

Doncaster & Bassetlaw Medicines Formulary

Short-Acting β_2 Agonists (SABA)

Salbutamol 100micrograms/dose CFC Free MDI

Salbutamol 100micrograms/dose Easyhaler

Salbutamol 2.5mg and 5mg Nebules

Salbutamol 500micrograms/1ml and 5mg/5ml Injection

Terbutaline 500micrograms/1ml and 2.5mg/5ml Injection

Long-Acting β_2 Agonists (LABA)

Formoterol 12microgram Easyhaler

Atimos Modulite (formoterol 6 and 12micrograms/dose)

Short-Acting Muscarinic Antagonists (SAMA)

Ipratropium Bromide 20micrograms/dose CFC Free MDI

Ipratropium Bromide 250 and 500micrograms Nebules

Long-Acting Muscarinic Antagonists (LAMA)

Incruse Ellipta (umeclidinium 55micrograms/dose)

Methylxanthines

Aminophylline 250mg in 10ml Injection

Theophylline (Uniphyllin) 200, 300 and 400mg MR Tablets

Compound Bronchodilator Preparations (LAMA/LABA)

Anoro Ellipta 55/22 (umeclidinium 55micrograms and vilanterol 22micrograms)

Other Adrenoceptor Agonists

Adrenaline 1 in 1000 Injection (including auto-injectors; section 3.4)

Ephedrine 30mg in 1ml Injection

Peak Flow Meters/Spacers

Able Spacer

AeroChamber Plus Flow Vue Spacer Device (Standard/Infant/Child)

Peak Flow Meters (Standard/Low Range)

Volumatic Large Volume Spacer Device

Approved by Drug and Therapeutics Committee: March 2021

Review by: March 2024

Prescribing Guidance:

Prescribers should be familiar with the following guidelines (click to access):

[BTS guidelines for the Management of Asthma](#)
[NICE Guidance for the Management of Asthma](#)

[NICE Guidance for the Management of COPD](#)

For local management of inhaled therapies in COPD, see:
[Formulary Guidance for Management of COPD Patients](#)

BEFORE INITIATING A NEW DRUG THERAPY PRACTITIONERS SHOULD CHECK COMPLIANCE WITH EXISTING THERAPIES, INHALER TECHNIQUE AND ELIMINATE TRIGGER FACTORS

Summary tables (outlining recommended first-line choices dependent on type of device) are available via [Formulary First Line Choices for Asthma and COPD](#).