

NOTICE

AUTHORIZATION TO SUBSTITUTE MEDICATIONS

An Act respecting prescription drug insurance (chapter A-29.01, s. 60.1)

I hereby authorize the temporary use of the following medication:

| | | | | | | | |
|----------|----------------------------------|--|---|--------|-------|--|--|
| 99114064 | Trifluoperazine hydrochloride | | 1 | 2.5 mg | Caps. | | |
|----------|----------------------------------|--|---|--------|-------|--|--|

until the following medication appearing on the List of Medications attached to the *Regulation respecting the list of Medications covered by the basic prescription drug insurance plan* are no longer out of stock:

| | | | | | | | |
|----------|-----------------|-----------|-----|------|------|-------|--------|
| 00312746 | Trifluoperazine | AA Pharma | 100 | 5 mg | Tab. | 23.75 | 0.2375 |
|----------|-----------------|-----------|-----|------|------|-------|--------|

This notice has effect retroactively from August 16, 2022.

Québec, September 13, 2022

[original signed by]

MARCO THIBAUT
President and Chief Executive Officer
Régie de l'assurance maladie du Québec

Publication of this notice on the website of the Régie imparts authentic value to it.