

South Dakota Max Units List

Drug Name	Limit/Day	Max Supply	Max Days
ABILIFY INJ 9.75MG	0.09	2.6	28
ABILIFY SOL 1MG/ML	10	300	30
ABILIFY TAB 10MG	1	34	34
ABILIFY TAB 15MG	1	34	34
ABILIFY TAB 20MG	1	34	34
ABILIFY TAB 2MG	1	34	34
ABILIFY TAB 30MG	1	34	34
ABILIFY TAB 5MG	1	34	34
ABILIFY DISC TAB 10MG	1	34	34
ABILIFY DISC TAB 15MG	1	34	34
ABSTRAL SUB 100MCG	2	68	34
ABSTRAL SUB 200MCG	2	68	34
ABSTRAL SUB 300MCG	2	68	34
ABSTRAL SUB 400MCG	2	68	34
ABSTRAL SUB 600MCG	2	68	34
ABSTRAL SUB 800MCG	2	68	34
ACCU-CHEK TES ACTIVE	10	300	30
ACCU-CHEK TES AVIVA	10	300	30
ACCU-TREND TES GLUCOSE	10	300	30
ACEON TAB 4MG	1	34	34
ACEON TAB 8MG	2	68	34
ACIPHEX TAB 20MG	2	68	34
ACTIQ LOZ 1200MCG	1	30	30
ACTIQ LOZ 1600MCG	1	30	30
ACTIQ LOZ 200MCG	1	30	30
ACTIQ LOZ 400MCG	1	30	30
ACTIQ LOZ 600MCG	1	30	30
ACTIQ LOZ 800MCG	1	30	30
ACTONEL TAB 150MG	0.04	1	28
ACTONEL TAB 35MG	0.14	4	28
ACTOS TAB 15MG	1	34	34
ACTOS TAB 30MG	1	34	34
ACTOS TAB 45MG	1	34	34
ACURA TES BLD GLUC	10	300	30
ADALAT CC TAB 30MG ER	1	34	34
ADALAT CC TAB 60MG ER	2	68	34
ADALAT CC TAB 90MG ER	1	34	34
ADDERALL XR CAP 10MG	1	34	34

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Drug Name	Limit/Day	Max Supply	Max Days
ADDERALL XR CAP 15MG	1	34	34
ADDERALL XR CAP 20MG	2	68	34
ADDERALL XR CAP 25MG	1	34	34
ADDERALL XR CAP 30MG	2	68	34
ADDERALL XR CAP 5MG	1	34	34
ADVAIR DISKU AER 100/50	2	60	30
ADVAIR DISKU AER 250/50	2	60	30
ADVAIR DISKU AER 500/50	2	60	30
ADVAIR HFA AER 115/21	0.4	12 (1 inhaler)	30
ADVAIR HFA AER 230/21	0.4	12 (1 inhaler)	30
ADVAIR HFA AER 45/21	0.4	12 (1 inhaler)	30
ADVANCE TES INTUITIO	10	300	30
ADVICOR TAB 1000-20	2	68	34
ADVICOR TAB 1000-40	2	68	34
ADVICOR TAB 500-20MG	1	34	34
ADVICOR TAB 750-20MG	2	68	34
ADVOCATE TES	10	300	30
ADVOCATE TES REDICODE	10	300	30
AFEDITAB TAB 30MG CR	1	34	34
AFEDITAB TAB 60MG CR	2	68	34
ALAVERT TAB 10MG	1	34	34
ALAVERT TAB 10MG	1	34	34
ALAVERT ALRG TAB /SINUS	2	68	34
ALENDRONATE TAB 10MG	1	34	34
ALENDRONATE TAB 35MG	0.14	4	28
ALENDRONATE TAB 40MG	1	34	34
ALENDRONATE TAB 5MG	1	34	34
ALENDRONATE TAB 70MG	0.14	4	28
ALL DAY ALLG CAP 10MG	1	34	34
ALL DAY ALRG TAB 5-120MG	2	68	34
ALLEGRA ALRG SUS 30MG/5ML	10	340	34
ALLEGRA ALRG TAB 180MG	1	34	34
ALLEGRA ALRG TAB 30MG	2	68	34
ALLEGRA ALRG TAB 60MG	2	68	34
ALLEGRA-D TAB 12 HOUR	2	68	34
ALLERGY REL/ TAB DECONGES	1	34	34
ALPRAZOLAM TAB 0.5MG ER	1	34	34
ALPRAZOLAM TAB 1MG ER	1	34	34

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Drug Name	Limit/Day	Max Supply	Max Days
ALPRAZOLAM TAB 2MG ER	1	34	34
ALPRAZOLAM TAB 3MG ER	1	34	34
ALTABAX OIN 1%	0.33	5	15
ALTACE CAP 1.25MG	1	34	34
ALTACE CAP 10MG	2	68	34
ALTACE CAP 2.5MG	1	34	34
ALTACE CAP 5MG	1	34	34
ALVESCO AER 160MCG	0.2	6.1 (1 inhaler)	30
ALVESCO AER 80MCG	0.2	6.1 (1 inhaler)	30
AMARYL TAB 1MG	1.5	51	34
AMARYL TAB 2MG	1.5	51	34
AMARYL TAB 4MG	2	68	34
AMBIEN TAB 10MG	2	68	34
AMBIEN TAB 5MG	1.5	51	34
AMBIEN CR TAB 12.5MG	1	34	34
AMBIEN CR TAB 6.25MG	1	34	34
AMERGE TAB 1MG	0.6	18	30
AMERGE TAB 2.5MG	0.6	18	30
AMITIZA CAP 24MCG	2	68	34
AMLODIPINE TAB 2.5MG	1	34	34
AMLODIPINE TAB 5MG	1.5	51	34
AMOX/K CLAV SUS 200/5ML	30	900	30
AMOX/K CLAV SUS 250/5ML	30	900	30
AMOX/K CLAV SUS 400/5ML	30	900	30
AMOX/K CLAV SUS 600/5ML	30	900	30
AMOXICILLIN SUS 125/5ML	30	900	30
AMOXICILLIN SUS 200/5ML	30	900	30
AMOXICILLIN SUS 250/5ML	30	900	30
AMOXICILLIN SUS 400/5ML	30	900	30
AMPHET/DEXTR CAP 15MG ER	1	34	34
AMPHET/DEXTR CAP 20MG ER	2	68	34
AMPHET/DEXTR CAP 25MG ER	1	34	34
AMPHET/DEXTR CAP 30MG ER	2	68	34
AMPHET/DEXTR CAP 5MG ER	1	34	34
AMPHETAMINE CAP 10MG ER	1	34	34
AMRIX CAP 15MG	1	34	34
AMRIX CAP 30MG	1	34	34
ANA-LEX KIT	0.01	0.5	34

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Drug Name	Limit/Day	Max Supply	Max Days
ANGELIQ TAB 0.5-1MG	1	28	28
ALENZIN TAB 174MG	1	34	34
ALENZIN TAB 348MG	1	34	34
ALENZIN TAB 522MG	1	34	34
ARAVA TAB 10MG	1	34	34
ARAVA TAB 20MG	1	34	34
ARICEPT TAB 10MG	1	34	34
ARICEPT TAB 5MG	1	34	34
ASSURE TES PLATINUM	10	300	30
ASSURE 3 TES	10	300	30
ASSURE 4 TES	10	300	30
ASSURE PRO TES	10	300	30
ATACAND TAB 16MG	1.5	51	34
ATACAND TAB 32MG	1	34	34
ATACAND TAB 4MG	1.5	51	34
ATACAND TAB 8MG	1.5	51	34
ATACAND HCT TAB 16-12.5	1.5	51	34
ATACAND HCT TAB 32-12.5	1	34	34
ATROVENT NAS SOL 0.03%	1	30	30
ATROVENT NAS SOL 0.06%	1.07	15	14
AUGMENTIN SUS 125/5ML	30	900	30
AUGMENTIN SUS 250/5ML	30	900	30
AVALIDE TAB 150-12.5	1	34	34
AVALIDE TAB 150-12.5	1	34	34
AVALIDE TAB 300-12.5	1	34	34
AVANDAMET TAB 4-500MG	2	68	34
AVANDIA TAB 2MG	2	68	34
AVANDIA TAB 4MG	2	68	34
AVANDIA TAB 8MG	2	68	34
AVAPRO TAB 150MG	1	34	34
AVAPRO TAB 300MG	1	34	34
AVAPRO TAB 75MG	1.5	51	34
AVINZA CAP 120MG	1	34	34
AVINZA CAP 30MG	1	34	34
AVINZA CAP 60MG	1	34	34
AVINZA CAP 90MG	1	34	34
AVONEX KIT 30MCG	0.14	4 vials	28
AVONEX PEN KIT 30MCG	0.14	4 pens	28

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Drug Name	Limit/Day	Max Supply	Max Days
AVONEX PREFL KIT 30MCG	0.14	4 syringes	28
AXERT TAB 12.5MG	0.4	12	30
AXERT TAB 6.25MG	0.4	12	30
AZELASTINE SPR 0.1%	1	30	30
AZILECT TAB 0.5MG	1	34	34
AZILECT TAB 1MG	1	34	34
BASAGLAR INJ 100UNIT	1.5	45ml	30
BASAGLAR INJ 100UNIT	1.5	45ml	30
BECONASE AQ SUS 0.042%	0.83	25	30
BENAZEP/HCTZ TAB 10-12.5	2	68	34
BENAZEP/HCTZ TAB 20-12.5	2	68	34
BENAZEP/HCTZ TAB 20-25MG	2	68	34
BENAZEP/HCTZ TAB 5-6.25	2	68	34
BENAZEPRIL TAB 10MG	2	68	34
BENAZEPRIL TAB 20MG	2	68	34
BENAZEPRIL TAB 40MG	2	68	34
BENAZEPRIL TAB 5MG	2	68	34
BENZAMYCIN GEL 5-3%	1.55	46.6	30
BETASERON INJ 0.3MG	0.5	15	30
BLOOD GLUCOS TES	10	300	30
BROVANA NEB 15MCG	4 ml (2 vials)	120 ml (60 vials)	30
BUDEPRION TAB 150MG SR	1	34	34
BUPRENORPHIN SUB 2MG	3	102	34
BUPRENORPHIN SUB 8MG	3	102	34
BUPROPN HCL TAB 150MG XL	1	34	34
BUPROPN HCL TAB 300MG XL	1	34	34
BUTORPHANOL SOL 10MG/ML	0.17	5	30
BUTRANS DIS 10MCG/HR	0.14	4	28
BUTRANS DIS 20MCG/HR	0.14	4	28
BUTRANS DIS 5MCG/HR	0.14	4	28
BYETTA INJ 10MCG	0.08	2.4	30
BYETTA INJ 5MCG	0.04	1.2	30
CABERGOLINE TAB 0.5MG	0.29	8	28
CADUET TAB 10-10MG	1	34	34
CADUET TAB 10-20MG	1	34	34
CADUET TAB 10-40MG	1	34	34
CADUET TAB 10-80MG	1	34	34
CADUET TAB 2.5-10MG	1	34	34

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CADUET TAB 2.5-20MG	1	34	34
CADUET TAB 2.5-40MG	1	34	34
CADUET TAB 5-10MG	1	34	34
CADUET TAB 5-20MG	1	34	34
CADUET TAB 5-40MG	1	34	34
CADUET TAB 5-80MG	1	34	34
CALAN SR TAB 120MG	2	68	34
CALAN SR TAB 180MG	2	68	34
CALAN SR TAB 240MG	2	68	34
CARDIZEM CD CAP 120MG/24	1	34	34
CARDIZEM CD CAP 180MG/24	2	68	34
CARDIZEM CD CAP 240MG/24	1	34	34
CARDIZEM CD CAP 300MG/24	1	34	34
CARDIZEM CD CAP 360MG/24	1	34	34
CARDIZEM LA TAB 120MG	1	34	34
CARDIZEM LA TAB 180MG	1	34	34
CARDIZEM LA TAB 240MG	1	34	34
CARDIZEM LA TAB 300MG/24	1	34	34
CARDIZEM LA TAB 360MG	1	34	34
CARDIZEM LA TAB 420MG/24	1	34	34
CARDURA TAB 1MG	1.5	51	34
CARDURA TAB 2MG	1.5	51	34
CARDURA TAB 4MG	1.5	51	34
CARDURA TAB 8MG	2	68	34
CARDURA XL TAB 4MG	0.5	17	34
CARDURA XL TAB 8MG	0.5	17	34
CARESENS N TES	10	300	30
CARISOPRODOL TAB 250MG	3	102	34
CARTIA XT CAP 120/24HR	1	34	34
CARTIA XT CAP 180/24HR	2	68	34
CARTIA XT CAP 240/24HR	1	34	34
CARTIA XT CAP 300/24HR	1	34	34
CATAPRES-TTS DIS 0.1/24HR	0.14	4	28
CATAPRES-TTS DIS 0.2/24HR	0.14	4	28
CATAPRES-TTS DIS 0.3/24HR	0.14	4	28
CEFTRIAXONE INJ 10GM	0.41	14	34
CEFTRIAXONE INJ 1GM	4	136	34
CEFTRIAXONE INJ 250MG	8	272	34

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Drug Name	Limit/Day	Max Supply	Max Days
CEFTRIAXONE INJ 2GM	2	68	34
CEFTRIAXONE INJ 500MG	8	272	34
CELEBREX CAP 100MG	2	68	34
CELEBREX CAP 200MG	2	68	34
CELEBREX CAP 400MG	2	68	34
CELEXA TAB 10MG	1	34	34
CELEXA TAB 20MG	2	68	34
CELEXA TAB 40MG	2	68	34
CEPHALEXIN SUS 125/5ML	20	600	30
CEPHALEXIN SUS 250/5ML	20	600	30
CESAMET CAP 1MG	6	204	34
CETIRIZ/PSE TAB 5-120MG	2	68	34
CETIRIZINE CHW 10MG	1	34	34
CETIRIZINE CHW 5MG	1	34	34
CETIRIZINE TAB 10MG	1	34	34
CETIRIZINE TAB 5MG	1	34	34
CICLODAN SOL 8%	0.22	6.6	30
CICLOPIROX SOL 8%	0.22	6.6	30
CIMETIDINE TAB 300MG	2	68	34
CIMETIDINE TAB 400MG	2	68	34
CIMETIDINE TAB 800MG	2	68	34
CIMZIA KIT	0.04	1	28
CIMZIA PREFL KIT 200MG/ML	0.04	1	28
CITALOPRAM TAB 10MG	1	34	34
CITALOPRAM TAB 20MG	2	68	34
CITALOPRAM TAB 40MG	2	68	34
CLARINEX TAB 5MG	1	34	34
CLARITIN CAP 10MG	1	34	34
CLARITIN TAB 10MG	1	34	34
CLARITIN-D TAB 10-240MG	1	34	34
CLARITIN-D TAB 5-120MG	2	68	34
CLEVER CHEK TES	10	300	30
CLEVER CHOIC TES MICRO	10	300	30
CLEVR CHOICE TES AUTO-CD	10	300	30
CLONIDINE DIS 0.1/24HR	0.14	4	28
CLONIDINE DIS 0.2/24HR	0.14	4	28
CLONIDINE DIS 0.3/24HR	0.14	4	28
COMBIVENT AER 20-100	0.266	8 (2 inhalers)	30

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Drug Name	Limit/Day	Max Supply	Max Days
CONCERTA TAB 18MG	1	34	34
CONCERTA TAB 27MG	1	34	34
CONCERTA TAB 36MG	2	68	34
CONCERTA TAB 54MG	1	34	34
CONTOUR TES BLD GLUC	10	300	30
CONTROL TES	10	300	30
COPAXONE INJ 20MG/ML	0.03	1	30
COREG CR CAP 10MG	1	34	34
COREG CR CAP 20MG	1	34	34
COREG CR CAP 40MG	1	34	34
COREG CR CAP 80MG	1	34	34
COZAAR TAB 100MG	1	34	34
COZAAR TAB 25MG	1.5	51	34
COZAAR TAB 50MG	1.5	51	34
CREAMY FACE LIQ WASH 4%	0.03	1	30
CRESTOR TAB 10MG	1	34	34
CRESTOR TAB 20MG	1	34	34
CRESTOR TAB 40MG	1	34	34
CRESTOR TAB 5MG	1	34	34
CUBICIN SOL 500MG	2	68	34
CYCLOBENZAPR TAB 5MG	2	68	34
CYMBALTA CAP 20MG	2	68	34
CYMBALTA CAP 30MG	2	68	34
CYMBALTA CAP 60MG	1	34	34
DAYPRO TAB 600MG	2	68	34
DAYTRANA DIS 10MG/9HR	1	34	34
DAYTRANA DIS 15MG/9HR	1	34	34
DAYTRANA DIS 20MG/9HR	1	34	34
DAYTRANA DIS 30MG/9HR	1	34	34
DDAVP SPR 0.01%	0.33	10	30
DENAVIR CRE 1%	0.1666	5	30
DESMOPRESSIN SPR 0.01%	0.33	10	30
DESMOPRESSIN SPR 0.01%	0.33	10	30
DETROL TAB 1MG	2	68	34
DETROL TAB 2MG	2	68	34
DETROL LA CAP 2MG	1	34	34
DETROL LA CAP 4MG	1	34	34
DIASTAT PED GEL 2.5M GEL	0.04	1	28

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Drug Name	Limit/Day	Max Supply	Max Days
DIAZEPAM GEL 2.5MG	0.04	1	28
DICLOFENAC SOL 0.1% OP	0.1666	5	30
DILTIAZEM CAP 120MG/24	1	34	34
DILTIAZEM CAP 180MG/24	1	34	34
DILTIAZEM CAP 240MG/24	1	34	34
DILTIAZEM CAP 300MG/24	1	34	34
DILTIAZEM CAP 360MG/24	1	34	34
DILTIAZEM CAP 420MG/24	1	34	34
DILTIAZEM ER TAB 180MG	1	34	34
DILTIAZEM ER TAB 240MG	1	34	34
DILTIAZEM ER TAB 300MG	1	34	34
DILTIAZEM ER TAB 360MG	1	34	34
DILTIAZEM ER TAB 420MG	1	34	34
DILT-XR CAP 120MG	1	34	34
DILT-XR CAP 180MG	2	68	34
DILT-XR CAP 240MG	1	34	34
DIOVAN TAB 160MG	1	34	34
DIOVAN TAB 40MG	1	34	34
DIOVAN TAB 80MG	1	34	34
DIOVAN HCT TAB 160-12.5	2	68	34
DIOVAN HCT TAB 80/12.5	1	34	34
DITROPAN XL TAB 10MG	2	68	34
DITROPAN XL TAB 15MG	2	68	34
DITROPAN XL TAB 5MG	1	34	34
DONEPEZIL TAB 10MG	1	34	34
DONEPEZIL TAB 10MG ODT	1	34	34
DONEPEZIL TAB 5MG	1	34	34
DONEPEZIL TAB 5MG ODT	1	34	34
DOXAZOSIN TAB 1MG	1.5	51	34
DOXAZOSIN TAB 2MG	1.5	51	34
DOXAZOSIN TAB 4MG	1.5	51	34
DOXAZOSIN TAB 8MG	2	68	34
DUETACT TAB 30-4MG	1	34	34
DURAGESIC DIS 100MCG/H	0.33	10	30
DURAGESIC DIS 12MCG/HR	0.33	10	30
DURAGESIC DIS 25MCG/HR	0.33	10	30
DURAGESIC DIS 50MCG/HR	0.33	10	30
DURAGESIC DIS 75MCG/HR	0.33	10	30

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Drug Name	Limit/Day	Max Supply	Max Days
EASY TALK TES BLD GLUC	10	300	30
EASYGLUCO TES	10	300	30
EASYMAX TES	10	300	30
EASYPRO PLUS TES	10	300	30
EFFEXOR XR CAP 150MG	2	68	34
EFFEXOR XR CAP 37.5MG	1	34	34
EFFEXOR XR CAP 75MG	1	34	34
ELEMENT TES	10	300	30
ELMIRON CAP 100MG	3	102	34
EMBEDA CAP 100-4MG	2	68	34
EMBEDA CAP 20-0.8MG	2	68	34
EMBEDA CAP 30-1.2MG	2	68	34
EMBEDA CAP 50-2MG	2	68	34
EMBEDA CAP 60-2.4MG	2	68	34
EMBEDA CAP 80-3.2MG	2	68	34
EMBRACE TES BLD GLUC	10	300	30
EMEND CAP 125MG	1	1	1
EMEND CAP 80MG	1	2	2
EMEND PAK 80 & 125	1	3	3
EMSAM DIS 12MG/24H	1	34	34
EMSAM DIS 6MG/24HR	1	34	34
EMSAM DIS 9MG/24HR	1	34	34
ENBREL INJ 25/0.5ML	0.29	8 vials/syringes	28
ENBREL INJ 25MG	0.29	8 vials/syringes	28
ENBREL INJ 50MG/ML	0.29	8 vials/syringes	28
ENBREL SRCLK INJ 50MG/ML	0.29	8 vials/syringes	28
ENDOCET TAB 10-325MG	12	408	34
ENJUVIA TAB 0.3MG	1	34	34
ENJUVIA TAB 0.45MG	1	34	34
ENJUVIA TAB 0.625MG	1	34	34
ENJUVIA TAB 1.25MG	1	34	34
ENOXAPARIN INJ 100MG/ML	1	34	34
ENOXAPARIN INJ 120/0.8	1	34	34
ENOXAPARIN INJ 150MG/ML	1	34	34
ENOXAPARIN INJ 30/0.3ML	1	34	34
ENOXAPARIN INJ 40/0.4ML	1	34	34
ENOXAPARIN INJ 60/0.6ML	1	34	34
ENOXAPARIN INJ 80/0.8ML	1	34	34

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Drug Name	Limit/Day	Max Supply	Max Days
EPOPROSTENOL INJ 0.5MG	2	56	28
EPOPROSTENOL INJ 1.5MG	2	56	28
ESTRING MIS 2MG	0.03	1	30
EVENCARE TES BLD GLUC	10	300	30
EVOLUTION TES AUTOCODE	10	300	30
EXALGO TAB 12MG	1	34	34
EXALGO TAB 16MG	1	34	34
EXALGO TAB 8MG	1	34	34
EXFORGE TAB 10-160MG	1	34	34
EXFORGE TAB 10-320MG	1	34	34
EXFORGE TAB 5-160MG	1	34	34
EXFORGE TAB 5-320MG	1	34	34
EXTAVIA INJ 0.3MG	0.5	15	30
EZ SMART TES BLD GLUC	10	300	30
EZ SMART PLS TES BLD GLUC	10	300	30
FAMOTIDINE TAB 20MG	2	68	34
FAMOTIDINE TAB 40MG	2	68	34
FANAPT PAK	0.24	8	34
FANAPT TAB 10MG	2	68	34
FANAPT TAB 12MG	2	68	34
FANAPT TAB 1MG	2	68	34
FANAPT TAB 2MG	2	68	34
FANAPT TAB 4MG	2	68	34
FANAPT TAB 6MG	2	68	34
FANAPT TAB 8MG	2	68	34
FAZACLO TAB 100 ODT	3	102	34
FAZACLO TAB 12.5 ODT	2	68	34
FAZACLO TAB 150 ODT	3	102	34
FAZACLO TAB 200 ODT	3	102	34
FAZACLO TAB 25MG ODT	3	102	34
FELODIPINE TAB 10MG ER	2	68	34
FELODIPINE TAB 2.5MG ER	2	68	34
FELODIPINE TAB 5MG ER	2	68	34
FENTANYL DIS 100MCG/H	0.33	10	30
FENTANYL DIS 12MCG/HR	0.33	10	30
FENTANYL DIS 25MCG/HR	0.33	10	30
FENTANYL DIS 50MCG/HR	0.33	10	30
FENTANYL DIS 75MCG/HR	0.33	10	30

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Drug Name	Limit/Day	Max Supply	Max Days
FENTANYL OT LOZ 1200MCG	1	30	30
FENTANYL OT LOZ 1600MCG	1	30	30
FENTANYL OT LOZ 200MCG	1	30	30
FENTANYL OT LOZ 400MCG	1	30	30
FENTANYL OT LOZ 600MCG	1	30	30
FENTANYL OT LOZ 800MCG	1	30	30
FENTORA TAB 100MCG	1	30	30
FENTORA TAB 200MCG	1	30	30
FENTORA TAB 400MCG	1	30	30
FENTORA TAB 600MCG	1	30	30
FENTORA TAB 800MCG	1	30	30
FEXOFEN/PSE TAB 60-120MG	2	68	34
FEXOFENADINE TAB 180MG	1	34	34
FEXOFENADINE TAB 60MG	2	68	34
FIFTY50 GLUC TES 2.0	10	300	30
FLECTOR DIS 1.3%	2	68	34
FLOLAN INJ 0.5MG	2	56	28
FLOLAN INJ 1.5MG	2	56	28
FLONASE ALGY SPR 50MCG	1.07	32	30
FLOVENT DISK AER 100MCG	4	120	30
FLOVENT DISK AER 250MCG	4	120	30
FLOVENT DISK AER 50MCG	4	120	30
FLOVENT HFA AER 110MCG	0.8	24 (2 inhalers)	30
FLOVENT HFA AER 220MCG	0.8	24 (2 inhalers)	30
FLOVENT HFA AER 44MCG	0.706	21.2 (2 inhalers)	30
FLUNISOLIDE SPR 0.025%	0.83	25	30
FLUOXETINE CAP 10MG	1	34	34
FLUOXETINE CAP 10MG	1	34	34
FLUOXETINE CAP 20MG	4	136	34
FLUOXETINE CAP 40MG	1	34	34
FLUOXETINE CAP 90MG DR	0.14	4	28
FLUOXETINE TAB 10MG	1	34	34
FLUOXETINE TAB 20MG	8	272	34
FLUTICASONE SPR 50MCG	1.07	32	30
FLUVOXAMINE CAP 100MG ER	1	34	34
FLUVOXAMINE CAP 150MG ER	1	34	34
FLUVOXAMINE TAB 100MG	3	102	34
FLUVOXAMINE TAB 50MG	2	68	34

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Drug Name	Limit/Day	Max Supply	Max Days
FOCALIN XR CAP 10MG	1	34	34
FOCALIN XR CAP 15MG	1	34	34
FOCALIN XR CAP 20MG	1	34	34
FOCALIN XR CAP 5MG	1	34	34
FORA D15G TES BLD GLUC	10	300	30
FORA D20 TES BLD GLUC	10	300	30
FORA G20 TES BLD GLUC	10	300	30
FORA G30A TES BLD GLUC	10	300	30
FORA V10 TES BLD GLUC	10	300	30
FORA V12 TES BLD GLUC	10	300	30
FORA V20 TES BLD GLUC	10	300	30
FORA V30A TES BLD GLUC	10	300	30
FORADIL CAP AEROLIZE	2	60	30
FOSAMAX TAB 70MG	0.14	4	28
FOSAMAX + D TAB 70-2800	0.14	4	28
FOSAMAX + D TAB 70-5600	0.14	4	28
FOSINOPRIL TAB 10MG	2	68	34
FOSINOPRIL TAB 20MG	2	68	34
FOSINOPRIL TAB 40MG	2	68	34
FREESTYLE TES	10	300	30
FREESTYLE TES LITE	10	300	30
FROVA TAB 2.5MG	0.6	18	30
FUZEON INJ 90MG	0.04	1	28
GALANTAMINE SOL 4MG/ML	6	180	30
GALANTAMINE TAB 12MG	2	68	34
GALANTAMINE TAB 4MG	2	68	34
GALANTAMINE TAB 8MG	2	68	34
GEODON CAP 40MG	2	68	34
GEODON CAP 60MG	2	68	34
GEODON CAP 80MG	2	68	34
GEODON INJ 20MG	0.07	2	30
GLIMEPIRIDE TAB 1MG	1.5	51	34
GLIMEPIRIDE TAB 2MG	1.5	51	34
GLIMEPIRIDE TAB 4MG	2	68	34
GLUCOCARD TES VITAL	10	300	30
GLUCOCARD TES X-SENSOR	10	300	30
GLUCOCARD 01 TES SENSOR	10	300	30
GLUCOCOM TES	10	300	30

South Dakota Max Units List

Drug Name	Limit/Day	Max Supply	Max Days
GLUCOSE TES STRIPS	10	300	30
GLUMETZA TAB 500MG	4	136	34
GYNAZOLE-1 CRE 2%	0.18	5	28
HUMALOG INJ 100/ML	2	60ml	30
HUMALOG INJ 100/ML	1.5	45ml	30
HUMALOG KWIK INJ 100/ML	1.5	45ml	30
HUMALOG KWIK INJ 200/ML	1.5	45ml	30
HUMALOG MIX INJ 50/50	2.66	80ml	30
HUMALOG MIX INJ 50/50KWP	1.5	45ml	30
HUMALOG MIX INJ 75/25KWP	1.5	45ml	30
HUMALOG MIX SUS 75/25	2.66	80ml	30
HUMIRA INJ 10MG/0.2	0.07	2 syringes	28
HUMIRA KIT 20MG/0.4	0.07	2 syringes	28
HUMIRA KIT 40MG/0.8	0.21	6 syringes	28
HUMIRA PEN INJ CROHNS	0.21	6 syringes	28
HUMULIN INJ 70/30	2	60ml	30
HUMULIN INJ 70/30KWP	1.5	45ml	30
HUMULIN N INJ U-100	2	60ml	30
HUMULIN N INJ U-100KWP	1.5	45ml	30
HUMULIN R INJ U-100	2	60ml	30
HUMULIN R INJ U-500	0.67	20	30
HUMULIN R INJ U-500	0.6	18	30
HYZAAR TAB 100-25	1	34	34
HYZAAR TAB 50-12.5	1	34	34
IBUDONE TAB 10-200MG	5	170	34
IBUDONE TAB 5-200MG	5	170	34
IMITREX INJ 4MG/0.5	0.2	6 pens	30
IMITREX INJ 6MG/0.5	0.2	6	30
IMITREX INJ 6MG/0.5	0.2	6 pens	30
IMITREX INJ 6MG/0.5	0.2	6 cartridges	30
IMITREX SPR 20MG/ACT	0.4	12	30
IMITREX SPR 5MG/ACT	0.4	12	30
IMITREX TAB 100MG	0.6	18	30
IMITREX TAB 25MG	0.6	18	30
IMITREX TAB 50MG	0.6	18	30
INFINITY TES BLD GLUC	10	300	30
INVEGA TAB 1.5MG	1	34	34
INVEGA TAB 3MG	1	34	34

South Dakota Max Units List

Drug Name	Limit/Day	Max Supply	Max Days
INVEGA TAB 6MG	1	34	34
INVEGA TAB 9MG	1	34	34
INVEGA SUST INJ 117/0.75	0.03	0.75	28
INVEGA SUST INJ 156MG/ML	0.04	1	28
INVEGA SUST INJ 234/1.5	0.05	1.5	28
INVEGA SUST INJ 39/0.25	0.01	0.25	28
INVEGA SUST INJ 78/0.5ML	0.02	0.5	28
IPRATROPIUM SPR 0.03%	1	30	30
IPRATROPIUM SPR 0.06%	1.07	15	14
ISOPTIN SR TAB 240MG	2	68	34
ISOSORB MONO TAB 120MG ER	3	102	34
ISOSORB MONO TAB 30MG ER	1.5	51	34
ISOSORB MONO TAB 60MG ER	1.5	51	34
JANUMET TAB 50-1000	2	68	34
JANUMET TAB 50-500MG	2	68	34
JANUVIA TAB 100MG	1	34	34
JANUVIA TAB 25MG	1	34	34
JANUVIA TAB 50MG	1	34	34
KADIAN CAP 100MG ER	2	68	34
KADIAN CAP 10MG ER	1	34	34
KADIAN CAP 200MG ER	2	68	34
KADIAN CAP 20MG ER	2	68	34
KADIAN CAP 30MG ER	2	68	34
KADIAN CAP 50MG ER	2	68	34
KADIAN CAP 60MG ER	2	68	34
KADIAN CAP 80MG ER	2	68	34
KEFLEX CAP 750MG	0.5	17	34
KEPIVANCE INJ 6.25MG	1	6	6
KEPPRA XR TAB 500MG	6	204	34
KETOROLAC TAB 10MG	4	20	5
KINERET INJ	0.67	18.8	28
KLARON LOT 10%	3.93	118	30
KLOR-CON 10 TAB 10MEQ ER	4	136	34
K-TAB TAB 10MEQ CR	4	136	34
LANSOPRAZOLE CAP 15MG DR	2	68	34
LANSOPRAZOLE CAP 30MG DR	2	68	34
LANTUS INJ 100/ML	1.67	50	30
LANTUS INJ SOLOSTAR	1.5	45ml	30

South Dakota Max Units List

Drug Name	Limit/Day	Max Supply	Max Days
LATRIX SUS 50%	8.35	284	34
LEFLUNOMIDE TAB 10MG	1	34	34
LEFLUNOMIDE TAB 20MG	1	34	34
LESCOL CAP 20MG	1	34	34
LESCOL CAP 40MG	2	68	34
LESCOL XL TAB 80MG	2	68	34
LETAIRIS TAB 10MG	1	34	34
LETAIRIS TAB 5MG	1	34	34
LEVAQUIN TAB 250MG	1	34	34
LEVAQUIN TAB 500MG	1.5	51	34
LEVAQUIN TAB 750MG	1	34	34
LEVOCETIRIZI TAB 5MG	1	34	34
LEXAPRO SOL 5MG/5ML	20	680	34
LEXAPRO TAB 10MG	1.5	51	34
LEXAPRO TAB 20MG	1.5	51	34
LEXAPRO TAB 5MG	1	34	34
LIALDA TAB 1.2GM	4	136	34
LIBERTY TES	10	300	30
LIDOCAINE/HC KIT 2-2%	0.01	0.5	34
LIPITOR TAB 10MG	0.5	17	34
LIPITOR TAB 20MG	0.5	17	34
LIPITOR TAB 40MG	0.5	17	34
LIPITOR TAB 80MG	1	34	34
LISINOP/HCTZ TAB 10-12.5	1	34	34
LISINOPRIL TAB 10MG	2	68	34
LISINOPRIL TAB 2.5MG	2	68	34
LISINOPRIL TAB 20MG	2	68	34
LISINOPRIL TAB 40MG	2	68	34
LISINOPRIL TAB 5MG	2	68	34
LORATADINE CAP 10MG	1	34	34
LORATADINE TAB 10MG	1	34	34
LORATADINE TAB 10MG	1	34	34
LORATADINE TAB 10MG	1	34	34
LORATADINE TAB 10MG	1	34	34
LORATADINE-D TAB 10-240MG	1	34	34
LOSARTAN POT TAB 100MG	1	34	34
LOSARTAN POT TAB 25MG	1.5	51	34
LOSARTAN POT TAB 50MG	1.5	51	34

South Dakota Max Units List

Drug Name	Limit/Day	Max Supply	Max Days
LOSARTAN/HCT TAB 100-25	1	34	34
LOSARTAN/HCT TAB 50-12.5	1	34	34
LOTENSIN TAB 10MG	2	68	34
LOTENSIN TAB 20MG	2	68	34
LOTENSIN TAB 40MG	2	68	34
LOTENSIN HCT TAB 10-12.5	2	68	34
LOTENSIN HCT TAB 20-12.5	2	68	34
LOTENSIN HCT TAB 20-25MG	2	68	34
LOTRONEX TAB 1MG	2	68	34
LOVASTATIN TAB 10MG	1	34	34
LOVASTATIN TAB 20MG	1	34	34
LOVASTATIN TAB 40MG	2	68	34
LOVENOX INJ 100MG/ML	1	34	34
LOVENOX INJ 120/0.8	1	34	34
LOVENOX INJ 150MG/ML	1	34	34
LOVENOX INJ 30/0.3ML	1	34	34
LOVENOX INJ 300/3ML	1	34	34
LOVENOX INJ 40/0.4ML	1	34	34
LOVENOX INJ 60/0.6ML	1	34	34
LOVENOX INJ 80/0.8ML	1	34	34
LUNESTA TAB 1MG	1	34	34
LUNESTA TAB 2MG	1	34	34
LUNESTA TAB 3MG	1	34	34
LYRICA CAP 100MG	3	102	34
LYRICA CAP 150MG	3	102	34
LYRICA CAP 200MG	3	102	34
LYRICA CAP 225MG	2	68	34
LYRICA CAP 25MG	3	102	34
LYRICA CAP 300MG	2	68	34
LYRICA CAP 50MG	3	102	34
LYRICA CAP 75MG	3	102	34
MATZIM LA TAB 180MG/24	1	34	34
MATZIM LA TAB 240MG/24	1	34	34
MATZIM LA TAB 300MG/24	1	34	34
MATZIM LA TAB 360MG/24	1	34	34
MATZIM LA TAB 420MG/24	1	34	34
MAVIK TAB 1MG	1	34	34
MAVIK TAB 2MG	1	34	34

South Dakota Max Units List

Drug Name	Limit/Day	Max Supply	Max Days
MAVIK TAB 4MG	2	68	34
MAXALT TAB 10MG	0.4	12	30
MAXALT TAB 5MG	0.4	12	30
MAXALT-MLT TAB 10MG	0.2	6	30
MAXALT-MLT TAB 5MG	0.2	6	30
MAXIMA BLOOD TES GLUCOSE	10	300	30
MECLIZINE CHW 25MG	4	136	34
MECLIZINE TAB 25MG	4	136	34
MELOXICAM TAB 15MG	2	68	34
MELOXICAM TAB 7.5MG	1	34	34
METADATE TAB 20MG ER	3	102	34
METADATE CD CAP 10MG	1	34	34
METADATE CD CAP 20MG	1	34	34
METADATE CD CAP 30MG	1	34	34
METADATE CD CAP 40MG	1	34	34
METADATE CD CAP 50MG	1	34	34
METADATE CD CAP 60MG	1	34	34
METHOCARBAM TAB 500MG	4	136	34
METHOCARBAM TAB 750MG	4	136	34
METHYLPHENID TAB 10MG ER	2	68	34
METHYLPHENID TAB 18MG ER	1	34	34
METHYLPHENID TAB 18MG ER	1	34	34
METHYLPHENID TAB 20MG SR	3	102	34
METHYLPHENID TAB 27MG ER	1	34	34
METHYLPHENID TAB 27MG ER	1	34	34
METHYLPHENID TAB 36MG ER	2	68	34
METHYLPHENID TAB 36MG ER	2	68	34
METHYLPHENID TAB 54MG ER	1	34	34
METHYLPHENID TAB 54MG ER	1	34	34
METOCLOPRAMI TAB 10MG ODT	4	136	34
METOPROLOL TAB 100MG ER	1.5	51	34
METOPROLOL TAB 25MG ER	1.5	51	34
METOPROLOL TAB 50MG ER	1.5	51	34
METOSZOLV ODT TAB 5MG	4	136	34
MEVACOR TAB 40MG	2	68	34
MIACALCIN SPR 200/ACT	0.12	3.7	30
MICARDIS TAB 20MG	1	34	34
MICARDIS TAB 40MG	1.5	51	34

South Dakota Max Units List

Drug Name	Limit/Day	Max Supply	Max Days
MICARDIS TAB 80MG	1	34	34
MICARDIS HCT TAB 40/12.5	1.5	51	34
MICARDIS HCT TAB 80/12.5	1	34	34
MICRODOT TES	10	300	30
MINOCYCLINE TAB 135MG ER	0.5	15	30
MINOCYCLINE TAB 45MG ER	0.5	15	30
MINOCYCLINE TAB 45MG ER	0.5	15	30
MINOCYCLINE TAB 90MG ER	0.5	15	30
MINOCYCLINE TAB 90MG ER	0.5	15	30
MIRTAZAPINE TAB 15MG	1	34	34
MIRTAZAPINE TAB 15MG ODT	1	34	34
MIRTAZAPINE TAB 30MG	1	34	34
MIRTAZAPINE TAB 30MG ODT	1	34	34
MIRTAZAPINE TAB 45MG	1	34	34
MIRTAZAPINE TAB 45MG ODT	1	34	34
MOBIC TAB 15MG	2	68	34
MOBIC TAB 7.5MG	1	34	34
MOEXIPRIL TAB 7.5MG	1.5	51	34
MYGLUCOHEALT TES BLD GLUC	10	300	30
NAMENDA TAB 10MG	2	60	30
NAMENDA TAB 5MG	2	60	30
NARATRIPTAN TAB 1MG	0.6	18	30
NARATRIPTAN TAB 2.5MG	0.6	18	30
NASACORT ALR SPR 55MCG/AC	0.55	16.5	30
NASONEX SPR 50MCG/AC	0.57	17	30
NEO/POLY GU SOL 40/ML IR	0.33	10	30
NEOSPORIN GU SOL 40/ML IR	0.33	10	30
NEULASTA INJ 6MG/0.6M	0.09	2.4	28
NEULASTA KIT 6MG/0.6M	0.043	1.2	28
NEXAVAR TAB 200MG	4	136	34
NEXIUM CAP 20MG	1	30	30
NEXIUM CAP 40MG	1	30	30
NEXIUM GRA 10MG DR	1	30	30
NEXIUM GRA 20MG DR	1	30	30
NEXIUM GRA 40MG DR	1	30	30
NIFEDIAC CC TAB 30MG ER	1	34	34
NIFEDICAL XL TAB 30MG	1	34	34
NIFEDICAL XL TAB 60MG	2	68	34

South Dakota Max Units List

Drug Name	Limit/Day	Max Supply	Max Days
NIFEDIPINE TAB 30MG ER	1	34	34
NIFEDIPINE TAB 60MG ER	2	68	34
NIFEDIPINE TAB 90MG ER	1	34	34
NISOLDIPINE TAB 20MG	1	34	34
NISOLDIPINE TAB 30MG	2	68	34
NISOLDIPINE TAB 40MG	1	34	34
NIZATIDINE CAP 150MG	2	68	34
NIZATIDINE CAP 300MG	2	68	34
NORVASC TAB 2.5MG	1	34	34
NORVASC TAB 5MG	1.5	51	34
NOVA MAX TES GLUCOSE	10	300	30
NOVOLIN INJ 70/30	2	60ml	30
NOVOLIN N INJ RELION	2	60ml	30
NOVOLIN N INJ U-100	2	60ml	30
NOVOLIN R INJ U-100	2	60ml	30
NOVOLOG INJ 100/ML	1.67	50	30
NOVOLOG INJ FLEXPEN	1.5	45ml	30
NOVOLOG INJ PENFILL	1.5	45ml	30
NOVOLOG MIX INJ 70/30	1.67	50	30
NOVOLOG MIX INJ FLEXPEN	1.5	45ml	30
NOXAFIL SUS 40MG/ML	2.68	37.5	14
NPLATE INJ 250MCG	0.29	8	28
NPLATE INJ 500MCG	0.29	8	28
OLEPTRO TAB 24HR150	1	34	34
OLEPTRO TAB 24HR300	1	34	34
OLUX-E AER 0.05%	5.88	200	34
OMEPRAZOLE CAP 10MG	2	68	34
OMEPRAZOLE CAP 20MG	4	136	34
OMEPRAZOLE CAP 40MG	2	68	34
OMNARIS SPR	0.42	12.5	30
ONETOUCH TES ULTRA BL	10	300	30
ONETOUCH TES VERIO	10	300	30
OPANA TAB 10MG	6	204	34
OPANA TAB 5MG	6	204	34
OPANA ER TAB 15MG	2	68	34
OPANA ER TAB 20MG	2	68	34
OPANA ER TAB 30MG	2	68	34
OPANA ER TAB 40MG	2	68	34

South Dakota Max Units List

Drug Name	Limit/Day	Max Supply	Max Days
OPANA ER TAB 5MG	2	68	34
OPANA ER TAB 7.5MG	2	68	34
OPTIUM TES	10	300	30
OPTIUMEZ TES	10	300	30
ORACEA CAP 40MG	1	30	30
ORAVIG TAB 50MG	2	68	34
ORENCIA INJ 250MG	0.11	3	28
OXAPROZIN TAB 600MG	2	68	34
OXYBUTYNIN TAB 10MG ER	2	68	34
OXYBUTYNIN TAB 15MG ER	2	68	34
OXYBUTYNIN TAB 5MG ER	1	34	34
OXYCOD/APAP TAB 10-325MG	12	408	34
OXYCOD/IBU TAB 5-400MG	0.82	28	34
OXYCODONE TAB 10MG	6	204	34
OXYCODONE TAB 20MG	6	204	34
OXYCONTIN TAB 10MG CR	6	204	34
OXYCONTIN TAB 15MG CR	2	68	34
OXYCONTIN TAB 20MG CR	6	204	34
OXYCONTIN TAB 30MG CR	2	68	34
OXYCONTIN TAB 40MG CR	6	204	34
OXYCONTIN TAB 60MG CR	2	68	34
OXYCONTIN TAB 80MG CR	6	204	34
OXYMORPHONE TAB HCL 10MG	6	204	34
OXYMORPHONE TAB HCL 5MG	6	204	34
OXYTROL DIS 3.9MG/24	0.29	8	28
PANTOPRAZOLE TAB 20MG	1	34	34
PANTOPRAZOLE TAB 40MG	2	68	34
PAROXETIN ER TAB 12.5MG	1	34	34
PAROXETIN ER TAB 37.5MG	1	34	34
PAROXETINE TAB 10MG	1	34	34
PAROXETINE TAB 20MG	1	34	34
PAROXETINE TAB 25MG ER	2	68	34
PAROXETINE TAB 30MG	1	34	34
PAROXETINE TAB 40MG	2	68	34
PATADAY SOL 0.2%	0.08	2.5	30
PATANASE SPR 0.6%	1.02	30.5	30
PAXIL SUS 10MG/5ML	40	1200	30
PAXIL TAB 10MG	1	34	34

South Dakota Max Units List

Drug Name	Limit/Day	Max Supply	Max Days
PAXIL TAB 20MG	1	34	34
PAXIL TAB 30MG	1	34	34
PAXIL TAB 40MG	2	68	34
PAXIL CR TAB 12.5MG	1	34	34
PAXIL CR TAB 25MG	2	68	34
PAXIL CR TAB 37.5MG	1	34	34
PEG 3350 POW	34.13	1024	30
PEGASYS INJ	0.04	1	28
PEGASYS INJ 180MCG/M	0.14	4	28
PENLAC SOL 8%	0.22	6.6	30
PEPCID TAB 20MG	2	68	34
PEPCID TAB 40MG	2	68	34
PERCOCET TAB 10-325MG	12	408	34
PERINDOPRIL TAB 2MG	1	34	34
PERINDOPRIL TAB 4MG	1	34	34
PERINDOPRIL TAB 8MG	2	68	34
PEXEVA TAB 10MG	1	34	34
PEXEVA TAB 20MG	1	34	34
PEXEVA TAB 30MG	1	34	34
PEXEVA TAB 40MG	1	34	34
POCKETCHEM TES EZ	10	300	30
POT CHLORIDE CAP 10MEQ ER	4	136	34
POT CHLORIDE TAB 10MEQ ER	4	136	34
PRAVACHOL TAB 20MG	1	34	34
PRAVACHOL TAB 40MG	1	34	34
PRAVACHOL TAB 80MG	1	34	34
PRAVASTATIN TAB 10MG	1	34	34
PRAVASTATIN TAB 20MG	1	34	34
PRAVASTATIN TAB 40MG	1	34	34
PRAVASTATIN TAB 80MG	1	34	34
PRECISION TES PCX	10	300	30
PRECISION TES PCX PLUS	10	300	30
PRECISION TES QID	10	300	30
PRECISION TES SOF-TACT	10	300	30
PRECISION TES XTRA	10	300	30
PRECISION PT TES OF CARE	10	300	30
PREMARIN TAB 0.625MG	1.42	42.5	30
PRESTIGE TEST STRIPS	10	300	30

South Dakota Max Units List

Drug Name	Limit/Day	Max Supply	Max Days
PREVACID CAP 15MG DR	2	68	34
PREVACID CAP 30MG DR	2	68	34
PREVACID TAB 15MG STB	2	68	34
PREVACID TAB 30MG STB	2	68	34
PREVPAC MIS	1	14	14
PRILOSEC CAP 10MG	2	68	34
PRILOSEC CAP 20MG	4	136	34
PRILOSEC CAP 40MG	2	68	34
PRIMLEV TAB 10-300MG	13	442	34
PRIMLEV TAB 5-300MG	13	442	34
PRIMLEV TAB 7.5-300	13	442	34
PRINIVIL TAB 10MG	2	68	34
PRINIVIL TAB 20MG	2	68	34
PRINIVIL TAB 5MG	2	68	34
PRISTIQ TAB 100MG	1	34	34
PRISTIQ TAB 50MG	1	34	34
PROAIR HFA AER	0.566	17 (2 inhalers)	30
PROCARDIA XL TAB 30MG CR	1	34	34
PROCARDIA XL TAB 60MG CR	2	68	34
PROCARDIA XL TAB 90MG CR	1	34	34
PRODIGY NO TES CODING	10	300	30
PROTONIX TAB 20MG	1	34	34
PROTONIX TAB 40MG	2	68	34
PROVENTIL AER HFA	0.446	13.4 (2 inhalers)	30
PROVIGIL TAB 100MG	1	34	34
PROVIGIL TAB 200MG	1	34	34
PROZAC CAP 10MG	1	34	34
PROZAC CAP 20MG	4	136	34
PROZAC CAP 40MG	1	34	34
PROZAC WEEKL CAP 90MG	0.14	4	28
PULMICORT INH 180MCG	0.03	1	30
PULMICORT INH 90MCG	0.03	1	30
QUALAQUIN CAP 324MG	1	34	34
QUICKTEK TES	10	300	30
RAMIPRIL CAP 1.25MG	1	34	34
RAMIPRIL CAP 10MG	2	68	34
RAMIPRIL CAP 2.5MG	1	34	34
RAMIPRIL CAP 5MG	1	34	34

South Dakota Max Units List

Drug Name	Limit/Day	Max Supply	Max Days
RANEXA TAB 500MG	4	136	34
RANITIDINE CAP 150MG	2	68	34
RANITIDINE CAP 300MG	2	68	34
RANITIDINE TAB 150MG	2	68	34
RANITIDINE TAB 300MG	2	68	34
RAZADYNE TAB 12MG	2	68	34
RAZADYNE TAB 4MG	2	68	34
RAZADYNE TAB 8MG	2	68	34
REBIF INJ 22/0.5	0.21	6	28
REBIF INJ 44/0.5	0.21	6	28
REFUAH PLUS TES BLD GLUC	10	300	30
REGRANEX GEL 0.01%	1.07	30	28
RELION CONFIRM/MICR TES GLUCOSE	10	300	30
RELPAK TAB 20MG	0.4	12	30
RELPAK TAB 40MG	0.4	12	30
REMERON TAB 15MG	1	34	34
REMERON TAB 30MG	1	34	34
REMERON TAB 45MG	1	34	34
REMICADE INJ 100MG	0.18	5	28
REMODULIN INJ 10MG/ML	0.67	20	30
REMODULIN INJ 1MG/ML	0.67	20	30
REMODULIN INJ 2.5MG/ML	0.67	20	30
REMODULIN INJ 5MG/ML	0.67	20	30
REPREXAIN TAB 10-200MG	5	170	34
REPREXAIN TAB 5-200MG	5	170	34
REQUIP XL TAB 12MG	1	34	34
REQUIP XL TAB 2MG	2	68	34
REQUIP XL TAB 4MG	1	34	34
REQUIP XL TAB 8MG	2	68	34
RESTASIS EMU 0.05%	2	64	32
RHINOCORT SUS AQUA	0.51	17.2 (2 bottles)	34
RIGHTEST TES GS100	10	300	30
RIGHTEST TES GS300	10	300	30
RIGHTEST TES GS550	10	300	30
RISPERDAL INJ 12.5MG	0.07	2	28
RISPERDAL INJ 25MG	0.07	2	28
RISPERDAL INJ 37.5MG	0.07	2	28
RISPERDAL INJ 50MG	0.07	2	28

South Dakota Max Units List

Drug Name	Limit/Day	Max Supply	Max Days
RISPERDAL SOL 1MG/ML	2	60	30
RISPERDAL TAB 0.25MG	2	68	34
RISPERDAL TAB 0.5MG	2	68	34
RISPERDAL TAB 1MG	2	68	34
RISPERDAL TAB 2MG	2	68	34
RISPERDAL TAB 3MG	2	68	34
RISPERDAL TAB 4MG	2	68	34
RISPERDAL M TAB 0.5MG	2	68	34
RISPERDAL M TAB 1MG	2	68	34
RISPERDAL M TAB 2MG	2	68	34
RISPERDAL M TAB 3MG	2	68	34
RISPERDAL M TAB 4MG	2	68	34
RISPERIDONE SOL 1MG/ML	2	60	30
RISPERIDONE TAB 0.25MG	2	68	34
RISPERIDONE TAB 0.5MG	2	68	34
RISPERIDONE TAB 0.5MG OD	2	68	34
RISPERIDONE TAB 0.5MG OD	2	68	34
RISPERIDONE TAB 1 MG	2	68	34
RISPERIDONE TAB 1MG ODT	2	68	34
RISPERIDONE TAB 1MG ODT	2	68	34
RISPERIDONE TAB 2MG	2	68	34
RISPERIDONE TAB 2MG ODT	2	68	34
RISPERIDONE TAB 2MG ODT	2	68	34
RISPERIDONE TAB 3MG	2	68	34
RISPERIDONE TAB 3MG ODT	2	68	34
RISPERIDONE TAB 3MG ODT	2	68	34
RISPERIDONE TAB 3MG ODT	2	68	34
RISPERIDONE TAB 4MG	2	68	34
RISPERIDONE TAB 4MG ODT	2	68	34
RITALIN LA CAP 20MG	1	34	34
RITALIN LA CAP 30MG	1	34	34
RITALIN LA CAP 40MG	1	34	34
ROBAXIN TAB 500MG	4	136	34
ROBAXIN-750 TAB 750MG	4	136	34
ROCEPHIN INJ 1GM	4	136	34
ROCEPHIN INJ 500MG	8	272	34
SALICYLIC AER 6%		2 packages	30
SALICYLIC AC CRE 6%		2 packages	30

South Dakota Max Units List

Drug Name	Limit/Day	Max Supply	Max Days
SALICYLIC AC GEL 6%		2 packages	30
SALICYLIC AC LOT 6%		2 packages	30
SALICYLIC AC SHA 6%		2 packages	30
SANCUSO DIS 3.1MG	0.12	4	34
SAPHRIS SUB 10MG	2	68	34
SAPHRIS SUB 5MG	2	68	34
SARAFEM TAB 10MG	2	68	34
SARAFEM TAB 20MG	4	136	34
SEREVENT DIS AER 50MCG	2	60	30
SEROQUEL TAB 100MG	3	102	34
SEROQUEL TAB 200MG	4	136	34
SEROQUEL TAB 25MG	3	102	34
SEROQUEL TAB 300MG	5	170	34
SEROQUEL TAB 400MG	3	102	34
SEROQUEL TAB 50MG	3	102	34
SEROQUEL XR TAB 200MG	1	34	34
SEROQUEL XR TAB 300MG	2	68	34
SEROQUEL XR TAB 400MG	2	68	34
SERTRALINE TAB 25MG	1	34	34
SERTRALINE TAB 50MG	1.5	51	34
SIMCOR TAB 1000-20	2	68	34
SIMCOR TAB 500-20MG	2	68	34
SIMCOR TAB 750-20MG	2	68	34
SIMPONI INJ 50/0.5ML	0.02	0.5	28
SIMPONI INJ 50/0.5ML	0.02	0.5	28
SIMVASTATIN TAB 10MG	1	34	34
SIMVASTATIN TAB 20MG	1	34	34
SIMVASTATIN TAB 40MG	1	34	34
SIMVASTATIN TAB 5MG	1	34	34
SIMVASTATIN TAB 80MG	1	34	34
SINGULAIR CHW 4MG	1	34	34
SINGULAIR CHW 5MG	1	34	34
SINGULAIR TAB 10MG	1	34	34
SMARTEST TES BLD GLUC	10	300	30
SOLODYN TAB 105MG	1	34	34
SOLODYN TAB 115MG	0.5	15	30
SOLODYN TAB 55MG	1	34	34
SOLODYN TAB 80MG	1	34	34

South Dakota Max Units List

Drug Name	Limit/Day	Max Supply	Max Days
SOLUS V2 TES AUDIBLE	10	300	30
SOMA TAB 250MG	3	102	34
SONATA CAP 10MG	2	68	34
SONATA CAP 5MG	1	34	34
STELARA INJ 45MG/0.5	0.01	0.5	90
STELARA INJ 90MG/ML	0.01	1	90
STRATTERA CAP 100MG	1	34	34
STRATTERA CAP 10MG	2	68	34
STRATTERA CAP 18MG	2	68	34
STRATTERA CAP 25MG	2	68	34
STRATTERA CAP 40MG	2	68	34
STRATTERA CAP 60MG	1	34	34
STRATTERA CAP 80MG	1	34	34
SUBOXONE MIS 2-0.5MG	2	68	34
SUBOXONE MIS 8-2MG	2	68	34
SUMATRIPTAN INJ 4MG/0.5	0.2	6 pens	30
SUMATRIPTAN INJ 6MG/0.5	0.2	6	30
SUMATRIPTAN INJ 6MG/0.5	0.2	6 pens	30
SUMATRIPTAN INJ 6MG/0.5	0.2	6 cartridges	30
SUMATRIPTAN INJ 6MG/0.5	0.2	6 syringes	30
SUMATRIPTAN SPR 20MG/ACT	0.4	12	30
SUMATRIPTAN SPR 5MG/ACT	0.4	12	30
SUMATRIPTAN TAB 100MG	0.6	18	30
SUMATRIPTAN TAB 25MG	0.6	18	30
SUMATRIPTAN TAB 50MG	0.6	18	30
SURE EDGE TES	10	300	30
SURECHEK TES BLD GLUC	10	300	30
SURE-TEST TES EASYPLUS	10	300	30
SYMBICORT AER 160-4.5	0.34	10.2 (1 inhaler)	30
SYMBICORT AER 80-4.5	0.34	10.2 (1 inhaler)	30
SYMBYAX CAP 12-25MG	1	34	34
SYMBYAX CAP 12-50MG	1	34	34
SYMBYAX CAP 6-25MG	1	34	34
SYMBYAX CAP 6-50MG	1	34	34
TACLONEX OIN	1.76	60	30
TACLONEX SUS	1.76	60	30
TAMIFLU CAP 30MG	2	10	5
TAMIFLU CAP 45MG	2	10	5

South Dakota Max Units List

Drug Name	Limit/Day	Max Supply	Max Days
TAMIFLU CAP 75MG	1.43	10	7
TAZTIA XT CAP 120MG/24	1	34	34
TAZTIA XT CAP 180MG/24	1	34	34
TAZTIA XT CAP 240MG/24	1	34	34
TAZTIA XT CAP 300MG/24	1	34	34
TAZTIA XT CAP 360MG/24	1	34	34
TEKTURNA TAB 150MG	1	34	34
TEKTURNA TAB 300MG	1	34	34
TEKTURNA HCT TAB 150-12.5	1	34	34
TEKTURNA HCT TAB 150-25MG	1	34	34
TEKTURNA HCT TAB 300-12.5	1	34	34
TEKTURNA HCT TAB 300-25MG	1	34	34
TERAZOSIN CAP 10MG	2	68	34
TERAZOSIN CAP 1MG	1	34	34
TERAZOSIN CAP 2MG	1	34	34
TERAZOSIN CAP 5MG	2	68	34
TIAZAC CAP 120MG/24	1	34	34
TIAZAC CAP 180MG/24	1	34	34
TIAZAC CAP 240MG/24	1	34	34
TIAZAC CAP 300MG/24	1	34	34
TIAZAC CAP 360MG/24	1	34	34
TIAZAC CAP 420MG/24	1	34	34
TIZANIDINE CAP 2MG	2.5	85	34
TOPROL XL TAB 100MG	1.5	51	34
TOPROL XL TAB 25MG	1.5	51	34
TOPROL XL TAB 50MG	1.5	51	34
TOUJEO SOLO INJ 300IU/ML	0.75	22.5ml	30
TRAMADL/APAP TAB 37.5-325	10	340	34
TRAMADL/APAP TAB 37.5-325	10	340	34
TRAMADOL HCL TAB 50MG	8	272	34
TRANDOLAPRIL TAB 1MG	1	34	34
TRANDOLAPRIL TAB 2MG	1	34	34
TRANDOLAPRIL TAB 4MG	2	68	34
TRIAMCINOLON AER 55MCG/AC	0.55	16.5	30
TRIBENZOR20- TAB 5-12.5MG	1	34	34
TRIBENZOR40- TAB 10-12.5	1	34	34
TRIBENZOR40- TAB 10-25MG	1	34	34
TRIBENZOR40- TAB 5-12.5MG	1	34	34

South Dakota Max Units List

Drug Name	Limit/Day	Max Supply	Max Days
TRIBENZOR40- TAB 5-25MG	1	34	34
TROSPIMUM CL TAB 20MG	2	68	34
TRUETEST TES	10	300	30
TUSSIONEX SUS 10-8/5ML	10	300	30
TWYNSTA TAB 40-10MG	1	34	34
TWYNSTA TAB 40-5MG	1	34	34
TWYNSTA TAB 80-10MG	1	34	34
TWYNSTA TAB 80-5MG	1	34	34
TYZEKA TAB 600MG	1	34	34
ULTIMA TES	10	300	30
ULTRACET TAB 37.5-325	10	340	34
ULTRAM TAB 50MG	8	272	34
ULTRATRAK TES ULTIMATE	10	300	30
ULTRATRK PRO TES	10	300	30
UREA EMU 50%	0.35	12	34
UROXATRAL TAB 10MG	1	34	34
VELETRI INJ 1.5MG	2	56	28
VENLAFAXINE CAP 150MG ER	2	68	34
VENLAFAXINE CAP 37.5 ER	1	34	34
VENLAFAXINE CAP 75MG ER	1	34	34
VENLAFAXINE TAB 100MG	2	68	34
VENLAFAXINE TAB 25MG	3	102	34
VENLAFAXINE TAB 37.5MG	3	102	34
VENLAFAXINE TAB 50MG	3	102	34
VENLAFAXINE TAB 75MG	3	102	34
VENTAVIS SOL 10MCG/ML	6	204	34
VENTOLIN HFA AER	1.2	36 (2 inhalers)	30
VERAMYST SPR 27.5MCG	0.33	10	30
VERAPAMIL CAP 100MG ER	2	68	34
VERAPAMIL CAP 120MG ER	2	68	34
VERAPAMIL CAP 180MG ER	2	68	34
VERAPAMIL CAP 200MG ER	2	68	34
VERAPAMIL CAP 240MG ER	2	68	34
VERAPAMIL CAP 300MG ER	2	68	34
VERAPAMIL TAB 120MG	2	68	34
VERAPAMIL TAB 120MG ER	2	68	34
VERAPAMIL TAB 180MG ER	2	68	34
VERAPAMIL TAB 240MG ER	2	68	34

South Dakota Max Units List

Drug Name	Limit/Day	Max Supply	Max Days
VERDESO AER 0.05%	1.47	50 (1 package)	34
VERDESO AER 0.05%	2.94	100 (1 package)	34
VERELAN CAP 120MG SR	2	68	34
VERELAN CAP 180MG SR	2	68	34
VERELAN CAP 240MG SR	2	68	34
VERELAN CAP 360MG SR	2	68	34
VERELAN PM CAP 100MG ER	2	68	34
VERELAN PM CAP 200MG ER	2	68	34
VERELAN PM CAP 300MG ER	2	68	34
VICTORY TES AGM-4000	10	300	30
VIGAMOX DRO 0.5%	0.43	3	7
VIMOVO TAB 375-20MG	2	68	34
VIMOVO TAB 500-20MG	2	68	34
VOCAL POINT TES BLD GLUC	10	300	30
VUSION OIN	1	50	50
VYTORIN TAB 10-10MG	1	34	34
VYTORIN TAB 10-20MG	1	34	34
VYTORIN TAB 10-40MG	1	34	34
VYTORIN TAB 10-80MG	1	34	34
VYVANSE CAP 20MG	1	34	34
VYVANSE CAP 30MG	1	34	34
VYVANSE CAP 40MG	1	34	34
VYVANSE CAP 50MG	1	34	34
VYVANSE CAP 60MG	1	34	34
VYVANSE CAP 70MG	1	34	34
WAVESENSE TES PRESTO	10	300	30
WELLBUTRIN TAB XL 150MG	1	34	34
WELLBUTRIN TAB XL 300MG	1	34	34
XALATAN SOL 0.005%	0.09	2.5	28
XANAX XR TAB 0.5MG	1	34	34
XANAX XR TAB 1MG	1	34	34
XANAX XR TAB 2MG	1	34	34
XANAX XR TAB 3MG	1	34	34
XOLAIR SOL 150MG	0.07	2	28
XOLEGEL GEL 2%	0.5	15	30
XOPENEX HFA AER	1.5	45 (3 inhalers)	30
XYREM SOL 500MG/ML	18	540	30
XYZAL SOL 2.5/5ML	5	170	34

South Dakota Max Units List

Drug Name	Limit/Day	Max Supply	Max Days
XYZAL TAB 5MG	1	34	34
ZALEPLON CAP 10MG	2	68	34
ZALEPLON CAP 5MG	1	34	34
ZANAFLEX CAP 2MG	2.5	85	34
ZANTAC TAB 150MG	2	68	34
ZANTAC TAB 300MG	2	68	34
ZAVESCA CAP 100MG	3	102	34
ZELAPAR TAB 1.25MG	2	68	34
ZESTORETIC TAB 10-12.5	1	34	34
ZESTRIL TAB 10MG	2	68	34
ZESTRIL TAB 2.5MG	2	68	34
ZESTRIL TAB 20MG	2	68	34
ZESTRIL TAB 40MG	2	68	34
ZESTRIL TAB 5MG	2	68	34
ZETIA TAB 10MG	1	34	34
ZOCOR TAB 10MG	1	34	34
ZOCOR TAB 20MG	1	34	34
ZOCOR TAB 40MG	1	34	34
ZOCOR TAB 5MG	1	34	34
ZOCOR TAB 80MG	1	34	34
ZOLINZA CAP 100MG	1	34	34
ZOLOFT TAB 25MG	1	34	34
ZOLOFT TAB 50MG	1.5	51	34
ZOLPIDEM TAB 10MG	2	68	34
ZOLPIDEM TAB 5MG	1.5	51	34
ZOLPIDEM ER TAB 12.5MG	1	34	34
ZOLPIDEM ER TAB 6.25MG	1	34	34
ZOMIG TAB 2.5MG	0.4	12	30
ZOMIG TAB 5MG	0.4	12	30
ZOMIG ZMT TAB 2.5 MG	0.4	12	30
ZOMIG ZMT TAB 5MG	0.2	6	30
ZYFLO TAB 600MG	4	136	34
ZYFLO CR TAB 600MG	4	136	34
ZYPREXA INJ 10MG	0.07	2	30
ZYPREXA TAB 10MG	2	68	34
ZYPREXA TAB 15MG	2	68	34
ZYPREXA TAB 2.5MG	2	68	34
ZYPREXA TAB 20MG	2	68	34

South Dakota Max Units List

Drug Name	Limit/Day	Max Supply	Max Days
ZYPREXA TAB 5MG	2	68	34
ZYPREXA TAB 7.5MG	2	68	34
ZYPREXA RELP INJ 210MG	0.07	2	28
ZYPREXA RELP INJ 300MG	0.07	2	28
ZYPREXA RELP INJ 405MG	0.07	2	28
ZYPREXA ZYDI TAB 10MG	2	68	34
ZYPREXA ZYDI TAB 15MG	2	68	34
ZYPREXA ZYDI TAB 20MG	2	68	34
ZYPREXA ZYDI TAB 5MG	2	68	34
ZYVOX TAB 600MG	2	28	14