

# Catalogue des dosages de médicaments

## Katalog der Blutspiegelbestimmungen

Substance	Nom commercial (exemples !!!)	Méthode de dosage	Nbre pts OFAS	Code OFAS
Amisulpride	SOLIAN	UPLC MS/MS	140	1579.00
Amitriptyline	SAROTEN, TRIPTYZOL	UPLC MS/MS	140	1065.00
Aripiprazole	ABILIFY	UPLC MS/MS	140	1579.00
Asénapine	SYCREST	UPLC MS/MS	140	1579.00
Atomoxétine	STRATTERA	UPLC MS/MS	140	1065.00
Brexpiprazole	REXULTI	UPLC MS/MS	140	1579.00
Bupropion	WELLBUTRIN, ZYBAN	UPLC MS/MS	140	1065.00
Cariprazine	REAGILA	UPLC MS/MS	140	1579.00
Citalopram	SEROPRAM	UPLC MS/MS	140	1065.00
Chlorprothixène	TRUXAL	UPLC MS/MS	140	1579.00
Clomipramine	ANAFRANIL	UPLC MS/MS	140	1065.00
Clozapine	LEPONEX	UPLC MS/MS	140	1579.00
Donepézil	ARICEPT	UPLC MS/MS	140 CHF	&
Duloxétine	CYMBALTA	UPLC MS/MS	140	1065.00
Escitalopram	CIPRALEX	UPLC MS/MS	140	1065.00
Fluoxétine	FLUCTINE	UPLC MS/MS	140	1065.00
Flupentixol	FLUANXOL, DEANXIT	UPLC MS/MS	140	1579.00
Fluvoxamine	FLOXYFRAL	UPLC MS/MS	140	1065.00
Galantamine	REMINYL	UPLC MS/MS	140 CHF	&
Halopéridol	HALDOL	UPLC MS/MS	140	1579.00
Levomépromazine	NOZINAN	UPLC MS/MS	140	1579.00
Lithium	LITHIOFOR, QUILONORM, PRIADEL	Méthode colorimétrique	12.4	1541.00
Lurasidone	LATUDA	UPLC MS/MS	140	1579.00
Memantine	AXURA, EBIXA	UPLC MS/MS	140 CHF	&
(R,S)-Méthadone	KETALGINE	LCMS	185	1052.00
(R,S)-Méthadone cinétique	KETALGINE (2 dosages)	LCMS	370	1052.00
(R)- Méthadone	L-POLAMIDON	LCMS	185	1052.00
(R)-Méthadone cinétique	L-POLAMIDON (2 dosages)	LCMS	370	1052.00
Miansérine	TOLVON	UPLC MS/MS	140	1065.00
Mirtazapine	REMERON	UPLC MS/MS	140	1065.00
Moclobémide	AURORIX	UPLC MS/MS	140	1065.00
Nortriptyline	NORTRILEN	UPLC MS/MS	140	1065.00
Olanzapine	ZYPREXA	UPLC MS/MS	140	1579.00
Palipéridone	INVEGA, XEPLION	UPLC MS/MS	140	1579.00
Paroxétine	DEROXAT	UPLC MS/MS	140	1065.00
Pipampérone	DIPIPERON	UPLC MS/MS	140	1579.00
Promazine	PRAZINE	UPLC MS/MS	140	1579.00
Quétiapine	SEROQUEL	UPLC MS/MS	140	1579.00
Réboxétine	EDRONAX	UPLC MS/MS	140	1065.00
Risperidone	RISPERDAL	UPLC MS/MS	140	1579.00
Rivastigmine	EXELON	UPLC MS/MS	140 CHF	&
Sertindole	SERDOLECT	UPLC MS/MS	140	1579.00
Sertraline	ZOLOFT	UPLC MS/MS	140	1065.00
Trazodone	TRITTICO	UPLC MS/MS	140	1065.00
Trimipramine	SURMONTIL	UPLC MS/MS	140	1065.00
Venlafaxine	EFEXOR	UPLC MS/MS	140	1065.00
Vortioxétine	BRINTELLIX	UPLC MS/MS	140	1065.00
Zuclopenthixol	CLOPIXOL	UPLC MS/MS	140	1579.00

& Le patient a été informé que ces analyses (hors liste OFAS) ne sont en général pas prises en charge par les caisses maladie (140 CHF).

& Der Patient wurde informiert, dass diese Analysen (ausser OFAS Liste) im allgemeinen nicht von den Krankenkassen übernommen sind (140 CHF).