

Use of High-Risk Medications in the Elderly (DAE)

High-Risk Medications

Description	Prescription			
Anticholinergics, first-generation antihistamines	<ul style="list-style-type: none"> • Brompheniramine • Carbinoxamine • Chlorpheniramine • Clemastine 	<ul style="list-style-type: none"> • Cyproheptadine • Dexbrompheniramine • Dexchlorpheniramine • Diphenhydramine (oral) 	<ul style="list-style-type: none"> • Dimenhydrinate • Doxylamine • Hydroxyzine 	<ul style="list-style-type: none"> • Meclizine • Promethazine • Triprolidine
Anticholinergics, anti-Parkinson agents	<ul style="list-style-type: none"> • Benztropine (oral) 	<ul style="list-style-type: none"> • Trihexyphenidyl 		
Antispasmodics	<ul style="list-style-type: none"> • Atropine (exclude ophthalmic) • Belladonna alkaloids 	<ul style="list-style-type: none"> • Clidinium-chlordiazepoxide • Dicyclomine 	<ul style="list-style-type: none"> • Hyoscyamine • Propantheline 	<ul style="list-style-type: none"> • Scopolamine
Anti-thrombotics	<ul style="list-style-type: none"> • Dipyridamole, oral short-acting (does not apply to the extended-release combination with aspirin) 		<ul style="list-style-type: none"> • Ticlopidine 	
Cardiovascular, alpha agonists, central	<ul style="list-style-type: none"> • Guanfacine 	<ul style="list-style-type: none"> • Methyldopa 		
Cardiovascular, other	<ul style="list-style-type: none"> • Disopyramide 	Nifedipine, immediate release		
Central nervous system, antidepressants	<ul style="list-style-type: none"> • Amitriptyline • Clomipramine • Amoxapine 	<ul style="list-style-type: none"> • Desipramine • Imipramine • Trimipramine 	<ul style="list-style-type: none"> • Nortriptyline • Paroxetine • Protriptyline 	
Central nervous system, barbiturates	<ul style="list-style-type: none"> • Amobarbital • Butabarbital 	<ul style="list-style-type: none"> • Butalbital • Pentobarbital 	<ul style="list-style-type: none"> • Phenobarbital • Secobarbital 	
Central nervous system, vasodilators	<ul style="list-style-type: none"> • Ergot mesylates 	<ul style="list-style-type: none"> • Isoxsuprine 		
Central nervous system, other	<ul style="list-style-type: none"> • Meprobamate 			
Endocrine system, estrogens with or without progestins; include only oral and topical patch products	<ul style="list-style-type: none"> • Conjugated estrogen • Esterified estrogen 	<ul style="list-style-type: none"> • Estradiol • Estropipate 		
Endocrine system, sulfonylureas, long-duration	<ul style="list-style-type: none"> • Chlorpropamide 	<ul style="list-style-type: none"> • Glyburide 		
Endocrine system, other	<ul style="list-style-type: none"> • Desiccated thyroid 	<ul style="list-style-type: none"> • Megestrol 		
Pain medications, skeletal muscle relaxants	<ul style="list-style-type: none"> • Carisoprodol • Chlorzoxazone 	<ul style="list-style-type: none"> • Cyclobenzaprine • Metaxalone 	<ul style="list-style-type: none"> • Methocarbamol • Orphenadrine 	
Pain medications, other	<ul style="list-style-type: none"> • Indomethacin 	<ul style="list-style-type: none"> • Ketorolac, includes parenteral 	<ul style="list-style-type: none"> • Meperidine 	<ul style="list-style-type: none"> • Pentazocine

High-Risk Medications With Days Supply Criteria Medications

Description	Prescription			Days Supply Criteria
<ul style="list-style-type: none"> • Anti-Infectives, other 	<ul style="list-style-type: none"> • Nitrofurantoin 	<ul style="list-style-type: none"> • Nitrofurantoin macrocrystals 	<ul style="list-style-type: none"> • Nitrofurantoin macrocrystals-monohydrate 	>90 days
<ul style="list-style-type: none"> • Nonbenzodiazepine hypnotics 	<ul style="list-style-type: none"> • Eszopiclone 	<ul style="list-style-type: none"> • Zaleplon 	<ul style="list-style-type: none"> • Zolpidem 	>90 days

High-Risk Medications With Average Daily Dose Criteria Medications

Description	Prescription	Average Daily Dose Criteria
Alpha agonists, central	<ul style="list-style-type: none"> • Reserpine 	>0.1 mg/day
Cardiovascular, other	<ul style="list-style-type: none"> • Digoxin 	>0.125 mg/day
Tertiary TCAs (as single agent or as part of combination products)	<ul style="list-style-type: none"> • Doxepin 	>6 mg/day

American Geriatrics Society 2015 Beers Criteria Update Expert Panel. American Geriatrics Society 2015 Updated Beers Criteria for Potentially Inappropriate Medication Use in Older Adults. *J Am Geriatr Soc* 2015, 63:2227-2246.

National Committee for Quality Assurance (2018). HEDIS 2019. Technical Specifications. Vol. 2 (pp. 279-283). Washington, D.C.