|  |
| --- |
| **Questionnaire on availability and accessibility of medicines for paediatric malignancies in Europe** |

PART II: Palliative, supportive and pain control medicines **Top of Form**

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Thank you for taking the time to participate in this survey on the availability and accessibility of essential medicines for children and adolescents with cancer: Part II - palliative, supportive and pain control medicines.

Please note that the [online survey](https://www.surveymonkey.co.uk/r/78HYVQ8) set up requires completion in one sitting.

You can use the current text version to prepare your answers and fill them in online here: <https://www.surveymonkey.co.uk/r/78HYVQ8> **before 30 June 2018***.*

There are 20 questions in total. All questions marked with an asterisk (\*) are mandatory.

The list of medicines is provided directly in some of the questions and also provided as Annex should you require it during the response preparation.

*SIOPE thanks ESMO for allowing use of its survey questions and methodology from the ESMO studies on the availability of cancer medicines for solid adult tumours to serve as a basis for the development of SIOPE’s survey on the availability of cancer medicines for paediatric malignancies.*

**Bottom of Form**

**\*** 1.  **Are the following medicines approved for use in the treatment of children in your country?**

Terminology: For the purposes of the survey, ‘approved’ means that the medicine has obtained an official Marketing Authorisation for use in children from the competent authority/ies in the country

|  | **Yes** | **No** | **Don’t know** |
| --- | --- | --- | --- |
| Halothane |[ ] [ ] [ ]
| Isoflurane |[ ] [ ] [ ]
| Nitrous Oxide |[ ] [ ] [ ]
| Oxygen |[ ] [ ] [ ]
| Ketamine |[ ] [ ] [ ]
| Propofol (thiopental as alternative) |[ ] [ ] [ ]
| D bupivacaine |[ ] [ ] [ ]
| D lidocaine |[ ] [ ] [ ]
| lidocaine + epinephrine (adrenaline) |[ ] [ ] [ ]
| ephedrine |[ ] [ ] [ ]
| atropine |[ ] [ ] [ ]
| D midazolam |[ ] [ ] [ ]
| Acetylsalicytic acid |[ ] [ ] [ ]
| Ibubrofen |[ ] [ ] [ ]
| Paracetamol |[ ] [ ] [ ]
| Codeine |[ ] [ ] [ ]
| Fentanyl |[ ] [ ] [ ]
| Morphine |[ ] [ ] [ ]
| Methadone |[ ] [ ] [ ]
| Amitriptyne |[ ] [ ] [ ]
| Cyclizine |[ ] [ ] [ ]
| Diazepam |[ ] [ ] [ ]
| Docusate sodium |[ ] [ ] [ ]
| Fluoxetine |[ ] [ ] [ ]
| Haloperidol |[ ] [ ] [ ]
| Hyoscine butylbromide |[ ] [ ] [ ]
| Hyoscine hydrobromide |[ ] [ ] [ ]
| Lactulose |[ ] [ ] [ ]
| Loperamide |[ ] [ ] [ ]
| Metoclopramide |[ ] [ ] [ ]
| Midazolam |[ ] [ ] [ ]
| Ondansetron |[ ] [ ] [ ]
| Sen(n)a |[ ] [ ] [ ]
| Aciclovir |[ ] [ ] [ ]
| Ganciclovir (for CMV reactivation) |[ ] [ ] [ ]
| Clinically relevant broad spectrum IV antibiotics |[ ] [ ] [ ]
| Sulphametoxazol with trimethoprim, or equivalent IV therapy for pneumocystis jerovicii |[ ] [ ] [ ]
| Clinically relevant antifungal agent(s) for prophylaxis |[ ] [ ] [ ]
| Clinically relevant antifungal agent(s) for treatment of invasive fungal infections |[ ] [ ] [ ]
| Allopurinol |[ ] [ ] [ ]
| Filgastrim or lenograstim |[ ] [ ] [ ]
| Calcium folinate or calcium levofolinate |[ ] [ ] [ ]
| Mesna |[ ] [ ] [ ]
| Pyridoxine (hydrochloride) |[ ] [ ] [ ]
| Rasburicase |[ ] [ ] [ ]
| Corticosteroid (eye drop) |[ ] [ ] [ ]

**\*2. Are the following medicines used in the treatment of children in your country?**

Terminology: For the purposes of the survey, ‘used in children’ means that the medicine is used independently of its official indication, so including off-label use.

|  | **Yes** | **No** | **Don’t know** |
| --- | --- | --- | --- |
| Halothane |[ ] [ ] [ ]
| Isoflurane |[ ] [ ] [ ]
| Nitrous Oxide |[ ] [ ] [ ]
| Oxygen |[ ] [ ] [ ]
| Ketamine |[ ] [ ] [ ]
| Propofol (thiopental as alternative) |[ ] [ ] [ ]
| D bupivacaine |[ ] [ ] [ ]
| D lidocaine |[ ] [ ] [ ]
| lidocaine + epinephrine (adrenaline) |[ ] [ ] [ ]
| ephedrine |[ ] [ ] [ ]
| atropine |[ ] [ ] [ ]
| D midazolam |[ ] [ ] [ ]
| Acetylsalicytic acid |[ ] [ ] [ ]
| Ibubrofen |[ ] [ ] [ ]
| Paracetamol |[ ] [ ] [ ]
| Codeine |[ ] [ ] [ ]
| Fentanyl |[ ] [ ] [ ]
| Morphine |[ ] [ ] [ ]
| Methadone |[ ] [ ] [ ]
| Amitriptyne |[ ] [ ] [ ]
| Cyclizine |[ ] [ ] [ ]
| Diazepam |[ ] [ ] [x]
| Docusate sodium |[ ] [ ] [ ]
| Fluoxetine |[ ] [ ] [ ]
| Haloperidol |[ ] [ ] [ ]
| Hyoscine butylbromide |[ ] [ ] [ ]
| Hyoscine hydrobromide |[ ] [ ] [ ]
| Lactulose |[ ] [ ] [ ]
| Loperamide |[ ] [ ] [ ]
| Metoclopramide |[ ] [ ] [ ]
| Midazolam |[ ] [ ] [ ]
| Ondansetron |[ ] [ ] [ ]
| Sen(n)a |[ ] [ ] [ ]
| Aciclovir |[ ] [ ] [ ]
| Ganciclovir (for CMV reactivation) |[ ] [ ] [ ]
| Clinically relevant broad spectrum IV antibiotics |[ ] [ ] [ ]
| Sulphametoxazol with trimethoprim, or equivalent IV therapy for pneumocystis jerovicii |[ ] [ ] [ ]
| Clinically relevant antifungal agent(s) for prophylaxis |[ ] [ ] [ ]
| Clinically relevant antifungal agent(s) for treatment of invasive fungal infections |[ ] [ ] [ ]
| Allopurinol |[ ] [ ] [ ]
| Filgastrim or lenograstim |[ ] [ ] [ ]
| Calcium folinate or calcium levofolinate |[ ] [ ] [ ]
| Mesna |[ ] [ ] [ ]
| Pyridoxine (hydrochloride) |[ ] [ ] [ ]
| Rasburicase |[ ] [ ] [ ]
| Corticosteroid (eye drop) |[ ] [ ] [ ]

**\***3. **Are the following medicines available in your country?**

Terminology: For the purposes of the survey, ‘available’ means that the medicine can be obtained as needed and in a timely manner.

|  | **Always** | **Usually** | **Occasionally** | **Never** | **Don’t know** |
| --- | --- | --- | --- | --- | --- |
| Halothane |[ ] [ ] [ ] [ ] [ ]
| Isoflurane |[ ] [ ] [ ] [ ] [ ]
| Nitrous Oxide |[ ] [ ] [ ] [ ] [ ]
| Oxygen |[ ] [ ] [ ] [ ] [ ]
| Ketamine |[ ] [ ] [ ] [ ] [ ]
| Propofol (thiopental as alternative) |[ ] [ ] [ ] [ ] [ ]
| D bupivacaine |[ ] [ ] [ ] [ ] [ ]
| D lidocaine |[ ] [ ] [ ] [ ] [ ]
| lidocaine + epinephrine (adrenaline) |[ ] [ ] [ ] [ ] [ ]
| ephedrine |[ ] [ ] [ ] [ ] [ ]
| atropine |[ ] [ ] [ ] [ ] [ ]
| D midazolam |[ ] [ ] [ ] [ ] [ ]
| Acetylsalicytic acid |[ ] [ ] [ ] [ ] [ ]
| Ibubrofen |[ ] [ ] [ ] [ ] [ ]
| Paracetamol |[ ] [ ] [ ] [ ] [ ]
| Codeine |[ ] [ ] [ ] [ ] [ ]
| Fentanyl |[ ] [ ] [ ] [ ] [ ]
| Morphine |[ ] [ ] [ ] [ ] [ ]
| Methadone |[ ] [ ] [ ] [ ] [ ]
| Amitriptyne |[ ] [ ] [ ] [ ] [ ]
| Cyclizine |[ ] [ ] [ ] [ ] [ ]
| Diazepam |[ ] [ ] [ ] [ ] [ ]
| Docusate sodium |[ ] [ ] [ ] [ ] [ ]
| Fluoxetine |[ ] [ ] [ ] [ ] [ ]
| Haloperidol |[ ] [ ] [ ] [ ] [ ]
| Hyoscine butylbromide |[ ] [ ] [ ] [ ] [ ]
| Hyoscine hydrobromide |[ ] [ ] [ ] [ ] [ ]
| Lactulose |[ ] [ ] [ ] [ ] [ ]
| Loperamide |[ ] [ ] [ ] [ ] [ ]
| Metoclopramide |[ ] [ ] [ ] [ ] [ ]
| Midazolam |[ ] [ ] [ ] [ ] [ ]
| Ondansetron |[ ] [ ] [ ] [ ] [ ]
| Sen(n)a |[ ] [ ] [ ] [ ] [ ]
| Aciclovir |[ ] [ ] [ ] [ ] [ ]
| Ganciclovir (for CMV reactivation) |[ ] [ ] [ ] [ ] [ ]
| Clinically relevant broad spectrum IV antibiotics |[ ] [ ] [ ] [ ] [ ]
| Sulphametoxazol with trimethoprim, or equivalent IV therapy for pneumocystis jerovicii |[ ] [ ] [ ] [ ] [ ]
| Clinically relevant antifungal agent(s) for prophylaxis |[ ] [ ] [ ] [ ] [ ]
| Clinically relevant antifungal agent(s) for treatment of invasive fungal infections |[ ] [ ] [ ] [ ] [ ]
| Allopurinol |[ ] [ ] [ ] [ ] [ ]
| Filgastrim or lenograstim |[ ] [ ] [ ] [ ] [ ]
| Calcium folinate or calcium levofolinate |[ ] [ ] [ ] [ ] [ ]
| Mesna |[ ] [ ] [ ] [ ] [ ]
| Pyridoxine (hydrochloride) |[ ] [ ] [ ] [ ] [ ]
| Rasburicase |[ ] [ ] [ ] [ ] [ ]
| Corticosteroid (eye drop) |[ ] [ ] [ ] [ ] [ ]

#### 4. \*****If in the previous question you answered ‘Never’ for the below listed medicines, please define the reasons for non-availability over the past 24 months:****

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **Not licensed in the country** | **Not procured in the country** | **Budget limitations** | **Don’t know** | **Other\*** |
| [in this table you will see the medicines that were selected as ‘Never’] |[ ] [ ] [ ] [ ] [ ]

#### 5. \*Other (please specify the reasons for non-availability over the past 24 months)

|  |  |
| --- | --- |
| [in this table you will see the medicines that were selected as ‘Other\*’] |  |

#### 6. \*****If in question 3 you answered ‘Usually’ or ‘Occasionally’ for the below listed medicines, please define the reasons for intermittent non-availability over the past 24 months:****

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **Shortages** | **Budget limitations** | **Don’t know** | **Other\*** |
| [in this table you will see the medicines that were selected as ‘Usually’ or ‘Occasionally’ ] |[ ] [ ] [ ] [ ]

7. **\*Other (please specify the reasons for intermittent non-availability over the past 24 months)**

|  |  |  |
| --- | --- | --- |
| [in this table you will see the medicines that were selected as ‘Other\*’] |  |  |

#### 8. \*****Where you indicated experiencing Shortages of medicines in your country, please indicate which options, if any, were available to overcome them:****

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | **Using substitutes** | **Borrowing from other countries** | **Using another protocol** | **Postponing therapy** | **Obtaining funding/support from NGOs** | **Not able to overcome shortages** | **Don’t know** | **Other\*** |
| [in this table you will see the medicines that were selected as ‘Shortages’] | [ ]  |[ ] [ ] [ ] [ ] [ ] [ ] [ ]

#### 9. \*Other (please specify how did you overcome shortages)

|  |  |
| --- | --- |
| [in this table you will see the medicines that were selected as ‘Other\*’] |  |

#### \*10.  ****Did you face issues prescribing the following medicines to children in your country in the past 24 months?****

|  | **Yes** | **No** | **Not applicable** |
| --- | --- | --- | --- |
| Halothane |[ ] [ ] [ ]
| Isoflurane |[ ] [ ] [ ]
| Nitrous Oxide |[ ] [ ] [ ]
| Oxygen |[ ] [ ] [ ]
| Ketamine |[ ] [ ] [ ]
| Propofol (thiopental as alternative) |[ ] [ ] [ ]
| D bupivacaine |[ ] [ ] [ ]
| D lidocaine |[ ] [ ] [ ]
| lidocaine + epinephrine (adrenaline) |[ ] [ ] [ ]
| ephedrine |[ ] [ ] [ ]
| atropine |[ ] [ ] [ ]
| D midazolam |[ ] [ ] [ ]
| Acetylsalicytic acid |[ ] [ ] [ ]
| Ibubrofen |[ ] [ ] [ ]
| Paracetamol |[ ] [ ] [ ]
| Codeine |[ ] [ ] [ ]
| Fentanyl |[ ] [ ] [ ]
| Morphine |[ ] [ ] [ ]
| Methadone |[ ] [ ] [ ]
| Amitriptyne |[ ] [ ] [ ]
| Cyclizine |[ ] [ ] [ ]
| Diazepam |[ ] [ ] [ ]
| Docusate sodium |[ ] [ ] [ ]
| Fluoxetine |[ ] [ ] [ ]
| Haloperidol |[ ] [ ] [ ]
| Hyoscine butylbromide |[ ] [ ] [ ]
| Hyoscine hydrobromide |[ ] [ ] [ ]
| Lactulose |[ ] [ ] [ ]
| Loperamide |[ ] [ ] [ ]
| Metoclopramide |[ ] [ ] [ ]
| Midazolam |[ ] [ ] [ ]
| Ondansetron |[ ] [ ] [ ]
| Sen(n)a |[ ] [ ] [ ]
| Aciclovir |[ ] [ ] [ ]
| Ganciclovir (for CMV reactivation) |[ ] [ ] [ ]
| Clinically relevant broad spectrum IV antibiotics |[ ] [ ] [ ]
| Sulphametoxazol with trimethoprim, or equivalent IV therapy for pneumocystis jerovicii |[ ] [ ] [ ]
| Clinically relevant antifungal agent(s) for prophylaxis |[ ] [ ] [ ]
| Clinically relevant antifungal agent(s) for treatment of invasive fungal infections |[ ] [ ] [ ]
| Allopurinol |[ ] [ ] [ ]
| Filgastrim or lenograstim |[ ] [ ] [ ]
| Calcium folinate or calcium levofolinate |[ ] [ ] [ ]
| Mesna |[ ] [ ] [ ]
| Pyridoxine (hydrochloride) |[ ] [ ] [ ]
| Rasburicase |[ ] [ ] [ ]
| Corticosteroid (eye drop) |[ ] [ ] [ ]

#### 11. ****\*(If)**** ****in the previous question you answered ‘Yes’ for the below listed medicines, how were these barriers to prescribing overcome in your country?****

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | **Obtaining special authorisation from national medicines agency** | **Obtaining special authorisation from manufacturer** | **Obtaining special authorisation from wholesaler** | **Obtaining insurance pre-approval per patient** | **Don’t know** | **Other\*** |
| [in this table you will see the medicines that were selected as ‘Yes’] |[ ] [ ] [ ] [ ] [ ] [ ]

#### 12. \*Other (please specify how were these barriers to prescribing overcome in your country

|  |  |
| --- | --- |
| [in this table you will see the medicines that were selected as ‘Other\*’] |  |

#### \*13. ****Do patients/parents have to incur out-of-pocket costs for the following medicines?****

|  | **Yes** | **No** | **Don’t know** |
| --- | --- | --- | --- |
| Halothane |[ ] [ ] [ ]
| Isoflurane |[ ] [ ] [ ]
| Nitrous Oxide |[ ] [ ] [ ]
| Oxygen |[ ] [ ] [ ]
| Ketamine |[ ] [ ] [ ]
| Propofol (thiopental as alternative) |[ ] [ ] [ ]
| D bupivacaine |[ ] [ ] [ ]
| D lidocaine |[ ] [ ] [ ]
| lidocaine + epinephrine (adrenaline) |[ ] [ ] [ ]
| ephedrine |[ ] [ ] [ ]
| atropine |[ ] [ ] [ ]
| D midazolam |[ ] [ ] [ ]
| Acetylsalicytic acid |[ ] [ ] [ ]
| Ibubrofen |[ ] [ ] [ ]
| Paracetamol |[ ] [ ] [ ]
| Codeine |[ ] [ ] [ ]
| Fentanyl |[ ] [ ] [ ]
| Morphine |[ ] [ ] [ ]
| Methadone |[ ] [ ] [ ]
| Amitriptyne |[ ] [ ] [ ]
| Cyclizine |[ ] [ ] [ ]
| Diazepam |[ ] [ ] [ ]
| Docusate sodium |[ ] [ ] [ ]
| Fluoxetine |[ ] [ ] [ ]
| Haloperidol |[ ] [ ] [ ]
| Hyoscine butylbromide |[ ] [ ] [ ]
| Hyoscine hydrobromide |[ ] [ ] [ ]
| Lactulose |[ ] [ ] [ ]
| Loperamide |[ ] [ ] [ ]
| Metoclopramide |[ ] [ ] [ ]
| Midazolam |[ ] [ ] [ ]
| Ondansetron |[ ] [ ] [ ]
| Sen(n)a |[ ] [ ] [ ]
| Aciclovir |[ ] [ ] [ ]
| Ganciclovir (for CMV reactivation) |[ ] [ ] [ ]
| Clinically relevant broad spectrum IV antibiotics |[ ] [ ] [ ]
| Sulphametoxazol with trimethoprim, or equivalent IV therapy for pneumocystis jerovicii |[ ] [ ] [ ]
| Clinically relevant antifungal agent(s) for prophylaxis |[ ] [ ] [ ]
| Clinically relevant antifungal agent(s) for treatment of invasive fungal infections |[ ] [ ] [ ]
| Allopurinol |[ ] [ ] [ ]
| Filgastrim or lenograstim |[ ] [ ] [ ]
| Calcium folinate or calcium levofolinate |[ ] [ ] [ ]
| Mesna |[ ] [ ] [ ]
| Pyridoxine (hydrochloride) |[ ] [ ] [ ]
| Rasburicase |[ ] [ ] [ ]
| Corticosteroid (eye drop) |[ ] [ ] [ ]

#### 14. \*(If) i****n the previous question you answered Yes for the below listed medicines, please select which proportion of out of pocket costs applies, approximately?****

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **25% of cost** | **50% of cost** | **Full cost** | **Don’t know** | **Other\*** |
| [in this table you will see the medicines that were selected as ‘Yes’] |[ ] [ ] [ ] [ ] [ ]

#### 15. \*Other (please specify which proportion of out of pocket costs applies)

|  |  |
| --- | --- |
| [in this table you will see the medicines that were selected as ‘Other\*’] |  |

#### \*16.  ****Are the following orally administrable medicines available in child-friendly formulations and doses?****

|  | **Always** | **Usually** | **Occasionally** | **Never** | **Don’t know** | **Not applicable** |
| --- | --- | --- | --- | --- | --- | --- |
| D lidocaine |[ ] [ ] [ ] [ ] [ ] [ ]
| D midazolam |[ ] [ ] [ ] [ ] [ ] [ ]
| Acetylsalicytic acid |[ ] [ ] [ ] [ ] [ ] [ ]
| Ibubrofen |[ ] [ ] [ ] [ ] [ ] [ ]
| Paracetamol |[ ] [ ] [ ] [ ] [ ] [ ]
| Codeine |[ ] [ ] [ ] [ ] [ ] [ ]
| Fentanyl |[ ] [ ] [ ] [ ] [ ] [ ]
| Morphine |[ ] [ ] [ ] [ ] [ ] [ ]
| Methadone |[ ] [ ] [ ] [ ] [ ] [ ]
| Amitriptyne |[ ] [ ] [ ] [ ] [ ] [ ]
| Cyclizine |[ ] [ ] [ ] [ ] [ ] [ ]
| Diazepam |[ ] [ ] [ ] [ ] [ ] [ ]
| Docusate sodium |[ ] [ ] [ ] [ ] [ ] [ ]
| Fluoxetine |[ ] [ ] [ ] [ ] [ ] [ ]
| Haloperidol |[ ] [ ] [ ] [ ] [ ] [ ]
| Hyoscine hydrobromide |[ ] [ ] [ ] [ ] [ ] [ ]
| Lactulose |[ ] [ ] [ ] [ ] [ ] [ ]
| Loperamide |[ ] [ ] [ ] [ ] [ ] [ ]
| Metoclopramide |[ ] [ ] [ ] [ ] [ ] [ ]
| Midazolam |[ ] [ ] [ ] [ ] [ ] [ ]
| Ondansetron |[ ] [ ] [ ] [ ] [ ] [ ]
| Sen(n)a |[ ] [ ] [ ] [ ] [ ] [ ]
| Aciclovir |[ ] [ ] [ ] [ ] [ ] [ ]
| Ganciclovir (for CMV reactivation) |[ ] [ ] [ ] [ ] [ ] [ ]
| Clinically relevant antifungal agent(s) for prophylaxis |[ ] [ ] [ ] [ ] [ ] [ ]
| Clinically relevant antifungal agent(s) for treatment of invasive fungal infections |[ ] [ ] [ ] [ ] [ ] [ ]
| Allopurinol |[ ] [ ] [ ] [ ] [ ] [ ]
| Mesna |[ ] [ ] [ ] [ ] [ ] [ ]
| Pyridoxine (hydrochloride) |[ ] [ ] [ ] [ ] [ ] [ ]
| Corticosteroid (eye drop) |[ ] [ ] [ ] [ ] [ ] [ ]

#### \*17.  ****When medicines are not available in a child-friendly dose or formulation, what alternatives are available (in general/across agents covered)?****

[ ]  Preparation on the hospital ward by nurses

[ ]  Centralised preparation by hospital pharmacy only for in-patients

[ ]  Centralised preparation by hospital pharmacy for both in- and out- patients

[ ]  Preparation by any other pharmacy as additional service

[ ]  Don't know

[ ]  Other (please specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

#### \*18.  ****Would you like your participation in the survey to be acknowledged?****

[ ]  Yes

[ ]  No

#### 19. ****If your answer is yes, please complete the below:****

First name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Last name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

#### \*20. ****Country****

#### \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Annex: Reference list of palliative, supportive and pain control medicines considered in the survey

|  |
| --- |
| Halothane |[ ] [ ] [ ]
| Isoflurane |[ ] [ ] [ ]
| Nitrous Oxide |[ ] [ ] [ ]
| Oxygen |[ ] [ ] [ ]
| Ketamine |[ ] [ ] [ ]
| Propofol (thiopental as alternative) |[ ] [ ] [ ]
| D bupivacaine |[ ] [ ] [ ]
| D lidocaine |[ ] [ ] [ ]
| lidocaine + epinephrine (adrenaline) |[ ] [ ] [ ]
| ephedrine |[ ] [ ] [ ]
| atropine |[ ] [ ] [ ]
| D midazolam |[ ] [ ] [ ]
| Acetylsalicytic acid |[ ] [ ] [ ]
| Ibubrofen |[ ] [ ] [ ]
| Paracetamol |[ ] [ ] [ ]
| Codeine |[ ] [ ] [ ]
| Fentanyl |[ ] [ ] [ ]
| Morphine |[ ] [ ] [ ]
| Methadone |[ ] [ ] [ ]
| Amitriptyne |[ ] [ ] [ ]
| Cyclizine |[ ] [ ] [ ]
| Diazepam |[ ] [ ] [ ]
| Docusate sodium |[ ] [ ] [ ]
| Fluoxetine |[ ] [ ] [ ]
| Haloperidol |[ ] [ ] [ ]
| Hyoscine butylbromide |[ ] [ ] [ ]
| Hyoscine hydrobromide |[ ] [ ] [ ]
| Lactulose |[ ] [ ] [ ]
| Loperamide |[ ] [ ] [ ]
| Metoclopramide |[ ] [ ] [ ]
| Midazolam |[ ] [ ] [ ]
| Ondansetron |[ ] [ ] [ ]
| Sen(n)a |[ ] [ ] [ ]
| Aciclovir |[ ] [ ] [ ]
| Ganciclovir (for CMV reactivation) |[ ] [ ] [ ]
| Clinically relevant broad spectrum IV antibiotics |[ ] [ ] [ ]
| Sulphametoxazol with trimethoprim, or equivalent IV therapy for pneumocystis jerovicii |[ ] [ ] [ ]
| Clinically relevant antifungal agent(s) for prophylaxis |[ ] [ ] [ ]
| Clinically relevant antifungal agent(s) for treatment of invasive fungal infections |[ ] [ ] [ ]
| Allopurinol |[ ] [ ] [ ]
| Filgastrim or lenograstim |[ ] [ ] [ ]
| Calcium folinate or calcium levofolinate |[ ] [ ] [ ]
| Mesna |[ ] [ ] [ ]
| Pyridoxine (hydrochloride) |[ ] [ ] [ ]
| Rasburicase |[ ] [ ] [ ]
| Corticosteroid (eye drop) |[ ] [ ] [ ]