

ALASKA MEDICAID

**Transderm Scōp® (Scopolamine Patch)**

Transdermal patch: 1.5mg scopolamine

**Preferred Medication:**

NA

**Non-Preferred Medication:**

NA

**INDICATION:**

“Transderm Scop® is indicated in adults for prevention of nausea and vomiting associated with motion sickness and recovery from anesthesia and surgery.”<sup>1</sup>

**CRITERIA FOR APPROVAL:**

Patient is 18 years of age or older, **AND** is being treated for:

1. Nausea and vomiting associated with recovery from anesthesia and surgery; **OR**
2. Excess secretions, when therapy with a different drug has been less than optimal or inappropriate; **OR**
3. Nausea and vomiting associated with motion sickness; **AND**
4. Treatment with meclizine has been less than optimal, or is inappropriate.

**LENGTH OF AUTHORIZATION:**

1. Coverage may be approved for up to 1 year.

**DISPENSING LIMIT:**

The dispensing limit is a 30 day supply of medication.

**REFERENCES / FOOTNOTES:**

<sup>1</sup> Transderm Scōp® package insert, available at:  
[http://www.transdermscop.com/infomed\\_prescribing.htm](http://www.transdermscop.com/infomed_prescribing.htm)  
Accessed 05/28/09.