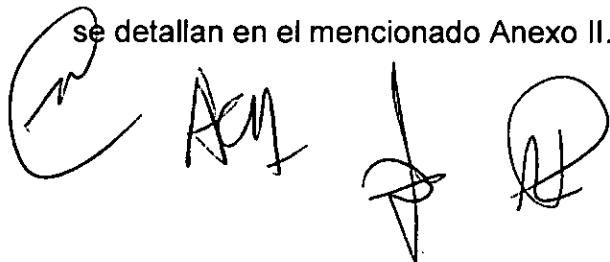


**ACTA ACUERDO ENTRE LA ADMINISTRACION PROVINCIAL DEL SEGURO  
DE SALUD (APROSS) y CAEME, CILFA Y COOPERALA**

Entre la **ADMINISTRACION PROVINCIAL DEL SEGURO DE SALUD**, en adelante **APROSS**, representada en este acto por el Lic. Julio César COMELLO, DNI N° 24.420.177, en su carácter de Presidente y que lo hace *ad referéndum* del Directorio de APROSS, por una parte; y por la otra **CAEME**, representada en este acto por su apoderado, el Sr. Alejandro Poli, DNI 12.046.408; por **COOPERALA** representada en este acto por la Gerente de Obras Sociales, la Sra. Ana Carolina Marchilli, DNI 20.618.888; por **CILFA** representada en este acto por su apoderado, el Sr. Claudio Riganti, DNI 14.270.410; en adelante, en conjunto "**LAS PARTES**", acuerdan en celebrar la presente **Acta Acuerdo** en aras de establecer descuentos más convenientes e incorporar nuevos principios activos al convenio que vincula a las partes para garantizar una mejor y más eficaz provisión de medicamentos a los afiliados de APROSS.

**PRIMERA: LAS PARTES** convienen que los principios activos descriptos en el Anexo I que forma parte integrante de la presente Acta Acuerdo y se encuentran incluidos en el vademécum de APROSS serán provistos por CAEME, CILFA y COOPERALA con los descuentos de acuerdo al Anexo mencionado sobre el precio de venta al público conforme agenda Kairos en los términos de la Resolución n° 231/11.

**SEGUNDA: LAS PARTES** acuerdan incorporar al convenio los principios activos detallados en el Anexo II que forma parte integrante de la presente Acta Acuerdo y establecer los descuentos sobre el precio de venta al público conforme agenda Kairos en los términos de la Resolución n° 231/11 de los principios activos como se detallan en el mencionado Anexo II.



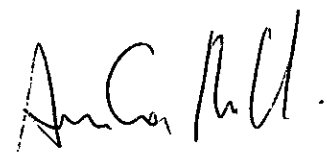
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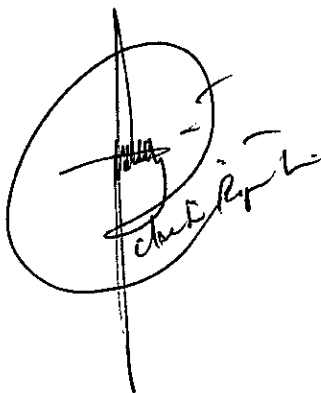
**TERCERA: LAS PARTES** acuerdan que los principios activos individualizados en el ANEXO I y II se corresponderán sólo a la marca comercial, presentación y laboratorio de acuerdo al ANEXO III.

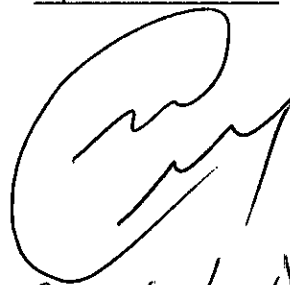
**CUARTA: LAS PARTES** acuerdan que la presente Acta Acuerdo tendrá vigencia a partir del día 01 de marzo de 2019.

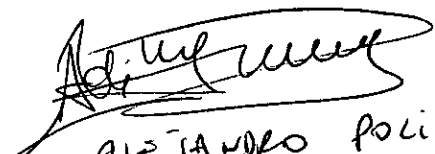
**QUINTA: LAS PARTES** ratifican, en todos sus términos, el Contrato de Adhesión aprobado mediante la Resolución nº 231/11 y sus posteriores modificaciones.

Se firman cuatro (04) ejemplares de un mismo tenor y a un solo efecto, en la ciudad Autónoma de Buenos Aires, a los 26 días de FEBRERO de dos mil diecinueve. –

  
Ana Carolina Marchetti  
Coolermax

  
Alejandro Poli  
CAEME

  
Presidente Directorio  
ARROSS

  
ALEJANDRO POLI  
CAEME

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**ANEXO I**

|    | Principio Activo        | % Descuento |
|----|-------------------------|-------------|
| 1  | Abatacept               | 40          |
| 2  | Abiraterona             | 50          |
| 3  | Adalimumab              | 42          |
| 4  | Adefovir dipivoxilo     | 41          |
| 5  | Anastrozol              | 76          |
| 6  | Aprepitant              | 40          |
| 7  | Asparaginasa            | 53          |
| 8  | Azacitidina             | 60          |
| 9  | Azatioprina             | 50          |
| 10 | BCG intravesical        | 46          |
| 11 | Bevacizumab             | 45          |
| 12 | Bicalutamida            | 66          |
| 13 | Bleomicina              | 66          |
| 14 | Bortezomib              | 50          |
| 15 | Buserelina              | 53          |
| 16 | Busulfan                | 38          |
| 17 | Capecitabina            | 66          |
| 18 | Carboplatino            | 66          |
| 19 | Cetuximab               | 40          |
| 20 | Ciclofosfamida          | 53          |
| 21 | Ciclosporina            | 46          |
| 22 | Ciproterona             | 66          |
| 23 | Cisplatino              | 66          |
| 24 | Citarabina              | 66          |
| 25 | Cladribina              | 41          |
| 26 | Clorambucilo            | 40          |
| 27 | Colistimetato sodico    | 40          |
| 28 | Colistina               | 50          |
| 29 | Copolimero-1            | 50          |
| 30 | Dacarbazina             | 66          |
| 31 | Dasatinib               | 50          |
| 32 | Daunorrubicina          | 66          |
| 33 | Deferasirox             | 40          |
| 34 | Degarelix               | 40          |
| 35 | Desoxirribonucleasa     | 46          |
| 36 | Dexametasona            | 40          |
| 37 | Dietilestilbestrol      | 53          |
| 38 | Docetaxel               | 66          |
| 39 | Doxorrubicina           | 66          |
| 40 | Doxorrubicina liposomal | 45          |
| 41 | Epirubicina             | 66          |
| 42 | Eritropoyetina          | 66          |
| 43 | Erlotinib               | 50          |
| 44 | Etanercept              | 42          |
| 45 | Etoposido               | 66          |

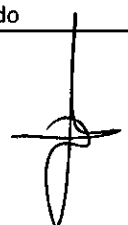
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|    | Principio Activo            | % Descuento |
|----|-----------------------------|-------------|
| 46 | Etravirina                  | 41          |
| 47 | Everolimus                  | 40          |
| 48 | Exemestano                  | 66          |
| 49 | FCE-hr                      | 41          |
| 50 | Fentanilo                   | 62          |
| 51 | Filgrastim                  | 66          |
| 52 | Fingolimod                  | 45          |
| 53 | Fludarabina                 | 62          |
| 54 | Fluorouracilo               | 66          |
| 55 | Flutamida                   | 66          |
| 56 | Fulvestrant                 | 50          |
| 57 | Gemcitabina                 | 66          |
| 58 | Goserelin                   | 53          |
| 59 | Hidroxiurea                 | 66          |
| 60 | Histrelina                  | 45          |
| 61 | Hormona foliculoestimulante | 41          |
| 62 | Idarrubicina                | 66          |
| 63 | Ifosfamida                  | 66          |
| 64 | Iloprost                    | 40          |
| 65 | Imatinib                    | 50          |
| 66 | Infliximab                  | 49          |
| 67 | Inmunocianina               | 40          |
| 68 | Interferon alfa (2b)        | 66          |
| 69 | Interferon beta             | 50          |
| 70 | Interferon beta 1 B         | 50          |
| 71 | Interferon beta 1a          | 50          |
| 72 | Irinotecan                  | 66          |
| 73 | Ixabepilona                 | 40          |
| 74 | Lanreotida                  | 41          |
| 75 | Lapatinib                   | 40          |
| 76 | Letrozol                    | 66          |
| 77 | Leucovorina calcica         | 66          |
| 78 | Leuprolide acetato          | 53          |
| 79 | Lipasa + Amilasa + Proteasa | 44          |
| 80 | Medroxiprogesterona         | 66          |
| 81 | Megestrol                   | 66          |
| 82 | Melfalan                    | 38          |
| 83 | Meprednisona                | 62          |
| 84 | Mercaptopurina              | 66          |
| 85 | Mesna                       | 66          |
| 86 | Metilprednisolona           | 62          |
| 87 | Metotrexato                 | 66          |
| 88 | Micofenolato mofetilo       | 46          |
| 89 | Micofenolico acido          | 46          |
| 90 | Mitomicina                  | 66          |
| 91 | Mitoxantrona                | 66          |
| 92 | Nilotinib                   | 40          |

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|     | Principio Activo          | % Descuento |
|-----|---------------------------|-------------|
| 93  | Nimotuzumab               | 40          |
| 94  | Octreotida                | 53          |
| 95  | Omalizumab                | 40          |
| 96  | Onabotulinumtoxin A       | 45          |
| 97  | Ondansetron               | 76          |
| 98  | Oxaliplatino              | 66          |
| 99  | Oxicodona                 | 62          |
| 100 | Paclitaxel                | 66          |
| 101 | Pamidronato disodico      | 66          |
| 102 | Pancreatina               | 44          |
| 103 | Panitumumab               | 40          |
| 104 | Paricalcitol              | 40          |
| 105 | Pazopanib                 | 50          |
| 106 | Pemetrexed                | 50          |
| 107 | Prednisona                | 62          |
| 108 | Ranibizumab               | 40          |
| 109 | Ribavirina                | 53          |
| 110 | Riluzol                   | 50          |
| 111 | Rituximab                 | 45          |
| 112 | Salbutamol                | 50          |
| 113 | Sirolimus                 | 40          |
| 114 | Somatostatina             | 50          |
| 115 | Somatotropina             | 53          |
| 116 | Sorafenib                 | 40          |
| 117 | Sunitinib                 | 40          |
| 118 | SUPLEMENTOS NUTRICIONALES | 39          |
| 119 | Tacrolimus                | 40          |
| 120 | Talidomida                | 5           |
| 121 | Tamoxifeno                | 66          |
| 122 | Temozolomida              | 50          |
| 123 | Temsirolimus              | 41          |
| 124 | Tioguanina                | 40          |
| 125 | Tobramicina               | 50          |
| 126 | Topotecan                 | 66          |
| 127 | Tramadol                  | 62          |
| 128 | Trastuzumab               | 42          |
| 129 | Triptorelina              | 53          |
| 130 | Valganciclovir            | 40          |
| 131 | Vinblastina               | 66          |
| 132 | Vincristina               | 66          |
| 133 | Vinorelbina               | 40          |
| 134 | Zoledronico acido         | 60          |

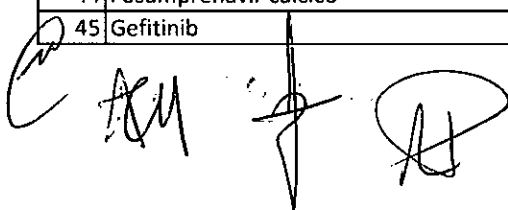





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**ANEXO II**

|    | Principio Activo                                      | % Descuento |
|----|-------------------------------------------------------|-------------|
| 1  | Abacavir                                              | 60          |
| 2  | Abacavir + lamivudina                                 | 50          |
| 3  | Afatinib                                              | 40          |
| 4  | Aflibercept                                           | 40          |
| 5  | Alfa-1-antitripsina                                   | 48          |
| 6  | Amfotericina B liposomal                              | 40          |
| 7  | Anagrelida                                            | 41          |
| 8  | Anidulafungina                                        | 41          |
| 9  | Atazanavir                                            | 40          |
| 10 | Atazanavir+Cobicistat                                 | 40          |
| 11 | Axitinib                                              | 40          |
| 12 | Basiliximab                                           | 41          |
| 13 | Belatacept                                            | 40          |
| 14 | Belimumab                                             | 41          |
| 15 | Bendamustina clorhidrato                              | 50          |
| 16 | Bexaroteno                                            | 41          |
| 17 | Bosentano                                             | 45          |
| 18 | Brentuximab vedotina                                  | 41          |
| 19 | Cabazitaxel                                           | 45          |
| 20 | carfilzomib                                           | 40          |
| 21 | Certolizumab pegol                                    | 40          |
| 22 | Cinacalcet                                            | 45          |
| 23 | Clofarabina                                           | 41          |
| 24 | Crizotinib                                            | 40          |
| 25 | Daclatasvir                                           | 40          |
| 26 | Darunavir                                             | 50          |
| 27 | Darunavir + Ritonavir                                 | 55          |
| 28 | Decitabina                                            | 41          |
| 29 | Denosumab                                             | 40          |
| 30 | Dimetilfumarato                                       | 45          |
| 31 | Dolutegravir                                          | 40          |
| 32 | Dolutegravir + Abacavir + lamivudina                  | 41          |
| 33 | Efavirenz                                             | 60          |
| 34 | Elbasvir+Grazoprevir                                  | 41          |
| 35 | Eltrombopag                                           | 40          |
| 36 | Elvitegravir + Cobicistat + Emtricitabina + Tenofovir | 40          |
| 37 | Emtricitabina + Elvitegravir                          | 41          |
| 38 | Emtricitabina + Tenofovir                             | 40          |
| 39 | Emtricitabina + Tenofovir + Efavirenz                 | 40          |
| 40 | Entecavir                                             | 40          |
| 41 | Enzalutamida                                          | 40          |
| 42 | Fampridina                                            | 45          |
| 43 | Fluconazol                                            | 50          |
| 44 | Fosamprenavir calcico                                 | 41          |
| 45 | Gefitinib                                             | 40          |



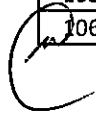
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|    | Principio Activo                            | % Descuento |
|----|---------------------------------------------|-------------|
| 46 | Golimumab                                   | 40          |
| 47 | Hialuronato sodico                          | 41          |
| 48 | Ibrutinib                                   | 40          |
| 49 | Inmunoglobulina antihepatitis B             | 41          |
| 50 | Inmunoglobulina anti-Rho(D)                 | 41          |
| 51 | Inmunoglobulina antitimocitos humanos       | 40          |
| 52 | Inmunoglobulina humana                      | 50          |
| 53 | Inmunoglobulina humana normal               | 40          |
| 54 | Ipilimumab                                  | 40          |
| 55 | Ivacaftor                                   | 41          |
| 56 | Lamivudina                                  | 60          |
| 57 | Lamivudina + Tenofovir                      | 40          |
| 58 | Lamivudina + zidovudina                     | 60          |
| 59 | Lamivudina + Zidovudina + Abacavir          | 60          |
| 60 | Lamivudina + Zidovudina + Nevirapina        | 55          |
| 61 | Ledipasvir+Sofosbuvir                       | 40          |
| 62 | Lenalidomida                                | 50          |
| 63 | Linezolid                                   | 40          |
| 64 | Liraglutida                                 | 41          |
| 65 | Lopinavir + ritonavir                       | 41          |
| 66 | Lumacaftor+Ivacaftor                        | 41          |
| 67 | Macicentan                                  | 40          |
| 68 | Maraviroc                                   | 41          |
| 69 | Natalizumab                                 | 40          |
| 70 | Nevirapina                                  | 60          |
| 71 | Nivolumab                                   | 40          |
| 72 | OMBITASVIR+PARITAPREVIR+RITONAVIR+DASABUVIR | 41          |
| 73 | Paclitaxel+Albumina                         | 41          |
| 74 | Palbociclib                                 | 40          |
| 75 | Palivizumab                                 | 40          |
| 76 | Pegaspargasa                                | 41          |
| 77 | Pegvisomant                                 | 41          |
| 78 | Pertuzumab                                  | 40          |
| 79 | Pertuzumab+Trastuzumab                      | 41          |
| 80 | Pirfenidona                                 | 45          |
| 81 | Plerixafor                                  | 41          |
| 82 | Racotumomab                                 | 41          |
| 83 | Raltegravir                                 | 43          |
| 84 | Rasburicasa                                 | 41          |
| 85 | Regorafenib                                 | 40          |
| 86 | Ritonavir                                   | 41          |
| 87 | Romiplostim                                 | 40          |
| 88 | Ruxolitinib                                 | 40          |
| 89 | Secukinumab                                 | 40          |
| 90 | Sevelamer                                   | 45          |
| 91 | Sodio colistimetato                         | 42          |
| 92 | Sofosbuvir                                  | 45          |




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|     | Principio Activo                   | % Descuento |
|-----|------------------------------------|-------------|
| 93  | Tenofovir disoproxil               | 40          |
| 94  | Tenofovir fumarato del disoproxilo | 40          |
| 95  | Tetrabenazina                      | 40          |
| 96  | Tigeciclina                        | 41          |
| 97  | Tocilizumab                        | 40          |
| 98  | Tofacitinib                        | 40          |
| 99  | Trabectedina                       | 41          |
| 100 | Trastuzumab-emtansina              | 40          |
| 101 | Treprostinil sodico                | 38          |
| 102 | Ustekinumab                        | 40          |
| 103 | Vemurafenib                        | 40          |
| 104 | Vinflunina                         | 40          |
| 105 | Voriconazol                        | 40          |
| 106 | Zidovudina                         | 55          |



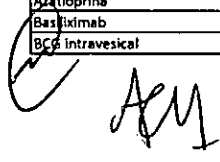



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ANEXO III

| Principio Activo         | Marca Comercial       | Presentación                            | Laboratorio          |
|--------------------------|-----------------------|-----------------------------------------|----------------------|
| Abacavir                 | ABACAVIR ELEA         | 300 mg. Comp.Rec. x 60                  | ELEA PHOENIX         |
| Abacavir                 | FILABAC               | 300 mg. Blister x 60                    | FRESENIUS KABI       |
| Abacavir                 | FINEQL                | 300 mg. Comp. x 60                      | LKM                  |
| Abacavir                 | PANKA                 | 300 mg. Comp.Rec. x 60                  | MICROSULES ARGENTINA |
| Abacavir                 | PLUSABCIR             | 300 mg. Comp.Rec. x 60                  | DOSA                 |
| Abacavir                 | ZEPRIL                | 300 mg. Comp. x 60                      | RICHMOND             |
| Abacavir                 | ZIAGENAVIR            | 20 mg. Jbe. x 1 x 240 ml.               | GLAXOSMITHKLINE      |
| Abacavir                 | ZIAGENAVIR            | 300 mg. Comp. x 60                      | GLAXOSMITHKLINE      |
| Abacavir + lamivudina    | KIVEKA                | 600 mg. Comp.Rec. x 30                  | GLAXOSMITHKLINE      |
| Abacavir + lamivudina    | PROFELVIR             | 600 mg. Comp.Rec. x 30                  | LKM                  |
| Abacavir + lamivudina    | SELMIVIR              | 600 mg./300 mg. Comp.Rec. x 30          | RICHMOND             |
| Abatacept                | ORENCIA               | 125 mg. Jeringa Pre-Llenada x 4         | BRISTOL-MYERS SQUIBB |
| Abatacept                | ORENCIA               | 250 mg. Fco.Vial x 1                    | BRISTOL-MYERS SQUIBB |
| Abiraterona              | ABERIC                | 250 mg.comp.x 120                       | INGERICS             |
| Abiraterona              | ABIRANOVA             | 250 mg. Comp. x 120                     | CELNOVA              |
| Abiraterona              | BITERA                | 250 mg. Comp. x 120                     | TUTEUR               |
| Abiraterona              | KESTAVA               | 250 mg x 120 comp                       | BIOPROFARMA          |
| Abiraterona              | KIGAR                 | 250 mg x 120 comp.                      | DOSA                 |
| Abiraterona              | PROSTERONA            | 250 mg. Comp. x 120                     | LAB.INT.ARG.         |
| Abiraterona              | ROTERONA              | 250 mg. Comp. x 120                     | VARIFARMA            |
| Abiraterona              | TEBIRAN               | 250 mg. Comp. x 120                     | ASPEN                |
| Abiraterona              | ZYTIGA                | 250 mg.Comp. x 120                      | JANSSEN-CILAG        |
| Abiraterona              | ZYVALIX               | 250 mg. Comp. x 120                     | LKM                  |
| Adalimumab               | HUMIRA                | Ped. 40mg Caja x 2 x 1 vial+jer+aguja   | ABBVIE               |
| Adalimumab               | HUMIRA AC             | lap.autoinj.x 2 x 0.4 ml                | ABBVIE               |
| Adefovir dipivoxilo      | HEPSERA               | 10 mg. Comp. x 30                       | GLAXOSMITHKLINE      |
| Afatinib                 | GIOTRIF               | 20 mg. Comp. x 28                       | BOEHRINGER INGELHEIM |
| Afatinib                 | GIOTRIF               | 30 mg. Comp. x 28                       | BOEHRINGER INGELHEIM |
| Afatinib                 | GIOTRIF               | 40 mg. Comp. x 28                       | BOEHRINGER INGELHEIM |
| Afatinib                 | GIOTRIF               | 50 mg. Comp. x 28                       | BOEHRINGER INGELHEIM |
| Aflibercept              | EYLIA                 | 40 mg/ml soluc.iny                      | BAYER                |
| Alfa-1-antitripsina      | GLASSIA               | F.Amp. Sol. x 50ml + Aguj.c/filtro      | TUTEUR               |
| Alfa-1-antitripsina      | PROLASTIN C           | 1.000 mg. Fco.Amp.Liof. x 1 x 20 ml.    | GRIFOLS              |
| Amfotericina B liposomal | AMBISOME              | 50 mg. Fco.Amp. x 1                     | GADOR                |
| Anagrelida               | AGRELID               | 0.5 mg. Caps. x 100                     | ARISTON              |
| Anagrelida               | AGRELID               | 1 mg. Caps. x 100                       | ARISTON              |
| Anastrozol               | ANASKEBIR             | 1 mg. Comp.Rec. x 28                    | ASPEN                |
| Anastrozol               | ANASTROZOL GLENMARK   | 1 mg. Comp.Rec. x 30                    | GLENMARK GENERICS    |
| Anastrozol               | ANASTROZOL KILAB      | 1 mg. Comp. x 28                        | KILAB                |
| Anastrozol               | ANASTROZOL MICROSULES | 1 mg. Comp.Rec. x 28                    | MICROSULES ARGENTINA |
| Anastrozol               | ANASTROZOL TECHSPHERE | 1 mg. Comp.Rec. x 28                    | TECHSPHERE           |
| Anastrozol               | ANASTROZOL VARIFARMA  | 1 mg. Comp.Rec. x 28                    | VARIFARMA            |
| Anastrozol               | ANEBOL                | 1 mg. Comp. x 28                        | GADOR                |
| Anastrozol               | ARIMIDEX              | 1 mg. Comp. x 28                        | ASTRAZENECA          |
| Anastrozol               | DISTALENE             | 1 mg. Comp. x 28                        | IVAX ARGENTINA       |
| Anastrozol               | GONDONAR              | 1 mg. Comp. x 30                        | TUTEUR               |
| Anastrozol               | PANTSTONE             | 1 mg. Comp. x 28                        | GOBBI-NOVAG          |
| Anastrozol               | TROZOLITE             | 1 mg. Comp.Rec. x 30                    | RAFFO                |
| Anidulafungina           | ECALTA                | Liof. 100mg IV Iny Polvo F.Amp. x 1     | PFIZER               |
| Aprepitant               | EMEND                 | Tripack 125mg Caps. x 1 y 80mg Caps.x 2 | MSD ARGENTINA S.R.L. |
| Asparaginasa             | KIDROLASE             | 10.000 UI Fco.Amp. x 1                  | RAFFO                |
| Atazanavir               | REYATAZ               | 150 mg. Caps. x 60                      | BRISTOL-MYERS SQUIBB |
| Atazanavir               | REYATAZ               | 200 mg. Caps. x 60                      | BRISTOL-MYERS SQUIBB |
| Atazanavir               | REYATAZ               | 300 mg. Caps. x 30                      | BRISTOL-MYERS SQUIBB |
| Atazanavir + Cobicistat  | EVOTAZ                | comp.rec.x 30                           | BRISTOL-MYERS SQUIBB |
| Axitinib                 | INLYTA                | 1.00 mg. Comp.Rec. x 56                 | PFIZER               |
| Axitinib                 | INLYTA                | 5 mg. Comp.Rec. x 56                    | PFIZER               |
| Azacitidina              | AMILIX                | Liof. 100mg F.Amp. x 1                  | BIOSIDUS FARMA       |
| Azacitidina              | ARQUIMES              | 100 mg. Fco.Amp.Liof. x 1               | MICROSULES ARGENTINA |
| Azacitidina              | AZITECH               | 100 mg. Fco.Amp. x 1                    | GP PHARM             |
| Azacitidina              | ITERBIL               | 100 mg. Fco.Amp. x 1                    | TUTEUR               |
| Azacitidina              | MATURUS               | 100 mg fco amp polvo liof               | BIOPROFARMA          |
| Azacitidina              | MIELOZITIDINA         | 100mg F.Amp. x 1                        | LKM                  |
| Azacitidina              | NIMODAC               | Env. x 1 fco. amp. liof.                | GADOR                |
| Azacitidina              | REMITIVA              | 100mg F.Amp. x 1                        | LAB.INT.ARG.         |
| Azacitidina              | TAZADIR               | 100 mg. Fco.Amp. x 1                    | ASPEN                |
| Azacitidina              | VIDAZA                | 100 mg. Fco.Amp. x 1                    | VARIFARMA            |
| Azacitidina              | ZYLATADINA            | 100 mg fco. Amp x 1                     | ORIENTAL             |
| Azatioprina              | AZATIOPRINA FILAXIS   | 50 mg. Comp. x 100                      | GOBBI-NOVAG          |
| Azatioprina              | AZATIOPRINA RAFFO     | 50 mg. Comp. x 100                      | RAFFO                |
| Azatioprina              | IMURAN                | 50 mg. Comp. x 100                      | TECHSPHERE           |
| Azatioprina              | IMURAN                | 50 mg. Comp. x 25                       | TECHSPHERE           |
| Basiliximab              | SIMULECT              | 20 mg. Fco.Amp. x 1 + Amp. disol.       | NOVARTIS             |
| BCG intravesical         | BCG CULTIVO SSI       | 30 mg. Fco.Amp. x 4                     | IVAX ARGENTINA       |




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| Principio Activo         | Marca Comercial          | Presentación                          | Laboratorio          |
|--------------------------|--------------------------|---------------------------------------|----------------------|
| Belatacept               | NULOJIX                  | 250 mg. Vial x 1                      | BRISTOL-MYERS SQUIBB |
| Belimumab                | BENLYSTA                 | 120 mg. Pvo.Sol.p/Perf.Intrav. x 1    | GLAXOSMITHKLINE      |
| Belimumab                | BENLYSTA                 | 400 mg. Pvo.Sol.p/Perf.Intrav. x 1    | GLAXOSMITHKLINE      |
| Bendamustina clorhidrato | BEMUX                    | 100 mg. Fco.Amp. x 1                  | RICHMOND             |
| Bendamustina clorhidrato | BEMUX                    | 25 mg. Fco.Amp. x 1                   | RICHMOND             |
| Bendamustina clorhidrato | BENDAM                   | 100mg F.Amp. x 1                      | LKM                  |
| Bendamustina clorhidrato | BENDAM                   | 25mg F.Amp. x 1                       | LKM                  |
| Bendamustina clorhidrato | BENDAVAR                 | 100 mg. Fco.Amp. x 1                  | VARIFARMA            |
| Bendamustina clorhidrato | BENDAVAR                 | 25 mg. Fco.Amp. x 1                   | VARIFARMA            |
| Bendamustina clorhidrato | BENZIMIR                 | 100mg F.Amp. x 1                      | BIOPROFARMA          |
| Bendamustina clorhidrato | BENZIMIR                 | 25mg F.Amp. x 1                       | BIOPROFARMA          |
| Bendamustina clorhidrato | ERITIB                   | 25 mg. Vial x 1                       | ERIOCHEM             |
| Bendamustina clorhidrato | ESEVARIL                 | 100 mg. Fco.Amp. x 1                  | TUTEUR               |
| Bendamustina clorhidrato | ESEVARIL                 | 25 mg. Fco.Amp. x 1                   | TUTEUR               |
| Bendamustina clorhidrato | RIBOMUSTIN               | 100 mg. Vial x 1                      | JANSSEN-CILAG        |
| Bendamustina clorhidrato | RIBOMUSTIN               | 25 mg. Vial x 1                       | JANSSEN-CILAG        |
| Bevacizumab              | AVASTIN                  | 100 mg. Vial x 1 x 4 ml.              | ROCHE                |
| Bevacizumab              | AVASTIN                  | 400 mg. Vial x 1 x 16 ml.             | ROCHE                |
| Bevacizumab              | BEVAX                    | 100 mg vial x 1 x 4 ml                | ELEA PHOENIX         |
| Bevacizumab              | BEVAX                    | 400 mg vial x 1 x 16 ml               | ELEA PHOENIX         |
| Bevacizumab              | LUMIERE                  | 0.2 ml/5 mg vial x 1                  | ELEA PHOENIX         |
| Bexaroteno               | TARGETIN                 | 75 mg. Caps. x 100                    | BIOPROFARMA          |
| Bicalutamida             | BICALUTAMIDA DELTA FARMA | 50 mg. Comp. x 28                     | SIDUS                |
| Bicalutamida             | BICALUTAMIDA GLENMARK    | 50 mg. Comp. x 28                     | GLENMARK GENERICS    |
| Bicalutamida             | BICALUTAMIDA KILAB       | 50 mg. Comp. x 28                     | KILAB                |
| Bicalutamida             | BICALUTAMIDA TECHSPHERE  | 50mg Comp. x 30                       | TECHSPHERE           |
| Bicalutamida             | BICALUTAMIDA VARIFARMA   | 50 mg. Comp. x 28                     | VARIFARMA            |
| Bicalutamida             | BIDROSTAT                | 50 mg. Comp. x 28                     | BIOPROFARMA          |
| Bicalutamida             | BITAKEBIR                | 50 mg. Comp.Rec. x 28                 | ASPEN                |
| Bicalutamida             | BOSCONAR                 | 50 mg. Comp. x 30                     | TUTEUR               |
| Bicalutamida             | CASODEX                  | 150 mg. Comp. x 28                    | ASTRAZENECA          |
| Bicalutamida             | CASODEX                  | 50 mg. Comp. x 28                     | ASTRAZENECA          |
| Bicalutamida             | DIMALAN                  | 50 mg. Comp. x 28                     | GOBBI-NOVAG          |
| Bicalutamida             | FINABAND                 | 50 mg. Comp.Rec. x 30                 | MICROSULES ARGENTINA |
| Bicalutamida             | GEPEPROSTIN              | 150 mg. Comp.Rec. x 30                | NOVARTIS             |
| Bicalutamida             | GEPEPROSTIN              | 50 mg. Comp. x 30                     | NOVARTIS             |
| Bicalutamida             | LIBERPROST               | 50 mg. Comp. x 28                     | QUALITY PHARMA       |
| Bicalutamida             | RAFFOLUTIL               | 150 mg. Comp.Rec. x 30                | RAFFO                |
| Bicalutamida             | RAFFOLUTIL               | 50 mg. Comp. x 30                     | RAFFO                |
| Bleomicina               | BILECO                   | 15 UI Fco.Amp. x 1                    | IVAX ARGENTINA       |
| Bleomicina               | BLEOCRIS                 | 15 UI Fco.Amp.Liof. x 1               | LKM                  |
| Bortezomib               | BORATER                  | 3,5mg F.Amp. x 1                      | TUTEUR               |
| Bortezomib               | MIASOMA                  | 3,5 mg. Fco.Amp. x 1                  | BIOPROFARMA          |
| Bortezomib               | VELCADE                  | 3,5 mg. Vial x 1 x 10 ml.             | JANSSEN-CILAG        |
| Bosentano                | BOSENTAL                 | 125 mg. Comp.Ran. x 60                | BAGO                 |
| Bosentano                | MASICAN                  | 125 mg.comp rec x 60                  | TUTEUR               |
| Bosentano                | MASICAN                  | 62,5 mg. comp rec x 60                | TUTEUR               |
| Bosentano                | TRACLEER                 | 125,00 mg. Comp.Rec. x 56             | JANSSEN-CILAG        |
| Bosentano                | TRACLEER                 | 62,5 mg. Comp.Rec. x 56               | JANSSEN-CILAG        |
| Bosentano                | USENTA                   | 125mg Comp. Ran. x 60                 | RAFFO                |
| Brentuximab vedotina     | ADCETRIS                 | 50 mg vial                            | TAKEDA               |
| Buserelina               | SUPREFACT DEPOT          | 6,6 mg. Implante Bimensual x 1 + Jer. | SANOFI-AVENTIS       |
| Busulfan                 | BUSILVEX                 | 60 mg. X 8 Amp.                       | ROVAFARM             |
| Busulfan                 | MYLERAN                  | 2 mg. Grageas x 25                    | TECHSPHERE           |
| Cabazitaxel              | JEVTANA                  | 60 mg. Vial x 1 x 1,5 ml.             | SANOFI-AVENTIS       |
| Cabazitaxel              | ZITAT                    | 60 mg f.a. x 1+diluy.                 | LKM                  |
| Capecitabina             | CAPEBINA                 | 500 mg. Comp. x 120                   | LKM                  |
| Capecitabina             | CAPECIT                  | 500 mg. Comp. x 120                   | RICHMOND             |
| Capecitabina             | CAPECITABINA GLENMARK    | 500 mg. Comp.Rec. x 120               | GLENMARK GENERICS    |
| Capecitabina             | CAPECITABINA TECHSPHERE  | 500 mg. Comp. x 120                   | TECHSPHERE           |
| Capecitabina             | CAPECITABINA VARIFARMA   | 500 mg. Comp. x 120                   | VARIFARMA            |
| Capecitabina             | CAPECTAN                 | 500 mg. Comp.Rec. x 120               | MICROSULES ARGENTINA |
| Capecitabina             | CAPEFAS                  | 500 mg. Caps. x 120                   | RAFFO                |
| Capecitabina             | CAPTECH                  | 500 mg. Comp. x 120                   | GP PHARM             |
| Capecitabina             | CATEGOR                  | 500 mg. Comp. x 120                   | NOVARTIS             |
| Capecitabina             | CATEPEN                  | 500 mg. Comp.Rec. x 120               | ASPEN                |
| Capecitabina             | DEREBEL                  | 500 mg. Comp.Rec. x 120               | TUTEUR               |
| Capecitabina             | XELODA                   | 500 mg. Comp. x 120                   | ROCHE                |
| Capecitabina             | XITABIN                  | 500 mg. Comp. x 120                   | BIOPROFARMA          |
| Carboplatino             | CARBOKEBIR               | 150 mg. Fco.Amp.Liof. x 1             | ASPEN                |
| Carboplatino             | CARBOKEBIR               | 450 mg. Fco.Amp.Liof. x 1             | ASPEN                |
| Carboplatino             | CARBOPLAT                | 150 mg. Fco.Amp. x 1                  | GOBBI-NOVAG          |
| Carboplatino             | CARBOPLATINO DELTA FARMA | 450 mg. Fco.Amp.Liof. x 1             | SIDUS                |
| Carboplatino             | CARBOPLATINO DELTA FARMA | 50 mg. Fco.Amp.Liof. x 1              | SIDUS                |
| Carboplatino             | CARBOPLATINO GLENMARK    | 150 mg. Fco.Amp.Liof. x 1             | GLENMARK GENERICS    |
| Carboplatino             | CARBOPLATINO GLENMARK    | 450 mg. Fco.Amp.Liof. x 1             | GLENMARK GENERICS    |
| Carboplatino             | CARBOPLATINO IVAX        | 150 mg. Fco.Amp. x 1                  | IVAX ARGENTINA       |
| Carboplatino             | CARBOPLATINO LKM         | 150 mg. Fco.Amp.Liof. x 1             | LKM                  |
| Carboplatino             | CARBOPLATINO MICROSULES  | 150 mg. Fco.Amp. x 1                  | MICROSULES ARGENTINA |

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| Principio Activo     | Marca Comercial             | Presentación                                      | Laboratorio          |
|----------------------|-----------------------------|---------------------------------------------------|----------------------|
| Carboplatino         | CARBOPLATINO MICROSULES     | 450 mg. Fco.Amp. x 1                              | MICROSULES ARGENTINA |
| Carboplatino         | CARBOPLATINO TUTEUR         | 150 mg. Fco.Amp.Llof. x 1                         | TUTEUR               |
| Carboplatino         | CARBOPLATINO TUTEUR         | 450 mg. Fco.Amp.Llof. x 1                         | TUTEUR               |
| Carboplatino         | CARBOPLATINO TUTEUR         | 50 mg. Fco.Amp.Llof. x 1                          | TUTEUR               |
| Carboplatino         | CARBOPLATINO VARIFARMA      | 150 mg. Fco.Amp.Llof. x 1                         | VARIFARMA            |
| Carboplatino         | CARBOPLATINO VARIFARMA      | 450 mg. Fco.Amp.Llof. x 1                         | VARIFARMA            |
| Carboplatino         | CARBOXTIE                   | 150 mg. Fco.Amp. x 1                              | BIOPROFARMA          |
| Carboplatino         | FADA CARBOPLATINO           | Llof. 150mg F.Amp. x 25ml                         | LAB.INT.ARG.         |
| Carboplatino         | FADA CARBOPLATINO           | Llof. 450mg F.Amp. x 100ml                        | LAB.INT.ARG.         |
| Carboplatino         | OMILUPIS                    | 150 mg. Fco.Amp.Llof. x 1                         | RICHMOND             |
| Carboplatino         | OMILUPIS                    | 450 mg. Fco.Amp.Llof. x 1                         | RICHMOND             |
| carfilzomib          | KYPROLIS                    | 60 mg fco amp                                     | AMGEN                |
| Certolizumab pegol   | CIMZIA                      | 200 mg. JeringaPre-Llenada x 2 + 2 almohadillas   | MONTPELLIER          |
| Cetuximab            | ERBITUX                     | 100 mg. Vial                                      | MERCK S.A.           |
| Cetuximab            | ERBITUX                     | 500 mg. Vial                                      | MERCK S.A.           |
| Ciclofosfamida       | CICLOFOSFAMIDA FILAXIS      | 1.000 mg. Fco.Amp.Llof. x 1                       | GP PHARM             |
| Ciclofosfamida       | CICLOFOSFAMIDA FILAXIS      | 200 mg. Fco.Amp.Llof. x 5                         | GP PHARM             |
| Ciclofosfamida       | CICLOFOSFAMIDA FILAXIS      | 50 mg. Comp. x 30                                 | GP PHARM             |
| Ciclofosfamida       | CICLOFOSFAMIDA LKM          | 1.000 mg. Fco.Amp. x 1                            | LKM                  |
| Ciclofosfamida       | CICLOFOSFAMIDA MICROSULES   | 1.000 mg. Fco.Amp. x 1                            | MICROSULES ARGENTINA |
| Ciclofosfamida       | CICLOFOSFAMIDA MICROSULES   | 200 mg. Fco.Amp. x 6                              | MICROSULES ARGENTINA |
| Ciclosporina         | SANDIMMUN                   | 50 mg. Fco.Amp. x 10 x 5 cc.                      | NOVARTIS             |
| Ciclosporina         | SANDIMMUN NEORAL            | 10 mg. Caps. x 60                                 | NOVARTIS             |
| Ciclosporina         | SANDIMMUN NEORAL            | 100 mg. Caps. x 50                                | NOVARTIS             |
| Ciclosporina         | SANDIMMUN NEORAL            | 100 mg. Sol.Bebible x 1 x 50 ml.                  | NOVARTIS             |
| Ciclosporina         | SANDIMMUN NEORAL            | 25 mg. Caps. x 50                                 | NOVARTIS             |
| Ciclosporina         | SANDIMMUN NEORAL            | 50 mg. Caps. x 50                                 | NOVARTIS             |
| Cinacalcet           | AUTRAXIL                    | 30 mg. Comp. x 30                                 | SIDUS                |
| Cinacalcet           | AUTRAXIL                    | 90 mg comp.rec.x 30                               | SIDUS                |
| Cinacalcet           | AUTRAXIL                    | 60 mg. Comp. x 30                                 | SIDUS                |
| Cinacalcet           | MIMPARA                     | 30 mg. Comp. x 30                                 | RAFFO                |
| Cinacalcet           | MIMPARA                     | 60 mg. Comp. x 30                                 | RAFFO                |
| Cinacalcet           | TENALCET                    | 30 mg. Comp.Rec. x 30                             | TUTEUR               |
| Cinacalcet           | TENALCET                    | 60 mg. Comp.Rec. x 30                             | TUTEUR               |
| Ciproterona          | ANDROCUR                    | 100 mg. Comp. x 30                                | BAYER                |
| Ciproterona          | ANDROCUR                    | 50 mg. Comp. x 50                                 | BAYER                |
| Ciproterona          | ANDROSTAT                   | 50 mg. Comp. x 50                                 | BIOPROFARMA          |
| Ciproterona          | ASOTERON                    | 100 mg. Comp.Rec. x 30                            | RAFFO                |
| Ciproterona          | ASOTERON                    | 50 mg. Comp. x 50                                 | RAFFO                |
| Ciproterona          | C.P.D.                      | 50 mg. Comp. x 50                                 | IVAX ARGENTINA       |
| Ciproterona          | CICLAMIL                    | 50 mg. Comp. x 50                                 | LKM                  |
| Ciproterona          | CIPROFARMA                  | 50 mg. Comp. x 50                                 | VARIFARMA            |
| Ciproterona          | CIPROPLEX 50                | 50 mg. Comp. x 50                                 | TUTEUR               |
| Ciproterona          | CIPROTERONA BIOTENK         | 50 mg. Comp. x 50                                 | BIOTENK              |
| Ciproterona          | CIPROTERONA DELTA FARMA     | 50 mg. Tab. x 50                                  | SIDUS                |
| Ciproterona          | CIPROTERONA GLENMARK        | 50 mg. Comp. x 50                                 | GLENMARK GENERICS    |
| Ciproterona          | CIPROTERONA KILAB           | 50mg Comp. x 50                                   | KILAB                |
| Ciproterona          | CIPROTERONA MICROSULES 50MG | 50 mg. Comp. x 50                                 | MICROSULES ARGENTINA |
| Ciproterona          | CIPROTERONA SANDOZ          | 50 mg. Comp. x 50                                 | NOVARTIS             |
| Ciproterona          | CIPROTERONA TECHSPHERE      | 50 mg. Comp. x 50                                 | TECHSPHERE           |
| Ciproterona          | KEBIRTERONA                 | 100 mg. Comp. x 30                                | ASPEN                |
| Ciproterona          | KEBIRTERONA                 | 50 mg. Comp. x 50                                 | ASPEN                |
| Ciproterona          | PURFILX                     | 50 mg. Comp. x 50                                 | GOBBI-NOVAG          |
| Cisplatino           | CISPLATINO DELTA FARMA      | 10 mg. Fco.Amp. x 1                               | SIDUS                |
| Cisplatino           | CISPLATINO DELTA FARMA      | 50 mg. Fco.Amp. x 1                               | SIDUS                |
| Cisplatino           | CISPLATINO FADA PHARMA      | 10mg F.Amp. x 1                                   | LAB.INT.ARG.         |
| Cisplatino           | CISPLATINO FADA PHARMA      | 50mg F.Amp. x 1                                   | LAB.INT.ARG.         |
| Cisplatino           | Cisplatino GLENMARK         | 50 mg. Fco.Amp.Llof. x 1                          | GLENMARK GENERICS    |
| Cisplatino           | CISPLATINO MARTIAN          | 50 mg. Fco.Amp.Llof. x 1                          | LKM                  |
| Cisplatino           | CISPLATINO MICROSULES       | 50 mg. Fco.Amp.Llof. x 1                          | MICROSULES ARGENTINA |
| Cisplatino           | CISPLATINO TUTEUR           | 50 mg./100 ml. Fco.Amp. x 1                       | TUTEUR               |
| Cisplatino           | CISPLATINO TUTEUR           | 10 mg./20 ml. Fco.Amp. x 1                        | TUTEUR               |
| Cisplatino           | PLATANOVAG                  | 50 mg. Fco.Amp. x 1 + Solv.                       | GOBBI-NOVAG          |
| Cisplatino           | PLATINO II FILAXIS          | 10 mg. Fco.Amp.Llof. x 1                          | GOBBI-NOVAG          |
| Cisplatino           | PLATINO II FILAXIS          | 10 mg. Sol.Iny. x 1                               | GOBBI-NOVAG          |
| Cisplatino           | PLATINO II FILAXIS          | 50 mg. Sol.Iny. x 1                               | GOBBI-NOVAG          |
| Citarabina           | ARA-C                       | 1 g. Fco.Amp. x 1                                 | GOBBI-NOVAG          |
| Citarabina           | CITARABINA LKM              | 1.000 mg. Fco.Amp.Llof. x 1                       | LKM                  |
| Citarabina           | CITARABINA LKM              | 100 mg. Fco.Amp.Llof. x 1                         | LKM                  |
| Citarabina           | CITARABINA MICROSULES       | 1.000 mg. PolvoFco.Amp.Llof. x 1                  | MICROSULES ARGENTINA |
| Citarabina           | CITARABINA MICROSULES       | 100 mg. PolvoFco.Amp.Llof. x 1                    | MICROSULES ARGENTINA |
| Cladribina           | INTOCEL                     | 10 mg. Fco.Amp. x 1                               | SIDUS                |
| Cladribina           | INTOCEL                     | 10 mg. Fco.Amp. x 7                               | SIDUS                |
| Clofarabina          | CLOFAZIC                    | 20mg F.Amp. x 1 x 20ml                            | RAFFO                |
| Clofarabina          | CLOFAZIC                    | 20mg F.Amp. x 4 x 20ml                            | RAFFO                |
| Clorambucilo         | LEUKERAN                    | 2 mg. Grageas x 25                                | TECHSPHERE           |
| Colistimetato sodico | ALVEOXINA                   | 1000000 UI Fco.Amp.Pvo.Est. x 30 + 30 Amp.Disolv. | FINADIET             |
| Colistimetato sodico | ALVEOXINA                   | 2000000 UI Fco.Amp.Pvo.Est. x 30 + 30 Amp.Disolv. | FINADIET             |
| Colistimetato sodico | TOLUSCRIN 1                 | 1 MUI Fco.Amp. x 30 + 30 amp. agua                | DOSA                 |

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| Principio Activo      | Marca Comercial       | Presentación                           | Laboratorio          |
|-----------------------|-----------------------|----------------------------------------|----------------------|
| Colistimetato sodico  | TOLISCRIN 2           | 2 MUI Fco.Amp. x 30 + 30 amp. agua     | DOSA                 |
| Colistina             | ALFICETIN             | 100 mg. Fco.Amp. x 1                   | NOVA ARGENTIA        |
| Colistina             | ESPIROTECH INYECTABLE | f.a.x 1+disolv.x1                      | TECHSPHERE           |
| Copolimero-1          | COPAXONE              | 20 mg. JeringaPre-Llenada x 28         | IVAX ARGENTINA       |
| Copolimero-1          | COPAXONE              | 40 mg/ml jer prellenadas x 12 unidades | IVAX ARGENTINA       |
| Copolimero-1          | ESCADRA               | 20 mg ler prell x 28                   | RAFFO                |
| Copolimero-1          | ESCADRA 40            | jga.prell.x 12                         | RAFFO                |
| Copolimero-1          | POLIMUNOL             | 40 mg iny.x 12                         | SYNTHON BAGO         |
| Crizotinib            | XALKORI               | 200 mg. Caps. x 60                     | PFIZER               |
| Crizotinib            | XALKORI               | 250 mg. Caps. x 60                     | PFIZER               |
| Dacarbazina           | DACARBAZINA FILAXIS   | 100 mg. Fco.Amp.Liof. x 1              | GOBBI-NOVAG          |
| Dacarbazina           | DACARBAZINA FILAXIS   | 200 mg. Fco.Amp.Liof. x 1              | GOBBI-NOVAG          |
| Dacarbazina           | ONCOCARBIL            | 100 mg. Fco.Amp.Liof. x 1              | LKM                  |
| Dacarbazina           | ONCOCARBIL            | 200 mg. Fco.Amp.Liof. x 1              | LKM                  |
| Daclatasvir           | DAKUNZA               | 30mg Comp. x 28                        | BRISTOL-MYERS SQUIBB |
| Daclatasvir           | DAKLINZA              | 60mg Comp. x 28                        | BRISTOL-MYERS SQUIBB |
| Darunavir             | PREZISTA              | 150 mg. Comp. x 240                    | JANSSEN-CILAG        |
| Darunavir             | PREZISTA              | 400 mg. Comp. x 60                     | JANSSEN-CILAG        |
| Darunavir             | PREZISTA              | 600 mg. Comp. x 60                     | JANSSEN-CILAG        |
| Darunavir             | RESISVIR              | 600mg Comp. Rec. x 60                  | LKM                  |
| Darunavir + Ritonavir | VIRONTAR              | 600 mg./100 mg. Comp.Rec. x 60         | RICHMOND             |
| Darunavir + Ritonavir | VIRONTAR N            | 800 mg./100 mg. Comp.Rec. x 30         | RICHMOND             |
| Dasatinib             | DAPIBUS               | 100 mg. Comp. X 30                     | BIOPROFARMA          |
| Dasatinib             | DAPIBUS               | 50mg Comp. x 60                        | BIOPROFARMA          |
| Dasatinib             | DAPIBUS               | 20 mg comp recub x 60                  | BIOPROFARMA          |
| Dasatinib             | DAPIBUS               | 70 mg comp recub x 60                  | BIOPROFARMA          |
| Dasatinib             | DASONIB               | 100 mg. Comp. x 30                     | MICROSULES ARGENTINA |
| Dasatinib             | DASONIB               | 50 mg. Comp. x 60                      | MICROSULES ARGENTINA |
| Dasatinib             | DASTERIB              | 20 mg comp.rec.x 60                    | TUTEUR               |
| Dasatinib             | DASTERIB              | 100 mg comp.rec.x 30                   | TUTEUR               |
| Dasatinib             | DASTERIB              | 50 mg comp.rec.x 60                    | TUTEUR               |
| Dasatinib             | DASTERIB              | 70 mg comp.rec.x 60                    | TUTEUR               |
| Dasatinib             | FONTRAX               | 100.00 mg. Comp.Rec. x 30              | RICHMOND             |
| Dasatinib             | FONTRAX               | 50 mg. Comp.Rec. x 60                  | RICHMOND             |
| Dasatinib             | LITEDA                | 100 mg. Comp. x 30                     | RAFFO                |
| Dasatinib             | LITEDA                | 50 mg. Comp. x 60                      | RAFFO                |
| Dasatinib             | LITEDA                | 70 mg. Comp. x 60                      | RAFFO                |
| Dasatinib             | REMBRE                | 100 mg. Comp.Rec. x 30                 | LKM                  |
| Dasatinib             | REMBRE                | 20 mg. Comp.Rec. x 60                  | LKM                  |
| Dasatinib             | REMBRE                | 50 mg. Comp.Rec. x 60                  | LKM                  |
| Dasatinib             | REMBRE                | 70 mg. Comp.Rec. x 60                  | LKM                  |
| Dasatinib             | SPRYCEL               | 100 mg. Comp. x 30                     | BRISTOL-MYERS SQUIBB |
| Dasatinib             | SPRYCEL               | 20 mg. Caps. x 60                      | BRISTOL-MYERS SQUIBB |
| Dasatinib             | SPRYCEL               | 50 mg. Caps. x 60                      | BRISTOL-MYERS SQUIBB |
| Dasatinib             | SPRYCEL               | 70 mg. Caps. x 60                      | BRISTOL-MYERS SQUIBB |
| Dasatinib             | SPRYTINIB             | 100.00 mg. Caps. x 30                  | DOSA                 |
| Dasatinib             | SPRYTINIB             | 20 mg. Caps. x 60                      | DOSA                 |
| Dasatinib             | SPRYTINIB             | 50 mg. Comp. x 60                      | DOSA                 |
| Dasatinib             | SPRYTINIB             | 70 mg. Caps. x 60                      | DOSA                 |
| Daunorrubicina        | DAUNOGOSBI            | 20 mg. Fco.Amp. x 1 + Amp. solv.       | GOBBI-NOVAG          |
| Daunorrubicina        | MAXIDAUNO             | 20 mg. Fco.Amp. x 1                    | VARIFARMA            |
| Decitabina            | DACOGEN               | 50 mg. Fco.Amp. x 1                    | JANSSEN-CILAG        |
| Deferasirox           | DEFERADE              | 125 mg comp.disp. x 28                 | TUTEUR               |
| Deferasirox           | DEFERADE              | 250 mg comp.disp. x 28                 | TUTEUR               |
| Deferasirox           | DEFERADE              | 500 mg comp.disp. x 28                 | TUTEUR               |
| Deferasirox           | EXIADE                | 125 mg. Comp. x 28                     | NOVARTIS             |
| Deferasirox           | EXIADE                | 250 mg. Comp. x 28                     | NOVARTIS             |
| Deferasirox           | EXIADE                | 500 mg. Comp. x 28                     | NOVARTIS             |
| Degarelix             | FIRMAGON              | Liof. 120mg Iny. Polvo F.Amp. x 2 Pre. | FERRING              |
| Degarelix             | FIRMAGON              | Liof. 80mg Iny. Polvo F.Amp. Pre.      | FERRING              |
| Denosumab             | PROLIA                | 60 mcg./1 ml. JeringaPre-Llenada x 1   | RAFFO                |
| Denosumab             | XGEVA                 | 70 MG/ ML INY 120 MG X 1 VIAL          | AMGEN                |
| Desoxirribonucleasa   | PULMOZYME             | 2.5 mg. Fco.Amp. x 6                   | ROCHE                |
| Dexametasona          | BUTIOL                | 1.5mg Comp. x 20                       | IVAX ARGENTINA       |
| Dexametasona          | DECADRON              | 0.5 mg. Comp. x 20                     | SIDUS                |
| Dexametasona          | DECADRON              | 4mg./ml Fco. Amp. x 2ml + 1 jer. desc. | SIDUS                |
| Dexametasona          | DECADRON              | Shock 20mg./ml Iny. F.Amp. x 5ml       | SIDUS                |
| Dexametasona          | DEXAMERAL             | 4 mg. Comp. x 10                       | RAYMOS               |
| Dexametasona          | DEXAMERAL             | 4 mg. Comp. x 20                       | RAYMOS               |
| Dexametasona          | DEXAMFOR              | 40 mg comp.x 14                        | QUALITY PHARMA       |
| Dexametasona          | DEXAMFOR              | 8 mg x 20                              | QUALITY PHARMA       |
| Dexametasona          | DEXATOTAL             | 1.5mg Comp. Ran. x 10                  | ARISTON              |
| Dexametasona          | DEXATOTAL             | 1.5mg Comp. Ran. x 20                  | ARISTON              |
| Dexametasona          | DEXATOTAL             | 4mg Comp. Ran. x 10                    | ARISTON              |
| Dexametasona          | DEXATOTAL             | 4mg Comp. Ran. x 20                    | ARISTON              |
| Dexametasona          | DEXATOTAL             | 8 mg. Comp.Ran. x 10                   | ARISTON              |
| Dexametasona          | DEXATOTAL             | 8 mg. Comp.Ran. x 30                   | ARISTON              |
| Dexametasona          | OZURDEX               | 0.7 mg. Aplicador x 1                  | ALLERGAN             |
| Dietilestilbestrol    | GOBBIESTROL           | 1 mg. Comp. x 30                       | GOBBI-NOVAG          |

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| Principio Activo                                      | Marca Comercial          | Presentación                                 | Laboratorio          |
|-------------------------------------------------------|--------------------------|----------------------------------------------|----------------------|
| Dimetilfumarato                                       | CATIRA                   | 240 mg. Caps. x 60                           | SYNTHON BAGO         |
| Dimetilfumarato                                       | DIMEFUL 240              | 240 mg x 60 caps                             | GADOR                |
| Dimetilfumarato                                       | DIMEFUL 120              | 120 mg x 14 caps                             | GADOR                |
| Dimetilfumarato                                       | TECFIDERA                | 120 mg caps.x 14                             | BIOGEN IDEC          |
| Dimetilfumarato                                       | TECFIDERA                | 240 mg caps.x 56                             | BIOGEN IDEC          |
| Docetaxel                                             | ASODOCEL                 | 20 mg. Fco.Amp. x 1 + Disolv.                | RAFFO                |
| Docetaxel                                             | ASODOCEL                 | 80 mg. Fco.Amp. x 1 + Disolv.                | RAFFO                |
| Docetaxel                                             | DOCEKEBIR                | 20 mg. Fco.Amp. x 1 + Solv.                  | ASPEN                |
| Docetaxel                                             | DOCEKEBIR                | 80 mg. Fco.Amp. x 1 + Solv.                  | ASPEN                |
| Docetaxel                                             | DOCETAXEL DELTA FARMA    | 80 mg. Fco.Amp. x 1 + Solv.                  | SIDUS                |
| Docetaxel                                             | DOCETAXEL DELTA FARMA    | 20 mg. Fco.Amp. x 1 + Solv.                  | SIDUS                |
| Docetaxel                                             | DOCETAXEL GLENMARK       | 20 mg. Fco.Amp. x 1 + Solv.                  | GLENMARK GENERICS    |
| Docetaxel                                             | DOCETAXEL GLENMARK       | 80 mg. Fco.Amp. x 1 + Solv.                  | GLENMARK GENERICS    |
| Docetaxel                                             | DOCETAXEL GP PHARM       | 20 mg. Fco.Amp. x 1                          | GP PHARM             |
| Docetaxel                                             | DOCETAXEL GP PHARM       | 80 mg. Fco.Amp. x 1                          | GP PHARM             |
| Docetaxel                                             | DOCETAXEL MICROSULES     | 20 mg./0.5 ml. Fco.Amp. x 1 + Dil. x 1,5 ml. | MICROSULES ARGENTINA |
| Docetaxel                                             | DOCETAXEL MICROSULES     | 80 mg./2 ml. Fco.Amp. x 1 + Dil. x 2 ml.     | MICROSULES ARGENTINA |
| Docetaxel                                             | DOCETAXEL SANDOZ         | 20 mg. / 2ml x 1 Fco.Amp.                    | NOVARTIS             |
| Docetaxel                                             | DOCETAXEL SANDOZ         | 80 mg. / 8ml x 1 Fco.Amp.                    | NOVARTIS             |
| Docetaxel                                             | DOCETAXEL TUTEUR         | 20 mg. Fco.Amp. x 1 + Amp. dil.              | TUTEUR               |
| Docetaxel                                             | DOCETAXEL TUTEUR         | 80 mg. Fco.Amp. x 1 + Amp. dil.              | TUTEUR               |
| Docetaxel                                             | DOLECTRAN NF             | 20 mg. Fco.Amp. x 1 + Amp. disolv.           | LKM                  |
| Docetaxel                                             | DOLECTRAN NF             | 80 mg. Fco.Amp. x 1 + Amp. disolv.           | LKM                  |
| Docetaxel                                             | DONATAXEL                | 20 mg. Fco.Amp. x 1                          | BIOPROFARMA          |
| Docetaxel                                             | DONATAXEL                | 80 mg. Fco.Amp. x 1                          | BIOPROFARMA          |
| Docetaxel                                             | DOXETAL                  | 20 mg. Fco.Amp. x 1 + Disolv.                | RICHMOND             |
| Docetaxel                                             | DOXETAL                  | 80 mg. Fco.Amp. x 1 + Disolv.                | RICHMOND             |
| Docetaxel                                             | ERIOX                    | 20 mg. Concent.p/iny. x 1                    | ERIOCHEM             |
| Docetaxel                                             | ERIOX                    | 80 mg. Concent.p/iny. x 1                    | ERIOCHEM             |
| Docetaxel                                             | PLUSTAXANO ANHIDRO       | 20 mg. Fco.Amp. x 1 + Amp. disolv.           | DOSA                 |
| Docetaxel                                             | PLUSTAXANO ANHIDRO       | 80 mg. Fco.Amp. x 1 + Amp. disolv.           | DOSA                 |
| Docetaxel                                             | TAXOTERE 20              | 20 mg. Fco.Amp. x 1                          | SANOFI-AVENTIS       |
| Docetaxel                                             | TAXOTERE 80              | 80 mg. Fco.Amp. x 1                          | SANOFI-AVENTIS       |
| Docetaxel                                             | TEXOT                    | 20 mg./0.5 ml. Fco.Amp. x 1 + Diluyente      | GOBBI-NOVAG          |
| Docetaxel                                             | TEXOT                    | 80 mg./2 ml. Fco.Amp. x 1 + Dil.             | GOBBI-NOVAG          |
| Dolutegravir                                          | TIVICAY                  | 50 mg x 30 comprimidos                       | GLAXOSMITHKLINE      |
| Dolutegravir + Abacavir + lamivudina                  | TRIUMEQ                  | Fco Amp 30 Comp                              | GLAXOSMITHKLINE      |
| Doxorrubicina                                         | ADRIBLASTINA DR          | 50 mg. Fco.Amp. x 1                          | PFIZER               |
| Doxorrubicina                                         | COLHIDROL                | 50 mg. PolvoFco.Amp.Liof. x 1                | TUTEUR               |
| Doxorrubicina                                         | DICLADOX                 | 50 mg. Fco.Amp. x 1                          | IVAX ARGENTINA       |
| Doxorrubicina                                         | DOXOCRI                  | 50 mg. Fco.Amp.Liof. x 1                     | LKM                  |
| Doxorrubicina                                         | DOXOKEBIR                | 50 mg. Fco.Amp. x 1                          | ASPEN                |
| Doxorrubicina                                         | DOXORRUBICINA FILAXIS    | 50 mg. Fco.Amp.Liof. x 1                     | GOBBI-NOVAG          |
| Doxorrubicina                                         | DOXORRUBICINA FILAXIS    | 10 mg. Fco.Amp.Liof. x 1                     | GOBBI-NOVAG          |
| Doxorrubicina                                         | DOXORUBICINA DELTA FARMA | 50 mg. Fco.Amp. x 1                          | SIDUS                |
| Doxorrubicina                                         | DOXORUBICINA DELTA FARMA | 10 mg. Fco.Amp. x 1                          | SIDUS                |
| Doxorrubicina                                         | DOXORUBICINA GLENMARK    | 10 mg. Fco.Amp.Liof. x 1                     | GLENMARK GENERICS    |
| Doxorrubicina                                         | DOXORUBICINA GLENMARK    | 50 mg. Fco.Amp.Liof. x 1                     | GLENMARK GENERICS    |
| Doxorrubicina                                         | DOXTIE                   | 50 mg. Fco.Amp.Liof. x 1                     | BIOPROFARMA          |
| Doxorrubicina                                         | FADA DOXORUBICINA        | 50mg F.Amp. x 1                              | LAB.INT.ARG.         |
| Doxorrubicina                                         | ONKOSTATIL               | 50 mg. Fco.Amp.Liof. x 1                     | MICROSULES ARGENTINA |
| Doxorrubicina                                         | ROXORIN                  | 10 mg. Fco.Amp.Liof. x 1                     | RICHMOND             |
| Doxorrubicina                                         | ROXORIN                  | 50 mg. Fco.Amp.Liof. x 1                     | RICHMOND             |
| Doxorrubicina liposomal                               | DALMONAR                 | 20mg/10ml F.Amp. x 1                         | TUTEUR               |
| Doxorrubicina liposomal                               | DOXOPEG                  | 20 mg. Sol.Vial x 1                          | RAFFO                |
| Doxorrubicina liposomal                               | DOXPLAX                  | 20 mg./10 ml. Fco.Amp. x 1                   | LKM                  |
| Efavirenz                                             | FILGINASE                | 200 mg. Caps. x 90                           | FRESENIUS KABI       |
| Efavirenz                                             | FILGINASE                | 600 mg. Comp.Rec. x 30                       | FRESENIUS KABI       |
| Efavirenz                                             | STOCRIN                  | 600 mg. Comp. x 30                           | MSD ARGENTINA S.R.L. |
| Efavirenz                                             | SULFINAV                 | 600 mg. Caps. x 30                           | LKM                  |
| Efavirenz                                             | VIORREVER                | 600 mg. Comp. x 30                           | RICHMOND             |
| Efavirenz                                             | ZULETEL                  | 600 mg. Comp. x 30                           | MICROSULES ARGENTINA |
| Elbasvir+Grazoprevir                                  | ZEPATIER                 | 50/100 mg comp.rec.x 28                      | MSD ARGENTINA S.R.L. |
| Eltrombopag                                           | REVOLADE                 | 25 mg. Comp. x 28                            | NOVARTIS             |
| Elvitegravir + Cobicistat + Emtricitabina + Tenofovir | GENVOYA                  | comp.rec.x 30                                | GADOR                |
| Emtricitabina + Elvitegravir                          | STRIBILD                 | Env x 30 comp rec                            | GADOR                |
| Emtricitabina + Tenofovir                             | REMIVIR                  | 300 mg x 30 Caps.                            | ELEA PHOENIX         |
| Emtricitabina + Tenofovir                             | TRUVADA                  | Comp. Rec. x 30                              | GADOR                |
| Emtricitabina + Tenofovir + Efavirenz                 | ATRIPLA                  | Comp. Rec. x 30                              | GADOR                |
| Emtricitabina + Tenofovir + Efavirenz                 | SIMPLIR                  | comp.rec.x 30                                | ELEA PHOENIX         |
| Emtricitabina + Tenofovir + Efavirenz                 | TRIVENZ                  | comp.rec.x 30                                | RICHMOND             |
| Entecavir                                             | BARACLUDE                | 0.5 mg. Comp. x 30                           | BRISTOL-MYERS SQUIBB |
| Entecavir                                             | BARACLUDE                | 1 mg. Comp. x 30                             | BRISTOL-MYERS SQUIBB |
| Enzalutamida                                          | XTANDI                   | 40 mg x 120 comp                             | RAFFO                |
| Epirubicina                                           | CRISABON                 | 50 mg. PolvoFco.Amp.Liof. x 1                | TUTEUR               |
| Epirubicina                                           | CUATROEPI                | 50 mg. Fco.Amp. x 1                          | VARIFARMA            |
| Epirubicina                                           | EPIDOXO                  | 50 mg. Fco.Amp.Liof. x 1                     | LKM                  |
| Epirubicina                                           | EPIFIL                   | 10 mg. Fco.Amp.Liof. x 1                     | GOBBI-NOVAG          |
| Epirubicina                                           | EPIFIL                   | 50 mg. Fco.Amp.Liof. x 1                     | GOBBI-NOVAG          |

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| Principio Activo | Marca Comercial            | Presentación                                   | Laboratorio          |
|------------------|----------------------------|------------------------------------------------|----------------------|
| Epirubicina      | EPIRUBICINA DELTA FARMA    | 10 mg. Fco.Amp. x 1                            | SIDUS                |
| Epirubicina      | EPIRUBICINA DELTA FARMA    | 50 mg. Fco.Amp. x 1                            | SIDUS                |
| Epirubicina      | EPIRUBICINA GLENMARK       | 50 mg. Fco.Amp. x 1                            | GLENMARK GENERICS    |
| Epirubicina      | FARMORUBICIN DR            | 50 mg. Fco.Amp. x 1                            | PFIZER               |
| Eritropoyetina   | EPOGEN                     | 2.000 UI Fco.Amp. x 1 x 1 ml.                  | CASSARA              |
| Eritropoyetina   | EPOGEN                     | 4.000 UI Fco.Amp. x 1 x 1 ml.                  | CASSARA              |
| Eritropoyetina   | EPOGEN                     | 10.000 UI Fco.Amp. x 1                         | VARIFARMA            |
| Eritropoyetina   | EPOGEN                     | 40.000 UI Fco.Amp. x 1 x 1 ml.                 | VARIFARMA            |
| Eritropoyetina   | ERITROGEN                  | 10.000 UI Fco.Amp. x 1 x 1 ml.                 | BIOPROFARMA          |
| Eritropoyetina   | ERITROGEN                  | 2.000 UI Fco.Amp. x 1 x 1 ml.                  | BIOPROFARMA          |
| Eritropoyetina   | ERITROGEN                  | 4.000 UI Fco.Amp. x 1 x 1 ml.                  | BIOPROFARMA          |
| Eritropoyetina   | HEMAX                      | 1000 UI Fco.Amp. x 1 + Jer. Prellenada c/dil.  | BIOSIDUS FARMA       |
| Eritropoyetina   | HEMAX                      | 10000 UI Fco.Amp. x 1 + Jer. Prellenada c/dil. | BIOSIDUS FARMA       |
| Eritropoyetina   | HEMAX                      | 2000 UI Fco.Amp. x 1 + Jer. Prellenada c/dil.  | BIOSIDUS FARMA       |
| Eritropoyetina   | HEMAX                      | 20000 UI Fco.Amp. x 1                          | BIOSIDUS FARMA       |
| Eritropoyetina   | HEMAX                      | 3000 UI Fco.Amp. x 1 + Jer. Prellenada c/dil.  | BIOSIDUS FARMA       |
| Eritropoyetina   | HEMAX                      | 4000 UI Fco.Amp. x 1 + Jer. Prellenada c/dil.  | BIOSIDUS FARMA       |
| Eritropoyetina   | HEMAX                      | 40000 UI Fco.Amp. x 1                          | BIOSIDUS FARMA       |
| Eritropoyetina   | HYPERCRIT                  | 10.000 UI Fco.Amp. x 1 + Amp. disol.           | BIOSIDUS FARMA       |
| Eritropoyetina   | HYPERCRIT                  | 2.000 UI Fco.Amp.Liof. x 1 + Solv. x 2 ml.     | BIOSIDUS FARMA       |
| Eritropoyetina   | HYPERCRIT                  | 4.000 UI Fco.Amp.Liof. x 1 + Solv. x 2 ml.     | BIOSIDUS FARMA       |
| Eritropoyetina   | PRONIVEL                   | 2.000 UI Fco.Amp.Liof. x 1 + Solv.             | ELEA PHOENIX         |
| Erlotinib        | RELOTIB                    | 100 mg. Comp. x 30                             | VARIFARMA            |
| Erlotinib        | RELOTIB                    | 150 mg. Comp. x 30                             | VARIFARMA            |
| Erlotinib        | TARCEVA                    | 100 mg. Comp.Rec. x 30                         | ROCHE                |
| Erlotinib        | TARCEVA                    | 150 mg. Comp.Rec. x 30                         | ROCHE                |
| Etanercept       | ENBREL                     | 25 mg. JeringaPre-Llenada x 4                  | PFIZER               |
| Etanercept       | ENBREL                     | 25 mg. PolvoVialLiof. x 4                      | PFIZER               |
| Etanercept       | ENBREL MYCLIC AUTOINJECTOR | 50 mg. Dispositivo autoinyector x 4            | PFIZER               |
| Etoposido        | CITODOX                    | 100 mg. Fco.Amp. x 1                           | GOBBI-NOVAG          |
| Etoposido        | ETOPOSIDO DELTA FARMA      | 100 mg. Fco.Amp. x 1                           | SIDUS                |
| Etoposido        | ETOPOSIDO FILAXIS          | 100 mg. Fco.Amp. x 1                           | GOBBI-NOVAG          |
| Etoposido        | ETOPOSIDO GLENMARK         | 100 mg. Fco.Amp. x 1                           | GLENMARK GENERICS    |
| Etoposido        | ETOPOSIDO MICROSULES       | 100 mg. Fco.Amp. x 1 x 5 ml.                   | MICROSULES ARGENTINA |
| Etoposido        | EUVAXON                    | 100 mg./5 ml. Fco.Amp. x 1                     | TUTEUR               |
| Etoposido        | VP-GEN                     | 100 mg. Fco.Amp. x 1                           | BIOPROFARMA          |
| Etravirina       | INTELENCE                  | 200 mg. Comp. x 60                             | JANSSEN-CILAG        |
| Everolimus       | AFINITOR                   | 10 mg. Comp. x 30                              | NOVARTIS             |
| Everolimus       | AFINITOR                   | 2.5 mg. Comp. x 30                             | NOVARTIS             |
| Everolimus       | AFINITOR                   | 5 mg. Comp. x 30                               | NOVARTIS             |
| Everolimus       | CERTICAN                   | 0.25 mg. Comp. x 60                            | NOVARTIS             |
| Everolimus       | CERTICAN                   | 0.5 mg. Comp. x 60                             | NOVARTIS             |
| Everolimus       | CERTICAN                   | 0.75 mg. Comp. x 60                            | NOVARTIS             |
| Exemestano       | AROMASIN                   | 25 mg. Comp.Rec. x 30                          | PFIZER               |
| Exemestano       | NOXETOL                    | 25 mg. Comp.Rec. x 30                          | IVAX ARGENTINA       |
| Fampridina       | DALFYRAN                   | comp.rec.lib.prol.x 28                         | TUTEUR               |
| Fampridina       | DALFYRAN                   | comp.rec.lib.prol.x 56                         | TUTEUR               |
| Fampridina       | DATIZIC                    | 10 mg. Comp. x 28                              | RAFFO                |
| Fampridina       | DATIZIC                    | 10 mg. Comp. x 56                              | RAFFO                |
| Fampridina       | FAMPYRA                    | 10 mg. x 56 Comprimidos                        | BIOGEN IDEC          |
| Fampridina       | FAMPYRA                    | 10 mg X 28 Comprimidos                         | BIOGEN IDEC          |
| Fampridina       | ZILOBE                     | 10 mg. Comp.Rec. x 56                          | SYNTHON BAGO         |
| FCE-hr           | HEBERPROT-P                | Liof. 0.075mg Iny. Polvo Amp. x 6              | ELEA PHOENIX         |
| Fentanilo        | DUROGESIC D TRANS          | 25 mcg. Parche x 5                             | JANSSEN-CILAG        |
| Fentanilo        | DUROGESIC D TRANS          | 50 mcg. Parche x 5                             | JANSSEN-CILAG        |
| Fentanilo        | FENTAX                     | 0.3925 mg. Fco.Amp.EH x 1 x 5 ml.              | RICHMOND             |
| Fentanilo        | TALNUR                     | 25 mcg. Parche x 5                             | NOVARTIS             |
| Fentanilo        | TALNUR                     | 50 mcg. Parche x 5                             | NOVARTIS             |
| Fentanilo        | TALNUR                     | 75 mcg. Parche x 5                             | NOVARTIS             |
| Filgrastim       | FILGEN                     | 300 mcg. JeringaPre-Llenada x 1                | BIOPROFARMA          |
| Filgrastim       | FILGEN                     | 300 mcg. Fco.Amp. x 1                          | BIOPROFARMA          |
| Filgrastim       | FILGEN                     | 300 mcg. Fco.Amp. x 5                          | BIOPROFARMA          |
| Filgrastim       | FILGRATECH                 | 300 mcg jga prell x 1                          | BIOTECHNO PHARMA     |
| Filgrastim       | NEUPOGEN                   | 30 MUI JeringaPre-Llenada x 1 x 0.5 ml.        | ROCHE                |
| Filgrastim       | NEUTROFIL                  | 30 MUI Fco.Amp. x 1 x 1 ml.                    | VARIFARMA            |
| Filgrastim       | NEUTROFIL                  | 30 MUI Fco.Amp. x 5 x 1 ml.                    | VARIFARMA            |
| Filgrastim       | NEUTROFIL                  | 48 MUI Fco.Amp. x 1 x 1 ml.                    | VARIFARMA            |
| Filgrastim       | NEUTROMAX                  | 30 MUI Fco.Amp. x 1                            | BIOSIDUS FARMA       |
| Filgrastim       | NEUTROMAX                  | 30 MUI Fco.Amp. x 5                            | BIOSIDUS FARMA       |
| Filgrastim       | NEUTROMAX                  | 48 MUI Fco.Amp. x 5                            | BIOSIDUS FARMA       |
| Filgrastim       | PEG NEUTROPINE             | 6mg Jer. Prell. x 0.6ml                        | GEMABIOTECH          |
| Fingolimod       | FIBRONEURINA               | 0.5 mg. Caps. x 28                             | SYNTHON BAGO         |
| Fingolimod       | GILENYA                    | 0.5 mg. Caps. x 28                             | NOVARTIS             |
| Fingolimod       | LEBRINA                    | 0.5 mg. Caps.Duras x 28                        | RAFFO                |
| Fingolimod       | MODINA                     | 0.5 Comp. x 28                                 | LKM                  |
| Fluconazol       | FLUCONAZOL RICHET          | 200 mg. Comp. x 10                             | RICHET               |
| Fluconazol       | MUTUM2                     | 100 mg. Comp. x 15                             | RAFFO                |
| Fludarabina      | FLUDAKEBIR                 | 50 mg. Fco.Amp.Liof. x 1                       | ASPEN                |
| Fludarabina      | FLUDAKEBIR                 | 50 mg. Fco.Amp.Liof. x 5                       | ASPEN                |

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| Principio Activo           | Marca Comercial         | Presentación                         | Laboratorio          |
|----------------------------|-------------------------|--------------------------------------|----------------------|
| Fludarabina                | FLUDARABINA FILAXIS     | 50 mg. Fco.Amp. x 1                  | GOBBI-NOVAG          |
| Fludarabina                | FLUDARABINA FILAXIS     | 50 mg. Fco.Amp. x 5                  | GOBBI-NOVAG          |
| Fludarabina                | FLUDARABINA MICROSULES  | 10 mg. Comp.Rec. x 15                | MICROSULES ARGENTINA |
| Fludarabina                | FLUDARABINA MICROSULES  | 50 mg. Fco.Amp. x 1                  | MICROSULES ARGENTINA |
| Fludarabina                | FLUDARABINA MICROSULES  | 50 mg. Fco.Amp. x 5                  | MICROSULES ARGENTINA |
| Fludarabina                | FLUDARABINA VARIFARMA   | 10 mg. Comp.Rec. x 15                | VARIFARMA            |
| Fludarabina                | FLUDARABINA VARIFARMA   | 50 mg. Fco.Amp.Liof. x 1             | VARIFARMA            |
| Fludarabina                | FLURADOSA               | 50 mg. Fco.Amp. x 1                  | DOSA                 |
| Fludarabina                | FLURADOSA               | 50 mg. Fco.Amp. x 5                  | DOSA                 |
| Fluorouracilo              | FLUOROURACILO FILAXIS   | 500 mg. Fco.Amp. x 5                 | GOBBI-NOVAG          |
| Fluorouracilo              | FLUOROURACILO RONTAG    | 500 mg. Fco.Amp. x 5                 | ASTRAZENECA          |
| Fluorouracilo              | FLUOROURACILO TUTEUR    | 500 mg./10 ml. Fco.Amp. x 5          | TUTEUR               |
| Fluorouracilo              | ONCOFU                  | 500 mg. Fco.Amp. x 5                 | GOBBI-NOVAG          |
| Flutamida                  | FLUTAMIDA FILAXIS       | 250 mg. Comp. x 60                   | GOBBI-NOVAG          |
| Flutamida                  | FLUTAMIDA GADOR         | 250 mg. Comp. x 60                   | GADOR                |
| Flutamida                  | FLUTAMIDA MICROSULES    | 250 mg. Comp.Rec. x 60               | MICROSULES ARGENTINA |
| Flutamida                  | FLUTRAX                 | 250 mg. Comp. x 60                   | BIOPROFARMA          |
| Fosamprenavir calcico      | TELZIR                  | 700 mg. Comp. x 60                   | GLAXOSMITHKLINE      |
| Fulvestrant                | DIMERE                  | 250 mg a.x 2+kit admin.              | BIOPROFARMA          |
| Fulvestrant                | FASLODEX                | 250 mg. JeringaPre-llenada IM x 2    | ASTRAZENECA          |
| Fulvestrant                | NILGABAN                | 250mg/5ml a.x 2+kit adm.             | TUTEUR               |
| Fulvestrant                | OLVESTAN                | 250mg/5ml IM lny Sol. x 2 Jer.Prell. | LKM                  |
| Gefitinib                  | GEFINTER                | 250 mg. Comp.Rec. x 30               | TUTEUR               |
| Gefitinib                  | IRESSA                  | 250 mg. Comp.Rec. x 30               | ASTRAZENECA          |
| Gemcitabina                | ANTORIL                 | 1.000 mg. Fco.Amp. x 1               | TUTEUR               |
| Gemcitabina                | ANTORIL                 | 200 mg. Fco.Amp. x 1                 | TUTEUR               |
| Gemcitabina                | ERIOGEM                 | 1 g. Fco.Amp. x 1                    | ERIOCHEM             |
| Gemcitabina                | ERIOGEM                 | 200 mg. Fco.Amp. x 1                 | ERIOCHEM             |
| Gemcitabina                | FOTINEX                 | 200 mg. Fco.Amp. x 1                 | LAB.INT.ARG.         |
| Gemcitabina                | FOTINEX                 | 1 g. Fco.Amp. x 1                    | LAB.INT.ARG.         |
| Gemcitabina                | GEBINA                  | 1.000 mg. Fco.Amp. x 1               | ASPEN                |
| Gemcitabina                | GEBINA                  | 200 mg. Fco.Amp. x 1                 | ASPEN                |
| Gemcitabina                | GEMBIO                  | 1.00 g. Fco.Amp.Liof. x 1            | BIOPROFARMA          |
| Gemcitabina                | GEMBIO                  | 200.00 mg. Fco.Amp.Liof. x 1         | BIOPROFARMA          |
| Gemcitabina                | GEMCINOVA               | 1 g. Fco.Amp.Liof. x 1               | CELNOVA              |
| Gemcitabina                | GEMCINOVA               | 200 mg. Fco.Amp.Liof. x 1            | CELNOVA              |
| Gemcitabina                | GEMCITABINA FILAXIS     | 1 g. PolvoFco.Amp.Liof. x 1          | GOBBI-NOVAG          |
| Gemcitabina                | GEMCITABINA FILAXIS     | 200 mg. PolvoFco.Amp.Liof. x 1       | GOBBI-NOVAG          |
| Gemcitabina                | GEMCITABINA GLENMARK    | 1.000 mg. lny.Liof.Fco.Amp x 1       | GLENMARK GENERICS    |
| Gemcitabina                | GEMCITABINA GLENMARK    | 200 mg. lny.Liof.Fco.Amp x 1         | GLENMARK GENERICS    |
| Gemcitabina                | GEMCITABINA IMA         | 1000 mg pvo.ltof.x 1                 | IMA                  |
| Gemcitabina                | GEMCITABINA IMA         | 200 mg pvo.ltof.x 1                  | IMA                  |
| Gemcitabina                | GEMCITABINA VARIFARMA   | 200mg F.Amp. x 1                     | VARIFARMA            |
| Gemcitabina                | GEMCITABINA VARIFARMA   | 1000mg F.Amp. x 1                    | VARIFARMA            |
| Gemcitabina                | GEMTRO                  | 1.000 mg. Fco.Amp. x 1               | ELI LILLY            |
| Gemcitabina                | GEMTRO                  | 200 mg. Fco.Amp. x 1                 | ELI LILLY            |
| Gemcitabina                | GESTREDOS               | 1.000 mg. Fco.Amp.Liof. x 1          | LKM                  |
| Gemcitabina                | GESTREDOS               | 200 mg. Fco.Amp.Liof. x 1            | LKM                  |
| Gemcitabina                | GEZT                    | 1 g. Fco.Amp. x 1                    | RICHMOND             |
| Gemcitabina                | GEZT                    | 200 mg. Fco.Amp. x 1                 | RICHMOND             |
| Gemcitabina                | GRAMAGEN                | 1 g. Fco.Amp. x 1                    | NOVARTIS             |
| Gemcitabina                | GRAMAGEN                | 200 mg. Fco.Amp. x 1                 | NOVARTIS             |
| Gemcitabina                | HAXANIT                 | 1.000 mg. Fco.Amp.Liof. x 1          | GP PHARM             |
| Gemcitabina                | HAXANIT                 | 200 mg. Fco.Amp.Liof. x 1            | GP PHARM             |
| Gemcitabina                | NABIGEM                 | 1.000 mg. Amp. lny. x 1              | MICROSULES ARGENTINA |
| Gemcitabina                | NABIGEM                 | 200 mg. Amp. lny. x 1                | MICROSULES ARGENTINA |
| Golimumab                  | SIMPONI                 | 50 mg autoinyector. x 1              | JANSSEN-CILAG        |
| Golimumab                  | SIMPONI                 | autoinyector x 100 mg                | JANSSEN-CILAG        |
| Golimumab                  | SIMPONI                 | JeringaPre-llenada x 1               | JANSSEN-CILAG        |
| Golimumab                  | SIMPONI IV              | 50 mg vial x 1 x 4 ml                | JANSSEN-CILAG        |
| Goserelin                  | ZOLADEX                 | 3.6 mg. Depot x 1                    | ASTRAZENECA          |
| Goserelin                  | ZOLADEX LA              | 10.8 mg. Depot x 1                   | ASTRAZENECA          |
| Hialuronato sodico         | CYSTISTAT               | 40 MG x 50 ml                        | EUROLAB              |
| Hidroxiurea                | HIDROXIUREA DELTA FARMA | 500 mg. Comp. x 100                  | SIDUS                |
| Hidroxiurea                | HIDROXIUREA LKM         | 500 mg. Caps. x 100                  | LKM                  |
| Hidroxiurea                | HIDROXIUREA LKM         | 500 mg. Caps. x 20                   | LKM                  |
| Histrelina                 | VANTAS                  | Implante + Dispos.de inserci?n       | TUTEUR               |
| Hormona folicloestimulante | GONAL-F 2.0 300 UI      | 22mcg/0.5ml iny.prelx1               | MERCK S.A.           |
| Hormona folicloestimulante | GONAL-F 2.0 450 UI      | 33mcg/0.75ml iny.prelx1              | MERCK S.A.           |
| Hormona folicloestimulante | GONAL-F 2.0 900 UI      | 66mcg/1.5ml iny.prelx1               | MERCK S.A.           |
| Ibrutinib                  | IMBRUVICA               | 140 mg. Caps. x 120                  | JANSSEN-CILAG        |
| Ibrutinib                  | IMBRUVICA               | 140 mg. Caps. x 90                   | JANSSEN-CILAG        |
| Idarrubicina               | IDARRUBICINA DOSA       | 5 mg. Fco.Amp. x 1 + Solv.           | DOSA                 |
| Idarrubicina               | IDARRUBICINA VARIFARMA  | 10 mg. Fco.Amp.Liof. x 1             | VARIFARMA            |
| Idarrubicina               | ZAVEDOS                 | 10 mg. Fco.Amp. x 1 + Solv.          | PFIZER               |
| Ifosfamida                 | IFOCRIS                 | 1 g. Fco.Amp.Liof. x 1               | LKM                  |
| Ifosfamida                 | IFOSFAMIDA DELTA FARMA  | 1 g. Fco.Amp. x 1                    | SIDUS                |
| Ifosfamida                 | IFOSFAMIDA MICROSULES   | 1 g. Fco.Amp.Liof. x 1               | MICROSULES ARGENTINA |
| Ifosfamida                 | IFOSFAMIDA VARIFARMA    | 1 g. Fco.Amp.Liof. x 1               | VARIFARMA            |

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| Principio Activo                      | Marca Comercial            | Presentación                                             | Laboratorio          |
|---------------------------------------|----------------------------|----------------------------------------------------------|----------------------|
| Ilofamidina                           | IFX                        | 1 g. Fco.Amp. x 1                                        | GOBBI-NOVAG          |
| Iloprost                              | VENTAVIS                   | 10 mcg./1 ml. Amp. x 30 x 2 ml.                          | BAYER                |
| Imatinib                              | AGACEL                     | 100 mg. Comp. x 180                                      | TUTEUR               |
| Imatinib                              | AGACEL                     | 400 mg. Comp. x 30                                       | TUTEUR               |
| Imatinib                              | CLINID                     | 100 mg. Comp.Rec. x 180                                  | BIOPROFARMA          |
| Imatinib                              | CLINID                     | 400 mg. Comp.Rec. x 30                                   | BIOPROFARMA          |
| Imatinib                              | GLIVEC                     | 100 mg. Comp.Rec. x 180                                  | NOVARTIS             |
| Imatinib                              | GLIVEC                     | 400 mg. Comp. x 30                                       | NOVARTIS             |
| Imatinib                              | IMATIB                     | 100 mg. Comp.Rec. x 180                                  | ASPEN                |
| Imatinib                              | IMATIB                     | 400 mg. Comp.Rec. x 30                                   | ASPEN                |
| Imatinib                              | IMATINIB GP PHARM          | 100.00 mg. Comp.Rec. x 180                               | GP PHARM             |
| Imatinib                              | IMATINIB GP PHARM          | 400 mg. Comp.Rec. x 30                                   | GP PHARM             |
| Imatinib                              | IMATINOVA                  | 400 mg. Comp. x 30                                       | CELNOVA              |
| Imatinib                              | INGERINIB                  | 400 mg. Comp. x 30                                       | INGERICS             |
| Imatinib                              | IRITECH                    | 100 mg. Comp. x 180                                      | BIOTECHNO PHARMA     |
| Imatinib                              | MESINIB                    | 100 mg. Comp.Rec. x 180                                  | VARIFARMA            |
| Imatinib                              | MESINIB                    | 400 mg. Comp.Rec. x 30                                   | VARIFARMA            |
| Imatinib                              | TAGONIB                    | 100 mg. Comp. x 180                                      | MICROSULES ARGENTINA |
| Imatinib                              | TAGONIB                    | 400 mg. Comp. x 30                                       | MICROSULES ARGENTINA |
| Imatinib                              | TIMAB                      | 100 mg. Comp. x 180                                      | LKM                  |
| Imatinib                              | TIMAB                      | 400 mg. Comp. x 30                                       | LKM                  |
| Imatinib                              | VEK 400                    | 400 mg. Comp. x 30                                       | DOSA                 |
| Imatinib                              | ZIATIR                     | 100 mg. Comp. x 180                                      | RICHMOND             |
| Imatinib                              | ZIATIR                     | 400 mg. Comp. x 30                                       | RICHMOND             |
| Infliximab                            | REMICADE                   | 100 mg. PolvoFco.Amp.Liof. x 1                           | JANSSEN-CILAG        |
| Inmunocianina                         | IMMUCOTHEL                 | 10 mg. Fco.Amp. x 1 + Amp. solv.                         | BUXTON               |
| Inmunoglobulina antihepatitis B       | IGANTIBE                   | 1.000 UI Fco.Amp. x 1 x 5 ml.                            | GRIFOLS              |
| Inmunoglobulina anti-Rho(D)           | IGANTID                    | 300mcg (1500UI) Jer. Prell. x 2ml                        | GRIFOLS              |
| Inmunoglobulina antitímocitos humanos | TIMOGLOBULINA              | 25 mg. Fco.Amp.Liof. x 1 x 5 ml. + Solv.                 | SANO-AVENTIS         |
| Inmunoglobulina humana                | FLEBOGAMMA 5% DIF          | 10.000 mg. Fco.Amp. x 1 x 200 ml.                        | GRIFOLS              |
| Inmunoglobulina humana                | FLEBOGAMMA 5% DIF          | 5.000 mg. Fco.Amp. x 1 x 100 ml.                         | GRIFOLS              |
| Inmunoglobulina humana normal         | HIZENTRA                   | 1g Env. x 5ml                                            | CSL BEHRING          |
| Inmunoglobulina humana normal         | HIZENTRA                   | 2g Env. x 10ml                                           | CSL BEHRING          |
| Inmunoglobulina humana normal         | HIZENTRA                   | 4g Env. x 20ml                                           | CSL BEHRING          |
| Inmunoglobulina humana normal         | PRIVIGEN                   | 20 g. ml. Fco.Amp. x 1 x 200 ml.                         | CSL BEHRING          |
| Interferon alfa (2b)                  | BIOFERON                   | 10 MUI Fco.Amp.Liof. x 1 + Amp. dil.                     | BIOSIDUS FARMA       |
| Interferon alfa (2b)                  | BIOFERON                   | 3 MUI Fco.Amp.Liof. x 1 + Amp. dil.                      | BIOSIDUS FARMA       |
| Interferon alfa (2b)                  | BIOFERON                   | 5 MUI Fco.Amp.Liof. x 1 + Amp. dil.                      | BIOSIDUS FARMA       |
| Interferon alfa (2b)                  | INTER 2-B                  | 5 MUI Fco.Amp.Liof. x 1 + Amp. disolv.                   | BIOSIDUS FARMA       |
| Interferon alfa (2b)                  | INTER 2-B                  | Liof. 10MUI Iny. F.Amp. x 1 +Amp.disol                   | BIOSIDUS FARMA       |
| Interferon alfa (2b)                  | INTER 2-B                  | 3 MUI Fco.Amp.Liof. x 1 + Amp. disolv.                   | BIOSIDUS FARMA       |
| Interferon alfa (2b)                  | INTERFERON ALFA 2B CASSARA | 10 MUI Fco.Amp.Liof. x 1 + Amp. solv.                    | VARIFARMA            |
| Interferon alfa (2b)                  | INTERFERON ALFA 2B CASSARA | 3 MUI Fco.Amp.Liof. x 1 + Amp. solv.                     | VARIFARMA            |
| Interferon alfa (2b)                  | INTERFERON ALFA 2B CASSARA | 5 MUI Fco.Amp.Liof. x 1 + Amp. solv.                     | VARIFARMA            |
| Interferon beta                       | BLASTOFERON                | 22mcg (5MUI) SC Iny Jer. Prell. x 12 x 0.5ml c/Aguja 25  | BIOSIDUS FARMA       |
| Interferon beta                       | BLASTOFERON                | 44mcg (12MUI) SC Iny Jer. Prell. x 12 x 0.5ml c/Aguja 25 | BIOSIDUS FARMA       |
| Interferon beta 1 B                   | BETAIFERON RECOMBINANTE    | 8 MUI Env. x 15 + Kit con jeringa                        | BAYER                |
| Interferon beta 1a                    | AVONEX PEN INTERFERON BETA | PEN 30mcg /0.5ml Jer. Pre Cargada                        | BIOGEN IDEC          |
| Interferon beta 1a                    | ESCLEROFERON               | 30 mcg./0.5 ml. JeringaPre-Llenada x 4                   | BIOSIDUS FARMA       |
| Interferon beta 1a                    | INMUNOMAS                  | 22 mcg. Amp. x 12                                        | SYNTHON BAGO         |
| Interferon beta 1a                    | INMUNOMAS                  | 44 mcg. Amp. x 12                                        | SYNTHON BAGO         |
| Interferon beta 1a                    | REBIF NF                   | 44mcg Jer. Prell. x 12                                   | MERCK S.A.           |
| Interferon beta 1a                    | REBIF NF MULTIDOSIS        | 22mcg Cart. Multidosis x 3 Dosis                         | MERCK S.A.           |
| Interferon beta 1a                    | REBIF NF MULTIDOSIS        | 44mcg Cart. Multidosis x 3 Dosis                         | MERCK S.A.           |
| Ipilimumab                            | YERVOY                     | 50 mg. Fco.Vial x 1 x 10 ml.                             | BRISTOL-MYERS SQUIBB |
| Irinotecan                            | C.P.T. 11                  | 100 mg. Fco.Amp. x 1 x 5 ml.                             | VARIFARMA            |
| Irinotecan                            | CAMPTOSAR                  | 100 mg. Fco.Amp. x 1 x 5 ml.                             | PFIZER               |
| Irinotecan                            | EFIXANO                    | 100 mg. Fco.Amp. x 1 x 5 ml.                             | DOSA                 |
| Irinotecan                            | IRENAX                     | 100 mg. Fco.Amp. x 1 x 5 ml.                             | NOVARTIS             |
| Irinotecan                            | IRINOGEN                   | 100 mg. Fco.Amp. x 1 x 5 ml.                             | BIOPROFARMA          |
| Irinotecan                            | IRINOTECAN DELTA FARMA     | 100 mg. Fco.Amp. x 1 x 5 ml.                             | SIDUS                |
| Irinotecan                            | IRINOTECAN GLENMARK        | 100 mg. Fco.Amp. x 1 x 5 ml.                             | GLENMARK GENERICS    |
| Irinotecan                            | ITOXARIL 100               | 100 mg. Fco.Amp. x 1 x 5 ml.                             | LKM                  |
| Irinotecan                            | KEBIRTECAN                 | 100 mg. Fco.Amp. x 1 x 5 ml.                             | ASPEN                |
| Irinotecan                            | PIPETECAN                  | 100 mg. Fco.Amp. x 1 x 5 ml.                             | RICHMOND             |
| Irinotecan                            | SATIGENE                   | 100 mg. Fco.Amp. x 1 x 5 ml.                             | MICROSULES ARGENTINA |
| Irinotecan                            | SIBUDAN                    | 100 mg. Fco.Amp. x 1 x 5 ml.                             | TUTEUR               |
| Irinotecan                            | TIAGREL                    | 100 mg fco amp x 1                                       | GP PHARM             |
| Irinotecan                            | TRINOTECAN                 | 100 mg. Fco.Amp. x 1 x 5 ml.                             | GOBBI-NOVAG          |
| Irinotecan                            | WINOL                      | 100 mg. Fco.Amp. x 1 x 5 ml.                             | RAFFO                |
| Ivacaftor                             | IVADECO                    | 150 mg comp.rec. x 60                                    | TUTEUR               |
| Ixabepilona                           | IXEMPRA                    | 15 mg. Vial x 1 x 8 ml. + Diluyente                      | ANDRATX PHARMA       |
| Ixabepilona                           | IXEMPRA                    | 45 mg. Fco.Amp. x 1 + Kit                                | ANDRATX PHARMA       |
| Lamivudina                            | 3TC                        | 10 mg./1 ml. Sol.Oral x 1 x 240 ml.                      | GLAXOSMITHKLINE      |
| Lamivudina                            | 3TC                        | 150 mg. Comp. x 60                                       | GLAXOSMITHKLINE      |
| Lamivudina                            | KESS                       | 150 mg. Comp. x 60                                       | FRESENIUS KABI       |
| Lamivudina                            | ORALMUV                    | 300 mg. Comp. x 30                                       | LKM                  |
| Lamivudina                            | VUCLODIR                   | 300 mg. Comp. x 30                                       | RICHMOND             |
| Lamivudina + Tenofovir                | MIVUTEN                    | 300 mg. Comp. x 30                                       | RICHMOND             |

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| Principio Activo                     | Marca Comercial              | Presentación                            | Laboratorio          |
|--------------------------------------|------------------------------|-----------------------------------------|----------------------|
| Lamivudina + Tenofovir               | TELA VIR                     | 300 mg. Comp. x 30                      | LKM                  |
| Lamivudina + zidovudina              | 3TC COMPLEX                  | 150 mg./300 mg. Comp.Rec. x 60          | GLAXOSMITHKLINE      |
| Lamivudina + zidovudina              | KESS COMPLEX                 | 150 mg./300 mg. Comp. x 60              | FRESENIUS KABI       |
| Lamivudina + zidovudina              | LAMIVUDINA + ZIDOVUDINA DOSA | 150 mg. Comp.Rec. x 60                  | DOSA                 |
| Lamivudina + zidovudina              | MUV/DINA                     | 150 mg./300 mg. Comp. x 60              | LKM                  |
| Lamivudina + zidovudina              | ZETAVUDIN                    | 150 mg./300 mg. Comp.Rec. x 60          | RICHMOND             |
| Lamivudina + Zidovudina + Abacavir   | TRICIVIR                     | 150 mg./300 mg. Comp.Rec. x 60          | GLAXOSMITHKLINE      |
| Lamivudina + Zidovudina + Abacavir   | TRILAXIS                     | 150 mg. Comp.Rec. x 60                  | FRESENIUS KABI       |
| Lamivudina + Zidovudina + Abacavir   | ZIDOMUV                      | 150 mg. Comp. x 60                      | LKM                  |
| Lamivudina + Zidovudina + Nevirapina | LAZINEVIR                    | Comp. Rec. x 60                         | RICHMOND             |
| Lamivudina + Zidovudina + Nevirapina | MUV/DINA PLUS                | 150 mg. Comp.Rec. x 60                  | LKM                  |
| Lanreotida                           | SOMATULINE AUTOGEL           | 120 mg. Fco.Amp. x 1                    | SANOFI-AVENTIS       |
| Lanreotida                           | SOMATULINE AUTOGEL           | 60 mg. JeringaPre-Llenada x 1 x 0.3 ml. | SANOFI-AVENTIS       |
| Lanreotida                           | SOMATULINE AUTOGEL           | 90 mg. Fco.Amp. x 1                     | SANOFI-AVENTIS       |
| Lapatinib                            | TYKERB                       | 250 mcg x 140 compr. rec.               | NOVARTIS             |
| Ledipasvir+Sofosbuvir                | HARVONI                      | Comp.rec.x 28                           | GADOR                |
| Lenalidomida                         | LADEVINA                     | 10 mg. Caps. x 21                       | LKM                  |
| Lenalidomida                         | LADEVINA                     | 15 mg. Caps. x 21                       | LKM                  |
| Lenalidomida                         | LADEVINA                     | 25 mg. Caps. x 21                       | LKM                  |
| Lenalidomida                         | LADEVINA                     | 5 mg. Caps. x 21                        | LKM                  |
| Lenalidomida                         | LEDAMIN                      | 10 mg. Caps. x 21                       | ASPEN                |
| Lenalidomida                         | LEDAMIN                      | 15 mg. Caps. x 21                       | ASPEN                |
| Lenalidomida                         | LEDAMIN                      | 25 mg. Caps. x 21                       | ASPEN                |
| Lenalidomida                         | LEDAMIN                      | 5 mg. Caps. x 21                        | ASPEN                |
| Lenalidomida                         | LENOMEL                      | 10 mg. Caps. x 21                       | DOSA                 |
| Lenalidomida                         | LENOMEL                      | 15 mg. Caps. x 21                       | DOSA                 |
| Lenalidomida                         | LENOMEL                      | 25 mg. Caps. x 21                       | DOSA                 |
| Lenalidomida                         | LENOMEL                      | 5 mg. Caps. x 21                        | DOSA                 |
| Lenalidomida                         | LUNADIN                      | 10 mg. Caps. x 21                       | TUTEUR               |
| Lenalidomida                         | LUNADIN                      | 15 mg. Caps. x 21                       | TUTEUR               |
| Lenalidomida                         | LUNADIN                      | 25 mg. Caps. x 21                       | TUTEUR               |
| Lenalidomida                         | LUNADIN                      | 5 mg. Caps. x 21                        | TUTEUR               |
| Lenalidomida                         | MYELENZ                      | 10 mg caps.x 21                         | BIOPROFARMA          |
| Lenalidomida                         | MYELENZ                      | 25 mg caps.x 21                         | BIOPROFARMA          |
| Lenalidomida                         | REVLIMID                     | 10 mg. Caps. x 21                       | RAFFO                |
| Lenalidomida                         | REVLIMID                     | 15 mg. Caps. x 21                       | RAFFO                |
| Lenalidomida                         | REVLIMID                     | 25 mg. Caps. x 21                       | RAFFO                |
| Lenalidomida                         | REVLIMID                     | 5 mg. Caps. x 21                        | RAFFO                |
| Letrozol                             | CENDALON                     | 2.5 mg. Comp.Rec. x 30                  | TUTEUR               |
| Letrozol                             | FECINOLE                     | 2.5 mg. Comp. x 30                      | DOSA                 |
| Letrozol                             | FEMARA                       | 2.5 mg. Comp. x 30                      | NOVARTIS             |
| Letrozol                             | IDELARA                      | 2.5 mg. Comp.Rec. x 30                  | BIOPROFARMA          |
| Letrozol                             | KEBIRZOL                     | 2.5 mg. Comp.Rec. x 30                  | ASPEN                |
| Letrozol                             | LETOZOL GLENMARK             | 2.5 mg. Comp. x 30                      | GLENMARK GENERICS    |
| Letrozol                             | LETOZOL MICROSULES           | 2.5 mg. Comp.Rec. x 30                  | MICROSULES ARGENTINA |
| Letrozol                             | LETOZOL TECHSPHERE           | 2.5 mg. Comp. x 30                      | TECHSPHERE           |
| Letrozol                             | LETOZOL VARIFARMA            | 2.5 mg. Comp.Rec. x 30                  | VARIFARMA            |
| Letrozol                             | TROTECH                      | 2.5 mg. Comp.Rec. x 30                  | GP PHARM             |
| Leucovorina calcica                  | LEUCOCALCIN                  | 15 mg. Comp. x 10                       | LKM                  |
| Leucovorina calcica                  | LEUCOVORINA CALCICA FILAXIS  | 50 mg. Fco.Amp.Liof. x 1                | FRESENIUS KABI       |
| Leucovorina calcica                  | LEUCOVORINA CALCICA TUTEUR   | 50 mg./5 ml. Fco.Amp. x 1               | TUTEUR               |
| Leucovorina calcica                  | LEUCOVORINA DELTA FARMA      | 15 mg. Comp. x 10                       | SIDUS                |
| Leucovorina calcica                  | LEUCOVORINA DELTA FARMA      | 50 mg. Fco.Amp. x 1                     | SIDUS                |
| Leucovorina calcica                  | LEUCOVORINA GP PHARM         | 15 mg liof.f.a x 1                      | GP PHARM             |
| Leucovorina calcica                  | NOVIZET                      | 50 mg. Fco.Amp.Liof. x 1                | MICROSULES ARGENTINA |
| Leucovorina calcica                  | RONTAFOR                     | 50 mg. Fco.Amp. x 1                     | GOBBI-NOVAG          |
| Leuprolide acetato                   | ELIGARD                      | 22.5 mg. Kit x 1                        | RAFFO                |
| Leuprolide acetato                   | ELIGARD                      | Liof. 45mg lny. Jer. Prell.             | RAFFO                |
| Leuprolide acetato                   | LECTRUM                      | 3.75 mg. Fco.Amp. x 1                   | NOVARTIS             |
| Leuprolide acetato                   | LECTRUM                      | 7.5 mg. Fco.Amp. x 1 + Kit              | NOVARTIS             |
| Leuprolide acetato                   | LEPRID                       | 7.5 mg. Fco.Amp. x 1                    | LKM                  |
| Linezolid                            | LINEZOLID RICHET             | 600 mg comp.x 10                        | RICHET               |
| Linezolid                            | ZYVOX                        | 600 mg. Fco.Amp.IV x 10 x 300 ml.       | PFIZER               |
| Linezolid                            | ZYVOX                        | 600 mg. Tab. x 10                       | PFIZER               |
| Lipasa + Amilasa + Proteasa          | PANCREOLIPASA TECHSPHERE     | 12 mg. Caps. x 100                      | TECHSPHERE           |
| Lipasa + Amilasa + Proteasa          | PANCREOLIPASA TECHSPHERE     | 20 mg. Caps. x 100                      | TECHSPHERE           |
| Lipasa + Amilasa + Proteasa          | PANCREOLIPASA TECHSPHERE     | 4 mg. Caps. x 30                        | TECHSPHERE           |
| Liraglutida                          | VICTOZA                      | 6mg/ml Lap. Prell. x 2 x 3ml (PVP)      | NOVO NORDISK         |
| Lopinavir + ritonavir                | KALETRA                      | 200 mg./50 mg. Comp.Rec. x 120          | ABBVIE               |
| Lopinavir + ritonavir                | KALETRA                      | 80 mg./20 mg. lbe. x 1 x 160 ml.        | ABBVIE               |
| Lumacaftor+lvacaftor                 | LUCAFTOR                     | comp.rec.x 120                          | GADOR                |
| Macicentan                           | OPSUMIT                      | 10 mg x 30                              | JANSSEN-CILAG        |
| Maraviroc                            | CESENTRI                     | 150 mg. Comp. x 60                      | GLAXOSMITHKLINE      |
| Maraviroc                            | CESENTRI                     | 300 mg. Comp. x 60                      | GLAXOSMITHKLINE      |
| Medroxiprogesterona                  | LIVOMEDROX                   | 500 mg. Caps. x 20                      | VARIFARMA            |
| Megestrol                            | VARIGESTROL                  | 160 mg. Comp. x 30                      | VARIFARMA            |
| Melfalan                             | ALKERANA                     | 2 mg. Comp. x 25                        | TECHSPHERE           |
| Melfalan                             | MELFOMA                      | 2mg Comp. x 25                          | DOSA                 |
| Melfalan                             | MELFOMA                      | 50 mg. Fco.Amp. x 1                     | DOSA                 |

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| Principio Activo                            | Marca Comercial                | Presentación                        | Laboratorio          |
|---------------------------------------------|--------------------------------|-------------------------------------|----------------------|
| Meprednisona                                | CORTIPYREN B                   | 4 mg. Comp. x 20                    | GADOR                |
| Meprednisona                                | CORTIPYREN B                   | 40 mg. Comp. x 20                   | GADOR                |
| Meprednisona                                | CORTIPYREN B                   | 8 mg. Comp. x 20                    | GADOR                |
| Meprednisona                                | DELTISONA B                    | 4 mg. Comp. x 20                    | SANOFI-AVENTIS       |
| Meprednisona                                | DELTISONA B                    | 40 mg. Comp. x 20                   | SANOFI-AVENTIS       |
| Meprednisona                                | DELTISONA B                    | 4mg./1ml Oral Gotas x 20ml          | SANOFI-AVENTIS       |
| Meprednisona                                | DELTISONA B                    | 8 mg. Comp. x 20                    | SANOFI-AVENTIS       |
| Meprednisona                                | MEPREDNISONA VARIFARMA         | 40 mg. Comp. x 20                   | VARIFARMA            |
| Mercaptopurina                              | PURI-METHOL                    | 50 mg. Comp. x 25                   | TECHSPHERE           |
| Mercaptopurina                              | VARIMER                        | 50 mg. Comp. x 25                   | VARIFARMA            |
| Mesna                                       | FADA MESNA                     | 200 mg. Amp. x 10                   | LAB INT. ARG.        |
| Mesna                                       | MESNA DELTA FARMA              | 200 mg. Fco. Amp. x 10 x 2 ml.      | SIDUS                |
| Mesna                                       | MESNA DELTA FARMA              | 200 mg. Fco. Amp. x 15 x 2 ml.      | SIDUS                |
| Mesna                                       | MESNA DELTA FARMA              | 400 mg. Fco. Amp. x 10 x 4 ml.      | SIDUS                |
| Mesna                                       | MESNA DELTA FARMA              | 400 mg. Fco. Amp. x 15 x 4 ml.      | SIDUS                |
| Mesna                                       | MESNA GOBBI                    | 200 mg. Fco. Amp. x 15              | GOBBI-NOVAG          |
| Mesna                                       | VARIMESNA                      | 200 mg. Fco. Amp. x 15              | VARIFARMA            |
| Metilprednisolona                           | SOLU-MEDROL                    | 500 mg. Fco. Amp. x 1 + Dil.        | PFIZER               |
| Metotrexato                                 | ARTRAIT                        | 10 mg. Comp. x 10                   | TRB PHARMA           |
| Metotrexato                                 | ARTRAIT                        | 15 mg. Comp. Ran. x 4               | TRB PHARMA           |
| Metotrexato                                 | ARTRAIT                        | 15 mg. Fco. Amp. x 5 x 2 ml.        | TRB PHARMA           |
| Metotrexato                                 | ARTRAIT                        | 2.5 mg. Comp. x 20                  | TRB PHARMA           |
| Metotrexato                                 | ARTRAIT                        | 20 mg. Fco. Amp. x 4                | TRB PHARMA           |
| Metotrexato                                 | ARTRAIT                        | 7.5 mg. Comp. x 10                  | TRB PHARMA           |
| Metotrexato                                 | ERVEMIN                        | 2.5 mg. Comp. x 20                  | IVAX ARGENTINA       |
| Metotrexato                                 | ERVEMIN                        | 10 mg. Comp. x 10                   | IVAX ARGENTINA       |
| Metotrexato                                 | ERVEMIN                        | 15 mg. Fco. Amp. x 5 x 3 ml.        | IVAX ARGENTINA       |
| Metotrexato                                 | ERVEMIN                        | 7.5 mg. Comp. x 10                  | IVAX ARGENTINA       |
| Metotrexato                                 | METOTREXATE TUTEUR             | 50 mg./2 ml. Fco. Amp. x 1          | TUTEUR               |
| Metotrexato                                 | METOTREXATE TUTEUR             | 500 mg./20 ml. Fco. Amp. x 1        | TUTEUR               |
| Metotrexato                                 | METOTREXATO LKM                | 50 mg. Fco. Amp. Liof. x 1          | LKM                  |
| Metotrexato                                 | METOTREXATO LKM                | 500 mg. Env. x 1                    | LKM                  |
| Metotrexato                                 | METOTREXATO MICROSULES         | 1.000 mg. Polvo Fco. Amp. Liof. x 1 | MICROSULES ARGENTINA |
| Metotrexato                                 | METOTREXATO MICROSULES         | 500 mg. Polvo Fco. Amp. Liof. x 1   | MICROSULES ARGENTINA |
| Metotrexato                                 | METOTREXATO MICROSULES         | 50 mg. Polvo Fco. Amp. Liof. x 1    | MICROSULES ARGENTINA |
| Micofenolato mofetilo                       | CELLCEPT                       | 250 mg. Caps. x 100                 | ROCHE                |
| Micofenolato mofetilo                       | CELLCEPT                       | 500 mg. Comp. x 50                  | ROCHE                |
| Micofenolato mofetilo                       | IMUXGEN                        | 500 mg. Comp. x 50                  | BIOPROFARMA          |
| Micofenolato mofetilo                       | MICOFENOLATO MOFETIL VARIFARMA | 250 mg. Comp. x 100                 | VARIFARMA            |
| Micofenolato mofetilo                       | MMF 500 SANDOZ                 | 500 mg. Comp. Rec. x 50             | NOVARTIS             |
| Micofenolato mofetilo                       | MUNOTRAS                       | 250 mg. Comp. Rec. x 50             | RAFFO                |
| Micofenolico acido                          | MYFORTIC                       | 180 mg. Comp. x 120                 | NOVARTIS             |
| Micofenolico acido                          | MYFORTIC                       | 360 mg. Comp. x 120                 | NOVARTIS             |
| Mitomicina                                  | CRISOFIMINA                    | 20 mg. Fco. Amp. x 1                | TUTEUR               |
| Mitomicina                                  | MAXIMITON                      | 20 mg. Fco. Amp. x 1                | VARIFARMA            |
| Mitomicina                                  | MITOCYNA                       | 20 mg. Fco. Amp. x 1                | RICHMOND             |
| Mitomicina                                  | MITOCYNA                       | 5 mg. Fco. Amp. x 1                 | RICHMOND             |
| Mitomicina                                  | MITOKEBIR                      | 20 mg. Fco. Amp. x 1                | ASPEN                |
| Mitomicina                                  | MITOMICINA DELTA FARMA         | 5 mg. Fco. Amp. x 1                 | SIDUS                |
| Mitomicina                                  | MITOMICINA DELTA FARMA         | 20 mg. Fco. Amp. x 1                | SIDUS                |
| Mitomicina                                  | MITOMICINA LKM                 | 20 mg. Fco. Amp. Liof. x 1          | LKM                  |
| Mitomicina                                  | MITOMICINA MICROSULES          | 20 mg. Fco. Amp. Liof. x 1          | MICROSULES ARGENTINA |
| Mitomicina                                  | MITOMICINA-C FILAXIS           | 20 mg. Polvo Fco. Amp. Liof. x 1    | GOBBI-NOVAG          |
| Mitomicina                                  | MITONOVAG                      | 20 mg. Fco. Amp. x 1                | GOBBI-NOVAG          |
| Mitomicina                                  | MITOTIE                        | 20 mg. Fco. Amp. x 1                | BIOPROFARMA          |
| Mitomicina                                  | RONZINE                        | 20 mg. Fco. Amp. x 1                | GP PHARM             |
| Mitomicina                                  | VETIO                          | 20 mg. Fco. Amp. Liof. x 1          | IVAX ARGENTINA       |
| Mitoxantrona                                | MITOXANTRONA FILAXIS           | 20 mg. Fco. Amp. x 1                | GOBBI-NOVAG          |
| Mitoxantrona                                | MITOXANTRONA VARIFARMA         | 20 mg. Fco. Amp. x 1                | VARIFARMA            |
| Mitoxantrona                                | MITOXGEN                       | 20 mg. Fco. Amp. x 1 x 10 ml.       | BIOPROFARMA          |
| Natalizumab                                 | TYSABRI                        | 300 mg. Vial x 1 x 15 ml.           | BIOGEN IDEC          |
| Nevirapina                                  | FIUDE                          | 200 mg. Comp. x 60                  | FRESENIUS KABI       |
| Nevirapina                                  | NERAPIN                        | 200 mg. Comp. x 60                  | LKM                  |
| Nevirapina                                  | NEVIRAPINA ELEA                | 200 mg. Comp. x 60                  | ELEA PHOENIX         |
| Nevirapina                                  | PROTEASE                       | 200 mg. Comp. x 60                  | RICHMOND             |
| Nevirapina                                  | VIRAMUNE                       | 1 g./100 ml. Susp. x 1 x 240 ml.    | BOEHRINGER INGELHEIM |
| Nevirapina                                  | VIRAMUNE                       | 200 mg. Comp. x 60                  | BOEHRINGER INGELHEIM |
| Nilotinib                                   | TASIGNA                        | 150 mg. Caps. x 120                 | NOVARTIS             |
| Nilotinib                                   | TASIGNA                        | 200 mg. Caps. x 120                 | NOVARTIS             |
| Nimotuzumab                                 | CIMAHER                        | 50 mg. Fco. Amp. x 4                | ELEA PHOENIX         |
| Nivolumab                                   | OPDIVO                         | 100mg./10ml IV Iny Sol.             | BRISTOL-MYERS SQUIBB |
| Nivolumab                                   | OPDIVO                         | 40mg./4ml IV Iny Sol.               | BRISTOL-MYERS SQUIBB |
| Octreotida                                  | OCTREOTIDA GP PHARM            | 100mcg./ml Amp. x 5 x 1ml           | GP PHARM             |
| Octreotida                                  | SANDOSTATIN                    | 0.1 mg. Fco. Amp. x 5 x 1 cc.       | NOVARTIS             |
| Octreotida                                  | SANDOSTATIN                    | 1 mg. Fco. Amp. x 1 x 5 cc.         | NOVARTIS             |
| Octreotida                                  | SANDOSTATIN LAR                | MPVI 20mg Amp. Jer. Prell. x 1      | NOVARTIS             |
| Octreotida                                  | SANDOSTATIN LAR                | MPVI 30mg Amp. Jer. Prell. x 1      | NOVARTIS             |
| Omaliuzumab                                 | XOLAIR                         | 150 mg. Fco. Amp. Liof. x 1         | NOVARTIS             |
| OMBITASVIR+PARITAPREVIR+RITONAVIR+DASABUVIR | VIEKIRA PAK                    | 250 mg. Comp. Rec. x 1              | ABBVIE               |

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| Principio Activo    | Marca Comercial             | Presentación                             | Laboratorio          |
|---------------------|-----------------------------|------------------------------------------|----------------------|
| Onabotulinumtoxin A | BOTOX                       | 100 UI Sol.Vial x 1                      | ALLERGAN             |
| Onabotulinumtoxin A | BOTOX                       | 200 UI Vial x 1                          | ALLERGAN             |
| Ondansetron         | CETRON                      | 8 mg. Comp. x 10                         | RAFFO                |
| Ondansetron         | ESPASEVIT                   | 8 mg. Fco.Amp. x 1 x 4 ml.               | RICHMOND             |
| Ondansetron         | FINABER                     | 8 mg. Fco.Amp. x 1 x 4 ml.               | MICROSULES ARGENTINA |
| Ondansetron         | FINABER                     | 8 mg. Fco.Amp. x 5 x 4 ml.               | MICROSULES ARGENTINA |
| Ondansetron         | ONDANSETRON FILAXIS         | 8 mg. Fco.Amp. x 1 x 4 ml.               | GOBBI-NOVAG          |
| Ondansetron         | ONDANSETRON FILAXIS         | 8 mg. Fco.Amp. x 5 x 4 ml.               | GOBBI-NOVAG          |
| Ondansetron         | ONDANSETRON GLENMARK        | 8 mg. Amp. x 5 x 4 ml.                   | GLENMARK GENERICS    |
| Ondansetron         | ONDANSETRON GLENMARK        | 8 mg. Sol.Iny. x 1                       | GLENMARK GENERICS    |
| Ondansetron         | ONDANSETRON GOBBI           | 8mg Iny. Sol. Amp. x 1 x 4ml             | GOBBI-NOVAG          |
| Ondansetron         | ONDANSETRON LKM 8           | 8 mg. Comp. x 10                         | LKM                  |
| Ondansetron         | ONDANSETRON LKM 8           | 8 mg. Fco.Amp. x 5 x 4 ml.               | LKM                  |
| Ondansetron         | ONDANSETRON LKM 8           | 8 mg. mg. Fco.Amp. x 1 x 4 ml.           | LKM                  |
| Ondansetron         | TIOSALIS                    | 8 mg. Fco.Amp. x 1 x 4 ml.               | TUTEUR               |
| Ondansetron         | ZOFRAN DR                   | 4 mg. comp Liof disol rapida x 10        | SANDOZ               |
| Ondansetron         | ZOFRAN DR                   | 8 mg. comp Liof disol rapida x 10        | SANDOZ               |
| Ondansetron         | ZOFRAN LIAM                 | 8 mg. Fco.Amp. x 1 x 4 ml.               | SANDOZ               |
| Oxaliplatino        | CRISAPLA                    | 100 mg. Fco.Amp.Liof. x 1                | LKM                  |
| Oxaliplatino        | CRISAPLA                    | 50 mg. Fco.Amp.Liof. x 1                 | LKM                  |
| Oxaliplatino        | DABENZOL                    | 100 mg. Fco.Amp.Liof. x 1                | GOBBI-NOVAG          |
| Oxaliplatino        | DABENZOL                    | 50 mg. Fco.Amp.Liof. x 1                 | GOBBI-NOVAG          |
| Oxaliplatino        | DACPLAT                     | 50 mg. Fco.Amp. x 1                      | PFIZER               |
| Oxaliplatino        | DACPLAT                     | 100 mg. Fco.Amp. x 1                     | PFIZER               |
| Oxaliplatino        | FADA OXALIPLATINO           | 100 mg. Fco.Amp. x 1                     | LAB.INT.ARG.         |
| Oxaliplatino        | FADA OXALIPLATINO           | 50 mg. Fco.Amp. x 1                      | LAB.INT.ARG.         |
| Oxaliplatino        | GOXYRAL                     | 100 mg. Liof.Iny.p/Perf. x 1             | ERIOCHEM             |
| Oxaliplatino        | GOXYRAL                     | 50 mg. Liof.Iny.p/Perf. x 1              | ERIOCHEM             |
| Oxaliplatino        | KEBIR                       | 100 mg. Fco.Amp.Liof. x 1                | ASPEN                |
| Oxaliplatino        | KEBIR                       | 50 mg. Fco.Amp.Liof. x 1                 | ASPEN                |
| Oxaliplatino        | METAPLATIN                  | 100 mg. Fco.Amp. x 1                     | TUTEUR               |
| Oxaliplatino        | METAPLATIN                  | 50 mg. Fco.Amp. x 1                      | TUTEUR               |
| Oxaliplatino        | MITOG                       | 100 mg. Fco.Amp.Liof. x 1                | MICROSULES ARGENTINA |
| Oxaliplatino        | MITOG                       | 50 mg. Fco.Amp.Liof. x 1                 | MICROSULES ARGENTINA |
| Oxaliplatino        | OXALIPLATINO DELTA FARMA    | 50 mg. Fco.Amp. x 1                      | SIDUS                |
| Oxaliplatino        | OXALIPLATINO DELTA FARMA    | 100 mg. Fco.Amp. x 1                     | SIDUS                |
| Oxaliplatino        | Oxaliplatino Glenmark       | 100 mg. Fco.Amp.Liof. x 1                | GLENMARK GENERICS    |
| Oxaliplatino        | Oxaliplatino Glenmark       | 50 mg. Fco.Amp.Liof. x 1                 | GLENMARK GENERICS    |
| Oxaliplatino        | OXALIPLATINO GP PHARM       | 100mg Iny. F.Amp. x 1                    | GP PHARM             |
| Oxaliplatino        | OXALIPLATINO GP PHARM       | 50mg Iny. F.Amp. x 1                     | GP PHARM             |
| Oxaliplatino        | OXALIPLATINO VARIFARMA      | 50 mg. PolvoFco.Amp.Liof. x 1            | VARIFARMA            |
| Oxaliplatino        | OXALTIE                     | 100 mg. Fco.Amp. x 1                     | BIOPROFARMA          |
| Oxaliplatino        | OXALTIE                     | 50 mg. Fco.Amp. x 1                      | BIOPROFARMA          |
| Oxaliplatino        | PLATINOSTYL                 | 100 mg. Fco.Amp. x 1                     | IVAX ARGENTINA       |
| Oxaliplatino        | PLATINOSTYL                 | 50 mg. Fco.Amp. x 1                      | IVAX ARGENTINA       |
| Oxaliplatino        | UXALUN                      | 100mg Iny. Sol. Vial x 1                 | NOVARTIS             |
| Oxaliplatino        | UXALUN                      | 50mg Iny. Sol. Vial x 1                  | NOVARTIS             |
| Oxaliplatino        | XALIPLAT                    | 100 mg. Fco.Amp. x 1                     | RICHMOND             |
| Oxaliplatino        | XALIPLAT                    | 50 mg. Fco.Amp. x 1                      | RICHMOND             |
| Oxicodona           | OXINOVAG                    | 10 mg. Comp. x 30                        | GOBBI-NOVAG          |
| Oxicodona           | OXINOVAG                    | 20 mg. Comp. x 30                        | GOBBI-NOVAG          |
| Oxicodona           | OXINOVAG                    | 40 mg. Comp. x 30                        | GOBBI-NOVAG          |
| Oxicodona           | OXINOVAG                    | 5 mg. Tab. x 20                          | GOBBI-NOVAG          |
| Oxicodona           | OXYCONTIN                   | 10 mg. Comp. x 30                        | MUNDIPHARMA          |
| Oxicodona           | OXYCONTIN                   | 20 mg. Comp. x 30                        | MUNDIPHARMA          |
| Oxicodona           | OXYCONTIN                   | 40 mg. Comp. x 30                        | MUNDIPHARMA          |
| Paclitaxel          | CLITAXEL                    | 30 mg. Fco.Amp. x 1                      | GOBBI-NOVAG          |
| Paclitaxel          | CLITAXEL                    | 150 mg. Fco.Amp. x 1                     | GOBBI-NOVAG          |
| Paclitaxel          | DALYS                       | 150 mg. Fco.Amp. x 1                     | DOSA                 |
| Paclitaxel          | DALYS                       | 300 mg. Fco.Amp. x 1                     | DOSA                 |
| Paclitaxel          | DRIFEN                      | 150 mg. Fco.Amp. x 1 x 25 ml.            | RICHMOND             |
| Paclitaxel          | DRIFEN                      | 30 mg. Fco.Amp. x 1 x 5 ml.              | RICHMOND             |
| Paclitaxel          | PACLIKEBIR                  | 100 mg. Fco.Amp. x 1                     | ASPEN                |
| Paclitaxel          | PACLIKEBIR                  | 150 mg. Fco.Amp. x 1                     | ASPEN                |
| Paclitaxel          | PACLIKEBIR                  | 30 mg. Fco.Amp. x 1                      | ASPEN                |
| Paclitaxel          | PACLIKEBIR                  | 300 mg. Fco.Amp. x 1                     | ASPEN                |
| Paclitaxel          | PACLITAXEL BIOTECHNO PHARMA | 30.00 mg./5.00 ml. Fco.Amp. x 1 + Sol.   | GP PHARM             |
| Paclitaxel          | PACLITAXEL BIOTECHNO PHARMA | 300.00 mg./50.00 ml. Fco.Amp. x 1 + Sol. | GP PHARM             |
| Paclitaxel          | PACLITAXEL CONIFARMA        | 100 mg. Fco.Amp. x 1                     | CONIFARMA            |
| Paclitaxel          | PACLITAXEL CONIFARMA        | 150 mg. Fco.Amp. x 1                     | CONIFARMA            |
| Paclitaxel          | PACLITAXEL CONIFARMA        | 30 mg. Fco.Amp. x 1                      | CONIFARMA            |
| Paclitaxel          | PACLITAXEL DELTA FARMA      | 100 mg. Fco.Amp. x 1                     | SIDUS                |
| Paclitaxel          | PACLITAXEL DELTA FARMA      | 150 mg. Fco.Amp. x 1                     | SIDUS                |
| Paclitaxel          | PACLITAXEL DELTA FARMA      | 30 mg. Fco.Amp. x 1                      | SIDUS                |
| Paclitaxel          | PACLITAXEL DELTA FARMA      | 300 mg. Fco.Amp. x 1                     | SIDUS                |
| Paclitaxel          | PACLITAXEL GLENMARK         | 100 mg. Fco.Amp. x 1                     | GLENMARK GENERICS    |
| Paclitaxel          | PACLITAXEL GLENMARK         | 150 mg. Fco.Amp. x 1                     | GLENMARK GENERICS    |
| Paclitaxel          | PACLITAXEL GLENMARK         | 30 mg. Fco.Amp. x 1 x 5 ml.              | GLENMARK GENERICS    |
| Paclitaxel          | PACLITAXEL GLENMARK         | 300 mg. Fco.Amp. x 1                     | GLENMARK GENERICS    |

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| Principio Activo     | Marca Comercial       | Presentación                                    | Laboratorio          |
|----------------------|-----------------------|-------------------------------------------------|----------------------|
| Paclitaxel           | PACLITAXEL GP PHARM   | 100mg Iny. Sol. F.Amp. x 1                      | GP PHARM             |
| Paclitaxel           | PACLITAXEL GP PHARM   | 150mg Iny. Sol. F.Amp. x 1                      | GP PHARM             |
| Paclitaxel           | PACLITAXEL GP PHARM   | 300mg Iny. Sol. F.Amp. x 1                      | GP PHARM             |
| Paclitaxel           | PACLITAXEL GP PHARM   | 30mg Iny. Sol. F.Amp. x 1                       | GP PHARM             |
| Paclitaxel           | PACLITAXEL MICROSULES | 100 mg. Fco.Amp. x 1 x 17 ml.                   | MICROSULES ARGENTINA |
| Paclitaxel           | PACLITAXEL MICROSULES | 150 mg. Fco.Amp.IV x 1 x 25 ml.                 | MICROSULES ARGENTINA |
| Paclitaxel           | PACLITAXEL MICROSULES | 30 mg. Fco.Amp. x 1 x 5 ml.                     | MICROSULES ARGENTINA |
| Paclitaxel           | PACLITAXEL MICROSULES | 300 mg. Fco.Amp. x 1 x 50 ml.                   | MICROSULES ARGENTINA |
| Paclitaxel           | PACLITAXEL TECHSPHERE | 100mg F.Amp. x 1                                | TECHSPHERE           |
| Paclitaxel           | PACLITAXEL TECHSPHERE | 30 mg. Fco.Amp. x 1                             | TECHSPHERE           |
| Paclitaxel           | PACLITAXEL TECHSPHERE | 150mg F.Amp. x 1                                | TECHSPHERE           |
| Paclitaxel           | PACLITAXEL TECHSPHERE | 300 mg. Fco.Amp. x 1                            | TECHSPHERE           |
| Paclitaxel           | PACLITAXEL TUTEUR     | 100 mg. Fco.Amp. x 1                            | TUTEUR               |
| Paclitaxel           | PACLITAXEL TUTEUR     | 150.00 mg./25.00 ml. Fco.Amp. x 1 x 25.00 ml.   | TUTEUR               |
| Paclitaxel           | PACLITAXEL TUTEUR     | 30 mg. Fco.Amp. x 1                             | TUTEUR               |
| Paclitaxel           | PACLITAXEL TUTEUR     | 300.00 mg./50.00 ml. Fco.Amp. x 1 x 50.00 ml.   | TUTEUR               |
| Paclitaxel           | PACLITAXEL VARIFARMA  | 300 mg. Iny.Solv.Fco.Amp. x 1 x 50 ml.          | VARIFARMA            |
| Paclitaxel           | PACLITAXEL VARIFARMA  | 100 mg. Fco.Amp. x 1 x 17 ml.                   | VARIFARMA            |
| Paclitaxel           | PACLITAXEL VARIFARMA  | 150 mg. Fco.Amp. x 1 x 25 ml.                   | VARIFARMA            |
| Paclitaxel           | PACLITAXEL VARIFARMA  | 30 mg. Fco.Amp. x 1 x 5 ml.                     | VARIFARMA            |
| Paclitaxel           | PAKLITAXFIL           | 100 mg. Fco.Amp. x 1 + Set de infusión          | GOBBI-NOVAG          |
| Paclitaxel           | PAKLITAXFIL           | 30 mg. Fco.Amp. x 1                             | GOBBI-NOVAG          |
| Paclitaxel           | PAKLITAXFIL           | 300 mg. Fco.Amp. x 1 + Set de infusión          | GOBBI-NOVAG          |
| Paclitaxel           | PANATAXEL             | 100 mg. Fco.Amp. x 1 x 17 ml.                   | BIOPROFARMA          |
| Paclitaxel           | PANATAXEL             | 150 mg. Fco.Amp. x 1 x 25 ml.                   | BIOPROFARMA          |
| Paclitaxel           | PANATAXEL             | 30 mg. Fco.Amp. x 1 x 5 ml.                     | BIOPROFARMA          |
| Paclitaxel           | PANATAXEL             | 300 mg. Fco.Amp. x 1 x 50 ml. + Set de infusión | BIOPROFARMA          |
| Paclitaxel           | TARVEXOL              | 30 mg. Fco.Amp. x 1                             | NOVARTIS             |
| Paclitaxel           | TARVEXOL              | 30 mg. Fco.Amp. x 10                            | NOVARTIS             |
| Paclitaxel           | TAXOCRIS              | 100 mg. Fco.Amp. x 1                            | LKM                  |
| Paclitaxel           | TAXOCRIS              | 30 mg. Fco.Amp. x 1                             | LKM                  |
| Paclitaxel           | TAXOCRIS              | 30 mg. Fco.Amp. x 5                             | LKM                  |
| Paclitaxel           | TAXOCRIS              | 300 mg. Fco.Amp. x 1                            | LKM                  |
| Paclitaxel           | TAYCOVIT              | 100 mg. Fco.Amp. x 1 + Kit perf.                | IVAX ARGENTINA       |
| Paclitaxel           | TAYCOVIT              | 150 mg. Fco.Amp. x 1 + Kit perf.                | IVAX ARGENTINA       |
| Paclitaxel           | TAYCOVIT              | 30 mg. Fco.Amp. x 1                             | IVAX ARGENTINA       |
| Paclitaxel           | TAYCOVIT              | 300 mg. Fco.Amp. x 1 + Kit perf.                | IVAX ARGENTINA       |
| Paclitaxel+Albumina  | ABRAXANE              | Fco. Vial x 1                                   | RAFFO                |
| Palbociclib          | IBRANCE               | 100 mg. Caps. x 21                              | PFIZER               |
| Palbociclib          | IBRANCE               | 125 mg caps. x 21                               | PFIZER               |
| Palbociclib          | IBRANCE               | 75 mg. Caps. x 21                               | PFIZER               |
| Palivizumab          | SYNAGIS               | 100 mg f.a.x 1 Solucion                         | ABBVIE               |
| Palivizumab          | SYNAGIS               | 50 mg f.a.x 1 Solucion                          | ABBVIE               |
| Pamidronato disodico | AMINOMUX              | 30 mg. Fco.Amp.Liof. x 1                        | GADOR                |
| Pamidronato disodico | AMINOMUX              | 90 mg. Fco.Amp.Liof. x 1                        | GADOR                |
| Pamidronato disodico | FADA PAMIDRONATO      | 90 mg. Fco.Amp.Liof. x 1 + Amp.                 | LAB.INT.ARG.         |
| Pamidronato disodico | PAMDOSA               | 90 mg. Fco.Amp.Liof. x 1                        | DOSA                 |
| Pancreatina          | CREON 10000           | 150 mg. Caps. x 100                             | ABBOTT               |
| Pancreatina          | CREON 10000           | 150 mg. Caps. x 50                              | ABBOTT               |
| Pancreatina          | CREON FORTE           | 300 mg. Caps. x 100                             | ABBOTT               |
| Pancreatina          | CREON FORTE           | 300 mg. Caps. x 20                              | ABBOTT               |
| Pancreatina          | CREON FORTE           | 300 mg. Caps. x 50                              | ABBOTT               |
| Panitumumab          | VECTIBIX              | 100mg F.Amp. x 1 x 5ml                          | AMGEN                |
| Paricalcitol         | PARITOL               | 5 mcg f.a. x 5                                  | TUTEUR               |
| Paricalcitol         | ZEMPLAR               | 2 mcg. Caps. x 30                               | ABBVIE               |
| Paricalcitol         | ZEMPLAR               | 5 mcg f.a. x 5 x 1 ml                           | ABBVIE               |
| Pazopanib            | BIALKO                | 200 mg. Comp. x 30                              | BIOPROFARMA          |
| Pazopanib            | BIALKO                | 400 mg. Comp. x 30                              | BIOPROFARMA          |
| Pazopanib            | CITRAK                | 200 mg. Comp. x 30                              | GADOR                |
| Pazopanib            | CITRAK                | 400 mg. Comp.Rec. x 30                          | GADOR                |
| Pazopanib            | KIPANIB               | 200mg. x 30 comp rec                            | VARIFARMA            |
| Pazopanib            | KIPANIB               | 400mg. x 30 comp rec                            | VARIFARMA            |
| Pazopanib            | PAZOPATER             | 200mg Comp. Rec. x 30                           | TUTEUR               |
| Pazopanib            | PAZOPATER             | 400mg Comp. Rec. x 30                           | TUTEUR               |
| Pazopanib            | VORIFAS               | 200X30 compr. rec.                              | RAFFO                |
| Pazopanib            | VORIFAS               | 400X30 compr. rec.                              | RAFFO                |
| Pazopanib            | VOTRIENT              | 200 mg. Comp. x 30                              | NOVARTIS             |
| Pazopanib            | VOTRIENT              | 400 mg. Comp. x 30                              | NOVARTIS             |
| Pazopanib            | VOTRYNIB              | 400 mg Comp. Rec. x 30                          | LKM                  |
| Pazopanib            | VOTRYNIB              | 200 mg Comp. Rec. x 30                          | LKM                  |
| Pegaspargasa         | ONCASPAR              | 3750 UI Vial x 1 x 5 ml.                        | ORIEN SA             |
| Pegvisomant          | SOMAVERT              | 10 mg. PolvoFco.Amp.Liof. x 30                  | PFIZER               |
| Pegvisomant          | SOMAVERT              | 15 mg. Fco.Amp.Liof. x 30                       | PFIZER               |
| Pemetrexed           | ALIMTA                | 500 mg. Fco.Amp.Liof. x 1                       | ELI LILLY            |
| Pemetrexed           | EKEL                  | 500 mg. Fco.Amp.Liof. x 1                       | CELNOVA              |
| Pemetrexed           | ENZASTAR              | 500 mg. Fco.Amp. x 1 + Iny                      | LKM                  |
| Pemetrexed           | HOLISTA               | 500 mg. Fco.Amp. x 1 x 150 ml.                  | LAB.INT.ARG.         |
| Pemetrexed           | LIDORAS               | 500 mg. Fco.Amp. x 1                            | TUTEUR               |
| Pemetrexed           | MARTXEL               | 500 mg. Sol.Iny. x 1                            | ERIOCHEM             |

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|------------------------|-----------------------------------|-----------------------------------------------|----------------------|
| Pemetrexed             | PEMETREXED GLENMARK               | 500 mg. Fco.Amp. x 1                          | GLENMARK GENERICS    |
| Pemetrexed             | PEMETREXED GLENMARK               | 100 mg. Fco.Amp. x 1                          | GLENMARK GENERICS    |
| Pemetrexed             | PEMETREXED VARIFARMA              | 500 mg. Fco.Amp.Liof. x 1                     | VARIFARMA            |
| Pemetrexed             | PEYMETREL                         | 500 mg. Fco.Amp.Liof. x 1                     | DOSA                 |
| Pemetrexed             | PEYMETREL                         | Liof. 100mg F.Amp. x 1                        | DOSA                 |
| Pemetrexed             | PRAXED                            | 100 mg. Fco.Amp. x 1                          | ASPEN                |
| Pemetrexed             | PRAXED                            | 500 mg. Fco.Amp. x 1                          | ASPEN                |
| Pemetrexed             | SUKUBA                            | 500 mg. Fco.Amp.Liof. x 1                     | BIOPROFARMA          |
| Pemetrexed             | TREXAM                            | 500 mg. Fco.Amp.Liof. x 1                     | RICHMOND             |
| Pemetrexed             | TREXTECH                          | 500 mg. Fco.Amp. x 1                          | GP PHARM             |
| Pemetrexed             | VENUSTED                          | 500 mg. Fco.Amp.Liof. x 1                     | MICROSULES ARGENTINA |
| Pertuzumab             | PERJETA                           | 420 mg. Vial x 1 x 14 ml.                     | ROCHE                |
| Pertuzumab+Trastuzumab | PERJETA - HERCEPTIN IV COMBO PACK | Kit Inyectable                                | ROCHE                |
| Pirfenidona            | ESBRIET                           | 267 mg. Caps. x 270                           | ROCHE                |
| Pirfenidona            | ESGRINIL                          | 267 mg. Caps. x 270                           | RAFFO                |
| Pirfenidona            | FIBRIDONER                        | 200 mg. Comp. x 200                           | DOSA                 |
| Pirfenidona            | FIBRIDONER                        | 200 mg. Comp. x 360                           | DOSA                 |
| Pirfenidona            | MISOFAGAN                         | 200 mg comp.x 360                             | TUTEUR               |
| Pirfenidona            | MISOFAGAN                         | 200 mg. Comp. x 200                           | TUTEUR               |
| Pirfenidona            | PERFORMA                          | 267 mg. Caps. x 270                           | BAGO                 |
| Plerixator             | REVIXIL                           | 20 mg. Fco.Amp. x 1                           | GADOR                |
| Prednisona             | METICORTEN                        | 5 mg. Comp. x 20                              | TECHSPHERE           |
| Prednisona             | METILPRES                         | 20mg Comp. Ran. x 20                          | TRB PHARMA           |
| Prednisona             | METILPRES                         | 5mg Comp. Ran. x 30                           | TRB PHARMA           |
| Prednisona             | METILPRES                         | 5mg Comp. Ran. x 60                           | TRB PHARMA           |
| Racotumomab            | VAXIRA                            | 1 mg. Fco.Amp. x 1 vacuna                     | ELEA PHOENIX         |
| Raltegravir            | ISENTRESS                         | 400 mg. Comp. x 60                            | MSD ARGENTINA S.R.L. |
| Raltegravir            | ISENTRESS                         | 600 mg comp.rec.x 60                          | MSD ARGENTINA S.R.L. |
| Renibizumab            | LUCENTIS                          | Vial x 1 0.23 ml + Aguja filtro               | NOVARTIS             |
| Rasburicase            | FASTURTEC                         | 1,5 mg + 3 Amp. Con 1/ml de disolvente        | SANOFI-AVENTIS       |
| Regorafenib            | STIVARGA                          | 84 Comp. x 40mg                               | BAYER                |
| Ribavirina             | RIBAVIRINA ARISTON                | 200 mg. Caps. x 50                            | ARISTON              |
| Riluzol                | ACTILUZOL                         | 50 mg. Comp. x 60                             | BIOPROFARMA          |
| Riluzol                | ANIL                              | 50 mg. Comp. x 60                             | LAZAR                |
| Riluzol                | RILASAT                           | 50 mg. Comp.Rec. x 60                         | BUXTON               |
| Riluzol                | RILUTEK                           | 50 mg. Comp. x 60                             | SANOFI-AVENTIS       |
| Riluzol                | RIZOL                             | 50 mg. Comp.Rec. x 60                         | ASPEN                |
| Ritonavir              | RITONAVIR ABBOTT                  | 100 mg. Comp. x 30                            | ABBVIE               |
| Rituximab              | MABTHERA                          | 100 mg. Fco.Vial x 2                          | ROCHE                |
| Rituximab              | MABTHERA                          | 500 mg. Fco.Vial x 1                          | ROCHE                |
| Rituximab              | MABTHERA SC                       | 1400mg Vial x 1 x 11.7ml                      | ROCHE                |
| Rituximab              | NOVEX                             | 100 mg x 2 viales x 10 ml.                    | ELEA PHOENIX         |
| Rituximab              | NOVEX                             | 500 mg x 1 vial x 50 ml.                      | ELEA PHOENIX         |
| Romiplostim            | NPLATE                            | 250 mg. Amp. x 1 x 5 ml.                      | AMGEN                |
| Ruxolitinib            | JAKAVI                            | 10 mg comp.x 60                               | NOVARTIS             |
| Ruxolitinib            | JAKAVI                            | 15mg x 60 comp.                               | NOVARTIS             |
| Ruxolitinib            | JAKAVI                            | 20mg x 60 comp.                               | NOVARTIS             |
| Ruxolitinib            | JAKAVI                            | 5 mg x 60 comp.                               | NOVARTIS             |
| Salbutamol             | SALBUTAMOL FABRA                  | 2mg /5ml Jbe. x 120ml                         | FABRA                |
| Salbutamol             | SALBUTAMOL FABRA                  | 5mg /ml Gotas p/ Neb. x 20ml                  | FABRA                |
| Salbutamol             | SALBUTOL MDI                      | 100mcg Aer. x 200 Dosis                       | TAKEDA               |
| Salbutamol             | SALBUTOL MDI                      | 100mcg Aer. x 300 Dosis                       | TAKEDA               |
| Salbutamol             | SALBUTOL NEBU                     | 0.6g Sol. p/ Neb. x 1 x 20ml                  | TAKEDA               |
| Salbutamol             | VENTOLIN                          | 5mg /ml Sol. p/ Neb. x 20ml                   | GLAXOSMITHKLINE      |
| Salbutamol             | VENTOLIN                          | HFA 100mcg Inhal. Aer. x 200 Dosis + aplic.   | GLAXOSMITHKLINE      |
| Secukinumab            | COSENTYX                          | 150 mg./1 ml. PlumasPreLlenadas x 2           | NOVARTIS             |
| Sevelamer              | FOSEVA                            | 800 mg. Comp. x 180                           | TUTEUR               |
| Sevelamer              | POSTLINE                          | 800 mg. Comp. x 180                           | BAGO                 |
| Sevelamer              | RENVELA                           | 800 mg. Comp. x 180                           | SANOFI-AVENTIS       |
| Sirolimus              | RAPAMUNE                          | 0.5 mg. Comp. x 100                           | PFIZER               |
| Sirolimus              | RAPAMUNE                          | 1 mg. Comp. x 60                              | PFIZER               |
| Sirolimus              | RAPAMUNE                          | 1 mg./1 ml. Sol.Oral x 1 x 60 ml.             | PFIZER               |
| Sirolimus              | RAPAMUNE                          | 2 mg. Comp. x 30                              | PFIZER               |
| Sodio colistimetato    | TOLISCRIN CAPSULAS                | 1662500UI Polvo Seco Caps. x 60 + Disp.Inhal. | DOSA                 |
| Sofosbuvir             | PEMUTOL                           | 400 mg. Comp.Rec. x 28                        | RAFFO                |
| Sofosbuvir             | PROBIRASE                         | 400 mg. Comp.Rec. x 28                        | RICHMOND             |
| Sofosbuvir             | SOVALDI                           | 400 mg. Comp.Rec. x 28                        | GADOR                |
| Somatostatina          | SOMATOSTATIN UCB                  | 250mcg Iny. Amp. x 1                          | ASTRAZENECA          |
| Somatostatina          | SOMATOSTATIN UCB                  | 3000mcg Iny. Amp. x 1                         | ASTRAZENECA          |
| Somatostatina          | SOMATOSTATINA GLENMARK            | 3.000 mcg. Fco.Amp.Liof. x 1                  | GLENMARK GENERICS    |
| Somatostatina          | SOMATOSTATINA LYOMARK             | Liof. 3mg Iny. Amp. x 1                       | SIDUS                |
| Somatotropina          | BIOTROPIN                         | 12 UI Fco.Amp.Liof. x 1 + Amp. solv.          | FERRING              |
| Somatotropina          | GENOTROPIN                        | 16 UI JeringaCart.Desc. x 1                   | PFIZER               |
| Somatotropina          | GENOTROPIN                        | 36 UI JeringaCart.Desc. x 1                   | PFIZER               |
| Somatotropina          | HHT                               | 16 UI Vial x 1 + Jer.Prell.                   | BIOSIDUS FARMA       |
| Somatotropina          | HHT                               | 4 UI JeringaPre-LlenadaVial x 1               | BIOSIDUS FARMA       |
| Somatotropina          | HUTROPE                           | 18 UI Cart.Amp. x 1                           | ELI LILLY            |
| Somatotropina          | HUTROPE                           | 36 UI Cart.Amp. x 1                           | ELI LILLY            |
| Somatotropina          | NORDITROPIN FLEXPRO               | 10 mg lapiceras prell.x1                      | NOVO NORDISK         |

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|---------------------------|-----------------------|-----------------------------|----------------------|
| Somatotropina             | NORDITROPIN FLEXP     | 15 mg lapiceras prell.x1    | NOVO NORDISK         |
| Somatotropina             | NORDITROPIN FLEXP     | 5 mg lapiceras prell.x 1    | NOVO NORDISK         |
| Somatotropina             | OMNITROPE 10MG        | 6.7mg /ml Cart. x 1 x 1.5ml | NOVARTIS             |
| Somatotropina             | OMNITROPE 5MG         | 3.3mg /ml Cart. x 1 x 1.5ml | NOVARTIS             |
| Somatotropina             | SAIZEN                | 12 mg (8 mg/ml)             | MERCK S.A.           |
| Somatotropina             | SAIZEN                | 6 mg (5,83 mg/ml)           | MERCK S.A.           |
| Somatotropina             | ZOMACTON              | 10 mg. x 1                  | FERRING              |
| Somatotropina             | ZOMACTON              | 4mg Vial x 1                | FERRING              |
| Sorafenib                 | NEXAVAR               | 200 mg. Comp. x 112         | BAYER                |
| Sunitinib                 | SUTENT                | 12.5 mg. Caps. x 28         | PFIZER               |
| Sunitinib                 | SUTENT                | 25 mg. Caps. x 28           | PFIZER               |
| Sunitinib                 | SUTENT                | 50 mg. Caps. x 28           | PFIZER               |
| SUPLEMENTOS NUTRICIONALES | ENSURE PLUS DRINK     | Chocolate env.x 237 ml      | ABBOTT               |
| SUPLEMENTOS NUTRICIONALES | ENSURE PLUS DRINK     | Frutilla env.x 237 ml       | ABBOTT               |
| SUPLEMENTOS NUTRICIONALES | ENSURE PLUS DRINK     | Vainilla env.x 237 ml       | ABBOTT               |
| SUPLEMENTOS NUTRICIONALES | ENSURE POLVO          | Lata Polvo x 400g Chocolate | ABBOTT               |
| SUPLEMENTOS NUTRICIONALES | ENSURE POLVO          | Lata Polvo x 400g Vainilla  | ABBOTT               |
| SUPLEMENTOS NUTRICIONALES | FORTISIP CHOCOLATE    | Botella x 200ml Chocolate   | NUTRICIA-BAGO        |
| SUPLEMENTOS NUTRICIONALES | FORTISIP VAINILLA     | Botella x 200ml Vainilla    | NUTRICIA-BAGO        |
| SUPLEMENTOS NUTRICIONALES | JEVITY RTH            | 1.000 ml. Env. x 1          | ABBOTT               |
| SUPLEMENTOS NUTRICIONALES | L-K ADULTOS           | Lata x 325g Neutro          | NUTRICIA-BAGO        |
| SUPLEMENTOS NUTRICIONALES | L-K ADULTOS           | Lata x 325g Vainilla        | NUTRICIA-BAGO        |
| SUPLEMENTOS NUTRICIONALES | L-K ADULTOS DIAB.     | Lata x 350g                 | NUTRICIA-BAGO        |
| SUPLEMENTOS NUTRICIONALES | OSMOQUITE HN RTH      | Env. x 1000ml               | ABBOTT               |
| SUPLEMENTOS NUTRICIONALES | SECALBUM              | Oral Lata x 250g            | NUTRICIA-BAGO        |
| Tacrolimus                | PROGRAF               | 0.5 mg. Caps. x 50          | GADOR                |
| Tacrolimus                | PROGRAF               | 1 mg. Caps. x 100           | GADOR                |
| Tacrolimus                | PROGRAF               | 5 mg. Caps. x 50            | GADOR                |
| Tacrolimus                | PROGRAF               | 5 mg. Fco.Amp. x 1          | GADOR                |
| Tacrolimus                | PROGRAF XL            | 0.5 mg. Caps. x 50          | GADOR                |
| Tacrolimus                | PROGRAF XL            | 1 mg. Caps. x 50            | GADOR                |
| Tacrolimus                | PROGRAF XL            | 3 mg. Caps. x 50            | GADOR                |
| Tacrolimus                | PROGRAF XL            | 5 mg. Caps. x 50            | GADOR                |
| Tacrolimus                | TACROLIMUS SANDOZ     | 0.5 mg. Caps. x 50          | NOVARTIS             |
| Tacrolimus                | TACROLIMUS SANDOZ     | 1 mg. Caps. x 100           | NOVARTIS             |
| Tacrolimus                | TACROLIMUS SANDOZ     | 5mg Caps. x 50              | NOVARTIS             |
| Talidomida                | TALIDOMIDA LAZAR      | 100 mg. Comp. x 100         | LAZAR                |
| Tamoxifeno                | DIEMON                | 20 mg. Tab. x 30            | GOBBI-NOVAG          |
| Tamoxifeno                | GINARSAN FORTE        | 20 mg. Comp. x 30           | IVAX ARGENTINA       |
| Tamoxifeno                | NOLVADEX-D            | 20 mg. Comp. x 30           | ASTRAZENECA          |
| Tamoxifeno                | TAMOXIFENO FILAXIS    | 20 mg. Comp. x 30           | GOBBI-NOVAG          |
| Tamoxifeno                | TAMOXIFENO GADOR      | 10 mg. Comp. x 30           | GADOR                |
| Tamoxifeno                | TAMOXIFENO GADOR      | 20 mg. Comp. x 30           | GADOR                |
| Tamoxifeno                | TAMOXIFENO MICROSULES | 20 mg. Comp. x 30           | MICROSULES ARGENTINA |
| Tamoxifeno                | TAMOXIFENO RONTAG     | 20mg Comp. x 30             | ASTRAZENECA          |
| Tamoxifeno                | TAMOXIFENO VARIFARMA  | 20 mg. Comp. x 30           | VARIFARMA            |
| Tamoxifeno                | TAMOXIS               | 20 mg. Comp. x 30           | BIOPROFARMA          |
| Temozolomida              | DRALITEM              | 100 mg. Caps. x 21          | RAFFO                |
| Temozolomida              | DRALITEM              | 100 mg. Caps. x 5           | RAFFO                |
| Temozolomida              | DRALITEM              | 140 mg. Caps. x 21          | RAFFO                |
| Temozolomida              | DRALITEM              | 140 mg. Caps. x 5           | RAFFO                |
| Temozolomida              | DRALITEM              | 20 mg. Caps. x 21           | RAFFO                |
| Temozolomida              | DRALITEM              | 20 mg. Caps. x 5            | RAFFO                |
| Temozolomida              | DRALITEM              | 250 mg. Caps. x 5           | RAFFO                |
| Temozolomida              | DRALITEM              | 180 mg. Caps. x 5           | RAFFO                |
| Temozolomida              | RUMALAR               | 100.00 mg. Caps.Duras x 5   | TUTEUR               |
| Temozolomida              | RUMALAR               | 20.00 mg. Caps.Duras x 5    | TUTEUR               |
| Temozolomida              | RUMALAR               | 250 mg. Caps.Duras x 5      | TUTEUR               |
| Temozolomida              | TEMODAL               | 100 mg. Caps. x 5           | MSD ARGENTINA S.R.L. |
| Temozolomida              | TEMODAL               | 140 mg. Caps. x 5           | MSD ARGENTINA S.R.L. |
| Temozolomida              | TEMODAL               | 180 mg. Caps. x 5           | MSD ARGENTINA S.R.L. |
| Temozolomida              | TEMODAL               | 20 mg. Caps. x 5            | MSD ARGENTINA S.R.L. |
| Temozolomida              | TEMODAL               | 250 mg. Caps. x 5           | MSD ARGENTINA S.R.L. |
| Temozolomida              | TEMOLA 100            | 100 mg. Caps. x 5           | DOSA                 |
| Temozolomida              | TEMOLA 250            | 250 mg. Caps. x 5           | DOSA                 |
| Temozolomida              | TEMONOVA              | 100 mg. Caps. x 5           | CELNOVA              |
| Temozolomida              | TEMONOVA              | 20 mg Caps 5                | CELNOVA              |
| Temozolomida              | TEMONOVA              | 250 mg. Caps x 5            | CELNOVA              |
| Temozolomida              | TEZULINA              | 100 mg. Caps. x 5           | MICROSULES ARGENTINA |
| Temozolomida              | TEZULINA              | 20 mg. Caps. x 5            | MICROSULES ARGENTINA |
| Temozolomida              | TEZULINA              | 250 mg. Caps. x 5           | MICROSULES ARGENTINA |
| Temozolomida              | TOCITRAP              | 100 mg. Caps. x 5           | LKM                  |
| Temozolomida              | TOCITRAP              | 140 mg. Caps. x 5           | LKM                  |
| Temozolomida              | TOCITRAP              | 20 mg. Caps. x 5            | LKM                  |
| Temozolomida              | TOCITRAP              | 250 mg. Caps. x 5           | LKM                  |
| Temozolomida              | ZOLOM                 | 100 mg. Caps. x 5           | ASPEN                |
| Temozolomida              | ZOLOM                 | 250 mg. Caps. x 5           | ASPEN                |
| Temsirolimus              | TORISEL               | 25 mg. Fco.Amp. x 1         | PFIZER               |
| Tenofovir disoproxil      | TENOFOVIR ELEA        | 300 mg. Comp. x 30          | ELEA PHOENIX         |

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|------------------------------------|----------------------|----------------------------------------------------|----------------------|
| Tenofovir disoproxil               | VIDARA               | 300mg Comp. Rec. x 30                              | MICROSULES ARGENTINA |
| Tenofovir disoproxil               | VIREAD               | 300 mg. Comp.Rec. x 30                             | GADOR                |
| Tenofovir fumarato del disoproxilo | LEUZAN               | 300 mg. Comp.Rec. x 30                             | RICHMOND             |
| Tenofovir fumarato del disoproxilo | VIRAKAM              | 300 mg. Comp. x 30                                 | LKM                  |
| Tetrabenazina                      | FEINARDON            | 25 mg. Comp. x 112                                 | TUTEUR               |
| Tetrabenazina                      | TETRAZOL             | 25 mg. Comp. x 120                                 | BAGO                 |
| Tigeciclina                        | TYGACIL              | 50 mg. Fco.Amp. x 10                               | PFIZER               |
| Tioguanina                         | LANVIS               | 40 mg. Comp. x 25                                  | TECHSPHERE           |
| Tobramicina                        | ALVEOTEROL           | 300 mg./5 ml. sol. Inhalat. Amp x 28               | FINADIET             |
| Tobramicina                        | ALVEOTEROL           | 300 mg./5 ml. sol. Inhalat. Amp x 56               | FINADIET             |
| Tobramicina                        | BELBARMICINA INL     | 300 mg./5 ml. Polvo.Liof. p/reconst. x 28          | QUIMICA LUAR         |
| Tobramicina                        | BELBARMICINA INL     | Liof. 300mg./5ml Inhal. Sol. F.Amp. Monodosis x 56 | QUIMICA LUAR         |
| Tobramicina                        | BRIDUL               | 300.00 mg. Amp. x 56 x 5 ml.                       | TUTEUR               |
| Tobramicina                        | TOBI                 | 300 mg./5 ml. Sol.Inhal.Amp.Monodosis x 56         | NOVARTIS             |
| Tobramicina                        | TOBI PODHALER        | Inhalador x 5 Polvo seco Caps. Duras x 224         | NOVARTIS             |
| Tobramicina                        | TOBRADOSA            | 300mg./5ml Caja F.Amp. Monodosis x 28              | DOSA                 |
| Tobramicina                        | TOBRADOSA            | 300mg./5ml Caja F.Amp. Monodosis x 56              | DOSA                 |
| Tobramicina                        | TOBRAHALER           | 28 mg. Caps.Duras x 224 + Inhal. polvo seco x 6    | DOSA                 |
| Tobramicina                        | TOBRAMICINA CASSARA  | 300 mg. Sol.Inhal.Amp.Monodosis x 56 x 5 ml.       | VARIFARMA            |
| Tobramicina                        | TOFIB                | 300 mg./5 ml. Fco.Amp. x 56                        | TECHSPHERE           |
| Tobramicina                        | TUBERBUT             | 300 mg. Amp.Monodosis x 56 x 5 ml.                 | LKM                  |
| Tocilizumab                        | ACTEMRA              | 200.00 mg./10 ml. Fco.Amp. x 1                     | ROCHE                |
| Tocilizumab                        | ACTEMRA              | 400.00 mg./20 ml. Fco.Amp. x 1                     | ROCHE                |
| Tocilizumab                        | ACTEMRA              | 80.00 mg./4 ml. Fco.Amp. x 1                       | ROCHE                |
| Tocilizumab                        | ACTEMRA SC           | 162 mg. Vial x 4                                   | ROCHE                |
| Tofacitinib                        | XELJANZ              | 5 mg. Comp. x 60                                   | PFIZER               |
| Tofacitinib                        | XELJANZ XR           | 11 mg tab.x 30                                     | PFIZER               |
| Topotecan                          | TOPOKEBIR            | 4 mg. Fco.Amp.Liof. x 1                            | ASPEN                |
| Topotecan                          | TOPOKEBIR            | 4 mg. Fco.Amp.Liof. x 5                            | ASPEN                |
| Topotecan                          | TOPOTECAN MICROSULES | 4 mg. Fco Amp. x 5                                 | MICROSULES ARGENTINA |
| Topotecan                          | TOPOTECAN MICROSULES | 4 mg. Fco.Amp. x 1                                 | MICROSULES ARGENTINA |
| Trabectedina                       | YONDELIS             | 1 mg. Vial x 1                                     | JANSSEN-CILAG        |
| Tramadol                           | TRAMA-KLOSIDOL       | 100mg./ml Oral Gotas x 10ml                        | BAGO                 |
| Tramadol                           | TRAMA-KLOSIDOL       | 100mg lny. Amp. x 5 x 2ml                          | BAGO                 |
| Tramadol                           | TRAMA-KLOSIDOL       | Comp. x 20                                         | BAGO                 |
| Tramadol                           | TRAMAL               | 100 mg./100 ml. Gotas (Oral) x 1 x 10 ml.          | TAKEDA               |
| Tramadol                           | TRAMAL               | 50 mg. Caps. x 10                                  | TAKEDA               |
| Tramadol                           | TRAMAL LONG          | AP 100mg Comp. x 10                                | TAKEDA               |
| Tramadol                           | TRAMAL LONG          | AP 150mg Comp. x 10                                | TAKEDA               |
| Tramadol                           | TRAMAL LONG          | AP 200mg Comp. x 10                                | TAKEDA               |
| Tramadol                           | TRAMANOVAG           | 50 mg. Tab. x 20                                   | GOBBI-NOVAG          |
| Trastuzumab                        | HERCEPTIN            | 440 mg. Fco.Amp.Liof. x 1                          | ROCHE                |
| Trastuzumab                        | HERCEPTIN SC         | 600 mg x 1vial                                     | ROCHE                |
| Trastuzumab-emtansina              | KADCYLA              | 100 MG x 1 VIAL                                    | ROCHE                |
| Trastuzumab-emtansina              | KADCYLA              | 160MG x 1 VIAL                                     | ROCHE                |
| Treprostiniil sodico               | REMODULIN            | 1 mg. Fco.Amp. x 1                                 | BAGO                 |
| Treprostiniil sodico               | REMODULIN            | 10 mg. Fco.Amp. x 1                                | BAGO                 |
| Treprostiniil sodico               | REMODULIN            | 2.5 mg. Fco.Amp. x 1                               | BAGO                 |
| Treprostiniil sodico               | REMODULIN            | 5 mg. Fco.Amp. x 1                                 | BAGO                 |
| Treprostiniil sodico               | TYVASO               | a.x 28+kit de inicio                               | BAGO                 |
| Treprostiniil sodico               | TYVASO               | a.x 28+kit de reposición                           | BAGO                 |
| Triptorelina                       | DECAPEPTYL RETARD    | 11.25 mg. Kit x 1                                  | RAFFO                |
| Triptorelina                       | DECAPEPTYL RETARD    | 3.75 mg. Fco.Amp. x 1 + Kit mensual                | RAFFO                |
| Triptorelina                       | GONAPEPTYL DAILY     | 0.1 mg. JeringaPre-llenada x 7                     | FERRING              |
| Triptorelina                       | GONAPEPTYL DEPOT     | 3.75 mg. JeringaPre-llenadaLiof. x 1               | FERRING              |
| Ustekinumab                        | STELARA              | 45 mg./0.5 Vial x 1                                | JANSSEN-CILAG        |
| Ustekinumab                        | STELARA              | 45mg/0.5 ml vial+j.prell                           | JANSSEN-CILAG        |
| Valganciclovir                     | VALIXA               | 450 mg. Comp.Rec. x 60                             | ROCHE                |
| Vemurafenib                        | ZELBORAF             | Comp. rec.x 56                                     | ROCHE                |
| Vinblastina                        | VINBLASTINA FILAXIS  | 10 mg. Fco.Amp.Liof. x 1                           | GOBBI-NOVAG          |
| Vincristina                        | VINCRISTINA LKM      | 1 mg. Fco.Amp.Liof. x 1                            | LKM                  |
| Vinflunina                         | JAVLOR               | 250 mg. Fco.Amp. x 1 x 10 ml.                      | ROVAFARM             |
| Vinflunina                         | JAVLOR               | 50 mg. Fco.Amp. x 1 x 2 ml.                        | ROVAFARM             |
| Vinorelbina                        | FADA VINORELBINA     | 50 mg./5 ml. Fco.Amp.IV x 1                        | LAB.INT.ARG.         |
| Vinorelbina                        | FILCRIN              | 50mg lny. Sol. x 1                                 | GOBBI-NOVAG          |
| Vinorelbina                        | NAVELBINE            | 10 mg. Fco.Amp. x 1                                | ROVAFARM             |
| Vinorelbina                        | NAVELBINE            | 50 mg. Fco.Amp. x 1 x 5 ml.                        | ROVAFARM             |
| Vinorelbina                        | NAVELBINE ORAL       | 20 mg. Caps. x 1                                   | ROVAFARM             |
| Vinorelbina                        | NAVELBINE ORAL       | 30 mg. Caps. x 1                                   | ROVAFARM             |
| Vinorelbina                        | SULCOLINE            | 50 mg. Fco.Amp. x 1 x 5 ml.                        | TUTEUR               |
| Vinorelbina                        | VINKEBIR             | 50 mg. Fco.Amp. x 1                                | ASPEN                |
| Vinorelbina                        | VINOREL              | 10 mg. Sol.lny. x 1                                | ERIOCHEM             |
| Vinorelbina                        | VINOREL              | 50 mg. Sol.lny. x 1                                | ERIOCHEM             |
| Vinorelbina                        | VINORGEN             | 10 mg. Fco.Amp. x 1                                | BIOPROFARMA          |
| Vinorelbina                        | VINORGEN             | 50 mg. Fco.Amp. x 1 x 5 ml.                        | BIOPROFARMA          |
| Voriconazol                        | V-FEND               | 200 mg. Comp.Rec. x 10                             | PFIZER               |
| Voriconazol                        | V-FEND               | 200 mg. Fco.Amp.IV x 1                             | PFIZER               |
| Voriconazol                        | V-FEND               | 50 mg. Comp.Rec. x 10                              | PFIZER               |
| Zidovudina                         | ZETROTAX             | 10 mg./1 ml. Jbe. x 1 x 240 ml.                    | RICHMOND             |

| Principio Activo  | Marca Comercial              | Presentación                          | Laboratorio          |
|-------------------|------------------------------|---------------------------------------|----------------------|
| Zidovudina        | ZIDOVUDINA FILAXIS           | 10 mg./1 ml. Jbe. x 1 x 240 ml.       | FRESENIUS KABI       |
| Zidovudina        | ZIDOVUDINA FILAXIS           | 100 mg. Comp. x 100                   | FRESENIUS KABI       |
| Zidovudina        | ZIDOVUDINA FILAXIS           | 200 mg. Sol.Iny. x 1 x 20 ml.         | FRESENIUS KABI       |
| Zidovudina        | ZIDOVUDINA FILAXIS           | 250 mg. Caps. x 60                    | FRESENIUS KABI       |
| Zoledronico acido | ACIDO ZOLEDRONICO GLENMARK   | 4 mg. Fco.Vial x 1 + Solv.            | GLENMARK GENERICS    |
| Zoledronico acido | ACIDO ZOLEDRONICO MICROSULES | 4 mg. Fco.Amp.Liof. x 1 + Amp. disol. | MICROSULES ARGENTINA |
| Zoledronico acido | ACLASTA                      | 5 mg. Fco.Amp. x 1 x 100 ml.          | SANDOZ               |
| Zoledronico acido | ALAMUR                       | 4 mg./5 ml. Fco.Amp. x 1              | TUTEUR               |
| Zoledronico acido | DREICO                       | 4 mg. Sol.Iny. x 1                    | DOSA                 |
| Zoledronico acido | DROLZEN                      | 5 mg. Fco.Amp. x 1 x 100 ml.          | PHARMADORF           |
| Zoledronico acido | ERIOPHOS                     | 4 mg./5 ml. Sol concent p/inf x 1     | ERIOCHEM             |
| Zoledronico acido | FADA ZOLEDRONICO             | 4 mg./5 ml. Fco.Amp. x 1              | LAB.INT.ARG.         |
| Zoledronico acido | LEDRON                       | 4 mg. Liof.Iny.Vial x 1 + Amp. solv.  | ASPEN                |
| Zoledronico acido | RIONIT                       | 4 mg. Vial x 1 x 1 ml.                | BUXTON               |
| Zoledronico acido | SIMPLA                       | 5 mg./100 ml. Fco.Amp. x 1            | ELEA PHOENIX         |
| Zoledronico acido | SINRESOR                     | 4 mg. Fco.Amp. x 1 + Amp. disolv.     | BIOPROFARMA          |
| Zoledronico acido | VARIDRONICO                  | 4 mg. PolvoFco.Amp.Liof. x 1 x 5 ml.  | VARIFARMA            |
| Zoledronico acido | ZOLETECH                     | 4 mg. Fco.Amp.Liof. x 1 + Disolv.     | GP PHARM             |
| Zoledronico acido | ZOMETA                       | 4 mg./5 ml. Sol.Concent.p/inf. x 1    | NOVARTIS             |

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