



**Therapeutic Interchange for Antihistamine-Containing Products**

Patients under the age of 16 years old are excluded from this interchange.

<b>SINGLE ENTITY ANTIHISTAMINES</b>	
<b>Ordered As</b>	<b>Substitute</b>
<i>Cyproheptadine</i>	No substitution – Dispense as written
<i>Dimenhydrinate</i>	<b>meclizine</b> 25 mg PO q6h prn
<i>Diphenhydramine</i>	No substitution – Dispense as written
<i>Doxylamine*</i>	<b>Diphenhydramine (Benadryl)</b> 25 mg every PO 6 hours or every 6 hours as needed.
<i>Hydroxyzine pamoate</i>	<b>Hydroxyzine HCl same dose and frequency</b>
<i>Meclizine</i>	No substitution – Dispense as written
<i>Promethazine</i>	No substitution – Dispense as written
<i>All other PRN single entity antihistamines (e.g. fexofenadine, cetirizine, levocetirizine)</i>	<b>Loratadine (Claritin)</b> 10 mg daily prn
<i>All other SCHEDULED single entity antihistamines</i>	<b>Loratadine (Claritin)</b> 10 mg daily
<b>ANTIHISTAMINE/MISCELLANEOUS COMBINATIONS</b>	
<i>Doxylamine-Pyridoxine(Diclegis)</i>	No substitution – Dispense as written
<b>ANTIHISTAMINE/DECONGESTANT COMBINATIONS</b>	
<i>OTC solid dosage forms (tablets, capsules, gelcaps, etc.)</i>	<b>Loratadine-pseudoephedrine, 24 hour (Claritin-D 24 hour)</b> daily or daily prn
<b>ANTIHISTAMINE/ANALGESIC COMBINATIONS</b>	
<i>Acetaminophen-Diphenhydramine (Tylenol PM)</i>	No substitution – Dispense as written
<i>All others</i>	<b>Loratadine (Claritin)</b> 10 mg daily prn + advise physician to order analgesic if needed
<b>ANTIHISTAMINE/DECONGESTANT/ANALGESIC COMBINATIONS</b>	
<i>All combinations</i>	<b>Loratadine-Pseudoephedrine, 24 hour (Claritin-D 24 hour)</b> daily prn + physician to order analgesic if needed

\*See ANTIHISTAMINE/MISCELLANEOUS COMBINATIONS