



**Office of Pharmacy Services
Prior Authorization Criteria**

Gralise
(gabapentin)

Requests for Gralise will be authorized if the following criteria are met:

1. Diagnosis of post herpetic neuralgia
2. Trial of a tricyclic antidepressant for a least thirty days
3. Trial of gabapentin immediate release formulation (positive response without adequate duration)
4. Once daily dosing with 1800 mg. maximum daily dosage

*PL Detail-Document, Gralise (Extended-Release Gabapentin).
Pharmacist's Letter/Prescriber's Letter.
November 2011.*

*Review and Approved
DUR Board 11/16/2011*