon®)	Pemphigus Vulgaris - as per NHS England policy 16035/P (Not a licensed indication).	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Rituximab (biosimilar)	(Truxima®, Rixathon®)	Cytopenia complicating primary immunodeficiency - as per NHS England policy 16044/P (Not a licensed indication).	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Rituximab (biosimilar)	(Truximab®, Rithaxon®)	Systemic Lupus Erythematosus (SLE) - as per NHS England Policy A13/PS/a (Not a licensed indication).	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Rituximab (biosimilar)	(Truximab®, Rithaxon®)	Neuromyelitis optica (Not a licensed indication).	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Rituximab (biosimilar)	(Truximab®, Rithaxon®)	Graft versus host disease - as per Policy NHS England Policy 16069/P (Not a licensed indication).	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Rituximab (biosimilar)	(Truximab®, Rithaxon®)	ABO-incompatible kidney transplants - as per specification - Specialist centres only (Not a licensed indication).	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Rivaroxaban	(Xarelto®)	Prevention of adverse outcomes after acute management of acute coronary syndrome in people with elevated cardiac biomarkers (as per NICE TA 335)	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA335 - Mar 15
ADVICE	Rivaroxaban	(Xarelto®)	For preventing atherothrombotic events in people with coronary or peripheral artery disease	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	TA607 - Oct 19

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
Double Red	Rivaroxaban	(Xarelto®)	Combined use with dual antiplatelet therapy in people who otherwise need anticoagulation, who have had an MI - as per NICE CG 172 - Do Not Do (Not a licensed indication).	Not recommended for routine use	CG172 - Nov 13
RED	Rivaroxaban ▼	(Xarelto® ▼)	Prevention of venous thromboembolism in adults after total hip or total knee replacement (as per NICE TA 170)	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA170 - Apr 09
ADVICE	Rivaroxaban ▼	(Xarelto® ▼)	Treatment of deep vein thrombosis (except calf vein DVT) and prevention of recurrent DVT in specified patient groups	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation Consultant should prescribe for an initial period of 3 weeks.	TA261 - Jul 12
ADVICE	Rivaroxaban ▼	(Xarelto® ▼)	Treatment and prevention of pulmonary embolism as per NICE TA 261 (where warfarin is not appropriate - see Full Guidance)	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	TA261 - Jul 12
RED	Rivaroxaban ▼	(Xarelto® ▼)	Treatment of calf vein deep vein thrombosis (as per NICE TA 261)	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA261 - Jul 12
FULL SCA	Rivastigmine	(Exelon®)	Mild to moderate dementia in Alzheimer's Disease - as per NICE TA 217	Prescribe the drug and perform a basic level of monitoring, e.g. a standard annual review	TA217 - Mar 11

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
ADVICE	Rivastigmine	(Use cost-effective generic oral preparations)	Mild to moderate dementia in Parkinson's disease	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation Consultant/Specialist should recommend, but GP can take responsibility for all scripts 6 weeks.	NICE has not issued any guidance.
RED	Rivipansel sodium		Hepatic veno-occlusive disease	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Rivipansel sodium		Sickle Cell Disease	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
ADVICE	Roflumilast ▼	(Daxas® ▼)	Adjunct to bronchodilators for maintenance in chronic obstructive pulmonary disease in adults with chronic bronchitis and a history of frequent exacerbations - as per NICE 461	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation Consultant/Specialist should prescribe for an initial period of one month.	TA461 - Jul 17
RED	Romiplostim	(Nplate®)	Chronic immune (idiopathic) thrombocytopenic purpura	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA221 - Apr 11
RED	Romosozumab	EVENITY®	severe osteoporosis	Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA791 – May 2022
RED	Ropeginterferon alfa 2b	()	Hepatitis C	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
ADVICE	Ropinirole	(Adartrel®, Requip®)	Parkinson's Disease	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	NICE has not issued any guidance.
BLACK	Ropinirole	()	Pharmacological neuroprotective therapy in Parkinson's disease (Not a licensed indication).	Not commissioned. No NHS prescribing in primary or secondary care	NG71 -Sep 17
ADVICE	Rotigotine	(Neupro® patches)	Monotherapy for early and adjunct to levodopa in advanced stage Parkinson's disease	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	NICE has not issued any guidance.
BLACK	Rotigotine	()	Pharmacological neuroprotective therapy in Parkinson's disease (Not a licensed indication).	Not commissioned. No NHS prescribing in primary or secondary care	NG71 -Sep 17
BLACK	Rotigotine	n/a	restless legs syndrome	Not commissioned. No NHS prescribing in primary or secondary care	NICE CKS - July 2022
RED	Roxadustat	()	Dialysis induced anaemia	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Roxadustat	Evrenzo®	symptomatic anaemia in chronic kidney disease	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA807 – July 2022
BLACK	RT300 (functional electrical stimulation system)	(RT300)	Spinal cord injury rehabilitation - as per MIB 169	Not commissioned. No NHS prescribing in primary or secondary care	MIB169 - Jan 19
BLACK	Rubefacients	(Various -)	Osteoarthritis - as per NICE CG 59 - Do Not Do	Not commissioned. No NHS prescribing in primary or secondary care	CG59 - Feb 08

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Rucaparib	(Rubraca®)	Maintenance of relapsed platinum-sensitive ovarian, fallopian tube or peritoneal cancer	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA1007 – September 2024
RED	Rucaparib	Rubraca®	maintenance treatment of advanced ovarian, fallopian tube and peritoneal cancer after response to first-line platinum-based chemotherapy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA1055 – April 2025
BLACK	Rupatadine	(Generic)	Symptomatic relief of allergic rhinitis and urticaria	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.
RED	Rurioctocog alfa pegol		Haemophilia A	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Ruxolitinib	(Jakavi®)	Disease-related splenomegaly or symptoms in adults with myelofibrosis - as per NICE TA 386	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA386 - Mar 16
BLACK	Ruxolitinib	Jakavi	chronic graft versus host disease refractory to corticosteroids (terminated appraisal)	Not commissioned. No NHS prescribing in primary or secondary care	TA840 – November 2022
RED	Ruxolitinib	(Jakavi®)	Polycythaemia vera	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA921 – October 2023
RED	Ruxolitinib	Jakavi	acute graft versus host disease that responds inadequately to corticosteroids in people 12 years and over	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA1054 – April 2025

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Ruzasvir		Hepatitis C	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Sacituzumab govitecan	Trodelvy®	unresectable triple-negative advanced breast cancer after 2 or more therapies	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA819 – August 2022
RED	Sacrosidase		Congenital sucrase isomaltase deficiency	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
FULL SCA	Sacubitril / Valsartan ▼	(Entresto® ▼)	Symptomatic chronic heart failure with reduced ejection fraction in adults	Shared Care Agreement Level 1 - Prescribe the drug and perform a higher level of monitoring, e.g. 6-monthly	TA388 - Apr 16
ADVICE	Safinamide	(Xadago®)	Idiopathic Parkinson's disease where existing oral agents are contra-indicated or have failed to improve motor fluctuations/dyskinesia	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	NICE has not issued any guidance.
BLACK	Safinamide ▼	(Xadago® ▼)	NICE Do Not Do - Pharmacological neuroprotective therapy in Parkinson's disease - as per NG 71 (Not a licensed indication).	Not commissioned. No NHS prescribing in primary or secondary care	NG71 -Sep 17
RED	Sapropterin	Kuvan®	hyperphenylalaninaemia in phenylketonuria	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA729 – September 2021
RED	Sapropterin (Tetrahydrobiopterin (BH4, THB))	(Kuvan® ▼)	Management of Phenylketonuria (PKU) only during pregnancy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Sapropterin (Tetrahydrobiopterin (BH4, THB))	(Kuvan®)	Treatment of children with phenylketonuria (PKU)	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Sargramostim (GM-CSF)	(Leukine® (import))	Antibody-positive pulmonary alveolar proteinosis	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Sarilumab	Kevzara®	Critically ill patients with COVID-19 pneumonia (adults))	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	ES34 – January 2021
RED	Sarilumab ▼	(Kevzara® ▼)	Treatment of moderate to severe active rheumatoid arthritis in adults (with and without methotrexate) - as per NICE 485	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA485 - Nov 17
BLACK	Satralizumab	Enspryng	preventing relapses in neuromyelitis optica spectrum disorders	Not commissioned. No NHS prescribing in primary or secondary care	TA960 – March 2024
RED	Sebelipase alfa	(Kanuma®)	Lysosomal acid lipase deficiency	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Sebelipase alfa	Kanuma®	Wolman disease	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	HST30 – January 2024
BLACK	Sebelipase alfa	Kanuma®	lysosomal acid lipase deficiency that is not Wolman disease	Not commissioned. No NHS prescribing in primary or secondary care	TA961 – March 2024
RED	Secukinumab	Cosentyx®	non-radiographic axial spondyloarthritis	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA719 – July 2021

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Secukinumab	(Cosentyx®)	Paediatric indications (where adult TA available) (Not a licensed indication).	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Secukinumab	Cosentyx®	moderate to severe hidradenitis suppurativa	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA935 – December 2023
RED	Secukinumab	Cosentyx®	moderate to severe plaque psoriasis in children and young people	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA734 – October 2021
RED	Secukinumab ▼	(Cosentyx® ▼)	Treatment of moderate to severe plaque psoriasis - as per NICE TA 350 and the local treatment pathway	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA350 - Jul 15
RED	Secukinumab ▼	(Cosentyx® ▼)	Active ankylosing spondylitis after treatment with non-steroidal anti-inflammatory drugs or TNF-alpha inhibitors - as per NICE TA 407 and local treatment pathway	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA407 - Sep 16
RED	Secukinumab ▼ (with or without MTX)	(Cosentyx® ▼)	Active psoriatic arthritis after inadequate response to DMARDs - as per NICE TA 445 and local treatment pathway	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA445 - May 17
RED	Selective internal radiation therapies	QuiremSpheres®	hepatocellular carcinoma	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA688 – March 2021, updated July 2024
RED	Selective internal radiation therapies	QuiremSpheres®	unresectable advanced hepatocellular carcinoma	Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA985 – July 2024

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
BLACK	Selegiline	(<i>Eldepryl®</i> , <i>Zelapar®</i>)	NICE Do Not Do - Pharmacological neuroprotective therapy in Parkinson's disease - as per NG 71 (Not a licensed indication).	Not commissioned. No NHS prescribing in primary or secondary care	NG71 -Sep 17
RED	Selexipag	(<i>Uptravi®</i>)	Pulmonary arterial hypertension - as per NHSE policy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Selinexor	Nexpovio®	with dexamethasone for treating relapsed or refractory multiple myeloma after 4 or more treatments	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA970 – May 2024
RED	Selinexor	Nexpovio®	with bortezomib and dexamethasone for previously treated multiple myeloma	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA974 – May 2024
RED	Selpercatinib	Retsevmo®	untreated RET fusion-positive advanced non-small-cell lung cancer	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA911 – July 2023
RED	Selpercatinib	Retsevmo®	advanced thyroid cancer with RET alterations	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA1038 – February 2025
RED	Selpercatinib	Retsevmo®	advanced thyroid cancer with RET alterations untreated with a targeted cancer drug in people 12 years and over	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA1039 – February 2025
RED	Selpercatinib	Retsevmo®	previously treated RET fusion-positive advanced non-small-cell lung cancer	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA1042 – February 2025

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Selumetinib	Koselugo	symptomatic and inoperable plexiform neurofibromas associated with type 1 neurofibromatosis in children aged 3 and over	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	HST20 - May 2022
ADVICE	Semaglutide	(Ozempic®)	For adults with insufficiently controlled type 2 diabetes mellitus as adjunct to diet and exercise - monotherapy (if metformin inappropriate) or in combination with other antidiabetic drugs as per local Diabetes Formulary guidance - 3rd line option	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	NICE has not issued any guidance.
RED	Semaglutide	Wegovy®	managing overweight and obesity (adults)	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care Only to be supplied via Tier 3 service	TA875 – March 2023
BLACK	Semaglutide	Wegovy®	managing overweight and obesity in young people aged 12 to 17 years	Not commissioned. No NHS prescribing in primary or secondary care	TA910 – July 2023
ADVICE	Semaglutide oral preparations	Rybelsus®	Diabetic patients where GLP1 analogue is indicated but oral preparation is more suitable	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	NICE has not issued any guidance.
RED	Setmelanotide	Imcivree	obesity caused by LEPR or POMC deficiency	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	HST21 - July 2022

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Setmelanotide	Imcivree®	obesity and hyperphagia in Bardet-Biedl syndrome	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	HST31 – May 2024
Double Red	Setrobuvir	()	Viral Hepatitis C - as per NHSE policy	Not recommended for routine use	NICE has not issued any guidance.
RED	Setrusumab		Osteogenesis imperfecta	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
ADVICE	Sevelamer	(Renagel®)	Hyperphosphataemia in chronic renal failure in patients on haemodialysis	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	NICE has not issued any guidance.
RED	Sialic acid	()	Myopathy - as per NHSE policy (Not a licensed indication).	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Sildenafil	(Generic)	Connective tissue diseases (Not a licensed indication).	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
BLACK	Sildenafil	(Generic)	Use of regular, daily doses for penile rehabilitation in prostate cancer/post radical prostatectomy	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.
ADVICE	Sildenafil (generic plain tablets only)	(Generic plain tablets)	Digital ulceration in severe secondary Raynaud's phenomenon associated with systemic sclerosis (Not a licensed indication).	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation GP can initiate and take responsibility for all scripts 1 month or stable dose.	NICE has not issued any guidance.

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RED	Sildenafil (Revatio®)	(Revatio®)	Pulmonary Arterial Hypertension	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Silicone gel sheet dressing	various	Reduce and prevent hypertrophic and keloid scarring	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
BLACK	Silk garments	(Various)	Dermatology	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.
RED	Simeprevir	(Olysio®)	Treatment of genotypes 1 and 4 chronic hepatitis C	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA331 - Feb 15
BLACK	Simeprevir	(Olysio®)	For treating genotype 1 or 4 chronic hepatitis C in combination with sofosbuvir (Sovaldi®) (terminated appraisal)	Not commissioned. No NHS prescribing in primary or secondary care	TA361 - Oct 15
RED	Simeprevir / Peginterferon + Ribavirin	(Olysio® / Various)	Hepatitis C - as per NHSE policy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Siponimod	Mayzent®	secondary progressive multiple sclerosis	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA656 – November 2020
BLACK	Sipuleucel-T	(Provenge®)	Treatment of adults with asymptomatic or minimally symptomatic metastatic hormone relapsed prostate cancer	Not commissioned. No NHS prescribing in primary or secondary care	TA332 - Mar 15

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
BLACK	Sirolimus	(Rapamune®)	Initial treatment to prevent organ rejection in adults, children and young people having a kidney transplant as per NICE TAs 481 & 482	Not commissioned. No NHS prescribing in primary or secondary care	TA481 - Oct 17
BLACK	Sirolimus	(Rapamune®)	Initial treatment to prevent organ rejection in adults, children and young people having a kidney transplant as per NICE TAs 481 & 482 (Not commissioned. No NHS prescribing in primary or secondary care	TA482 - Oct 17
FULL SCA	Sirolimus	(Rapamune®)	Immunosuppression in adult solid organ transplantation - as per NICE TA 481	Shared Care Agreement Level 1 - Prescribe the drug and perform a higher level of monitoring, e.g. 6-monthly	TA481 - Oct 17
BLACK	Sirolimus	Rapamune®	facial angiofibroma caused by tuberous sclerosis complex in people 6 years and over (terminated appraisal)	Not commissioned. No NHS prescribing in primary or secondary care	TA972 - May 2024
RED	Sirukumab	(Plivensia®)	Paediatric indications (where adult TA available) as per NHSE policy (Not a licensed indication).	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
BLACK	Smart One (portable spirometer)	(Smart One (portable spirometer))	Measuring lung function	Not commissioned. No NHS prescribing in primary or secondary care	MIB96 - Feb 17
BLACK	Smartinhaler	(Smartinhaler)	Asthma	Not commissioned. No NHS prescribing in primary or secondary care	MIB90 - Jan 17

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
BLACK	Sodium Chloride (Hypertonic 3-7%) as a mucolytic	(Various including MucoClear®, Nebusal®)	Prevent exacerbations in people with stable chronic obstructive pulmonary disease (COPD) - as per NICE CG 101 - Do Not Do (x).	Not commissioned. No NHS prescribing in primary or secondary care	CG101 - Jul 10
RED	Sodium Chloride (Hypertonic 3-7%) for inhalation	(MucoClear®, Nebusal®)	Clearance of mucosal secretions in Cystic Fibrosis and Bronchiectasis	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
Double Red	Sodium chloride nasal appliance	(Sterimar isotonic & hypertonic, Aqua maris)	Nasal congestion and sinusitis	Not recommended for routine use	NG79 - Oct 17
ADVICE	Sodium Clodronate	(Bonefos®/Loron®)	Bone pain associated with bony metastases	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation Consultant/Specialist responsible for the first script.	NICE has not issued any guidance.
RED	Sodium oxybate	(Xyrem®)	Cataplexy associated with narcolepsy in adults aged ≥19 years (under specialist supervision) (A licensed indication). Updated July 2020 following PAC guidance in March 2020	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Sodium oxybate	(Xyrem®)	Management of narcolepsy with cataplexy in children aged <19 years (specialist centre use only – commissioned by NHS England) (Not a licensed indication).	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Sodium Phenylbutyrate	(Ammonaps®, Pheburane®)	Acute hyperammonaemia due to urea cycle disorders (specialist use only)	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
Double Red	Sodium valproate ▼ / semisodium ▼	(Epilim®, Episenta®, Depakote®)	Augmentation of an antidepressant - as per NICE CG 90 - Do Not Do (Not a licensed indication).	Not recommended for routine use	CG90 - Oct 09
RED	Sodium zirconium cyclosilicate (now includes moderate as well as severe)	(Lokelma®)	moderate (K>6.0) and severe (K>6.5) hyperkalaemia in adults - emergency care	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA599 - Sep 19
ADVICE	Sodium zirconium cyclosilicate (updated from black)	(Lokelma®)	Hyperkalaemia in adults - persistent use	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation Consultant should initiate treatment	TA599 - Sep 19
RED	Sofosbuvir ▼	(Sovaldi® ▼)	Treatment of chronic hepatitis C in adults - as per NICE TA 330 and NHSE policy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA330 - Feb 15
RED	Sofosbuvir-velpatasvir ▼	(Epclusa® ▼)	Chronic hepatitis C in adults - as per NICE TA 430 and NHSE policy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA430 - Jan 17
RED	Sofosbuvir-velpatasvir-voxilaprevir ▼	(Vosevi® ▼)	Chronic hepatitis C in adults	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA507 - Feb 18
BLACK	Solriamfetol	Sunosi®	excessive daytime sleepiness caused by obstructive sleep apnoea	Not commissioned. No NHS prescribing in primary or secondary care	TA777 – March 2022

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Solriamfetol	Sunosi®	excessive daytime sleepiness caused by narcolepsy as per TA758	Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA758 – January 2022
RED	Somatrogon	Ngenla®	growth disturbance in children and young people aged 3 years and over	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA863 – February 2023
RED	Somatropin (Growth hormone)	<i>(Various (lowest cost preparation))</i>	Adults: Profound growth hormone deficiency	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA64 - Aug 03
RED	Somatropin (Growth hormone)	<i>(Various - Omnitrope®, Genotropin®, Norditropin®)</i>	Children with growth failure with growth hormone deficiency, Turner syndrome, Prader-Willi syndrome and chronic renal insufficiency - as per NICE TA 188 and East of England PAC policy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA188 - Jul 10
RED	Somatropin (Growth Hormone)	<i>(Various - Omnitrope®, Genotropin®, Norditropin®)</i>	Growth disturbance in children born small for gestational age - as per NICE TA 188 and East of England PAC policy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA188 - Jul 10
RED	Sorafenib	<i>(Nexavar®)</i>	Treatment of advanced hepatocellular carcinoma as per NICE TA 474 / treatment of papillary or follicular thyroid cancer	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA474 - Sep 17

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Sorafenib (with lenvatinib) ▼	(Nexavar® (with Lenvima®) ▼)	Treatment of progressive, locally advanced or metastatic differentiated thyroid cancer (papillary, follicular or Hürthle cell) in adults whose disease does not respond to radioactive iodine - as per NICE TA 535	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA535 - Aug 18
BLACK	Sotagliflozin	(Generics)	Type 1 diabetes as per NICE TA622	Not commissioned. No NHS prescribing in primary or secondary care	TA622 - Feb 20
RED	Sotorasib	Lumykras®	previously treated KRAS G12C mutation-positive advanced non-small-cell lung cancer	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA781 – March 2022
RED	Sotrovimab	(Xevudy®)	for use in patients with covid-19	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA878 – March 2023, updated June 2023
BLACK	Spatone	(Spatone Iron-Plus sachets / products)	Iron supplement	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.
BLACK	SQ HDM SLIT	Acarizax	allergic asthma caused by house dust mites	Not commissioned. No NHS prescribing in primary or secondary care	TA1045 – March 2025
AI	SQ HDM SLIT	Acarizax	people aged 12 to 65 years	Consultant / Specialist to initiate and retain until stable. Prescribing will switch to primary care as per commissioning agreement or when clinically appropriate. First month of treatment to be provided by specialist allergy clinic	TA1045 – March 2025

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
ADVICE	SSRI antidepressants	(Various)	Use for depression in children and young people (only with talking therapies) - as per NICE CG 28 (Not a licensed indication).	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	CG28 - Mar 15
BLACK	St Mark's solution (ready made)	(Ready made sachets from unlicensed specials)	Oral rehydration solution (ORS) which is used in the management of Short Bowel Syndrome (Not a licensed indication).	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.
RED	Stiripentol	(Diacomit®)	For SCN1A related and Severe Myoclonic Epilepsies in Infancy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
BLACK	Strimvelis	(Strimvelis)	Adenosine deaminase deficiency - severe combined immunodeficiency (ADA-SCID) - as per NICE HST 7	Not commissioned. No NHS prescribing in primary or secondary care	HST7 - Feb 18
RED	Sucroferric oxyhydroxide	(Velporo®)	Control serum phosphorus in dialysis	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
FULL SCA	Sulfasalazine	(Generics are available)	Inflammatory Arthritis and Inflammatory Bowel Disease	Shared Care Agreement - Level 3 during year 1, Level 2 after year 1	NG100 - Jul 18
BLACK	Sumatriptan (as Imigran RADIS®)	(Imigran RADIS®)	Acute migraine; cluster headaches	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.
RED	Sunitinib	(Sutent®)	First-line for advanced and/or metastatic renal cell carcinoma	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA169 - Mar 09

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
BLACK	Sunitinib	(Sutent®)	Second-line treatment of advanced and/or metastatic renal cell carcinoma	Not commissioned. No NHS prescribing in primary or secondary care	TA178 - Aug 09
RED	Sunitinib	(Sutent®)	Treatment of gastrointestinal stromal tumours	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA179 - Sep 09
RED	Sunitinib	(Sutent®)	Unresectable or metastatic neuroendocrine tumours in people with progressive disease in adults - as per NICE TA 449	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA449 - Jun 17
RED	Susoctocog alfa	(Obizur®)	Antihaemorrhagics, blood coagulation factor VIII	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Sutimlimab		Primary cold agglutinin disease	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Tabalumab	()	Systemic Lupus Erythematosus (SLE)	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
BLACK	Tabelecleucel	n/a	post-transplant lymphoproliferative disorder caused by the Epstein-Barr virus (terminated appraisal)	Not commissioned. No NHS prescribing in primary or secondary care	TA923 – October 2023

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
FULL SCA	Tacrolimus (oral)	<i>(Generic option to be used)</i>	Induction of remission, in combination with steroids, in patients with mild-moderate Ulcerative Colitis which is unresponsive to steroids and 5-ASA preparations (Not a licensed indication).	Shared Care Agreement Level 1 - Prescribe the drug and perform a higher level of monitoring, e.g. 6-monthly	CG166 - Jun 13
FULL SCA	Tacrolimus (oral)	<i>(Various)</i>	Immunosuppression in adult solid organ transplantation - as per NICE TA 481	Shared Care Agreement Level 1 - Prescribe the drug and perform a higher level of monitoring, e.g. 6-monthly	TA481 - Oct 17
RED	Tacrolimus (oral) - immediate release	<i>(Various)</i>	Immunosuppressive therapy to prevent organ rejection in kidney transplant in children and young people - as per NICE TA 482	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA482 - Oct 17
BLACK	Tacrolimus (oral) - prolonged release	<i>(Advagraf®, Envarsus®)</i>	Initial treatments to prevent organ rejection in adults, children and young people having a kidney transplant - as per NICE TAs 481 and 482	Not commissioned. No NHS prescribing in primary or secondary care	TA481 - Oct 17
BLACK	Tacrolimus (oral) - prolonged release	<i>(Advagraf®, Envarsus®)</i>	Initial treatments to prevent organ rejection in adults, children and young people having a kidney transplant - as per NICE TAs 481 and 482	Not commissioned. No NHS prescribing in primary or secondary care	TA482 - Oct 17

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
ADVICE	Tacrolimus 0.03% Ointment ▼	(Protopic® ointment ▼)	Option for 2nd line treatment of moderate to severe atopic eczema in adults and children over 2 years not controlled by topical steroids where there is serious risk of important ADRs further topical steroid use - as per NICE CG 57	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation Consultant/Specialist should prescribe for an initial period of 3-4 months (1st review).	CG57 - Aug 04
RED	Tadalafil (Adcirca)	(Adcirca®)	Pulmonary Arterial Hypertension	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Tadalafil (Adcirca)	(Adcirca®)	Raynaud's disease or connective tissue diseases (Not a licensed indication).	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
BLACK	Tadalafil (Cialis)	(Cialis®)	Treatment of symptoms associated with benign prostatic hyperplasia (Not a licensed indication) (terminated appraisal)	Not commissioned. No NHS prescribing in primary or secondary care	TA273 - Jan 13
BLACK	Tadalafil (Cialis)	(Cialis®)	Use of regular, daily doses for penile rehabilitation in prostate cancer/post radical prostatectomy	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.
BLACK	Tadalafil taken once every day	(Cialis®)	Erectile dysfunction/penile rehabilitation	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.
RED	Tafamidis	(Vyndaqel®)	Amyloidosis - Treatment of transthyretin familial amyloid polyneuropathy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Tafamidis	Vyndaqel®	transthyretin amyloidosis with cardiomyopathy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA984 – June 2024
BLACK	Tafasitamab	Minjuvi®	relapsed or refractory diffuse large B-cell lymphoma	Not commissioned. No NHS prescribing in primary or secondary care	TA883 – May 2023
BLACK	Tagraxofusp	n/a	blastic plasmacytoid dendritic cell neoplasm (terminated appraisal)	Not commissioned. No NHS prescribing in primary or secondary care	TA782 – March 2022
RED	Talazoparib	Talzenna®	HER2-negative advanced breast cancer with germline BRCA mutations	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA952 – February 2024
RED	Taliglucerase alfa	(Elelyso®)	Gaucher's Disease	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Talimogene laherparepvec ▼	(Imlygic® ▼)	Unresectable, regionally or distantly metastatic (Stage IIIB, IIIC or IVM1a) melanoma that has not spread to bone, brain, lung or other internal organs, only if treatment with systemically administered immunotherapies is not suitable	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA410 - Sep 16
ADVICE	Tamoxifen	()	Chemoprophylaxis for no more than 5 years for pre- or post-menopausal women at either high or moderate risk of developing breast cancer (Not a licensed indication).	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	CG164 - Jun 13

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
BLACK	Tapentadol (immediate-release)	<i>various</i>	Management of moderate to severe pain in adults, where opioid analgesia is necessary	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.
ADVICE	Tapentadol (modified-release)	<i>various</i>	Severe chronic pain in adults with intolerance to m-r morphine, which can be adequately managed only with opioid analgesics	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	CG140 - Jul 12
RED	Targeted-release budesonide	(Kinpeygo®)	primary IgA nephropathy	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA937 – December 2023
Double Red	Taribavirin (viramidine)		Viral Hepatitis C	Not recommended for routine use	NICE has not issued any guidance.
RED	Tebentafusp	Kimmtrak®	advanced uveal melanoma	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA1027 – January 2025
RED	Teclistamab	Tecvayli®	relapsed and refractory multiple myeloma after 3 or more treatments	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA1015 – November 2024
RED	Teduglutide	Revestive®	short bowel syndrome	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA804 – July 2022
RED	Tegafur with uracil	(<i>Uftora</i> ®)	All indications	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA61 - May 03
RED	Teicoplanin	(<i>Targocid</i> ®)	Intravenous treatment at home	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
ADVICE	Teicoplanin	(Targocid®)	Intramuscular treatment at home	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation Consultant responsible for the first script.	NICE has not issued any guidance.
RED	Telaprevir	(Incivo®)	Treatment of genotype 1 chronic hepatitis C	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA252 - Apr 12
RED	Temozolomide	(Temodal®)	Malignant glioma (brain cancer)	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA121 - Jun 07
RED	Temozolomide	(Temodal®)	Endocrinology, non-malignant conditions	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Temsirolimus	(Torisel®)	First-line treatment of advanced and/or metastatic renal cell carcinoma	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA178 - Aug 09
BLACK	Temsirolimus	(Torisel®)	Treatment of relapsed or refractory mantle cell lymphoma (terminated appraisal)	Not commissioned. No NHS prescribing in primary or secondary care	TA207 - Oct 10
RED	Tenecteplase	Metalyse	acute ischaemic stroke	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA990 - July 2024

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Tenofovir alafenamide fumarate	(Vemlidy®)	HIV alone or in combination with other anti-retroviral drugs - as per NHS England Policy 16043/P (Not a licensed indication).	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
BLACK	Tenofovir alafenamide fumarate ▼	(Vemlidy® ▼)	Chronic Hepatitis B (terminated appraisal)	Not commissioned. No NHS prescribing in primary or secondary care	TA435 - March 2017
RED	Tenofovir disoproxil	(Viread®)	Treatment of chronic hepatitis B	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA173 - Jul 09
RED	Tepotinib	Tepmetko®	advanced non-small-cell lung cancer with MET gene alterations	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA789 – May 2022
RED	Teprasiran		Prevention of delayed graft function	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Teriflunomide ▼	(Aubagio® ▼)	Relapsing remitting multiple sclerosis	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA303 - Jan 14
RED	Teriparatide	(Forsteo®)	Secondary prevention of osteoporotic fragility fractures in postmenopausal women	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA161 - Oct 08
RED	Teriparatide	(Forsteo®)	Osteogenesis imperfecta - as per NHS England Policy 16002/P (Not a licensed indication).	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Teriparatide	(Forsteo®)	Male and juvenile osteoporosis (Not a licensed indication).	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
FULL SCA	Testosterone	Sustanon 250® Restandol® Testocaps®	Boys in Infancy and Adolescence	Shared Care Agreement Level 2 - Prescribe the drug and perform a more intense level of monitoring, e.g. quarterly	NICE has not issued any guidance.
ADVICE	Testosterone	various	off-label testosterone in women for hypoactive sexual disorder during the menopause	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	NICE has not issued any guidance.
BLACK	Testosterone - transdermal patches	()	Hormone replacement in androgen deficiency	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.
ADVICE	Testosterone - various formulations except patches	(Various)	Androgen deficiency / treatment of transgender patients requiring virilising endocrine therapy	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	NICE has not issued any guidance.
ADVICE	Tetrabenazine tablets	Xenazine® 25	hyperkinetic motor disorders with Huntington's chorea	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation. Specialist will initiate and retain patient until stable	NICE has not issued any guidance
RED	Tetrahydrobiopterin (BH4, THB) - aka Sapropterin	(Sapropterin (Kuvan®))	Phenylketonuria (PKU) - Specialist centres only - Highly specialised criteria only (Not a licensed indication).	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Tezacaftor	(Symkevi® (with ivacaftor))	Cystic Fibrosis	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Tezacaftor, Ivacaftor and Elexacaftor	Kaftrio®	patients 6 years and over who have cystic fibrosis	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Tezepelumab	Tezspire®	severe asthma	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA880 – April 2023
RED	Thalidomide	(Thalidomide Celgene®)	Multiple myeloma (first-line)	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA228 - Jul 11
RED	Thrombin	(Various)	Pseudoaneurysm - as per NICE IPG060	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	IPG060 - Nov 04
BLACK	Thyroxine (Levothyroxine sodium)	(Generics are available)	Chronic fatigue syndrome/myalgic encephalomyelitis (or encephalopathy) - as per NICE CG 53 - Do Not Do	Not commissioned. No NHS prescribing in primary or secondary care	CG53 - Aug 07
Double Red	Thyroxine (Levothyroxine sodium) / Liothyronine	(Generics)	Augmentation of an antidepressant - as per NICE CG 90 - Do Not Do (Not a licensed indication).	Not recommended for routine use	NG90 - Oct 09
ADVICE	Ticagrelor	(Brilique®)	(With aspirin) to prevent atherothrombotic events in patients with ACS as per NICE TA 236	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation Consultant/Specialist responsible for the first script.	TA236 - Oct 11

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
ADVICE	Ticagrelor	(Brilique®)	In combination with aspirin for preventing atherothrombotic events who had a myocardial infarction and who are at high risk of a further event as per NICE TA 420	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	TA420 - Dec 16
RED	Tildrakizumab	(Ilumetri®)	Moderate to severe plaque psoriasis in adults - as per NICE TA 575 and local treatment pathway	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA575 - Apr 19
RED	Tioguanine	(Lanvis®)	All indications	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Tipranavir	(Aptivus®)	HIV infection in combination with other antiretroviral drugs - as per BHIVA Guidelines	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
BLACK	Tirbanibulin	Klisyri®	actinic keratosis	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.
RED	Tirofiban	(Aggrastat®)	Prevention of MI in unstable angina	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA47 - Sep 02
ADVICE	Tirzepatide	Mounjaro®	type 2 diabetes	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	TA924 – October 2023

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Tirzepatide	Mounjaro®	Managing overweight and obesity - only for patients with a BMI of at least 35 and at least one weight-related comorbidity. Must be eligible for treatment in specialist weight management services as per local ICB guidance	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care. Only available via specialist weight management services for this indication	TA1026 - Dec 2024
BLACK	Tirzepatide	Mounjaro®	Managing overweight and obesity - please refer to RED and GREEN classifications on Netformulary. Not commissioned for any other patient cohorts	Not commissioned. No NHS prescribing in primary or secondary care	TA1026 - Dec 2024
RED	Tisagenlecleucel	(Kymriah®)	For treating relapsed or refractory diffuse large B-cell lymphoma after 2 or more systemic therapies - as per NICE 567 (NHSE commissioning responsibility)	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA567 - Mar 19
BLACK	Tisagenlecleucel	N/A	relapsed or refractory diffuse large B-cell lymphoma after 2 or more systemic therapies	Not commissioned. No NHS prescribing in primary or secondary care	TA933 – November 2023
RED	Tisagenlecleucel	Kymriah®	relapsed or refractory B-cell acute lymphoblastic leukaemia in people 25 years and under	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA975 – May 2024
BLACK	Tisagenlecleucel	Kymriah®	follicular lymphoma after 2 or more therapies (terminated appraisal)	Not commissioned. No NHS prescribing in primary or secondary care	TA842 – November 2022

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
BLACK	Tislelizumab	n/a	in combination for untreated advanced non-small-cell lung cancer (terminated appraisal)	Not commissioned. No NHS prescribing in primary or secondary care	TA1058 – April 2025
RED	Tivozanib	(<i>Fotivda</i> ®)	Advanced renal cell carcinoma - as per NICE TA 512	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA512 - Mar 18
BLACK	Tixagevimab plus cilgavimab	Evusheld®	for use in patients with covid-19	Not commissioned. No NHS prescribing in primary or secondary care	TA971 – May 2024
RED	Tobramycin (nebulised)	(<i>Tobi</i> ®, <i>Bramitob</i> ®)	Pseudomonas aeruginosa infection in patients with Cystic Fibrosis	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Tobramycin Dry Powder Inhaler	(<i>Tobi Podhaler</i> ®)	Pseudomonas lung infection in Cystic Fibrosis	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA276 - Mar 13
RED	Tocilizumab	(<i>RocActemra</i> ®)	Systemic juvenile idiopathic arthritis - as per NICE TA 238	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA238 - Dec 11
RED	Tocilizumab	RoActemra®	Critically ill patients with COVID-19 pneumonia (adults))	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	ES33 – January 2021
RED	Tocilizumab	(<i>RocActemra</i> ®)	Adult onset Stills Disease	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Tocilizumab	(RoActemra®)	for use in patients with covid-19	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA878 – March 2023, updated June 2023

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Tocilizumab (monotherapy)	(RoActemra®)	Option for use as per recommended pathway for moderate to severe rheumatoid arthritis	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Tocilizumab (with methotrexate)	(RoActemra®)	Rheumatoid arthritis in adults - as per NICE TA 247	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA247 - Feb 12
RED	Tocilizumab IV	(RoActemra® for infusion)	Juvenile arthritis paediatric - as per NHS England Policy E03/P/d & NICE TA 373 (Not a licensed indication).	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA373 - Dec 15
RED	Tocilizumab IV	(RoActemra® for infusion)	Treatment of giant cell arteritis - as per NHS England Policy 16019/P	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA518 - Apr 18
RED	Tocilizumab IV	(RoActemra® for infusion)	Takayasu arteritis - as per NHS England policy 16056/P (Not a licensed indication).	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Tocilizumab IV	(RoActemra® for infusion)	Juvenile arthritis paediatric (where adult TA available - as per TA 247 & 375)) (Not a licensed indication).	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Tofacitinib	(Xeljanz®)	Active psoriatic arthritis in adults after inadequate response to DMARDs under certain conditions - as per NICE TA 543 and local business application	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA543 - Oct 18
RED	Tofacitinib	(Xeljanz®)	Moderately to severely active ulcerative colitis in adults - as per NICE TA 547 (option after biosimilar adalimumab	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA547 - Nov 18

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Tofacitinib	Xeljanz®	juvenile idiopathic arthritis	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA735 – October 2021
RED	Tofacitinib	Xeljanz®	active ankylosing spondylitis	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA920 – October 2023
RED	Tofacitinib ▼	(Xeljanz® ▼)	Treatment of moderate to severe active rheumatoid arthritis in adults (with and without methotrexate) - as per NICE TA 480 and local pathway	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA480 - Oct 17
RED	Tolvaptan	(Jinarc®, Samsca®)	Hyponatraemia in cancer - as per NHS England Policy 16051/P (Not a licensed indication).	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Tolvaptan ▼	(Jinarc®, Samsca® ▼)	Autosomal dominant polycystic kidney disease in adults - NICE TA 358	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA358 - Oct 15
RED	Topotecan	(Hycamtin®)	Advanced ovarian cancer	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA28 - May 05
RED	Topotecan	(Hycamtin®)	Treatment of recurrent and stage IVB cervical cancer	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA183 - Oct 09
BLACK	Topotecan	(Hycamtin®)	Treatment of advanced recurrent ovarian cancer	Not commissioned. No NHS prescribing in primary or secondary care	TA389 - Apr 16

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Topotecan (oral)	(Hycamtin®)	Treatment of relapsed small-cell lung cancer	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA184 - Nov 09
BLACK	Toripalimab	n/a	with chemotherapy for untreated advanced oesophageal squamous cell cancer (terminated appraisal)	Not commissioned. No NHS prescribing in primary or secondary care	TA1024 – December 2024
RED	Total parenteral nutrition	(Various)	Various	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Trabectedin	(Yondelis®)	Treatment of advanced soft tissue sarcoma	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA185 - Feb 10
BLACK	Trabectedin	(Yondelis®)	(In combination with pegylated liposomal doxorubicin HCl) for relapsed ovarian cancer	Not commissioned. No NHS prescribing in primary or secondary care	TA389 - Apr 16
RED	Tralokinumab	Adtralza®	Asthma (Not a licensed indication).	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Tralokinumab	Adtralza®	moderate to severe atopic dermatitis	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA814 – August 2022
BLACK	Tramadol & paracetamol combination	(Tramacet®)	Moderate to severe pain	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
BLACK	Trametinib	(Mekinist®)	(with dabrafenib (Tafinlar®)) for treating advanced metastatic BRAF V600E mutation-positive non-small-cell lung cancer - as per NICE TA 564	Not commissioned. No NHS prescribing in primary or secondary care	TA564 - Feb 19
RED	Trametinib ▼	(Mekinist® ▼)	Unresectable or metastatic melanoma in adults with a BRAF V600 mutation (with dabrafenib)	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA396 - Jun 16
RED	Tranexamic Acid mouthwash	Unlicensed special	Oral bleeds. Restricted to use by local hospital trusts only	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
ADVICE	Transanal irrigation /Rectal Irrigation appliances	(Peristeen®, Qufora®, Aquaflush®, IryPump S®)	Bowel dysfunction; Chronic constipation; Faecal incontinence. Initiation by hospital consultants for adults acro	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	NICE has not issued any guidance.
ADVICE	Transanal irrigation/Rectal Irrigation appliances	(Peristeen®, Qufora®, IryPump S®)	Chronic Constipation and Faecal Incontinence (as recommended by the NCH&C Adult Continence Service only) - as an option as per agreed treatment pathways	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	NICE has not issued any guidance.
ADVICE	Transanal irrigation/Rectal Irrigation appliances	(Peristeen®, Qufora®)	Chronic Constipation and Faecal Incontinence in Paediatrics (as recommended by the NNUH Paediatrics Service) - as per agreed treatment pathway	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	NICE has not issued any guidance.

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Trastuzumab	(Herceptin®)	Advanced breast cancer	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA34 - Mar 02
RED	Trastuzumab	(Herceptin®)	Adjuvant treatment of early-stage HER2-positive breast cancer	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA107 - Feb 09
RED	Trastuzumab	(Herceptin®)	HER2-positive metastatic gastric cancer	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA208 - Nov 10
BLACK	Trastuzumab	(Herceptin®)	In combination with an aromatase inhibitor, 1st-line treatment of metastatic hormone-receptor-positive breast cancer that overexpresses HER2	Not commissioned. No NHS prescribing in primary or secondary care	TA257 - Jun 12
RED	Trastuzumab deruxtecan	Enhertu®	HER2-positive unresectable or metastatic breast cancer after 2 or more anti-HER2 therapies	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA704 – May 2021
RED	Trastuzumab deruxtecan	Enhertu®	HER2-positive unresectable or metastatic breast cancer after 1 or more anti-HER2 treatments	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA862 – February 2023
BLACK	Trastuzumab deruxtecan	Enhertu®	HER2-positive unresectable or metastatic gastric or gastro-oesophageal junction cancer after anti-HER2 treatment	Not commissioned. No NHS prescribing in primary or secondary care	TA879 – April 2023

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
BLACK	Trastuzumab deruxtecan	Enhertu®	HER2-mutated advanced non-small-cell lung cancer after platinum-based chemotherapy (terminated appraisal)	Not commissioned. No NHS prescribing in primary or secondary care	TA976 – May 2024
	Trastuzumab deruxtecan	Enhertu®	HER2-low metastatic or unresectable breast cancer after chemotherapy	Not for prescribing in primary or secondary care	TA992 – July 2024
RED	Trastuzumab emtansine ▼	(Kadcyla® ▼)	HER2-positive, unresectable locally advanced or metastatic breast cancer, after treatment with trastuzumab and a taxane (paclitaxel or docetaxel) as per NICE TA 458	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA458 - Jul 17
RED	Trastuzumab emtansine ▼	(Kadcyla® ▼)	adjuvant treatment of HER2-positive early breast cancer	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA632 – June 2020
RED	Trenonacog alpha	(IXinity®)	Haemophilia B	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Treosulfan	Trecondi®	with fludarabine for malignant disease before allogeneic stem cell transplant	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA640 – August 2020
RED	Treosulfan	Trecondi®	All indications	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
BLACK	Treosulfan	N/A	with fludarabine before allogeneic stem cell transplant for people aged 1 month to 17 years with non-malignant diseases (terminated appraisal)	Not commissioned. No NHS prescribing in primary or secondary care	TA945 – January 2024
RED	Treprostinil	<i>(Tyvaso (EU), Remodulin (U.S))</i>	Peripheral Arterial Hypertension	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Treprostinil diethanolamine	<i>(Orenitram (US))</i>	Pulmonary Arterial Hypertension (Not a licensed indication).	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Treprostinil sodium	<i>(Trevyent®)</i>	Pulmonary Arterial Hypertension - as per NHS England policy A11/P/c	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Triamcinolone and Erythromycin mouthwash	Knox mouthwash	Oral lichen planus	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance
RED	Trientine dihydrochloride	<i>(Metalite® (Japanese import))</i>	Wilson's Disease (where penicillamine not tolerated)	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Trifluridine–tipiracil	Lonsurf®	metastatic gastric cancer or gastro-oesophageal junction adenocarcinoma after 2 or more treatments	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA852 – December 2022
RED	Trifluridine–tipiracil	Lonsurf®	with bevacizumab for treating metastatic colorectal cancer after 2 systemic treatments	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA1008 – September 2024

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Trifluridine-tipiracil ▼	(Lonsurf® ▼)	For previously treated metastatic colorectal cancer	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA405 - Aug 16
RED	Triheptanoin		Pyruvate carboxylase deficiency	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
BLACK	Trihexyphenidyl hydrochloride	(Generics available)	NICE Do Not Do - Dyskinesia and/or motor fluctuations in Parkinson's disease - as per NG 71	Not commissioned. No NHS prescribing in primary or secondary care	NG71 -Sep 17
BLACK	Tri-Luma®	(Tri-Luma®)	Melasma (Chloasma)	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.
BLACK	Trimetazidine	N/A	refractory angina	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.
Double Red	Trimipramine	(Generics available)	Treatment of depressive illness, especially where sleep disturbance, anxiety or agitation are presenting symptoms	Not recommended for routine use	NICE has not issued any guidance.
FULL SCA	Triptorelin	(Decapeptyl® SR)	Treatment of precocious puberty, menorrhagia and dysmenorrhoea in children	Shared Care Agreement Level 1 - Prescribe the drug and perform a higher level of monitoring, e.g. 6-monthly	NICE has not issued any guidance.
FULL SCA	Triptorelin	(Decapeptyl® SR; Gonapeptyl® Depot)	Management of endometriosis; pre-operative management of uterine fibroids	Shared Care Agreement Level 2 - Prescribe the drug and perform a more intense level of monitoring, e.g. quarterly	NG73 - Sep 17
ADVICE	Triptorelin acetate	(Decapeptyl®; Gonapeptyl®)	Prostate cancer	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	NICE has not issued any guidance.

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Tucatinib	TUKYSA®	with trastuzumab and capecitabine for treating HER2-positive advanced breast cancer after 2 or more anti-HER2 therapies	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA786 – April 2022
RED	Ublituximab	Briumvi®	relapsing multiple sclerosis	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA1025 – December 2024
RED	Ulipristal ▼ (Esmya®)	(Esmya® ▼)	First line option for treatment of symptoms of fibroids ≥ 3cm and with Hb ≤102g/L	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Ulipristal acetate ▼ (Esmya®)	(Esmya® ▼)	Pre-operative treatment of moderate to severe symptoms of uterine fibroids	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
BLACK	Unloading Knee Braces	Various	Support for knee joint	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.
RED	Upadacitinib	Rinvoq®	Severe rheumatoid arthritis	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA665 – December 2020
RED	Upadacitinib	Rinvoq®	previously treated moderately to severely active Crohn's disease	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA905 – June 2023
RED	Upadacitinib	Rinvoq®	moderate rheumatoid arthritis	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA744 – November 2021
RED	Upadacitinib	Rinvoq®	active psoriatic arthritis after inadequate response to DMARDs	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA768 – February 2022

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Upadacitinib	Rinvoq®	active ankylosing spondylitis	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA829 – October 2022
RED	Upadacitinib	Rinvoq®	active non-radiographic axial spondyloarthritis	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA861 – February 2023
RED	Upadacitinib	Rinvoq®	moderate to severe atopic dermatitis	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA814 – August 2022
RED	Upadacitinib	Rinvoq®	moderately to severely active ulcerative colitis	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA856 – Jan 2023
RED	Uprifosbuvir		Hepatitis C	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
BLACK	Uroshield Catheter Device	()	Preventing catheter-related urinary infections	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.
RED	Ustekinumab	(Stelara®)	Treatment of adults with moderate to severe psoriasis - as per NICE TA 180 and CG153	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA180 - Oct 12

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Ustekinumab	(Stelara®)	Treatment of active psoriatic arthritis, as monotherapy or in combination with methotrexate, following inadequate response to previous non-biological DMARDs - as per NICE TA 340 and local treatment pathway	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA340 - Jul 15
RED	Ustekinumab	(Stelara®)	Plaque psoriasis in children and young people - as per NICE TA 455	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA455 - Jul 17
RED	Ustekinumab	(Stelara®)	2nd line (biologic) option for moderately to severely active Crohn's disease after previous treatment - as per NICE 456 and local treatment pathway	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA456 - Jul 17
RED	Ustekinumab	(Stelara®)	Treating moderately to severely active ulcerative colitis	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA633 - Jun 20
RED	Ustekinumab	(Stelara®)	Treatment of psoriasis and psoriatic arthritis in Paediatrics (where an adult NICE guidance is available - TAs 180, 340) - NHSE policy (Not a licensed indication).	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Ustekinumab	(Stelara®)	Dose escalation in the treatment of severe psoriasis which has responded inadequately to the initial ustekinumab dosage regimen	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
BLACK	Vacuum dressings	(<i>Vacuum Assisted Closure (VAC dressings).</i>)	Healing of chronic wounds	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.
RED	Vacuum pumps / devices for erectile dysfunction	(<i>Various</i>)	Erectile dysfunction	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Vadadustat	()	Anaemia in chronic kidney disease in dialysis	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Vadadustat	Vafseo®	symptomatic anaemia in adults having dialysis for chronic kidney disease	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA1035 – January 2025
RED	Vaginal dilators or trainers	(<i>Femmax®, Ameille Care® and Ameille Comfort®</i>)	Following vaginal reconstruction surgery or following pelvic radiotherapy when recommended by an appropriate Secondary Care Specialist	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Valganciclovir	(<i>Valcyte®</i>)	Prevention of CMV disease following solid organ transplantation	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
ADVICE	Valproate-containing products	Sodium Valproate, Valproic Acid and Valproate Semisodium	epilepsy and bipolar in women of childbearing potential	Formulary - Secondary care clinician to initiate and stabilise before transfer to primary care	NICE has not issued any guidance.

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Valproate-containing products	Sodium Valproate, Valproic Acid and Valproate Semisodium	epilepsy and bipolar - in women of childbearing potential where the conditions of PREVENT are not met	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
Double Red	Valproate-containing products	Sodium Valproate, Valproic Acid and Valproate Semisodium	epilepsy and bipolar - use in pregnancy	Not recommended for routine use	NICE has not issued any guidance.
BLACK	Valproate-containing products	Sodium Valproate, Valproic Acid and Valproate Semisodium	Migraine - all women under 55 of childbearing potential	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.
ADVICE	Valproate-containing products	Sodium Valproate, Valproic Acid and Valproate Semisodium	Migraine - women over 55	Formulary - Secondary care clinician to initiate and stabilise before transfer to primary care	NICE has not issued any guidance.
BLACK	Valproate-containing products	Sodium Valproate, Valproic Acid and Valproate Semisodium	All other indications in women of childbearing potential	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.
Double Red	Valsartan / Amlodipine	(Exforge®)	Hypertension	Not recommended for routine use	NICE has not issued any guidance.
RED	Vamorolone	Agamree®	Duchenne muscular dystrophy in people 4 years and over	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA1031 – January 2025

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
BLACK	Vandetanib	(Caprelsa®)	For treating aggressive and symptomatic medullary thyroid cancer in adults with unresectable, locally advanced or metastatic disease - as per NICE TA 550	Not commissioned. No NHS prescribing in primary or secondary care	TA550 - Dec 18
	Vardenafil	(Levitra®)	Use of regular, daily doses for penile rehabilitation in prostate cancer/post radical prostatectomy	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.
ADVICE	Varenicline	(Champix®)	Adjunct to smoking cessation in combination with motivational support - Public Health England commissioning responsibility - as per NICE TA 123 GP prescribable after consultant/specialist recommendation where the specialist is a smoking cessation adviser (level 2 or 3)	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation	TA123 - Jul 07
RED	Vatiquinone		Friedreichs ataxia	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
BLACK	Vedolizumab	(Entyvio®)	chronic refractory pouchitis after surgery for ulcerative colitis (terminated appraisal)	Not commissioned. No NHS prescribing in primary or secondary care	TA826 – September 2022

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Vedolizumab	(Entyvio®)	Paediatric indications (where an adult NICE TA is available - TAs 342 & 352)) - Specialist Centre only (Not a licensed indication).	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Vedolizumab ▼	(Entyvio® ▼)	3rd line (biologic) treatment option for moderately to severely active ulcerative colitis in adults - as per NICE TA 342 and the local treatment pathway	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA342 - Jun 15
RED	Vedolizumab ▼	(Entyvio® ▼)	3rd line biologic treatment option for moderately to severely active Crohn's disease - as per NICE TA 352 and local treatment pathway	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA352 - August 2015
RED	Velaglucerase alfa	(VPRIV®)	Type I Gaucher's disease (specialist use only) - as per NHS England specification	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Velcalcetide (aka Etelcalcetide)	(Parsabiv®)	Secondary hyperparathyroidism in patients with chronic kidney disease on haemodialysis	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Velmanase alfa	Lamzede®	alpha-mannosidosis	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	HST29 – December 2023
RED	Vemurafenib	(Zelboraf®)	Melanoma (BRAF V600 mutation positive, unresectable metastatic)	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA269 - Dec 13

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Venetoclax	(Venclyxto®)	(with rituximab) for treating chronic lymphocytic leukaemia in adults who have had at least 1 previous therapy - as per NICE TA 561	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA561 - Feb 19
RED	Venetoclax	(Venclyxto®)	with obinutuzumab for untreated chronic lymphocytic leukaemia	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA663 – December 2020
RED	Venetoclax	Venclyxto®	with azacitidine for untreated acute myeloid leukaemia when intensive chemotherapy is unsuitable	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA765 – February 2022
RED	Venetoclax	Venclyxto®	with low dose cytarabine for untreated acute myeloid leukaemia when intensive chemotherapy is unsuitable	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA787 – April 2022
RED	Venetoclax	Venclyxto®	chronic lymphocytic leukaemia	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA796 – June 2022
BLACK	Venlafaxine	(Generics / Various)	Depression in children and young people - as per NICE CG 28 "Do Not Do" (Not a licensed indication).	Not commissioned. No NHS prescribing in primary or secondary care	CG28 - Sep 17
BLACK	Vericiguat	N/A	chronic heart failure with reduced ejection fraction (terminated)	Not commissioned. No NHS prescribing in primary or secondary care	TA731 – September 2021
BLACK	Vernakalant	N/A	Rapid conversion of recent onset atrial fibrillation to sinus rhythm (terminated appraisal)	Not commissioned. No NHS prescribing in primary or secondary care	TA675 – February 2021

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Verteporfin	(Visudyne®)	With photodynamic therapy (PDT) - Chronic Central Serous Chorio-Retinopathy (Not a licensed indication).	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Vestronidase Alfa		Mucopolysaccharidosis VII	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
BLACK	Vinflunine	(Javlor® ▼)	Treatment of advanced or metastatic transitional cell carcinoma of the urothelial tract - as per NICE TA 272	Not commissioned. No NHS prescribing in primary or secondary care	TA272 - Jan 13
RED	Vinorelbine	(Navelbine®, Navelbine® Capsules ▼)	Non-small cell lung cancer	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA26 - Jun 01
RED	Vinorelbine	(Navelbine®, Navelbine® Capsules ▼)	Advanced breast cancer - as per NICE 81	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	CG81 - Feb 09
BLACK	Virulite electronic cold sore device	(Virulite)	Electronic cold sore device (Not a licensed indication).	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.
RED	Vismodegib ▼	(Erivedge® ▼)	Basal cell carcinoma	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA489 - Nov 17
RED	Vitamin B Co / Co Strong tablets	()	Time-limited use (10 days) only in re-feeding syndrome	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
BLACK	Vitamin E	<i>(Various)</i>	NICE Do Not Do - Pharmacological neuroprotective therapy in Parkinson's disease - as per NG 71 (Not a licensed indication).	Not commissioned. No NHS prescribing in primary or secondary care	NG71 - Sep 17
RED	Voclosporin	Lupkynis®	with mycophenolate mofetil for treating lupus nephritis	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA882 – May 2023
RED	Volanesorsen	Waylivra	Familial chylomicronemia syndrome	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	HST13 - Oct 2020
RED	Von Willebrand factor, recombinant - Factor VIII	<i>(Von Willebrand factor (recombinant))</i>	Von Willebrand's disease / factor VIII deficiency	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Vonicog Alfa	<i>(Veyvont®)</i>	Von Willebrand Deficiency	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Voretigene Neparvovec	Luxturna	Inherited Retinal Dystrophies	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	HST11 - Oct 2019
RED	Voriconazole	<i>(Vfend®)</i>	Systemic fungal infections	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Voxelotor	Oxbryta®	haemolytic anaemia caused	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA981 – June 2024

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Vutrisiran	Amvuttra®	hereditary transthyretin-related amyloidosis	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA868 – February 2023
RED	VX-210		Spinal cord Injury	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
Double Red	Warfarin	(Generics available)	Routine use in combination with prasugrel or ticagrelor to people who need anticoagulation who have had an MI - as per NICE CG 172 - Do Not Do	Not recommended for routine use	CG172 - Nov 13
RED	Wasp / Bee venom extract (Pharmalgen®)	(Pharmalgen® Wasp / Bee venom extract)	Wasp / Bee venom allergy - as per NICE TA 246	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA246 - Feb 12
BLACK	Waterproof dressing protectors	LimbO, Seal-Tight and all related brands/devices	Waterproof protectors to wear in shower/bath to protect casts, dressings and PICC lines.	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance
BLACK	Yasmin	(Yasmin®)	Contraception	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.
BLACK	Yohimbine	(eg Prowess, Aphrodyne, Dayto Himbin, Yocon, Yohimes)	Erectile dysfunction (Not a licensed indication).	Not commissioned. No NHS prescribing in primary or secondary care	NICE has not issued any guidance.
RED	Zanubrutinib	Brukinsa®	chronic lymphocytic leukaemia	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA931 – November 2023

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
BLACK	Zanubrutinib	Brukinsa®	with obinutuzumab for treating relapsed or refractory B-cell follicular lymphoma after 2 or more treatments (terminated appraisal)	Not commissioned. No NHS prescribing in primary or secondary care	TA978 – May 2024
RED	Zanubrutinib	Brukinsa®	marginal zone lymphoma after anti-CD20-based treatment	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA1001 – September 2024
RED	Zanubrutinib	Brukinsa®	Waldenstrom's macroglobulinaemia	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	TA833 – October 2022
RED	Ziconotide	(Prialt®)	Intrathecal analgesia for severe chronic pain - as per NHS England Policy 16011/P	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
RED	Zidovudine (also with lamivudine and Abacavir)	(Retrovir® / Combivir® / Trizivir® / Generics)	HIV infection in combination with other antiretroviral drugs	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
BLACK	Zolbetuximab	Vyloy®	with chemotherapy for untreated claudin-18.2-positive HER2-negative unresectable advanced gastric or gastro-oesophageal junction adenocarcinoma	Not commissioned. No NHS prescribing in primary or secondary care	TA1046 – March 2025
RED	Zoledronic Acid	(Various)	To prolong survival and prevent skeletal-related events (SREs) in patients with plasma cell myeloma	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.

Traffic Light Classification	Drug Name	Brand Name	Indication (assume licenced unless stated)	Instructions for Prescriber	NICE Guidance
RED	Zoledronic acid	(Various)	6-monthly infusions for 2 years to improve survival in post-menopausal women with breast cancer receiving chemotherapy (Not a licenced indication).	Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care	NICE has not issued any guidance.
ADVICE	Zonisamide	(Zonegran®)	Adjunctive therapy in the treatment of partial-onset seizures with or without secondary generalisation in patients with epilepsy aged 18 years and older	Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation Consultant should prescribe for an initial period of one month.	NICE has not issued any guidance.