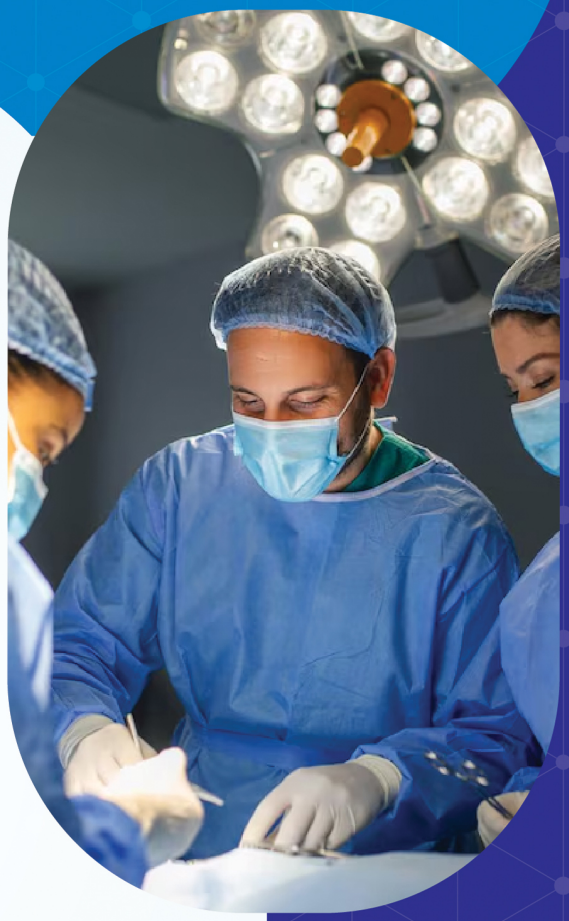
med master | LIFE CARING PARTNER

From Sinus To Skin, Tackle Infection With Precision

MEDMOXI 1.2

Amoxycillin + Potassium Clavulanate 1.2gm **INJECTION**



- **FDA-approved antibiotic** with broad-spectrum efficacy against various infections[1]
- Exhibits 90% clinical success rate against respiratory infections[2]
- Quickly absorbed with peak levels reached in just 1-2 hours[3]
- Safe and well-tolerated therapy for hospitalized patients with acute salpingitis[4]

INDICATIONS

- **Acute Bacterial Rhinosinusitis**
- **Acute Otitis Media**
- **Bone and Joint Infections**
- **Lower Respiratory Tract Infections**
- **Pelvic Inflammatory Disease**
- **Skin or Soft Tissue Infection**
- **Upper Respiratory Tract Infections**
- **Urinary Tract Infections**

Target The Source, Treat With Confidence



DOSAGE

Adults and Children over 12 years:
Typical dose is 1.2gm every 8 hours (3 times daily). In severe infections, the dose may be increased to 1.2gm every 6 hours, as directed by the physician.

***Disclaimer:** Doses may vary depending on individual patient needs and clinical discretion.

1. NIH. Bookshelf ID: NBK538164, PMID:30844191. Available from: https://www.ncbi.nlm.nih.gov/books/NBK538164/. 2. Antimicrob Agents Chemother. 2004 Sep;48(9): 3323–3331. doi: 10.1128/AAC.48.9.3323-3331.2004. 3. Medscape: Available form:https://reference.medscape.com/drug/augmentin-amoxicillin-clavulanate-342474#0
4. J Antimicrob Chemother. 1989 Nov:24 Suppl B:165-76. doi: 10.1093/jac/24.suppl_b.165.

Deliver Fast & Effective Therapy

MEDSUNATE

Artesunate 60 mg

INJECTION

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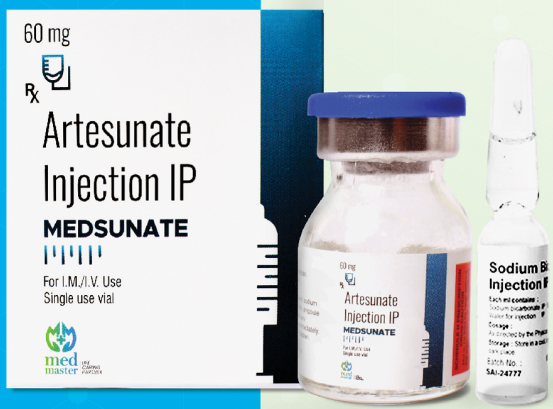
- **WHO-recommended** first-line treatment for severe malaria in travellers[1,2]
- FDA-approved lifesaving drug that significantly reduces mortality when compared to quinine[3,4]
- Artemisinin derivative that is highly effective and safe against resistant malaria strains[5]
- Shown to reach ≤1% parasitemia in 18 hours and 0% parasitemia in 37 hours[6]

INDICATIONS

- **Malaria**

To Cure & Control Malaria

Also available as:
MedSunate 120mg



DOSAGE

Adults and children weighing 20 kg or more:
Administer 2.4 mg of artesunate per kg of body weight by IV or IM injection at 0, 12, and 24 hours, then once daily until oral treatment can be started.

Children weighing less than 20 kg:
Administer 3 mg of artesunate per kg of body weight by IV or IM injection at 0, 12, and 24 hours, then once daily until oral treatment can be started.

***Disclaimer:** Doses may vary depending on individual patient needs and clinical discretion.

1. Clin. Infect. Dis. 2021 Nov 15;73(10):1795-804. https://doi.org/10.1093/cid/ciab133. 2. J Travel Med. 2017 Mar 1;24(2). doi: 10.1093/jtm/taw093.
3. FDA News Release: Available from: https://www.fda.gov/news-events/press-announcements/fda-approves-only-drug-us-treat-severe-malaria
4. Lancet. 2005;366(9487):717-25. doi: 10.1016/S0140-6736(05)67176-0. 5. Int J Infect Dis. 2019 Dec:89:30-44. doi: 10.1016/j.ijid.2019.08.030.
6. Clin Infect Dis. 2021 Dec 6;73(11):1965-1972. doi: 10.1093/cid/ciab570.

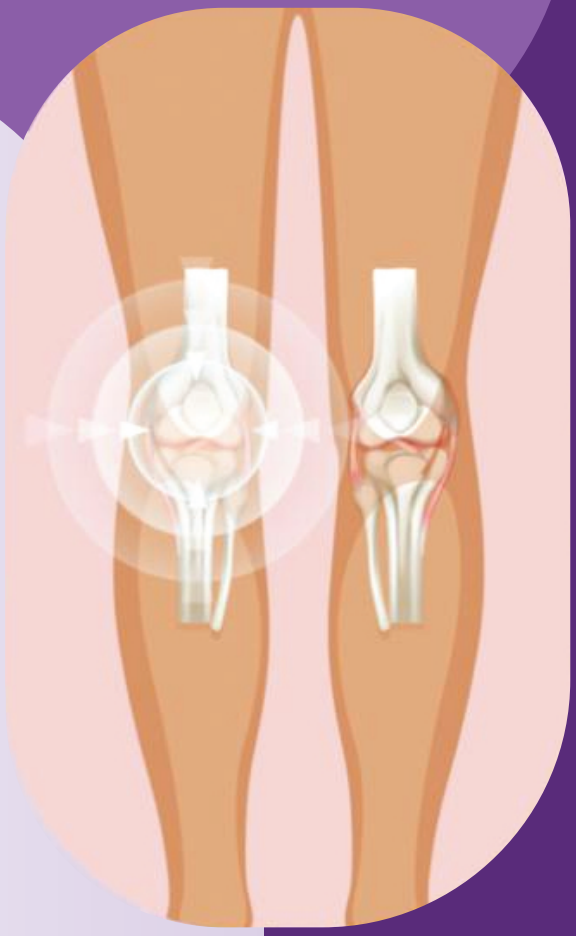
Complete Infection Control Begins With..

CEFOMED FORTE

Cefoperazone 1gm+Sulbactum 500mg

INJECTION

- **FDA-approved combination** offering broad-spectrum protection against infections[1]
- Reduces mortality risk by 38% in multidrug-resistant A. baumannii infections[2]
- Better than cefuroxime for management of surgical site infections[3]
- Safe, effective, and clinically proven 88% success in intra-abdominal infections[4]
- Well-tolerated, with most side effects being mild and manageable[5]
- Achieves 80.9% clinical cure rate in patients with pneumonia[6]



INDICATIONS

- **Bone and joint infections**
- **Endometritis**
- **Intra-abdominal infections**
- **Meningitis**
- **Other infections of the genital tract**
- **Respiratory tract infections**
- **Septicemia**
- **Skin and soft tissue infections**
- **Surgical site infections**
- **Urinary tract infections (upper and lower)**

For Critical Infection Management

DOSAGE

For Adults:
2 to 4 g daily given in equally divided doses every 12 hours (in terms of cefoperazone).

***Disclaimer:** Doses may vary depending on individual patient needs and clinical discretion.



1. FDA Label. CEFOPERAZONE + SULBACTAM. Available from: https://verification.fda.gov.ph/files/DR-XY47709_PI_01.pdf 2. Antibiotics (Basel). 2024 Sep 23;13(9):907. doi: 10.3390/antibiotics13090907. 3. Sci Rep. 2024 Nov 8;14(1):27164. doi: 10.1038/s41598-024-77906-5. 4. Surg Infect (Larchmt). 2021 Oct;22(8):763-770. doi: 10.1089/sur.2020.468. 5. EFDA (Ethiopian Food and Drug Administration) Label. SUMMARY OF PRODUCT CHARACTERISTICS. Available from: https://www.efda.gov.et/wp-content/uploads/2024/04/Cefoperazone-Sulbactam-Injection_CERAZONE-PLUS-500_SANCE-LABORATORIES-PVT.LTD_.pdf 6. Infect Drug Resist. 2021 Jun 16:14:2251-2258. doi: 10.2147/IDR.S313828.

Targets Critical Infections

MASTERZOLINE 500

Cefazolin 500mg

INJECTION



- **FDA-approved** broad-spectrum antibiotic[1,2]
- Well-tolerated and safe with proven decades of clinical use[3]
- First-line anti-microbial for prophylaxis after various surgical procedures[3]
- Safer and more effective over penicillin for MSSA (Methicillin-Susceptible Staphylococcus aureus) bacteremia[4]

INDICATIONS

- **Biliary tract infections**
- **Bone and joint infections**
- **Endocarditis**
- **Genital infections**
- **Respiratory tract infections**
- **Septicemia**
- **Skin and skin structure infections**
- **Surgical prophylaxis**
- **Urinary tract infections**



Also available as:
Master Zoline 1000 (Cefazolin 1000 mg)

Effective Care From First Dose

DOSAGE

Adult Dosing (Creatinine Clearance≥ 55 mL/min) :

- Moderate to severe infections: 50mg–1 g every 6–8 hrs
- Mild gram-positive infections: 250–500 mg every 8 hrs
- Uncomplicated UTIs: 1 g every 12 hrs
- Pneumococcal pneumonia: 500 mg every 12 hrs
- Severe/life-threatening (e.g., sepsis, endocarditis): 1–1.5 g every 6 hrs
- Surgical prophylaxis:
  - 1–2 g ½–1 hr before surgery
  - 500 mg–1 g during lengthy procedures
  - 500 mg–1 g every 6–8 hrs for 24 hrs post-op

Max dose: up to 12 g/day in rare cases

***Disclaimer:** Doses may vary depending on individual patient needs and clinical discretion.

1. FDA-Approved Drugs. Available from: https://www.accessdata.fda.gov/scripts/cder/daf/index. cfm?event=overview.process&ApplNo=211413
2. Drug Bank. Cefazolin [DB01327]. Available from: https://go.drugbank.com/drugs/DB01327. 3. Therapeutics. 2009 Jan;1: CMT-S2096. https://doi.org/10.4137/CMT.S2096. 4. BMC Infect Dis. 2018 Oct 11;18(1):508. doi: 10.1186/s12879-018-3418-9.

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From Surgery To Urinary Care

CEFOMED - T

Cefoperazone 1 gm + Tazobactam 125 mg

INJECTION



Cefoperazone 1 gm

- Most preferred third generation cephalosporin for surgical prophylaxis1,2
- Broad-spectrum and well-tolerated antibiotic for diverse bacterial infections1,3
- Offers better stability against β-lactamase hydrolysis than second-generation cephalosporins1

Tazobactam 125 mg

- Shows inhibitory activity against common ESBLs (extended-spectrum β-lactamases)4
- Blocks beta-lactamase enzymes to overcome antibiotic resistance5

INDICATIONS

- **Gynecological infections**
- **Post-operative infections**
- **Urinary tract infections**

Delivers Broad Spectrum Treatment



DOSAGE

For Adults:

Given intravenously (IV) over 30 min or intramuscularly (IM); given every 6, 8, or 12 hours depending on infection.

***Disclaimer:** Doses may vary depending on individual patient needs and clinical discretion.

1. Drugs. 1981 Dec;22(6):423-60. doi: 10.2165/00003495-198122060-00002 2. J Infect Dev Ctries. 2014 Feb 13;8(2):193-201. doi: 10.3855/jidc.3076 3. Drug Bank. Cefoperazone [DB01329]. Available from: https://go.drugbank.com/drugs/DB01329 4. Pharmacotherapy. 2021 Oct;41(10):864-880. Doi: 10.1002/phar.2623. 5. Drug Bank. Tazobactam [DB01606]. Available from: https://go.drugbank.com/drugs/DB01606

For Deep Tissue To Bloodstream Infections

MASTER CEFOTA

Cefotaxime Sodium 1gm

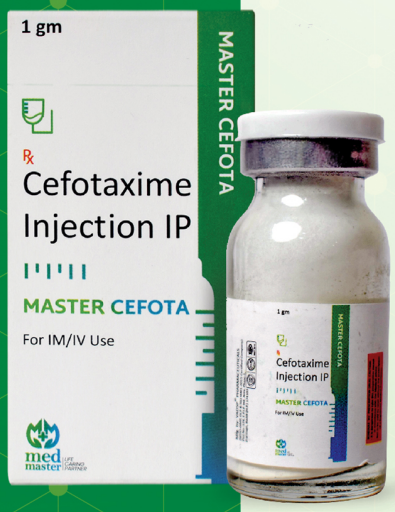
INJECTION



- **FDA-approved** third-generation cephalosporin with broad-spectrum antibacterial activity[1]
- More potent than first- and second-generation cephalosporins against gram-negative bacteria[2]
- Achieves 75–100% recovery rates in hospitalized patients with moderate-to-severe infections[1]
- Delivers 93.9% clinical cure and 89.9% bacterial clearance in lower respiratory tract infections[3]
- Outperforms cefazolin with higher bacteriologic and clinical cure rates[4]

INDICATIONS

- **Bacteremia/Septicemia**
- **Bone and joint infections**
- **Central nervous system infections**
- **Genitourinary infections**
- **Gynecologic infections**
- **Intra-abdominal infections**
- **Lower respiratory tract infections**
- **Skin and skin structure infections**



Delivering Life Saving Treatment

DOSAGE

For Adults:
1–2g IV/IM every 6–12 hours; adjust based on infection severity.

***Disclaimer:** Doses may vary depending on individual patient needs and clinical discretion.

1. Cefotaxime. StatPearls [Internet]. Available from: https://www.ncbi.nlm.nih.gov/books/NBK560653/ 2. Cefotaxime Sodium. PubChem [10695961]. Available from: https://pubchem.ncbi.nlm.nih.gov/compound/Cefotaxime-Sodium3. Rev Infect Dis. 1982 Sep-Oct:4 Suppl:S421-31. doi: 10.1093/clinids/4.supplement_2.s421.

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When Infections Turn Critical

MEDZID

Ceftazidime 1gm

INJECTION

- **FDA-cleared antibiotic** that offers broad-spectrum protection against bacterial infections[1,2]
- Defends against resistant bacteria with strong beta-lactamase stability[3]
- BeBactericidal power targets PBP3 (penicillin-binding protein 3) for effective infection control[1]
- Exhibits 84% clinical and 72% bacteriological response rates[4]
- Safe and well-tolerated against severe infections caused by susceptible gram-negative bacteria[4,5]
- Shows rapid absorption with peak plasma levels in 1 hour[6]



INDICATIONS

- **Bone and joint infections**
- **Bacterial septicemia**
- **Central nervous system infections**
- **Gynecologic infections**
- **Intra-abdominal infections**
- **Lower respiratory tract infections**
- **Skin and skin structure infections**
- **Urinary tract infections**

DOSAGE

For Adults:
1–2g IV/IM every 8–12 hours, adjusted for infection severity and renal function.

***Disclaimer:** Doses may vary depending on individual patient needs and clinical discretion.



1. Drug Bank. Ceftazidime [DB00438]. Available from: https://go.drugbank.com/drugs/DB00438 2. FDA-Approved Drugs. Available from: https://www.accessdata.fda.gov/scripts/cder/daf/index.cfm?event=overview.process&ApplNo=062640 3. Ceftazidime. Agricultural and Biological Sciences. Available from: https://www.sciencedirect.com/topics/agricultural-and-biological-sciences/ceftazidime 4. Arch Intern Med. 1984 Jan;144(1):57-62. doi: 10.1001/archinte.144.1.57. 5. Antimicrob Agents Chemother. 1983 Aug;24(2):176-80. doi: 10.1128/AAC.24.2.176. 6. Medscape. Ceftazidime. Available from: https://reference.medscape.com/drug/fortaz-tazicef-ceftazidime-342507#0

Serious Infections Demand Precision

CEFTRIAMASTER-T

Ceftriaxone 1 gm + Tazobactam 125 mg

INJECTION

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Ceftriaxone + Tazobactam

- Effectively combats anaerobes and 90% of ESBL (extended-spectrum β-lactamases) -producing strains[1,2]

Ceftriaxone

- Offers better gram-negative coverage than first and second-generation cephalosporinsz
- Leading choice for gonorrhea, community acquired pneumonia, and other infections[4]
- Offers 100% bioavailability and a long half-life for convenient, less frequent dosing[4]
- 91% satisfactory clinical response in patients with bone and soft tissue infections[5]

Tazobactam

- Potent β-lactamase inhibitor—targets resistant pathogens effectively[6,7]

INDICATIONS

- **Bacterial septicemia**
- **Bone and joint infections**
- **Complicated and uncomplicated urinary tract infections**
- **Intra-abdominal infections**
- **Lower respiratory tract infections**
- **Meningitis**
- **Pelvic inflammatory disease**
- **Skin and skin structure infections**
- **Surgical prophylaxis**

DOSAGE

For Adults : Administer 1–2 g equivalent dose daily (max 4 g); adjust for renal impairment.

***Disclaimer:** Doses may vary depending on individual patient needs and clinical discretion.

1. Eur J Clin Microbiol Infect Dis. 1994 Feb;13(2):177-81. doi: 10.1007/BF01982195. 2. ESBL Cureus. 2023 Sep 26;15(9):e46014. doi: 10.7759/cureus.46014. 3. Ceftriaxone. Drug Bank [DB01212]. Available from: https://go.drugbank.com/drugs/DB01212 4. Ceftriaxone. Science Direct. Available from: https://www.sciencedirect.com/topics/chemistry/ceftriaxone 5. Antimicrob Agents Chemother. 1983 May;23(5):731-7. doi: 10.1128/AAC.23.5.731. 6. Antimicrob Agents Chemother. 1993 Apr;37(4):851-8. doi: 10.1128/AAC.37.4.851. 7. Tazobactam. PubChem [123630]. Available from: https://pubchem.ncbi.nlm.nih.gov/compound/Tazobactam

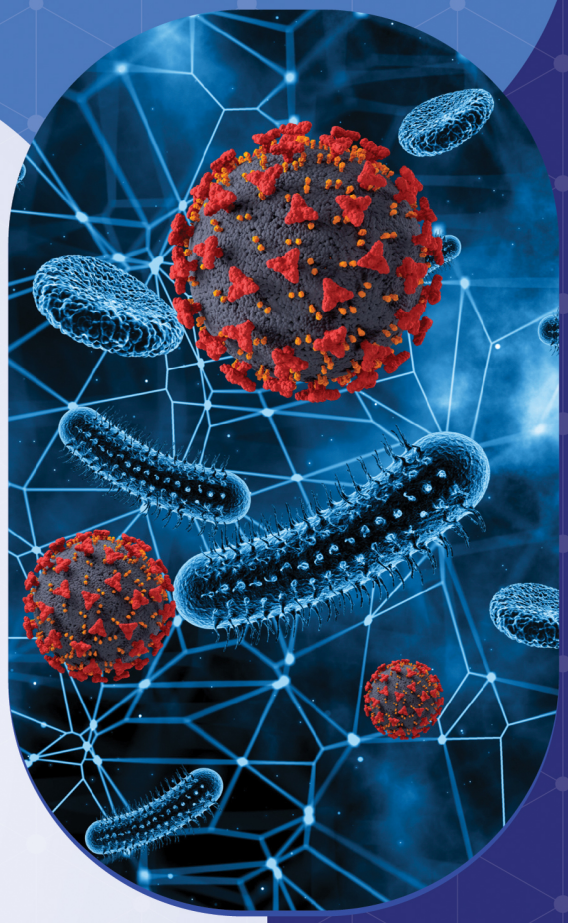
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Comprehensive Infection Management

CEFTRIAMASTER

Ceftriaxone 1000mg

INJECTION



- **FDA-approved** broad-spectrum antibiotic for various bacterial infections[1,2]
- High microbiologic cure rates, long serum half-life, and excellent safety profile[3,4]
- First-line regimen for patients with uncomplicated gonococcal infections[3]
- More effective than amoxicillin–clavulanic acid for acute bacterial sinusitis[5]
- Proven 91% clinical response against serious bacterial infections[4]
- Offers both high efficacy and good tolerability—93% cure rate in gram-negative infections[6]
- Superior to other antibiotics in preventing both local and remote postoperative infections[7]

INDICATIONS

- **Bacterial septicemia**
- **Bone and joint infections**
- **Complicated and uncomplicated urinary tract infections Intra-abdominal infections**
- **Meningitis**
- **Pelvic inflammatory disease**
- **Respiratory tract infections**
- **Skin and skin structure infections**
- **Surgical Prophylaxis**

DOSAGE

For Adults: Administer 1–2g IV once daily or in divided doses twice daily; total daily dose should not exceed 4g

***Disclaimer:** Doses may vary depending on individual patient needs and clinical discretion.

Trust For Complete Care



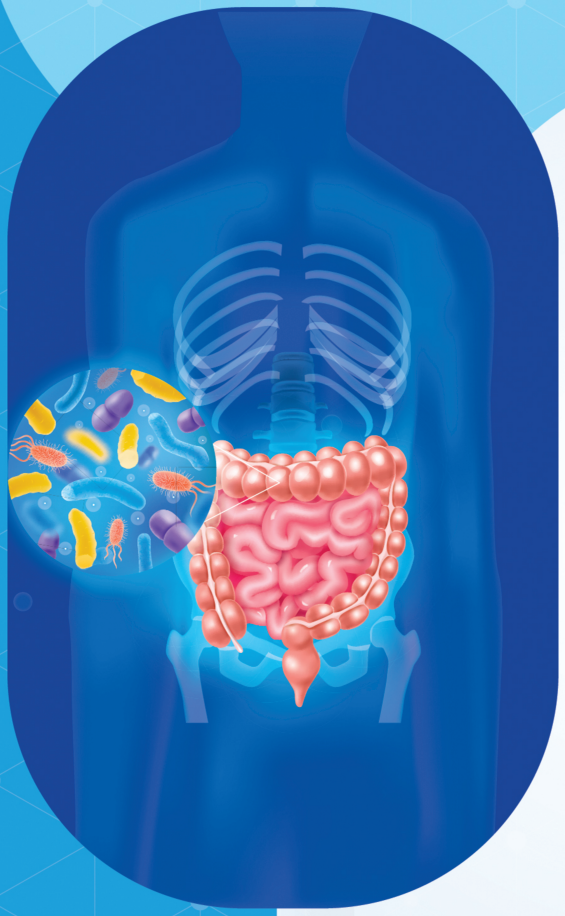
1. FDA label. Ceftriaxone for Injection USP. Available from: https://www.accessdata.fda.gov/drugsatfda_docs/label/2014/065169s022lbl.pdf 2. Ceftriaxone. Drug Bank [DB01212]. Available from: https://go.drugbank.com/drugs/DB01212 3. Drug Healthc Patient Saf. 2023 Nov 3:15:159-170. doi: 10.2147/DHPS.S350763. 4. Antimicrob Agents Chemother. 1982 Mar;21(3):402–406. doi: 10.1128/aac.21.3.402. 5. Open Access Maced J Med Sci. 2018 Aug 16;6(8):1419-1422. doi: 10.3889/oamjms.2018.329. 6. Antimicrob Agents Chemother. 1982 Jul;22(1):1-9. doi: 10.1128/AAC.22.1.1. 7. Clin Drug Investig. 2004;24(1):29-39. doi: 10.2165/00044011-200424010-00004.

Treat Deep Seated & Acute Infections

CEFTRIAMASTER S

Ceftriaxone 1gm + sulbactum 500gm

INJECTION



- **CDSCO-approved** for moderate-to-severe resistant bacterial infections[1,2]
- Well-tolerated with bacterial eradication rate of 83.58%[2]
- Overcomes resistance with strengthened activity against β-lactamase-producing pathogens[3]
- Superior anti-microbial efficacy compared to ceftriaxone/tazobactam combination[4]

INDICATIONS

- **Acute bacterial otitis media**
- **Bacterial septicemia**
- **Bone and joint infections**
- **Intra-abdominal infections**
- **Lower respiratory tract infections**
- **Meningitis**
- **Pelvic inflammatory disease**
- **Skin and skin structure infections**
- **Urinary tract infections (complicated and uncomplicated)**



For Reliable Care

DOSAGE

For Adults:
Administer 1.5–3g IV every 6 hours (Ceftriaxone 1–2g + Sulbactam 0.5–1g);
do not exceed 4g/day of Sulbactam. For neonates: 20–50mg/kg IV once daily
(max 50mg/kg). For children 15 days–12 years: 20–80mg/kg IV once daily; if ≥50kg, use adult dose. Give IV doses ≥50mg/kg over at least 30 minutes.

***Disclaimer:** Doses may vary depending on individual patient needs and clinical discretion.

1. Drugs@CDSCO. Available from: https://cdscoonline.gov.in/CDSCO/Drugs 2. Ann Clin Microbiol Antimicrob. 2013 Dec 9;12:38. doi: 10.1186/1476-0711-12-38.
3. Cureus. 2023 Mar 13;15(3):e36078. doi: 10.7759/cureus.36078. 4. J Pure Appl Microbiol. 2009;3(2):719-723.

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When Infections Threaten

COLISTIMED 1

Colistimethate 1 MIU

INJECTION



- **CDSCO and FDA-approved,** effective antibiotic for various infections[1,2,3]
- Impressive 80% clinical and 94% microbiological response rate against resistant pathogens[4]
- Lowers mortality rate significantly—from 80% to 46%[4]
- Achieves peak plasma concentration rapidly within 10 minutes[5]

INDICATIONS

- **Diarrhea**
- **Intra-abdominal infections**
- **Pneumonia**
- **Sepsis**
- **Skin and soft tissue infections**
- **Urinary tract infections (UTIs)**
- **Wound infections**

Also available as:

COLISTIMED 2/3/4



DOSAGE

Adults and Pediatric Patients: Administration: 2.5 to 5 mg/kg per day of colistin base in 2 to 4 divided doses for patients with normal renal function, depending on the severity of the infection. In obese individuals, dosage should be based on ideal body weight.

***Disclaimer:** Doses may vary depending on individual patient needs and clinical discretion.

1. Colistimethate. Drugs@FDA: FDA-Approved Drugs. Available from: https://www.accessdata.fda.gov/scripts/cder/daf/index.cfm?event=overview.process&ApplNo=050108
2. Colistimethate. Central Drugs Standard Control Organisation. Available from: https://cdscoonline.gov.in/CDSCO/Drugs 3. Colistimethate. DrugBank [DB01111]. Available from: https://go.drugbank.com/drugs/DB01111 4. Int J Infect Dis. 2007 Sep;11(5):402-6. doi: 10.1016/j.ijid.2006.09.011. Epub 2007 Feb 8. 5. Colistin. Medscape. Available from: https://reference.medscape.com/drug/colistimethate-sodium-coly-mycin-m-colistin-342578#0

Broad Injectable Coverage For Diverse Infections

MEDDOX 100

Doxycycline 100 mg

INJECTION

med master LIFE CARING PARTNER



- **Well-tolerated,** broad-spectrum antibiotic approved by the FDA [1,2,3]
- Clinically used for 40+ years, often called the "secret weapon of the infectious diseases physician" [3]
- Offers superior half-life, absorption, and safety over tetracycline [4]
- First-line treatment for malaria prophylaxis and C. trachomatis [4,5]
- Lower risk of visual side effects compared to mefloquine [4]
- Provides 60–85% protection against traveler's diarrhea [4]

INDICATIONS

- **Acute intestinal amebiasis**
- **Lyme disease**
- **Ophthalmic infections**
- **Prophylaxis of malaria**
- **Relapsing fever**
- **Respiratory tract infections**
- **Sexually transmitted infections**



Trusted Treatment For Complex Infections

DOSAGE

For Adults:
200 mg on the first day of treatment administered in one or two infusions. Subsequent daily dosage is 100 to 200 mg depending upon the severity of infection, with 200 mg administered in one or two infusions.

For Children Above Eight Years of Age
The recommended dosage schedule for children weighing 100 pounds or less is 2 mg/lb of body weight on the first day of treatment, administered in one or two infusions.

General
The duration of infusion may vary with the dose (100 to 200 mg/day), but is usually one to four hours.

***Disclaimer:** Doses may vary depending on individual patient needs and clinical discretion.

1. Doxycycline. FDA Label. Available from: https://www.accessdata.fda.gov/drugsatfda_docs/label/2018/050795s026lbl.pdf 2. Doxycycline. Drugs Bank [DB00254]. Available from: https://go.drugbank.com/drugs/DB00254 3. Therapeutics. 2009 Jan;1:CMT-S2035. https://doi.org/10.4137/CMT.S2035. 4. Doxycycline. NIH. Available from: https://www.ncbi.nlm.nih.gov/books/NBK556599/ 5. J Antimicrob Chemother. 2018 Mar 1;73(3):553-563. doi: 10.1093/jac/dkx420.

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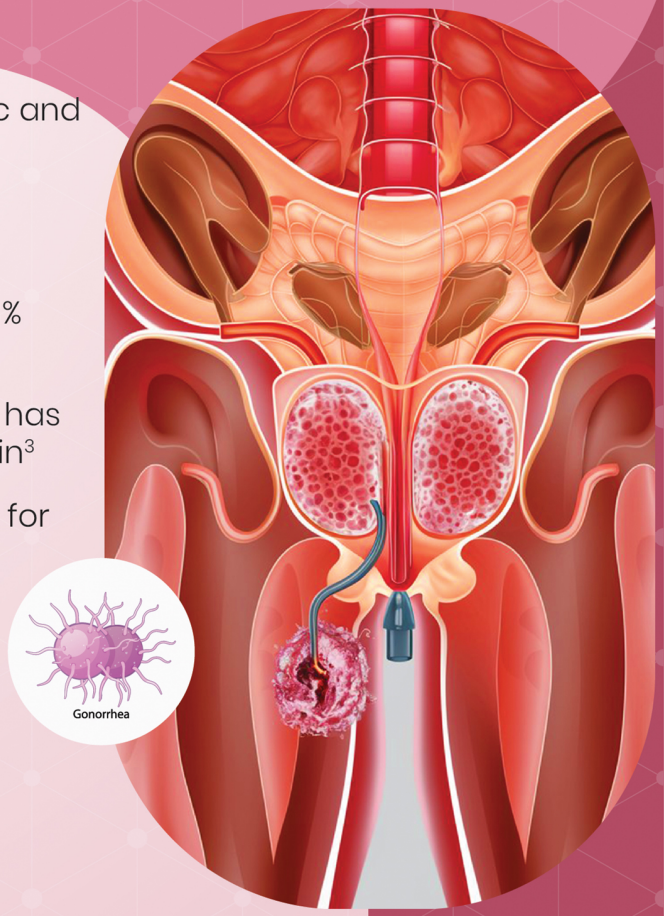
For Infections That Run Deep

FOSFOMED

Fosfomycin 4gm

INJECTION

- **FDA-approved** broad-spectrum antibiotic and trusted first-line UTI therapy[1]
- Proven safe and effective for severe, drug-resistant infections[2]
- Delivers strong clinical outcomes with 75.3% success and 83.4% response rates overall[2]
- A single dose is as effective, cheaper, and has fewer side effects than 7-day nitrofurantoin[3]
- Well-tolerated with low side effects profile for cystic fibrosis[4]



INDICATIONS

- **Cystic fibrosis**
- **Gonorrhea**
- **Uncomplicated UTI**

Built For The Most Challenging Infections

DOSAGE

For Adults:

Administer 3g for acute uncomplicated cystitis; for multi-drug resistant UTI, give 2–3g every 2–3 days. For prostatitis (off-label), administer 3g once daily for 1 week, then every 48 hours for a minimum of 6 weeks.

***Disclaimer:** Doses may vary depending on individual patient needs and clinical discretion.



1. Fosfomycin. Drug Bank [DB00828]. Available from: https://go.drugbank.com/drugs/DB00828 2. Infect Dis Ther. 2025 Apr;14(4):765-791. doi: 10.1007/s40121-025-01125-2. 3. Int J Med Res Rev. 2016 May31;4(5):787-93. doi: https://doi.org/10.17511/ijmrr.2016.i05.22. 4. J Cyst Fibros. 2003 Mar;2(1):19-24. doi: 10.1016/S1569-1993(02)00143-1.

When Complications Escalate

MASTER CORTI

Hydrocortisone 100mg

INJECTION

med master LIFE CARING PARTNER



- **FDA-approved** solution for various skin, hormonal, immune, and allergic conditions[1]
- Reduces 28-day mortality in severe community-acquired pneumonia[2]
- Improves quality of life and reduces hospital stays in cases of inadequate adrenal function[3]
- Offers strong safety and prompt cortisol elevation for emergency use in adrenal insufficiency[4]

INDICATIONS

- **Adrenal disorders**
- **Endocrine and metabolic conditions**
- **Gastrointestinal, CNS, and parasitic infections**
- **Hematologic conditions**
- **Ophthalmic inflammation**
- **Renal and edematous states**
- **Respiratory disorders**
- **Rheumatic and collagen diseases**
- **Severe allergic reactions**
- **Severe dermatological conditions**



Delivers Advanced Injectable Care

DOSAGE

For Adults:
100 mg Hydrocortisone Injection
100 mg IV bolus, then 200 mg/24h (via infusion or 50 mg IV every 6h); Day 2: 100 mg IV.
Primary Adrenal Insufficiency (unable to take oral): 100 mg IM.
Children – 100 mg Hydrocortisone Injection
Adolescents: 100 mg IM
Major Surgery or ICU: 50 mg/m² IM/IV bolus, then 50–100 mg/m² divided every 6h.

***Disclaimer:** Doses may vary depending on individual patient needs and clinical discretion.

1. Hydrocortisone. Drug Bank [DB00741]. Available from: https://go.drugbank.com/drugs/DB00741 2. N Engl J Med. 2023 May 25;388(21):1931-1941. doi: 10.1056/NEJMoa2215145.
3. Rev Endocr Metab Disord. 2024 Oct;25(5):911-924. doi: 10.1007/s11154-024-09905-w. 4. Eur J Endocrinol. 2013 Jun 29;169(2):147-54. doi: 10.1530/EJE-12-1057.

med master LIFE CARING PARTNER

Your Strong Shield Against Severe, Resistant Infections

MASTER PEN-C

Imipenem 500 mg + Cilastatin 500 mg

INJECTION

- **FDA approved** treatment effective against a broad range of infections[1,2]
- Proven clinical efficacy in 92% of infections[3]
- Boosts bacterial clearance and symptom relief with fewer side effects in severe infections[4]
- Higher success than Aztreonam–Clindamycin, with similar safety[5]



INDICATIONS

- **Endocarditis**
- **Gynecologic infections**
- **Intra-abdominal infections**
- **Lower respiratory tract infections**
- **Meningitis**
- **Pseudomonas infections**
- **Skin/skin structure infections**
- **Urinary tract infections**
- **Urogenital infections**

Proven To Clear Infections, Trusted To Restore Health



DOSAGE

Adults – 250mg/250mg, 500mg/500mg
Pediatric- 250mg/250mg

***Disclaimer:** Doses may vary depending on individual patient needs and clinical discretion.

1. Imipenem and Cilastatin. FDA Label. Available from: https://www.accessdata.fda.gov/drugsatfda_docs/label/2016/050587s074lbl.pdf
2. Imipenem-Cilastatin. Science Direct. Available from: https://www.sciencedirect.com/topics/chemistry/imipenem-cilastatin
3. Rev Infect Dis. 1985 Jul-Aug;7 Suppl 3:S528-36. doi: 10.1093/clinids/7.supplement_3.s528. 4. Int J Clin Exp Med. 2021;14(2):1345-51.
5. J Antimicrob Chemother. 1993 Sep;32(3):491-500. doi: 10.1093/jac/32.3.491.

Rapid Relief, Powerful Recovery In Critical Spinal And Inflammatory Conditions

MEDMPS

Methylprednisolone Sodium Succinate 1 g **INJECTION**



- **FDA-approved** anti-inflammatory glucocorticoid with broad therapeutic use[1,2]
- Timely 24-hour therapy supports improved motor outcomes in acute spinal cord injury[2]
- Initiates healing with pain relief in 88.9% of cases, without complications[3]
- Water-soluble corticosteroid with 46.2% cure rate for complicated cervical spinal cord injury[4,5]
- Improves survival by reducing 28-day mortality from 14.7% to 10.4% and 6-month mortality from 20.3% to 13.7%[6]
- Ensures safety with no rise in major cardiac complications such as rupture, aneurysm, or arrhythmias[6]

INDICATIONS

- **Cardiovascular disease**
- **Neoplastic disorder**
- **Spinal cord injury**





Restoring Mobility, Ensuring Safety

DOSAGE

Administer initial dosage ranging from 10 to 40 mg, depending on the condition being manage

***Disclaimer:** Doses may vary depending on individual patient needs and clinical discretion.

1. Methylprednisolone sodium succinate. FDA Label. Available from: https://www.accessdata.fda.gov/drugsatfda_docs/label/2011/011856s103s104lbl.pdf
2. Global Spine J. 2017 Sep 5;7(3 Suppl):116S–137S. doi: 10.1177/2192568217706366. 3. Radiology. 1980 Aug;136(2):289-93. doi: 10.1148/radiology.136.2.7403498.
4. Sci Rep. 2023 Jul 17;13:11548. doi: 10.1038/s41598-023-38539-2. 5. Pak J Med Sci. 2019 Jan-Feb;35(1):141-145. doi: 10.12669/pjms.35.1.211.
6. J Int Med Res. 1986:14 Suppl 1:1-10.

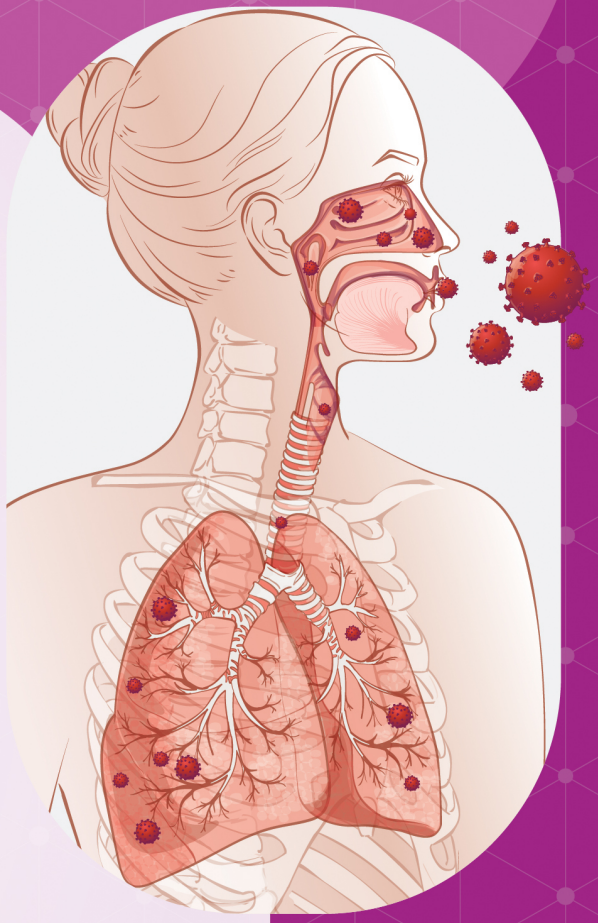
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Supports Respiratory Function And Speeds Symptom Relief

MEROPENDEM-S

Meropenem 1 G + Sulbactam Sodium 500 Mg

INJECTION



- **CDSCO approved** with strong efficacy and good tolerability in treating lower RTIs[1,2]
- Improves dyspnea, rhonchi, and wheezing symptoms by over 80% within 7 days[1]
- Relieves cough symptoms by over 82% within one week[1]
- Gradually lowers body temperature by up to 3.5% within 7 days[1]

INDICATIONS

- **Lower respiratory tract infections (RTIs)**

Promotes Faster Recovery And Reduces Risk Of Complications

DOSAGE

Standard Adult Dosage:
Meropenem: 1 gram intravenously (IV) every 8 hours.
Sulbactam: 500 mg IV every 8 hours.

***Disclaimer:** Doses may vary depending on individual patient needs and clinical discretion.



1. Indian Journal of Clinical Practice. 2013 Apr; 23(11): 721-727. https://imsear.searo.who.int/handle/123456789/182518
2. Drugs@CDSCO. Available from: https://cdscoonline.gov.in/CDSCO/Drugs

Advanced Treatment For Life-threatening Bacterial Challenges

MEROPENDEM 500

Meropenem 500 mg

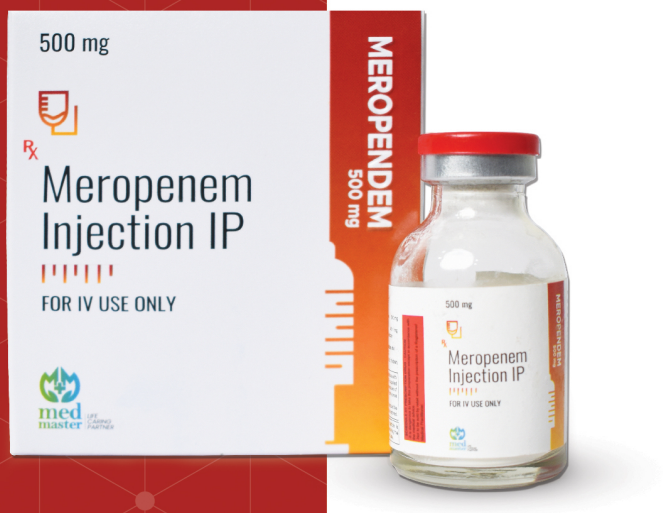
INJECTION



- Clinically approved antibiotic by the FDA, targets a wide array of infectious diseases[1,2]
- Safe, effective, well-tolerated against beta-lactamase-producing strains[3]
- Delivers 92% clinical efficacy in complicated skin and soft tissue infections[4]
- Achieves 95% response in intra-abdominal infections, outperforming Imipenem/Cilastatin[5]
- Potent empirical monotherapy for severe intra-abdominal infections[6]

INDICATIONS

- **Bacterial meningitis**
- **Complicated intra-abdominal infections**
- **Bone and Joint Infections**
- **Complicated skin and skin structure infections**



Also available as:

MEROPENDEM 1000

(Meropenem 1000 mg) Injection

When Complications Demand Control

DOSAGE

For Adults:

500 mg IV q8h (skin infections)
1 g IV q8h (Pseudomonas & intra-abdominal infections) 1 g IV bolus q8h (over 3–5 min)
Adjust dose for renal impairment

***Disclaimer:** Doses may vary depending on individual patient needs and clinical discretion.

1. Meropenem. FDA Label. Available from: https://www.accessdata.fda.gov/drugsatfda_docs/label/2016/050706s037lbl.pdf 2. Meropenem. Drug Bank [DB00760]. Available from: https://go.drugbank.com/drugs/DB00760 3. Chin Med J (Engl). 2002 Dec;115(12):1849-54. 4. Ther Clin Risk Manag. 2006 Dec;2(4):401-415. doi: 10.2147/tcrm.2006.2.4.401. 5. Clin Microbiol Infect. 2000 Jun;6(6):294-302. doi: 10.1046/j.1469-0691.2000.00082.x. 6. Drugs. 2000 Sep;60(3):619-46. doi: 10.2165/00003495-200060030-00010.

med master LIFE CARING PARTNER

For Healing, Relief, And Long-term Acid Control

PANTOMASTER 40

Pantoprazole 40 mg

INJECTION



- **FDA-approved PPI** for treating acid-related conditions and promoting gastric healing[1,2]
- Backed by 100+ trials, offers strong safety with low drug interaction risk[3]
- Outperforms H2RAs in erosive GERD—established first-line choice[3]
- Provides faster symptom relief in mild GERD patients[3]
- Lowers symptom relapse and episodes compared to esomeprazole[3]

INDICATIONS

- **Erosive esophagitis**
- **Gastroesophageal reflux disease**
- **Peptic ulcer disease**
- **Zollinger-Ellison syndrome**

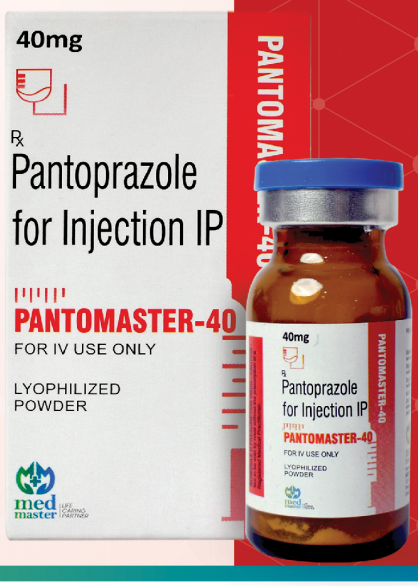
Restoring Quality Of Life

DOSAGE

For Adults:

The recommended adult dosage of pantoprazole sodium for injection is 40 mg once daily by intravenous injection (over at least 2 minutes) or intravenous infusion (for 15 minutes) for up to 10 days.

***Disclaimer:** Doses may vary depending on individual patient needs and clinical discretion.



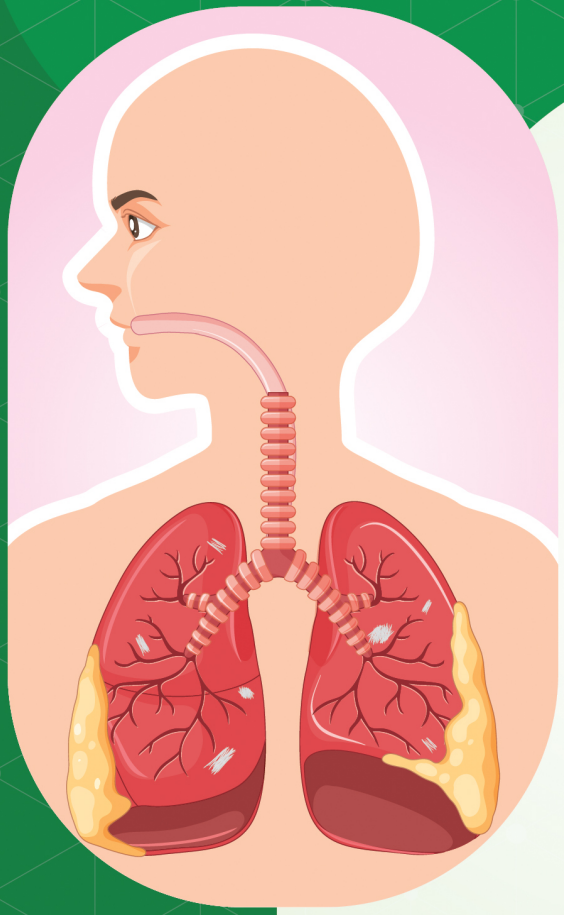
1. Pantoprazole. FDA Label. Available from: https://www.accessdata.fda.gov/drugsatfda_docs/label/2012/020988s044lbl.pdf 2. Pantoprazole. Drug Bank [DB00213]. Available from: https://go.drugbank.com/drugs/DB00213 3. Clin Exp Gastroenterol. 2010 Jan 20;3:11–16. doi: 10.2147/ceg.s6355.

Protecting Vital Organs Where Toxins Strike

MUCO MASTER

Acetylcysteine 2 ml

INJECTION



- **FDA-approved** with 100% efficacy in APAP overdose if given within 8 hours[1,2]
- Lowers mortality in severe aluminium phosphide poisoning by 20%[3]
- Decreases hospital stay duration in AT-DILI patients[4]
- Reduces sputum viscosity and facilitates expectoration in respiratory disease[5]

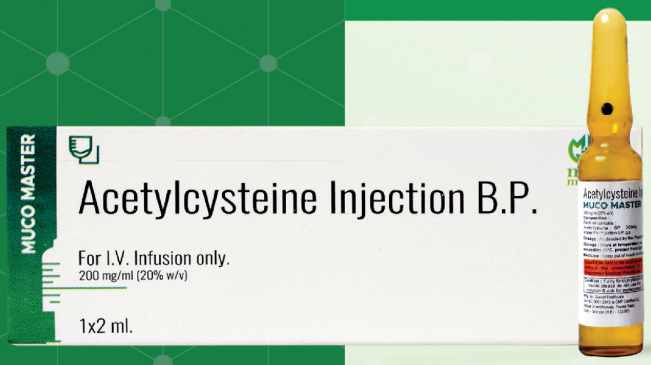
INDICATIONS

- **Acetaminophen (APAP) overdose**
- **Aluminium phosphide poisoning**
- **Anti-tuberculosis drug-induced liver injury (AT-DILI)**
- **Pulmonary diseases**

Reducing Damage, Improving Outcomes

Also available as:

Muco Master Ampoule (Acetylcysteine 5 ml)



DOSAGE

For Adults and Pediatrics (≤100 kg)
Loading dose: 150 mg/kg IV over 1 hour
Then: 50 mg/kg IV over 4 hours
Then: 100 mg/kg IV over 16 hours
For Adults >100 kg:
Loading dose: 15,000 mg IV over 1 hour
Then: 5,000 mg IV over 4 hours
Then: 10,000 mg IV over 16 hours

***Disclaimer:** Doses may vary depending on individual patient needs and clinical discretion.

1. Acetylcysteine. Drug Bank [DB06151]. Available from: https://go.drugbank.com/drugs/DB06151 2. N-Acetylcysteine. NIH. StatPearls. Available from: https://www.ncbi.nlm.nih.gov/books/NBK537183/ 3. BMC Pharmacol Toxicol. 2023 Nov 3;24:59. doi: 10.1186/s40360-023-00699-2. 4. Clin Infect Dis. 2021 Nov 2;73(9):e3377-e3383. doi: 10.1093/cid/ciaa1255. 5. Eur Rev Med Pharmacol Sci. 2023 Jun;27(11):5119-5127. doi: 10.26355/eurrev_202306_32628.

med master LIFE CARING PARTNER

Multi-site Action Against Serious Infections

MEDPIP-T FORTE

Piperacillin 2 gm + Tazobactam 125 mg **INJECTION**



- **FDA-approved,** broad-spectrum antibiotic for various infections[1,2]
- Superior clinical response and higher bacterial eradication rate than ticarcillin/clavulanic acid[3]
- Achieves clinical improvement in up to 94% of patients with respiratory infections[3]
- Higher cure rates, lower mortality, faster recovery in critically ill patients[4]
- Proven drug of choice for managing skin and soft tissue infections[5]

INDICATIONS

- **Bone and joint infections**
- **Gynecological infections**
- **Intra-abdominal infections**
- **Lower respiratory tract infections**
- **Skin and soft tissue infections**

Also available as:

MedPip-T (DS) Injection
(Piperacillin 4 gm + Tazobactam 500 mg)

Broad Reach, Deep Impact



DOSAGE

Adults and Pediatrics

piperacillin/tazobactam injection, lyophilized powder for reconstitution (2g/250mg) /vial: 2.25g (3g/375mg)/vial: 3.375g(4g/500mg)/vial:4.5g

Premix bag

2.25g/50mL 3.375g/50mL 4.5g/100mL

***Disclaimer:** Doses may vary depending on individual patient needs and clinical discretion.

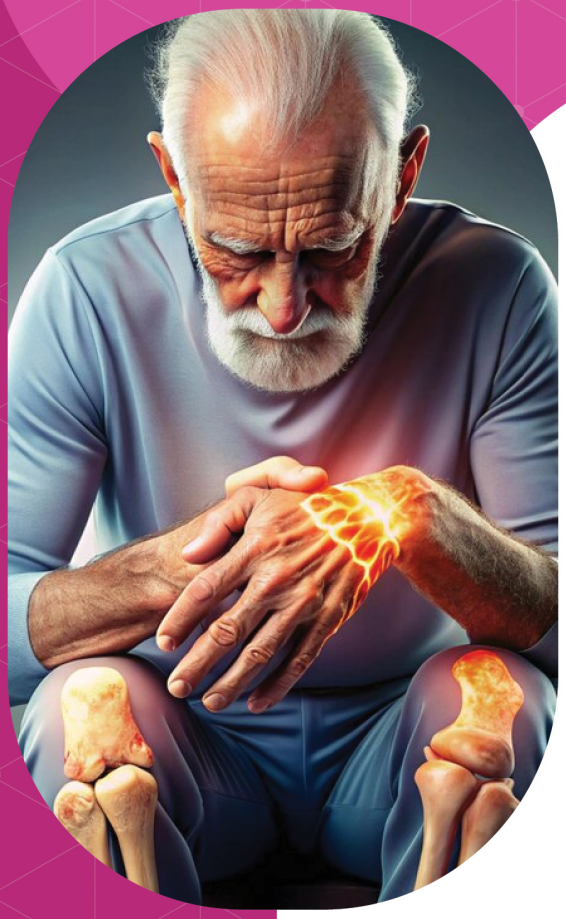
1. Piperacillin + Tazobactam. Drug Bank. Available from: https://go.drugbank.com/articles/A179266 2. Piperacillin + Tazobactam. FDA Approval Letter. Available from https://www.accessdata.fda.gov/drugsatfda_docs/nda/2005/050684_S045_ZOSYN_APPROV.pdf 3. Piperacillin/Tazobactam. Drugs 57, 805–843 (1999). https://doi.org/10.2165/00003495-199957050-00017 4. BMC Infect Dis. 2020 Jun 20;20(1):430. doi: 10.1186/s12879-020-05149-6. 5. Expert Opin Pharmacother. 2017 Jul;18(10):1027-1034. doi: 10.1080/14656566.2017.1341491.

Built To Tackle Today's Toughest Infections

VANCOMASTER

Vancomycin 500 mg

INJECTION



- **FDA-approved antibiotic** for complex, severe infections across the body[1,2]
- With over 70 years of clinical use, preferred first-line therapy for S. aureus bacteraemia[3,4]
- Delivers a rapid onset of action through quick serum level rise[4]
- Offers strong outcomes with fewer failures and lower mortality than Teicoplanin[5]
- Lowers 30-day mortality in sepsis, especially in adults aged 18–50[6]

INDICATIONS

- **Bone infections**
- **Infective endocarditis**
- **Lower respiratory tract infections**
- **Septicemia**
- **Skin and skin structure infections**



DOSAGE

Adults:
The usual daily IV dose is 2 g divided either as 500 mg every 6 hours or 1 g every 12 hours.

Pediatric:
Usual IV dosage of vancomycin is 10 mg/kg per dose given every 6 hours.

Neonates:
An initial dose of 15 mg/kg is suggested, followed by 10 mg/kg every 12 hours for neonates in the 1st week of life and every 8 hours thereafter up to the age of 1month.

***Disclaimer:** Doses may vary depending on individual patient needs and clinical discretion.

1. Clin. Infect. Dis. 2021 Nov 15;73(10):1795-804. https://doi.org/10.1093/cid/ciab133. 2. J Travel Med. 2017 Mar 1;24(2). doi: 10.1093/jtm/taw093.
3. FDA News Release: Available from: https://www.fda.gov/news-events/press-announcements/fda-approves-only-drug-us-treat-severe-malaria
4. Lancet. 2005;366(9487):717-25. doi: 10.1016/S0140-6736(05)67176-0. 5. Int J Infect Dis. 2019 Dec:89:30-44. doi: 10.1016/j.ijid.2019.08.030.
6. Clin Infect Dis. 2021 Dec 6;73(11):1965-1972. doi: 10.1093/cid/ciab570.

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A Reliable Option When First-line Therapies Fall Short

AMIKATER

Amikacin Sulphate 500 mg / 2 ml

INJECTION



- **FDA-approved antibiotic** proven effective across a range of severe infections[1,2]
- Delivers up to 90% efficacy across complex multi-site bacterial infections[3]
- Cures 62.5% of infections unresponsive to prior antibiotics[4]
- A key choice in hospitals with high gentamicin or tobramycin resistance[5]
- Feasible and well-tolerated treatment for non-bacteremic UTIs[6]

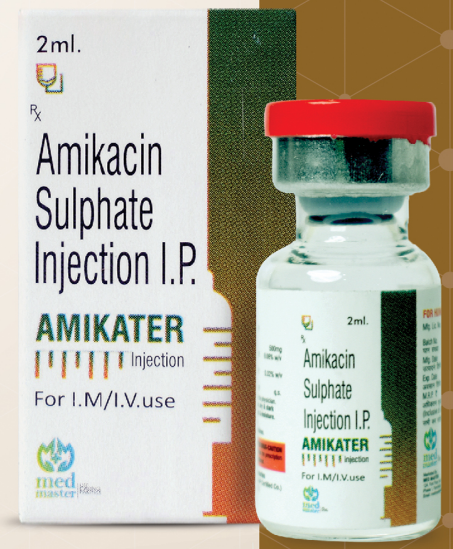
INDICATIONS

- **Urinary tract infections (UTIs)**
- **Respiratory diseases**

Reliable Infection Control

Also available as:

AMIKATER-250MG



DOSAGE

Conventional Adult dosing is typically given at 5 mg/kg intravenously every 8 hours. In elderly patients, due to age-related changes in renal clearance, a 12-hour dosing interval is often sufficient and preferred.

***Disclaimer:** Doses may vary depending on individual patient needs and clinical discretion.

1. Amikacin Sulphate. Centre for Drug Evaluation and Research. Available from: https://www.accessdata.fda.gov/drugsatfda_docs/nda/97/64146AP.PDF
2. Amikacin. Drug Bank [DB00479]. Available from: https://go.drugbank.com/drugs/DB00479 3. J Infect Dis. 1976 Nov:134 SUPPL:S441-5. doi: 10.1093/infdis/135.supplement_2.s441. 4. J Infect Dis. 1976 Nov:134 SUPPL:S381-3. doi: 10.1093/infdis/135.supplement_2.s381.
5. Am J Hosp Pharm. 1981 Jul;38(7):981-9. 6. Korean J Intern Med. 2015 Dec 28;31(1):156-161. doi: 10.3904/kjim.2016.31.1.156.

Powerful Aid For Cardiac And Respiratory Crises

ADRENAMED

Adrenaline Bitartrate 1 mg / 1 ml

INJECTION

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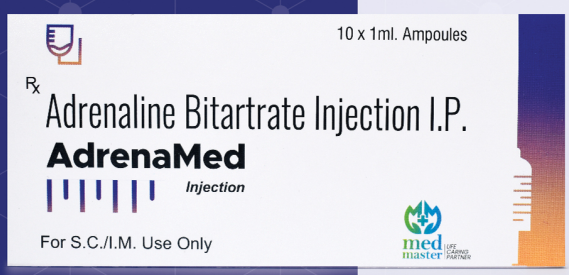


- Essential medication for reversing cardiac arrest during CPR[1]
- Provides fast respiratory support by relieving bronchospasm[1]
- Rapidly counteracts hypersensitivity reactions to drugs, serums, and allergens[1]
- Direct-acting sympathomimetic amine that prolongs the effect of local anesthetics[2]

INDICATIONS

- **Asthma**
- **Cardiac failure**
- **Cardiopulmonary resuscitation (CPR)**
- **Hypersensitivity reactions**

Rapid Action In Heart Failure And CPR



DOSAGE

Administer 1 mg IV/IO for every 3–5 minutes during resuscitation for cardiac arrest and 0.3–0.5 mg IM/SC every 5–10 minutes as needed for anaphylaxis.

***Disclaimer:** Doses may vary depending on individual patient needs and clinical discretion.

1. Epinephrine Bitartrate. Drug Bank [DBSALT000788]. Available from: https://go.drugbank.com/salts/DBSALT000788 2. Epinephrine Bitartrate. PubChem [5815]. Available from: https://pubchem.ncbi.nlm.nih.gov/compound/Epinephrine-Bitartrate

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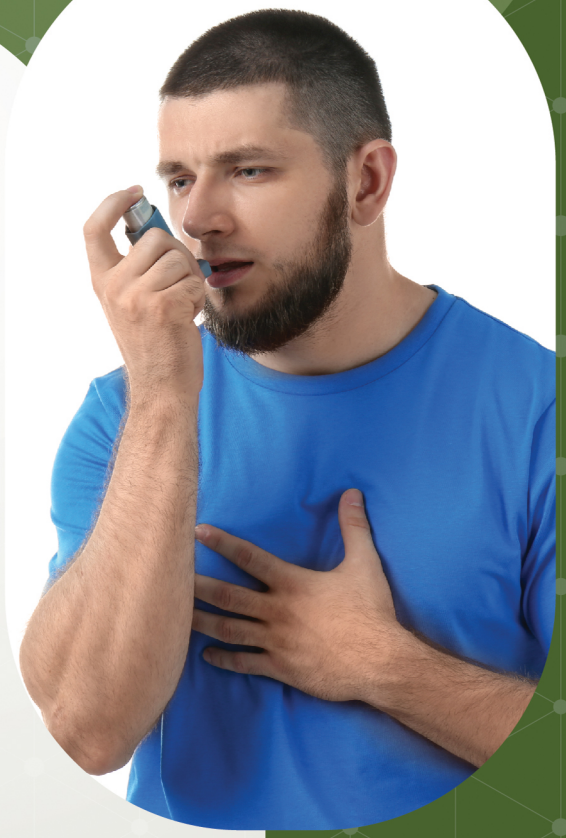
Restoring Rhythm To Every Breath

AMINOTER

Aminophylline 25 mg/ml

INJECTION

- **FDA-approved** bronchodilator to treat reversible airway obstruction[1]
- Boosts forced expiratory volume in 1 second in acute asthma by up to 19% as an add-on therapy[2]
- Decreases airway responsiveness to allergens and inflammatory mediators[3]
- Well tolerated and improves outcomes when used adjunctively in acute asthma[2]



INDICATIONS

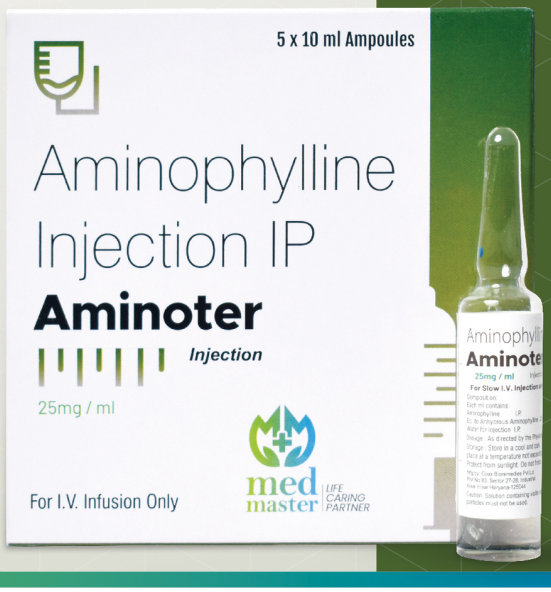
- **Asthma**
- **Chronic bronchitis**
- **Emphysema**

Breathe Beyond The Barrier Of Obstruction

DOSAGE

Administer an initial IV loading dose to achieve a serum concentration of 10 mcg/mL, followed by a continuous maintenance infusion to maintain levels between 10–15 mcg/mL.

***Disclaimer:** Doses may vary depending on individual patient needs and clinical discretion.



1. Aminophylline. NIH StatPearls. Available from: https://www.ncbi.nlm.nih.gov/books/NBK545175/ 2. Ann Intern Med. 1993 Dec 15;119(12):1155-60. doi: 10.7326/0003-4819-119-12-199312150-00001. 3. Aminophylline. PubChem [9433]. Available from: https://pubchem.ncbi.nlm.nih.gov/compound/Aminophylline

First-line Therapy In Toxic Cholinergic Emergencies

ATRO MASTER

Atropine Sulphate 0.6 mg/ml

INJECTION

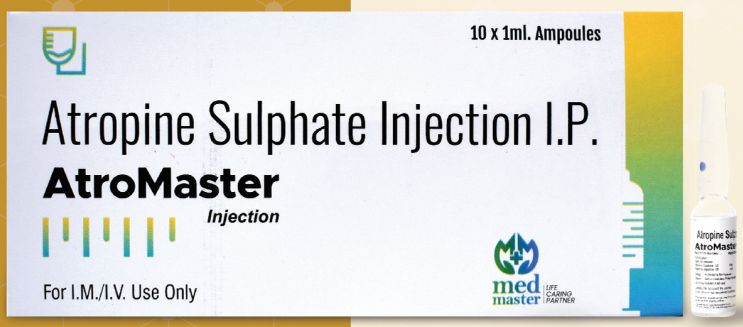


- **FDA-approved** muscarinic antagonist part of the WHO List of Essential Medicines[1,2]
- Frontline, lifesaving antidote for organophosphate poisoning[3]
- First-line drug for treating symptomatic bradycardia[4]
- Clinically essential, delivers immediate relief, with peak levels in 30 minutes[5]

INDICATIONS

- **Anti-sialagogue effects**
- **Bradycardia**
- **Organophosphate or muscarinic poisoning**

For Life-threatening Symptoms, Choose Rapid Reversal



DOSAGE

Administer 0.5–1 mg every 1–2 hours for anti-sialagogue or vagal effects. For poisoning, give 2–3 mg every 20–30 minutes (up to 20 mg); for bradycardia, 1 mg every 3–5 minutes (max 3 mg).

***Disclaimer:** Doses may vary depending on individual patient needs and clinical discretion.

1. Atropine Sulphate. Center for Drug Evaluation and Research. Available from: https://www.accessdata.fda.gov/drugsatfda_docs/nda/2001/21-146_Atropine%20Sulfate_Approv.pdf
2. Atropine Sulphate. DrugBank (DB00572). Available from: https://go.drugbank.com/drugs/DB00572| 3. Am J Emerg Med. 2010 Feb;28(2):143-50. doi: 10.1016/j.ajem.2008.10.025.
4. BMJ Case Rep. 2015 Jan 29;2015:bcr2014207596. doi: 10.1136/bcr-2014-207596. 5. Atropine. NIH. Stat Pearls. Available from: https://www.ncbi.nlm.nih.gov/books/NBK470551/

First-line Therapy In Toxic Cholinergic Emergencies

ATRO MASTER

Atropine Sulphate 0.6 mg/ml

INJECTION

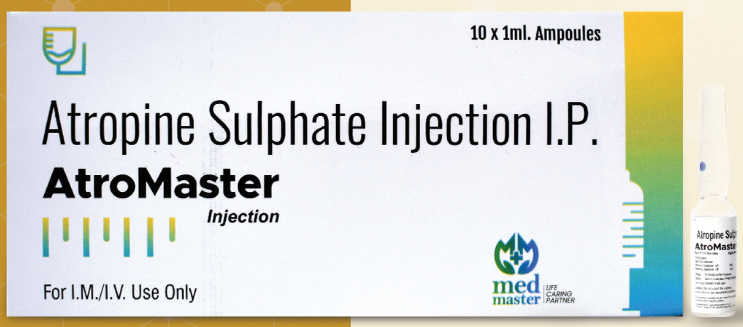


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2. Atropine Sulphate. DrugBank (DB00572). Available from: https://go.drugbank.com/drugs/DB00572| 3. Am J Emerg Med. 2010 Feb;28(2):143-50. doi: 10.1016/j.ajem.2008.10.025.
4. BMJ Case Rep. 2015 Jan 29;2015:bcr2014207596. doi: 10.1136/bcr-2014-207596. 5. Atropine. NIH. Stat Pearls. Available from: https://www.ncbi.nlm.nih.gov/books/NBK470551/

med master LIFE CARING PARTNER

Strong Control For Immune-driven Conditions

MEDBETAPHOS

Meropenem 1 G + Sulbactam Sodium 500 Mg

INJECTION

- Long-acting corticosteroid with strong anti-inflammatory properties[1]
- Rapid relief from septic shock within 4–8 hours with excellent tolerability[2]
- 70% of septic shock patients showed clinical improvement with no adverse effects[2]
- Fast-acting glucocorticoid with potent metabolic and immunosuppressive effects[3]



INDICATIONS

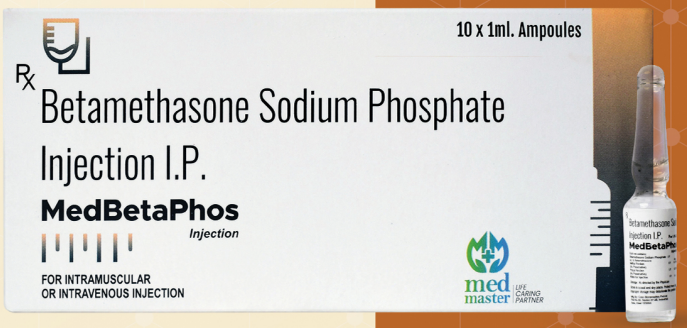
- **Autoimmune disorders**
- **Inflammatory skin conditions**
- **Septic shock**

Targeted, Fast Action

DOSAGE

Administer two intramuscular injections of betamethasone 12 mg each, spaced 24 hours apart.

***Disclaimer:** Doses may vary depending on individual patient needs and clinical discretion.



1. Betamethasone Sodium Phosphate. Drug Bank [DBSALT000850]. Available from: https://go.drugbank.com/salts/DBSALT000850
2. Clin Ther. 1984;6(5):719-26. Available from: https://pubmed.ncbi.nlm.nih.gov/6383616/ 3. Betamethasone Sodium Phosphate. Science direct. Available from: https://www.sciencedirect.com/topics/neuroscience/betamethasone-sodium-phosphate

A Reliable Ally In Long-term Brain Care

MEDCOLINE FORTE

Citicoline 1000 mg / 4 ml

INJECTION



- A very well tolerated, non-toxic neuroprotective agent with benefits in neurodegenerative disorders[1,2]
- Enhances functional recovery and reduces care burden in post-stroke patients[1]
- Significantly boosts retinal and cortical function in glaucoma[3]
- Meta-analytic evidence supports reduced mortality and disability in stroke[4]
- Improves neurological function with less adverse effects and better recovery outcomes[5]

INDICATIONS

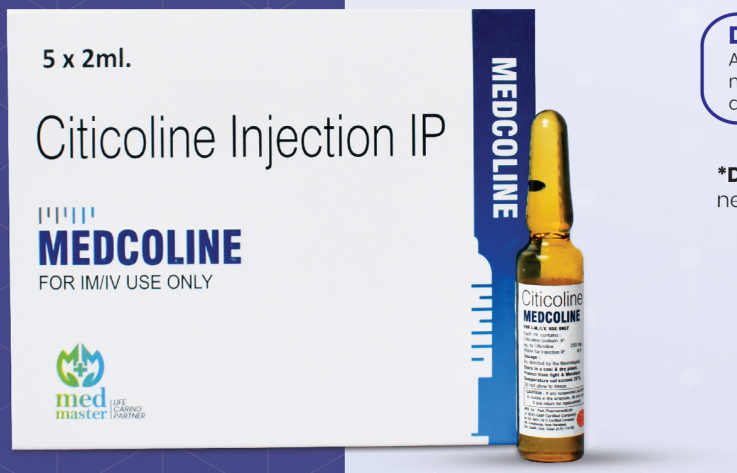
- **Cerebrovascular disorders**
- **Chronic neurodegenerative diseases**

Built For Complex Neurological Needs

DOSAGE

Administer citicoline 500–2,000 mg daily (7–28 mg/kg for a 70 kg adult). Use 1 injection per day; adjust by severity.

***Disclaimer:** Doses may vary depending on individual patient needs and clinical discretion.



1. CNS Drugs. 2014 Feb 7;28(3):185–193. doi: 10.1007/s40263-014-0144-8. 2. Citicoline. PubChem [13804]. Available from: https://pubchem.ncbi.nlm.nih.gov/compound/Citicoline 3. Prog Brain Res. 2008:173:541-54. doi: 10.1016/S0079-6123(08)01137-0. 4. Rev Neurol Dis. 2008 Fall;5(4):167-77. 5. Front Pharmacol. 2025 Apr 4:16:1529647. doi: 10.3389/fphar.2025.1529647.

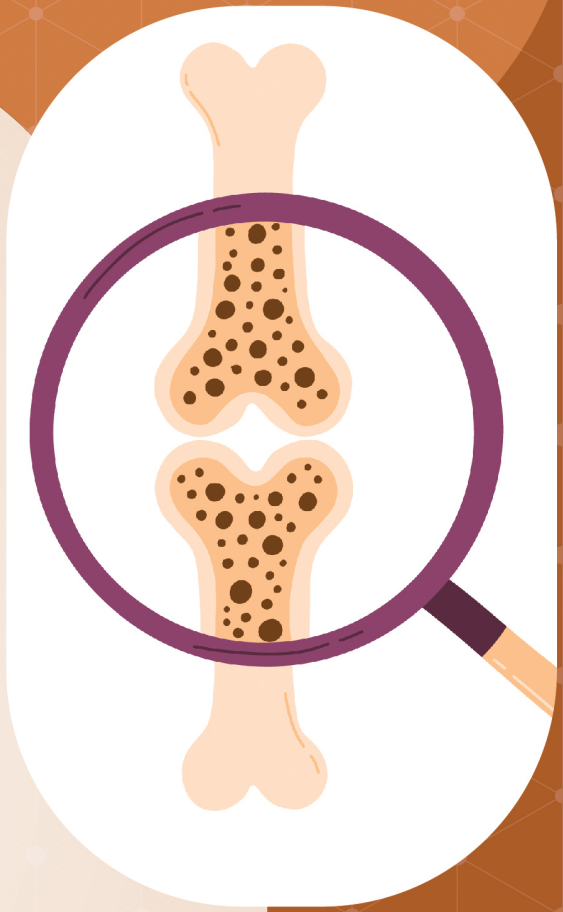
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Immediate Correction For Critical Hypocalcemia

CALCIOMED

Calcium Gluconate 10%

INJECTION



- **FDA-approved** to treat hypocalcemia and prevent related conditions like osteoporosis or rickets1,2,3
- Effectively normalizes ionized serum calcium in 79% of mild and 38% of moderate-to-severe hypocalcemia cases4
- Recommended by the Society for Endocrinology for severe hypocalcemia in endocrine emergencies5
- Restores ionized serum calcium >1 mmol/L in 95% and >1.12 mmol/L in 70% of critically ill hypocalcemic patients 6
- Preferred over calcium chloride due to lower risk of tissue damage from extravasation7

INDICATIONS

- **Hypocalcemia**

From deficiency to stability

DOSAGE

Administer 1–2g IV over10min for severe symptomatic hypocalcemia, 4g over 4h for moderate cases, and 1–2g over 2h for mild cases.



1. FDA Label. Calcium gluconate injection. Available from: https://www.accessdata.fda.gov/drugsatfda_docs/label/2017/208418s000lbl.pdf 2. Calcium gluconate. DrugBank [DB11126]. Available from: https://go.drugbank.com/drugs/DB11126 3. Calcium Gluconate. StatPearls. NIH. Available from: https://www.ncbi.nlm.nih.gov/books/NBK557463/ 4. JPEN J Parenter Enteral Nutr. 2005 Nov-Dec;29(6):436-41. doi: 10.1177/0148607105029006436. 5. Anaesth Crit Care Pain Med. 2024 Dec;43(6):101438. doi: 10.1016/j.accpm.2024.101438. 6. JPEN J Parenter Enteral Nutr. 2007 May-Jun;31(3):228-33. doi: 10.1177/0148607107031003228. 7. Hypocalcemia. StatPearls. NIH. Available from: https://www.ncbi.nlm.nih.gov/books/NBK430912

Advanced Ppi Therapy For Acid Suppression

RABEMASTER

Rabeprazole 20 mg

INJECTION

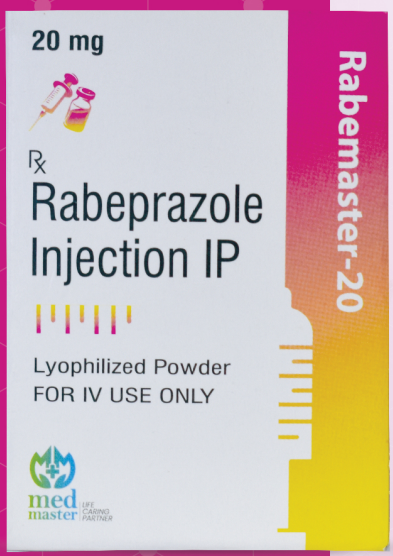


- Antiulcer, PPI* that provides fast and lasting relief from moderate to severe GERD symptoms[1,2]
- Outperforms pantoprazole and esomeprazole in reducing multiple GERD symptom severity[2]
- Suppresses both basal and meal-stimulated gastric acid secretion[1,3]
- Proven superior symptomatic relief over ranitidine for healing GERD and duodenal ulcer[4]
- Offers stronger long-term protection in PPI-resistant reflux esophagitis with proven safety[5]
- Well-tolerated, effective and safe for preventing peptic ulcer recurrence[6]

*PPI: Proton pump inhibitor

INDICATIONS

- **Gastroesophageal reflux disease (GERD)**
- **Peptic ulcer disease**
- **Reflux esophagitis**





Fast Relief From Severe Gerd Symptoms

DOSAGE

Standard Adult Dosage:
Meropenem: 1 gram intravenously (IV) every 8 hours.
Sulbactam: 500 mg IV every 8 hours.

***Disclaimer:** Doses may vary depending on individual patient needs and clinical discretion.

1. Rabeprazole. Drug Bank [DB01129]. Available from: https://go.drugbank.com/drugs/DB01129 2. J Assoc Physicians India. 2023 Oct;71(10):37-44. doi: 10.59556/japi.71.0366. 3. Rabeprazole. PubChem [5029]. Available from: https://pubchem.ncbi. nlm.nih.gov/compound/Rabeprazole
4. Dig Dis Sci. 2001 Mar;46(3):587-96. doi: 10.1023/a:1005659518030.5. J Gastroenterol. 2017 Nov 29;53(7):834–844. doi: 10.1007/s00535-017-1417-z.
6. J Clin Biochem Nutr. 2015 Apr 8;56(3):228–239. doi: 10.3164/jcbn.15-1.

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A Broad-spectrum Shield For Complex Clinical Cases

MEDKLIN 300

Clindamycin 300 mg/2 ml

INJECTION



- **FDA-Approved,** highly effective broad-spectrum antibiotic treating various infections1,2,3
- Drug of choice for managing diabetic foot and anaerobic lung infections4
- Clinically trusted for 50+ years, delivers antibacterial plus anti-inflammatory effects1,5
- Highly absorbed with sustained post-antibiotic effect and deep tissue penetration5

INDICATIONS

- **Bone and joint infection**
- **Gynecological infection**
- **Intra-abdominal infections**
- **Pelvic inflammatory disease**
- **Respiratory infection**
- **Septicemia**
- **Skin infection**

Critical Coverage For Critical Care

DOSAGE

Administer intravenously by intermittent infusion over 10 to 60 minutes at a maximum rate of 30 mg/min. Do not exceed a final concentration of 18 mg/ml.

***Disclaimer:** Doses may vary depending on individual patient needs and clinical discretion.

Also available as:

MEDKLIN 600



1. Antibiotics (Basel). 2024 Mar 17;13(3):270.doi: 10.3390/antibiotics13030270. 2. Clindamycin. Science Direct (Topical Therapeutics). Available from: https://www.sciencedirect.com/topics/medicine-and-dentistry/clindamycin#:~:text=Clindamycin% 3. Clindamycin. NIH StatPearls. Available from: https://www.ncbi.nlm.nih.gov/books/NBK519574/ 4. Can J Infect Dis. 1998 Jan-Feb;9(1):22–28. doi: 10.1155/1998/538090
5. J Clin Aesthet Dermatol. 2024 Aug;17(8):29–40.

When Inflammation Is The Enemy

DEXAHARBOR

Dexamethasone Sodium Phosphate

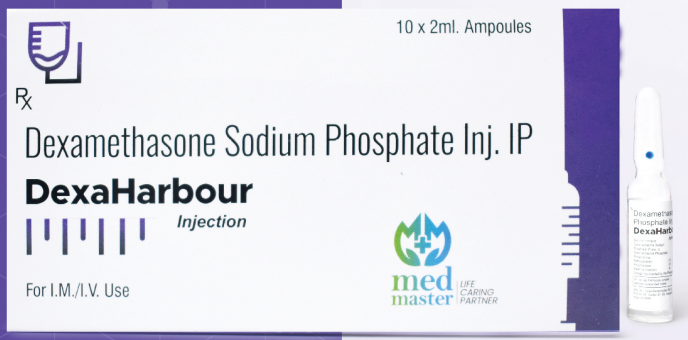
INJECTION



- **FDA-Approved,** corticosteroid beneficial in treating a wide range of conditions[1,2]
- Outperforms triamcinolone in potency while offering rapid onset of action[1,3]
- Significantly reduces pain scores, swelling, and trismus after wisdom tooth extraction[4]
- Reduces intraocular inflammation without impacting final vision of eye[5]

INDICATIONS

- **Allergic States**
- **Collagen Diseases**
- **Oral Diseases**
- **Dermatologic Diseases**
- **Endocrine Disorders**
- **Gastrointestinal Diseases**
- **Hematologic Disorders**
- **Ophthalmic Diseases**
- **Respiratory Diseases**
- **Rheumatic Disorders**



....Is The Answer

DOSAGE

Administer dexamethasone sodium phosphate injection intravenously at an initial dosage ranging from 0.5 to 9 mg per day, depending on the disease being treated.

***Disclaimer:** Doses may vary depending on individual patient needs and clinical discretion.

1. Dexamethasone Sodium Phosphate. FDA Label. Available from: https://www.accessdata.fda.gov/drugsatfda_docs/label/2014/040572s002lbl.pdf
2. Dexamethasone sodium phosphate. NIH. Available from: https://www.cancer.gov/publications/dictionaries/cancer-drug/def/dexamethasone-sodium-phosphate
3. Dexamethasone Sodium Phosphate. ScienceDirect. Available from: https://www.sciencedirect.com/topics/medicine-and-dentistry/dexamethasone-sodium-phosphate
4. A Comparative Study. The Open Dentistry Journal. 2024 Nov 15;18(1). Available from: https://www.opendentistryjournal.com/VOLUME/18/ELOCATOR/e18742106354194/FULLTEXT/
5. Dexamethasone Sodium Phosphate. ScienceDirect. Available from: https://www.sciencedirect.com/topics/neuroscience/dexamethasone-sodium-phosphate

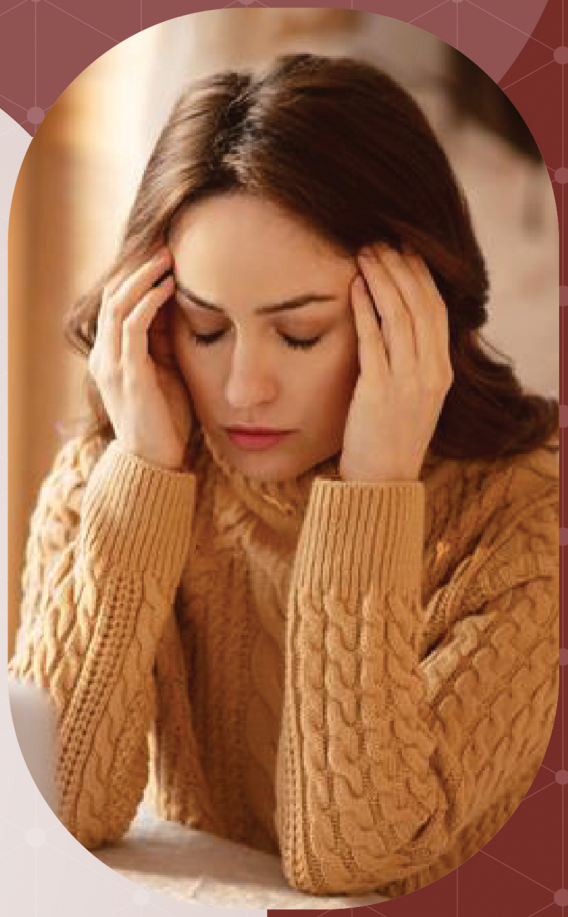
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Designed To Quickly Improve Circulation In Severe Shock And Acute Emergencies

VITAMED FORTE

Vitamin b complex with vitamin b12

INJECTION



- Enhances endurance and alleviates fatigue within 28 days[1]
- Lowers new chronic kidney disease risk and slows disease progression[2]
- Promotes faster creatinine reduction and renal recovery in acute kidney injury[2]
- Long-term use reduces post-stroke depression risk—safely and effectively[3]
- Shown to support heart failure management[4]

INDICATIONS

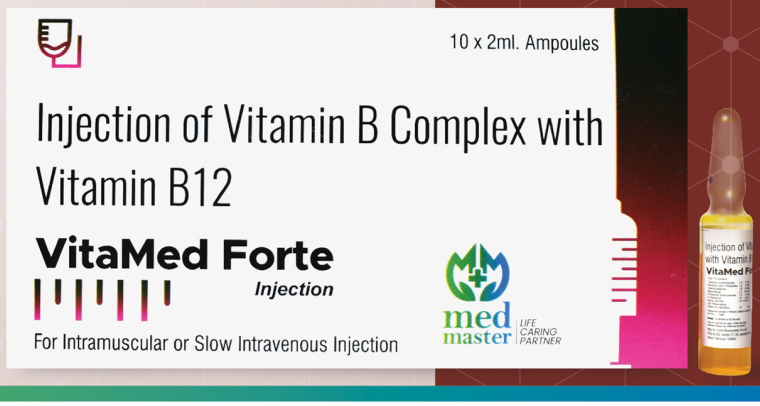
- **Autoimmune conditions**
- **Cardiovascular disease**
- **Cognitive decline**
- **Diabetes**
- **Malabsorption conditions**
- **Mental health conditions**
- **Nephrological conditions**
- **Vitamin B deficiencies**

Consistent Results For Better Patient Care

DOSAGE

Usually taken once daily, with or after food. B12 doses of 500–1000 mcg.

***Disclaimer:** Doses may vary depending on individual patient needs and clinical discretion.



1. Int J Med Sci. 2023 Aug 15;20(10):1272-1281. doi: 10.7150/ijms.86738. 2. Kidney International Reports. 2023 Mar 1;8(3):S19. doi: 10.1016/j.ekir.2023.02.042.
3. Ann Neurol. 2010 Oct;68(4):503-10. doi: 10.10y02/ana.22189. 4. Int J Mol Sci. 2024 Sep 10;25(18):9761. doi: 10.3390/ijms25189761.

Fast-acting Relief For Acute Pain Episodes

DICLOQUELL

Diclofenac Sodium 75 mg/ml

INJECTION

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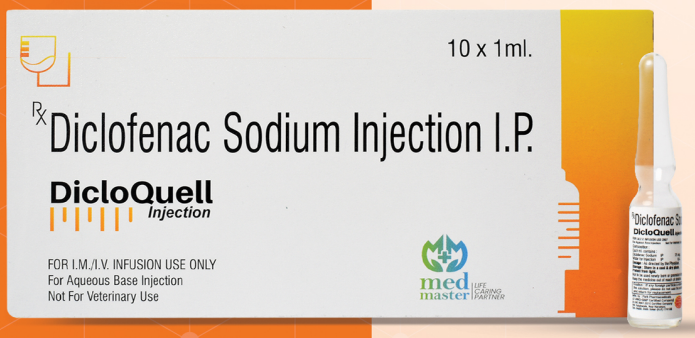


- **FDA-Approved,** used for a wide range of inflammatory and pain conditions[1,2]
- Backed by 20+ clinical trials, for quick and effective acute pain relief in acute migraine3
- Showed less adverse effects than aspirin, indicating a favorable safety profile4
- Rated as excellent in efficacy and safety by patients and physicians for pain managemnet5
- Rapid, significant pain relief in 92% of patients within 1 hour after cesarean section6
- Reduced mean pain scores from 7.09 to 0.85 in an hour, while also cutting opioid need6

INDICATIONS

- **Management of mild to severe pain**

Because Acute Pain Can't Wait



DOSAGE

Administer 37.5 mg as an intravenous bolus over 15 seconds every 6 hours, not exceeding a total daily dose of 150 mg for acute pain. Ensure adequate patient hydration prior to dosing.

***Disclaimer:** Doses may vary depending on individual patient needs and clinical discretion.

1. Diclofenac Sodium. DrugBank [DBSALT000466]. Available from: https://go.drugbank.com/salts/DBSALT000466 2. Diclofenac Sodium. FDA Label. Available from: https://www.accessdata.fda.gov/drugsatfda_docs/label/2014/022396lbl.pdf 3. Cephalalgia. 2022 Sep;42(10):1058-70. Available from: https://journals.sagepub.com/doi/full/10.1177/03331024221093712 4. Am J Med. 1986 Apr28;80(4B):43-7.doi:10.1016/0002-9343(86)90079-3. 5. Int J Clin Pharmacol Ther. 2011 Apr;49(4):286-90. doi: 10.5414/CP201512. 6. Arch Med Res. 2001 Mar-Apr;32(2):148-54. doi: 10.1016/s0188-4409(01)00254-5.

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Enabling Better Cardiac Outcomes With..

EDETAMED

Disodium Edetate 37.5 mg/ml

INJECTION

- Polyvalent chelating agent with anti-hypercalcemic and anti-arrhythmic effects[1]
- Significantly improves cardiovascular outcomes post-myocardial infarction, especially in diabetic patients[2]
- Lowers the risk of major cardiovascular events, including the need for revascularization[3]
- Ensures extended action while maintaining a wide therapeutic index and good tolerability[4]



INDICATIONS

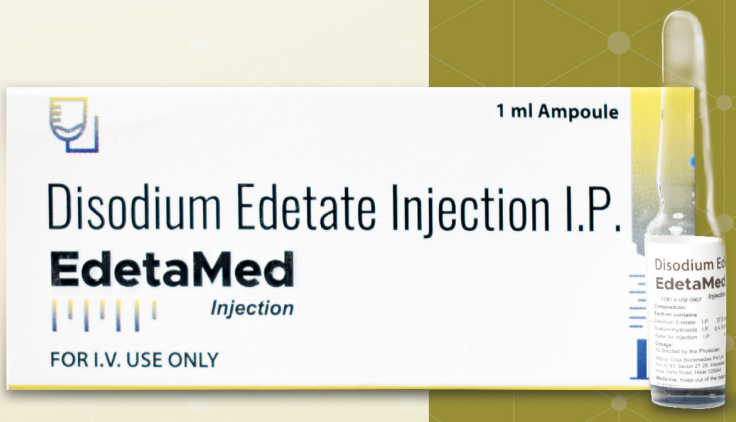
- **Hypercalcemia**
- **Cardiovascular disorders**

The Reliable Therapeutic Choice

DOSAGE

Administer Edetate Disodium Injection, USP IV only after dilution. Dose: 50 mg/kg (max 3 g/day) in 500 mL of 5% Dextrose or 0.9% NaCl. Infuse over ≥3 hours. Use 5-day dosing with 2-day breaks, up to 15 doses.

***Disclaimer:** Doses may vary depending on individual patient needs and clinical discretion.



1. Edetate Disodium. PubChem [63637]. Available from: https://pubchem.ncbi.nlm.nih.gov/compound/Edetate-Disodium 2. Curr Cardiol Rep. 2016 Feb;18(2):20. doi: 10.1007/s11886-015-0690-9.3. JAMA. 2013 Mar 27;309(12):1241–1250. doi: 10.1001/jama.2013.2107.
4. Edetate disodium. DrugBank [DB14600]. Available from: https://go.drugbank.com/drugs/DB14600

Essential In Managing Acute Cardiac Dysfunctions

DOBUTAMED

Dobutamine 250 mg / 5 ml

INJECTION

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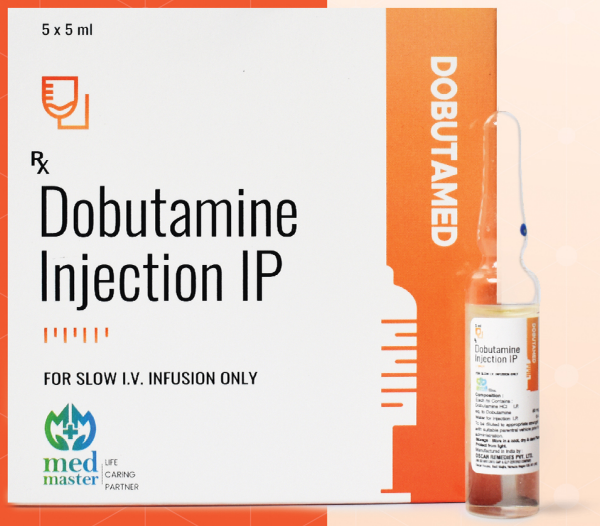


- **FDA-approved**, inotropic agent, safe and effective in advanced heart failure[1,2]
- Consistently improve symptoms, exercise tolerance, and cardiac function in chronic heart failure[3]
- Rapid improvement in average functional class from 3.8 to 2.7 within 2 days in congestive cardiomyopathy[4]
- Improved systolic time intervals seen in 7 days in 67% of the patients[4]
- Cardiac stimulant with sustained benefit in systolic intervals in 58% of patients at 2 months[4,5]

INDICATIONS

- **Cardiovascular disorders**

Fast-acting Support For Heart Function



DOSAGE

Administer dobutamine IV starting at 0.5–1 mcg/kg/min. Titrate to 2.5–20 mcg/kg/min; max 40 mcg/kg/min.

***Disclaimer:** Doses may vary depending on individual patient needs and clinical discretion.

1. Dobutamine. Center for Drug Evaluation and Research. Available from: https://www.accessdata.fda.gov/drugsatfda_docs/nda/2002/17-820_Dobutrex_Approv.pdf
2. J Clin Med. 2024 Jun 27;13(13):3782. doi: 10.3390/jcm13133782. 3. Clin Pharm. 1992 Jul;11(7):618-24. 4. Am Heart J. 1980 Nov;100(5):622-30. doi: 10.1016/0002-8703(80)90226-4.
5. Dobutamine. PubChem [36811]. Available from: https://pubchem.ncbi.nlm.nih.gov/compound/Dobutamine

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Immediate Intervention For Respiratory Stability

MEDFYLLINE

Doxofylline 10 mg / ml

INJECTION

- Clinically effective in 80% of patients with excellent tolerability and no reported side effects[1]
- A bronchodilator agent and an anti-asthmatic, outperforms theophylline in improving lung function and clinical symptoms[2,3]
- Offers better safety profile with reduced rescue inhaler use than theophylline[2]
- Leads to complete lesion resolution in 57% of chronic bronchitis patients after 3 months4



INDICATIONS

- **Respiratory diseases**

In Critical Moments, Bring The Lungs Back To Life

DOSAGE

Administer a single 100 mg IV dose of doxofylline for 10 minutes.

***Disclaimer:** Doses may vary depending on individual patient needs and clinical discretion.



1. J Int Med Res. 1988 Jul-Aug;16(4):264-9. doi: 10.1177/030006058801600403. 2. Int J Chron Obstruct Pulmon Dis. 2017 Dec 5;12:3487–3493. doi: 10.2147/COPD.S150887.3. Doxofylline. Pub Chem [50942]. Available from: https://pubchem.ncbi.nlm.nih.gov/compound/Doxofylline 4. Respir Med. 2020 Apr:164:105904. doi: 10.1016/j.rmed.2020.105904.

For The Acute Phase Of Ibs

MEDDROTA

Drotaverine 40 mg/2 ml

INJECTION



- Well tolerated, antispasmodic confirmed by 82% of clinicians for IBS improvement[1,2]
- Reduces pain frequency in 78% of patients with IBS within just 4 weeks while improving stool frequency[2]
- Delivers quicker, more effective relief from IBS pain and bowel issues than Mebeverine[3]
- A rapid decline in pain scores seen by day 3 from 6.02 to 4.8[3]

INDICATIONS

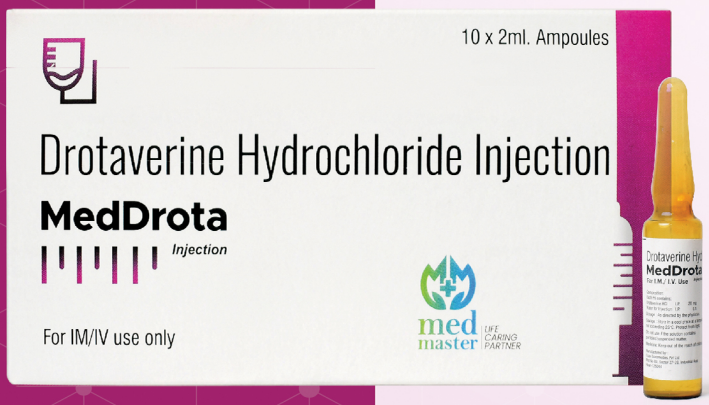
- **Gastrointestinal and genitourinary smooth muscle spasms**
- **Irritable bowel syndrome (IBS)**

Restore comfort, Reduce disruption

DOSAGE

Administer drotaverine 40 mg intramuscularly every 2 hours, up to a maximum of 3 injections

***Disclaimer:** Doses may vary depending on individual patient needs and clinical discretion.



1. Drotaverine. DrugBank [DB06751]. Available from: https://go.drugbank.com/drugs/DB06751 2. Saudi J Gastroenterol. 2014 Nov-Dec;20(6):378–382. doi: 10.4103/1319-3767.145331. 3. Saudi J Gastroenterol. 2021 May-Jun;27(3):136-143. doi: 10.4103/sjg.SJG_266_20.

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Supporting Motor Function In The Management Of Als

EDARAMED

Edaravone 20 ml

INJECTION



- **FDA-approved,** broad-spectrum antioxidant with orphan designation by the EMA1,2,3
- Clinically proven neuroprotective agent that improves survival outcomes with a good safety profile2,4
- Offers a well-tolerated, effective long-term treatment option for patients with ALS4,5
- Shows better efficacy in ALSFRS-R* score improvement than Riluzole combo6

* ALSFRS-R: Amyotrophic Lateral Sclerosis Functional Rating Scale-Revised

INDICATIONS

- **Amyotrophic lateral sclerosis (ALS)ns**

Enhance Patient Comfort and Function

DOSAGE

Administer 60 mg by IV over 60 mins: initial cycle - daily for 14 days and then 14-day drug-free.

***Disclaimer:** Doses may vary depending on individual patient needs and clinical discretion.



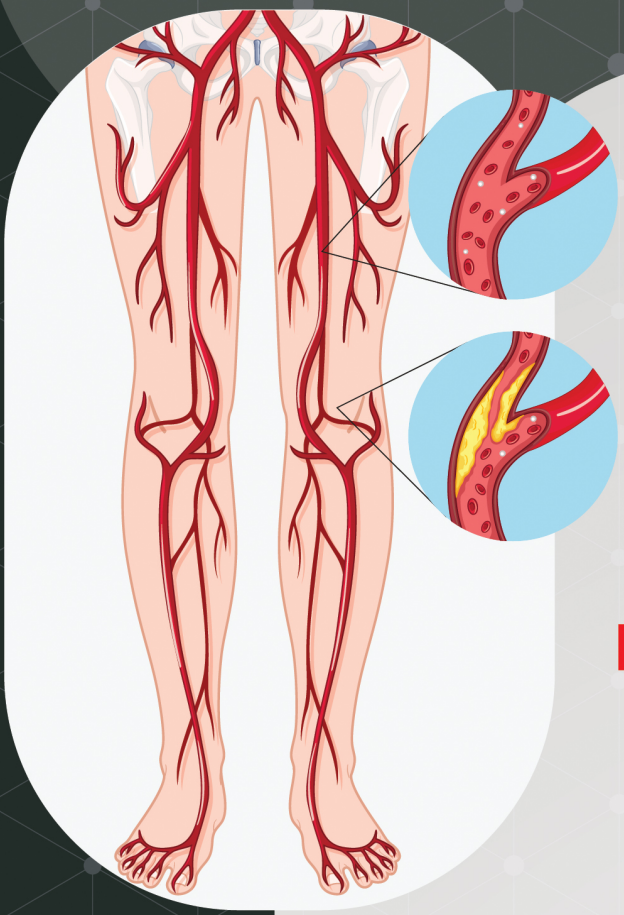
1. Edaravone. FDA Label. Available from: https://www.accessdata.fda.gov/drugsatfda_docs/label/2017/209176lbl.pdf 2. Edaravone. DrugBank [DB12243]. Available from: https://go.drugbank.com/drugs/DB12243 3. J Med Sci Clin Res. 2020;8 (7):10-8535. https://jmscr.igmpublication. org/home/index.php/current-issue/9454 4. Neurol Sci. 2023 May 30;44 (10):3429–3442. doi: 10.1007/s10072-023-06869-8. 5. JAMA Neurol. 2022 Feb 1;79(2):121-130. doi: 10.1001/jamaneurol. 2021.4893. 6. MNJ (Malang Neurology Journal). 2025 Feb 1;11(1):69-77. doi: https://doi.org/10.21776/ub.mnj.2025.011.01.13.

Supporting Critical Care In Cardiac Disorders and Clot Prevention

MEDENOXA 40

Enoxaparin Sodium 40 mg

INJECTION

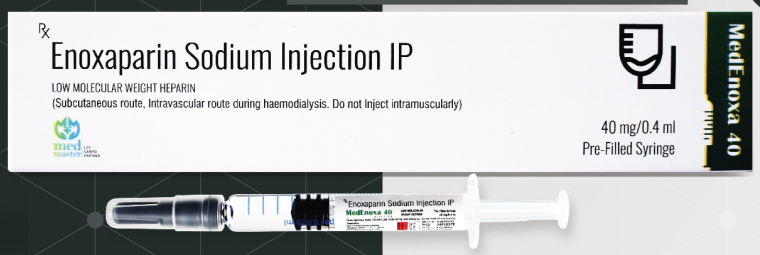


- **FDA-approved anticoagulant** for treating blood clots across a range of critical conditions[1,2]
- Significantly lowers the 30-day risk of death, MI, and recurrent angina in unstable angina and non–Q-wave MI[3]
- Proven effective and safe for VTE prevention post-surgery with just 3 days of treatment[4]
- Sustained one-year reduction in ischemic events diagnostic testing, and revascularization needs[5]

INDICATIONS

- **Acute ST-segment elevation myocardial infarction (STEMI)**
- **Complications of unstable angina and non–Q-wave myocardial infarction (MI)**
- **Prophylaxis of deep vein thrombosis (DVT)**
- **Venous thromboembolism (VTE)**

Also available as:
MedEnoxa 60
Injection (Enoxaparin Sodium 60 mg)



DOSAGE

Administer 1 mg/kg subcutaneously every 12 hours, or 1.5 mg/kg subcutaneously once daily at the same time each day, for hospitalized patients with acute DVT (with or without pulmonary embolism).

***Disclaimer:** Doses may vary depending on individual patient needs and clinical discretion.

1. Enoxaparin Sodium. FDA Label. Available from: https://www.accessdata.fda.gov/drugsatfda_docs/label/2021/020164s129lbl.pdf
2. Enoxaparin. DrugBank [DB01225]. Available from: https://go.drugbank.com/drugs/DB01225 3. American College of Cardiology. Available from: https://www.acc.org/latest-in-cardiology/clinical-trials/2010/02/23/19/03/essence 4. Int J Surg. 2021 May:89:105946. doi: 10.1016/j.ijsu.2021.105946. 5. J Am Coll Cardiol. 2000 Sep;36(3):693-8. doi: 10.1016/s0735-1097(00)00808-1.

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Support Immediate Bleeding Control In Acute Care Settings

MASTER SYLATE

Etamsylate 125 mg/ml

INJECTION



- Well-tolerated hemostatic agent backed by 40+ years of clinical research[1]
- Counteracts aspirin-induced bleeding by reducing blood loss and bleeding time[2]
- Safe and effective alternative to tranexamic acid for hemorrhage prevention post-C-section[3]
- Significantly reduces bleeding days and menstrual flow in intrauterine device users[4]

INDICATIONS

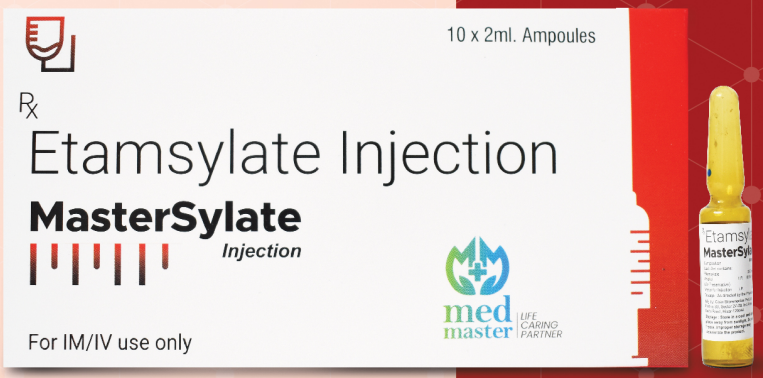
•**Hemorrhage**

Essential For Hemorrhage Care

DOSAGE

Administer at a dose of 5–20 mg/kg.

***Disclaimer:** Doses may vary depending on individual patient needs and clinical discretion.



1. Am J Ther. 2006 May-Jun;13(3):236-47. doi: 10.1097/01.mjt.0000158336.62740.54. 2. Etamsylate. Science Direct. Available from: https://www.sciencedirect.com/topics/medicine-and-dentistry/etamsylate 3. J. Evid. Based Med. Healthc. 2017; 4 (75), 4435-4438. doi: 10.18410/jebmh/2017/883. 4. Gynecol Invest. 1978;9(4):161-5. doi: 10.1159/000300980.

When Airflow Is Critical, Timing Is Everything

ETOMED-T

Etophylline & Theophylline 2 ml **INJECTION**



- Bronchodilators that widen the airways by relaxing the airway muscles, making breathing easier[1,2]
- Offers a better safety profile than monotherapy with a wider therapeutic window[3]
- Effectively alleviates chest tightness, breathlessness, wheezing, and persistent cough[1]
- Safe and effective relief that restores the ability to move and work comfortably[1]

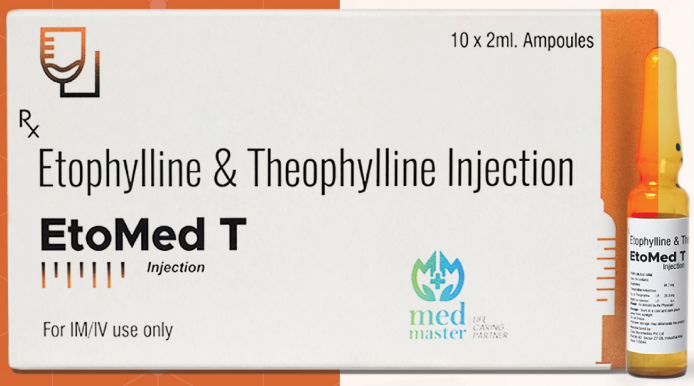
INDICATIONS

- **Asthma**
- **Chronic obstructive pulmonary disease (COPD)**

Restore The Rhythm Of Breath

DOSAGE

Administer as a single IV dose of 4.5 mg/kg, slowly over 5–10 minutes. Do not repeat within 4–6 hours. The maximum single dose should be 250 mg only.



***Disclaimer:** Doses may vary depending on individual patient needs and clinical discretion.

1. Etofylline + Theophylline. 1 mg. Available from: https://www.1mg.com/generics/etofylline-theophylline-401583?srsltid= AfmBOorhh_h2dTURkQ1kr_6Q5hBo5C4eVdlGsdU5k9tIl2AfB-p79bts 2. World Journal of Pharmaceutical Research. Available from: https://www.wisdomlib.org/uploads/journals/wjpr/volume-10,-october-issue-12_17781.pdf 3. J Chromatogr B Analyt Technol Biomed Life Sci. 2007 Apr 1;848(2):271-6. doi: 10.1016/j.jchromb.2006.10.035.

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Stopping Clots Before They Stop Lives

MEDPARIN 25K

Heparin 25000 IU/ 5 ml

INJECTION

- **FDA approved** anticoagulant that helps control clot progression in multiple conditions[1,2]
- Effectively reduces the risk of DVT and pulmonary embolism by up to 70%[3]
- Lowers the risk of myocardial infarction and refractory angina more than aspirin in unstable angina[3]
- Safer alternative to warfarin for preventing recurrent venous thromboembolism[4]



INDICATIONS

- **Atrial fibrillation**
- **Deep vein thrombosis (DVT)**
- **Pulmonary embolism**
- **Blood clot prevention**

Preventing Risks, Protecting Lives

Also available as:

MEDPARIN 5K

Heparin 25000 IU/ 5 ml INJECTION

DOSAGE

Administer as intermittent IV injections (10,000 units initially, then 5,000–10,000 units every 4–6 hours) or as continuous IV infusion (5,000-unit initial injection, then 20,000–40,000 units per day).

***Disclaimer:** Doses may vary depending on individual patient needs and clinical discretion.



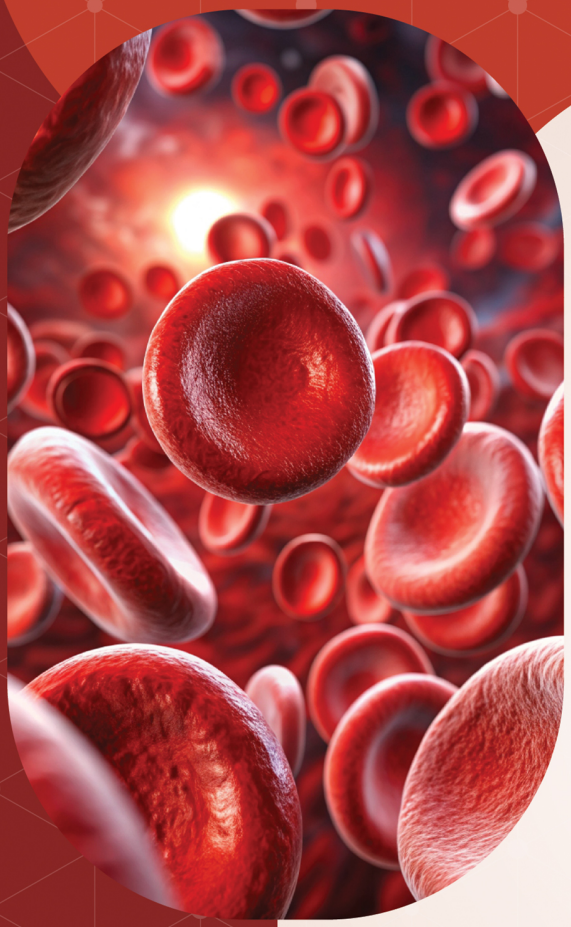
1. Heparin Sodium. FDA Label. Available from: https://www.accessdata.fda.gov/drugsatfda_docs/label/2017/017029s140lbl.pdf
2. Heparin. Drug Bank [DB01109]. Available from: https://go.drugbank.com/drugs/DB01109 3. Circulation. 2001 Jun 19;103(24):2994-3018. doi: 10.1161/01.cir.103.24.2994.4. Nat Rev Cardiol (2017). https://doi.org/10.1038/nrcardio.2017.175.

Restoring Hemoglobin, Restoring Health

MED-FERRIC

Ferric Carboxymaltose 50 mg / ml **INJECTION**

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- **FDA-approved** safe and effective iron replacement therapy for anemia unresponsive or intolerant to oral iron therapy[1,2]
- Offers better and faster restoration of haemoglobin and ferritin than other iron formulations[3]
- Well tolerated therapy that boosts serum iron and transferrin saturation, thus restoring depleted iron stores[4]
- Rapidly accelerates hematopoiesis by boosting iron availability for erythropoiesis[5]

INDICATIONS

- **Iron deficiency anemia**

Boosting Iron, Building Life





DOSAGE

Administer 750 mg IV in two doses at least 7 days apart, or 15 mg/kg up to a maximum of 1,000 mg as a single dose for patients weighing 50 kg or more.

***Disclaimer:** Doses may vary depending on individual patient needs and clinical discretion.

1. Ferric carboxymaltose. FDA Label. Available from: https://www.accessdata.fda.gov/drugsatfda_docs/label/2021/203565s014lbl.pdf
2. Ferric carboxymaltose, DrugBank [DB08917]. Available from: https://go.drugbank.com/drugs/DB08917 3. Clin Drug Investig. 2016 Mar;36(3):177-94. doi: 10.1007/s40261-015-0361-z. 4. Drugs. 2009;69(6):739-56. doi: 10.2165/00003495-200969060-00007.
5. Anemia. 2017 Jul 3;2017:3106890. doi: 10.1155/2017/3106890.

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Targeted Management Of Edema and Hypertension In Complex Cases

FURAMED

Furosemide 2 ml **INJECTION**



- **FDA-approved** loop diuretic, recommended as a second-line therapy for heart failure[1]
- Chosen over thiazide diuretics for treating hypertension[1]
- Leads to greater urine output and sodium excretion with fewer side effects in severe heart failure[2]
- Effectively achieves diuresis in acute heart failure without compromising renal function[3]

INDICATIONS

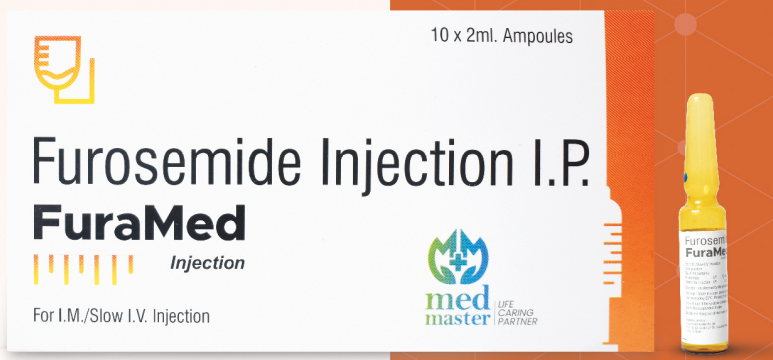
- **Edema in congestive heart failure, hypertension liver cirrhosis, and renal disease**
- **Hypertension**

Simplify Management Of Complex Conditions

DOSAGE

Administer 20–40 mg via IV or IM once; may increase by 20 mg every 2 hours as needed, with a maximum individual dose of 200 mg.

***Disclaimer:** Doses may vary depending on individual patient needs and clinical discretion.



1. Furosemide. NIH StatPearls. Available from: https://www.ncbi.nlm.nih.gov/books/NBK499921/ 2. J Am Coll Cardiol. 1996 Aug;28(2): 376-82. doi: 10.1016/0735-1097(96)00161-1. 3. J Cardiovasc Pharmacol Ther. 2012 Dec;17(4):373-81. doi: 10.1177/1074248412446194.

Quick Relief From Nausea and Vomiting

VOMICALM

Granisetron 1 mg/ml

INJECTION



- **FDA approved,** well tolerated, and highly effective for nausea and vomiting prophylaxis during chemotherapy[1,2]
- Effective even in patients unresponsive to other antiemetic therapies[3]
- Achieves nausea and vomiting control in nearly 87% of patients[3]
- Proven superior among 5-HT3 antagonists for preventing nausea beyond 24 hours post-chemotherapy[4]

INDICATIONS

- **Nausea and vomiting**

Helps Patients Feel Better, Quickly



DOSAGE

Administer 0.01 mg/kg per dose, either by slow IV infusion over 5 minutes or direct IV injection over 30 seconds, 30 minutes before chemotherapy.

***Disclaimer:** Doses may vary depending on individual patient needs and clinical discretion.

1. Granisetron. Drugs@FDA: FDA-Approved Drugs. Available from: https://www.accessdata.fda.gov/scripts/cder/daf/index.cfm?event=overview.process&ApplNo=077177 2. Drugs. 1991 Nov;42(5):805-24. doi: 10.2165/00003495-199142050-00007. 3. J Pain Symptom Manage. 2009 Feb;37(2):259-70. doi: 10.1016/j.jpainsymman.2008.01.014. 4. Granisetron. Science Direct. Available from: https://www.sciencedirect.com/topics/medicine-and-dentistry/granisetron

Helps Relieve Pain During Labour and Muscle Spasms

SPASMOMED

Hyoscine Butylbromide 20 mg/ml

INJECTION



- WGO* and ACG* recommended antispasmodic in use since the 1950's[1,2]
- Effectively decreases the duration of the active phase of labor[1]
- Shortens active labor time by 55-minutes in first-time mothers[1]
- Reliable first-line treatment for abdominal pain due to functional disorders[2]

WGO: World Gastroenterology Organization, ACG: American College of Gastroenterology

INDICATIONS

- **Labor pain**
- **Gastrointestinal and genitourinary spasms**

Comfort During Labour and Beyond

DOSAGE

Administer 20 – 40 mg via slow IV, IM, or subcutaneous route many times a day, not exceeding 100 mg per day.

***Disclaimer:** Doses may vary depending on individual patient needs and clinical discretion.



1. Eur J Obstet Gynecol Reprod Biol. 2020 Sep:252:218-224. doi: 10.1016/j.ejogrb.2020.06.042.
2. Neurogastroenterol Motil. 2023 Apr;35(4):e14451. doi: 10.1111/nmo.14451.

Targeted Injectable Therapy For Anemia In CKD Patients

FENAMED

Iron Sucrose

INJECTION

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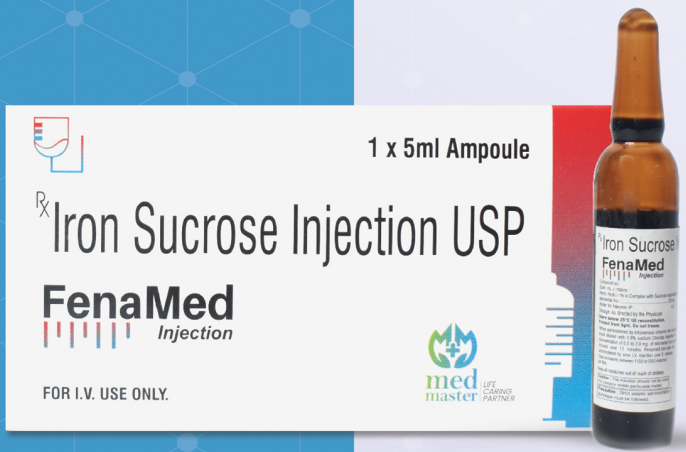


- **FDA-approved,** safe drug with over 25 million patient-years of clinical experience[1,2,3]
- Clinically used for 70 years, effective, well-tolerated, and rapidly boosts bioavailable iron[2]
- Delivers a mean hemoglobin rise of 3.29–4.58 g/dL, correcting anemia in over 70% of patients[3]
- Proven to raise hemoglobin and iron stores faster than oral iron[4]

INDICATIONS

- **Iron deficiency anemia is associated with chronic kidney disease**

Restores Iron Levels Safely and Effectively



DOSAGE

Administer 100 mg IV per dialysis session, up to 3 doses per week, not exceeding 1000 mg total per treatment cycle for hemodialysis-dependent CKD. Administer 200 mg IV injection per dose, given 5 times within 14 days to achieve a total dose of 1000 mg for non-dialysis-dependent CKD.

***Disclaimer:** Doses may vary depending on individual patient needs and clinical discretion.

1. Iron Sucrose. Drug Approval Package. Available from: https://www.accessdata.fda.gov/drugsatfda_docs/nda/2000/21135_Venofer.cfm 2. Adv Ther. 2020 Apr 15;37(5):1960–2002. doi: 10.1007/s12325-020-01323-z. 3. Rev Bras Hematol Hemoter. 2011;33(6):439–443. doi: 10.5581/1516-8484.20110119. 4. Int J Reprod Contracept Obstet Gynecol 8, no. 6 (2019): 2444-8. doi: http://dx.doi.org/10.18203/2320-1770.ijrcog20192447.

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Helps Most Patients Reach Target Bp Within An Hour

MM-LABETA

Labetalol 20 mg/4 ml

INJECTION



- **FDA-approved,** beta-adrenergic antagonist with long duration of action and wide therapeutic window[1,2]
- Helps 60% of neurosurgical patients reach target blood pressure (BP) within 1 hour[3]
- Rapidly controls BP in emergencies without compromising cardiac output or stroke volume[2,4]
- Achieves targeted BP reduction in 93% of preeclampsia/eclampsia cases with no major side effects[5,6]

INDICATIONS

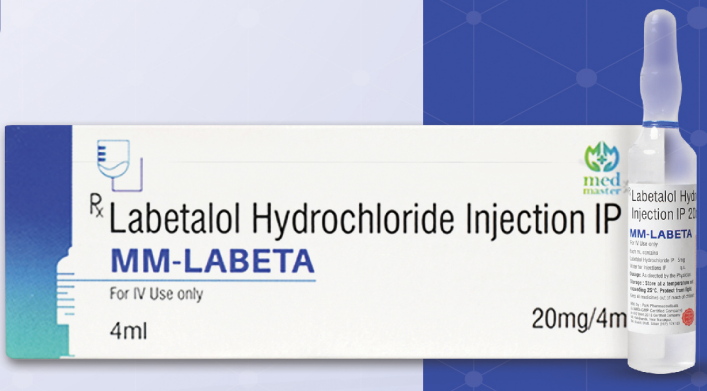
- **Arterial hypertension**
- **Preeclampsia/eclampsia**

Trusted for Managing High Blood Pressure in Emergencies

DOSAGE

Administer 50–200 mg intravenously via slow continuous infusion or repeated injection.

***Disclaimer:** Doses may vary depending on individual patient needs and clinical discretion.



1. Labetalol. FDA Label. Available from: https://www.accessdata.fda.gov/drugsatfda_docs/label/2023/213330s005lbl.pdf 2. Labetalol. DrugBank [DB00598]. Available from: https://go.drugbank.com/drugs/DB00598 3. J Int Med Res. 2023 Nov;51(11):3000605231212316. doi: 10.1177/03000605231212316. 4. Am J Med. 1983 Oct 17;75(4A):95-102. doi: 10.1016/0002-9343(83)90141-9. 5. Journal of the Practice of Cardiovascular Sciences 8(3):p 144-151, Sep-Dec 2022. doi: 10.4103/jpcs.jpcs_69_22. 6. Journal of Family Medicine and Primary Care 13(9):p 3788-3791, September 2024. doi : 10.4103/jfmpc.jfmpc_185_24.

Fast, Safe, And Effective Seizure Control Begins With...

MM-LEVITA

Levetiracetam 5 ml

INJECTION

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- **FDA-approved,** and WHO recommended first-line antiepileptic for many types of seizures1,2
- Well-tolerated with no cognitive impairment or long-term side effects and a wide therapeutic range[2]
- More effective than carbamazepine for newly diagnosed partial onset seizures2
- Achieves 89% seizure control at 24 hours across emergency settings3
- Desirable choice over other anti-epileptics due to minimal pharmacokinetic interactions4

INDICATIONS

- **Epilepsy**
- **Myoclonic and partial seizures**
- **Primary generalized tonic-clonic seizures**

Trusted First-line Option For Many Types Of Seizures





DOSAGE

Administer 500 mg twice daily, increasing by 250–500 mg every 1–2 weeks based on clinical response; do not exceed 3000 mg/day.

***Disclaimer:** Doses may vary depending on individual patient needs and clinical discretion.

1. Levetiracetam. NIH StatPearls. Available from: https://www.ncbi.nlm.nih.gov/books/NBK499890/#:~:text=In%20addition%2C%20the%20FDA%20approved%20intravenous%20levetiracetam%20(LEV)%20in,oral%20formulation%20is%20not%20tolerated. 2. Levetiracetam. WHO Expert Committee on Selection and Use of Essential Medicines. Available from: https://cdn.who.int/media/docs/default-source/essential-medicines/2023-eml-expert-committee/expert-reviews/a24_leviteracetam_rev2.pdf?sfvrsn=845fe63b_1 3. Curr Ther Res Clin Exp. 2021 Oct 24:95:100648. doi: 10.1016/j.curtheres.2021.100648. 4. Levetiracetam. PubChem [5284583]. Available from: https://pubchem.ncbi.nlm.nih.gov/compound/Levetiracetam

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A Reliable Choice For Improving Performance In Cardiac and Dialysis Patients

MEDCARNI

Levocarnitine 5 ml

INJECTION



- **FDA-approved,** well-tolerated drug that boosts heart function and eases CHF symptoms[1,2]
- Demonstrates 3.47 times higher overall efficacy in CHF patients[2]
- Improves LVEF* by 4.14%, stroke volume by 8.21 ml, and cardiac output by 0.88 L/min[2]
- Boosts ESA** response and reduces dose requirements in renal anemia patients on hemodialysis[3]
- Helps preserve muscle mass and physical strength in dialysis patients with carnitine deficiency[4]

* LVEF: Left ventricular ejection fraction
** ESA: Erythropoiesis-stimulating agent

INDICATIONS

- **Carnitine deficiency**
- **Chronic heart failure (CHF)**
- **End-stage renal disease**

DOSAGE

Administer 50 mg/kg IV as an initial bolus, then 50 mg/kg IV over the next 24 hours divided every

***Disclaimer:** Doses may vary depending on individual patient needs and clinical discretion.



1. Levocarnitine. FDA Label. Available from: https://www.accessdata.fda.gov/drugsatfda_docs/nda/99/20182S6_carnitor%20injection_approv.pdf https://www.accessdata.fda.gov/drugsatfda_docs/label/2018/020182s015lbl.pdf 2. Biomed Res Int. 2017 Apr 13;2017:6274854. doi: 10.1155/2017/6274854. https://pmc.ncbi.nlm.nih.gov/articles/PMC5406747/ 3. Cardiorenal Med. 2017 Apr 20;7(3):188–197. doi: 10.1159/000462983.
4. Eur J Clin Nutr. 2019 Feb;73(2):293-301. doi: 10.1038/s41430-018-0348-y.

Targeted Support For Nausea, Vomiting, and Upper Gi Distress

MASTERPRIDE

Levosulpiride 12.5 mg/ml

INJECTION



- Antiemetic drug used as a second-line treatment for drug-induced nausea and vomiting[1,2]
- Proven superior pharmacological activity compared to dextro enantiomer[3]
- Effective and well-tolerated prokinetic that improves gastric motility and relieves dyspepsia[4,5,6]

INDICATIONS

- **Dyspepsia**
- **Drug-induced nausea and vomiting**

Effective Control Of Nausea and Dyspepsia



DOSAGE

Mean dosage of 100-200 mg/day can be administered in the elderly intramuscularly or intravenously.

***Disclaimer:** Doses may vary depending on individual patient needs and clinical discretion.

1. Levosulpiride. DrugBank [DB16021]. Available from: https://go.drugbank.com/drugs/DB16021 2. Levosulpiride. PubChem [688272]. Available from: https://pubchem.ncbi.nlm.nih.gov/compound/Levosulpiride 3. Acta Pharm Sin B. 2014 Oct;4(5):402-7. doi: 10.1016/j.apsb.2014.06.001. 4. Korean J Intern Med. 1998 Feb;13(1):15–21. doi: 10.3904/kjim.1998.13.1.15. 5. Aliment Pharmacol Ther. 2021 Jan ;53(1) :8-21. doi: 10.1111/apt.16072. 6. GJCMMR. 2024; 2(1): 9-15. Available from: https://gsarpublishers.com/wp-content/uploads/2024/01/GJCMMR732023-Gelary-script.pdf

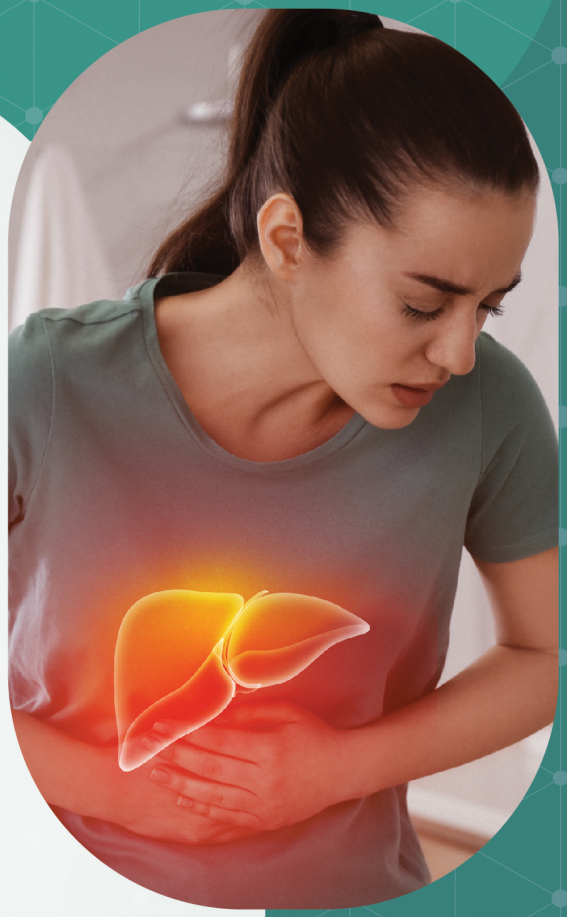
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Stabilize Liver Function And Reduce Neurotoxins...

LIVEROPTUM

L-Ornithine L-Aspartate 5 gm/10 ml

INJECTION



- Trusted for over 50 years to effectively reduce ammonia levels and improve clinical outcomes in HE[1,2]
- Improves liver function markers—including enzymes, bilirubin, prothrombin time, and MELD* scores in cirrhosis and HE[1]
- Hepatoprotective drug clinically proven to improve the mental state inHE[1]
- Demonstrates a superior side effect profile compared to lactulose[1]
- Reverses overt HE in 5 days, while reducing hospital stay and treatment time[3]

* MELD: Model of end-stage liver disease

INDICATIONS

- **Cirrhosis of liver**
- **Chronic liver disease**
- **Hepatic encephalopathy (HE)**

Restore liver stability

DOSAGE
Administer 20 g via intravenous infusion over 4 hours.

***Disclaimer:** Doses may vary depending on individual patient needs and clinical discretion.



1. J Clin Exp Hepatol. 2018 Sep 5;8(3):219–221. doi: 10.1016/j.jceh.2018.08.007. 2. Drugs. 2019 Feb;79 (Suppl 1):39–44. doi: 10.1007/s40265-018-1020-5.
3. Ornithine Aspartate. Science Direct. Available from: https://www.sciencedirect.com/topics/medicine-and-dentistry/ornithine-aspartate

Prevent Bleeding Complications Before They Begin

VITA K MED

Menadione Sodium Bisulfite 10 mg/1 ml

INJECTION



- Trusted supplement for managing hemorrhagic conditions due to low vitamin K[1,2]
- Acts as a vitamin K analogue to maintain healthy coagulation function[1]
- Supports normal blood clotting by aiding the production of key clotting factors (II, VII, IX, X) and anticoagulant proteins[1]

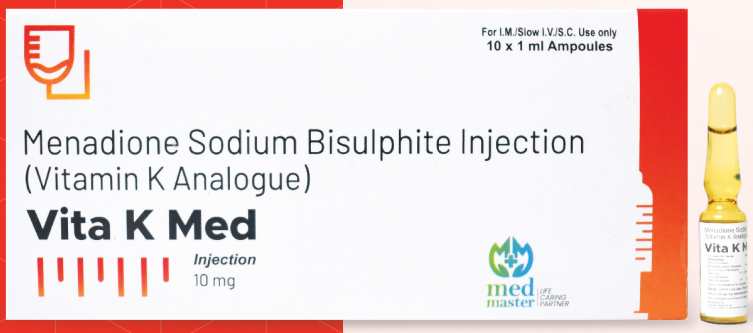
INDICATIONS

- **Vitamin K deficiency**

Critical In Deficiency

Also available as:

VITA MED-K 1



DOSAGE

Administer 10 to 25 mg IM injection once daily, based on the severity of vitamin K deficiency

***Disclaimer:** Doses may vary depending on individual patient needs and clinical discretion.

1. Menadione Sodium Bisulfite. 1 mg. Available from: https://www.1mg.com/generics/menadione-sodium-bisulfite-211788?srsltid=AfmBOorsirGmohs_jonTAOpWAOwk2jf_phIW33OX7GH_I5XJq93ufv3p 2. Biochim Biophys Acta Gen Subj. 2018 Oct;1862(10):2226-2235. doi: 10.1016/j.bbagen.2018.07.019.

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When Diabetes Damages Nerves, Support Becomes Essential

B SYNERGY 1500 INJECTION

Methylcobalamin 1500 mg, Pyridoxine Hydrochloride 100 mg, and Nicotinamide 100 mg



- **CDSCO-approved** neurorestorative, neuro re-energizing and neuroregenerative agent[1,2]
- Multivitamin that promotes nerve repair and protection in diabetic neuropathy[1,2,3]
- Restores structural and functional nerve integrity with proven therapeutic value[2]
- Prevents vitamin deficiency and restores essential nutrients to combat anemia and nerve issues[3]

INDICATIONS

- **Diabetic neuropathy**
- **Nutritional**

Supports Nerves, Restores Function

DOSAGE

Administer via IM or IV infusion, 3 times a week for 4–8 consecutive weeks.

***Disclaimer:** Doses may vary depending on individual patient needs and clinical discretion.



Also available as:

B SYNERGY 2500 INJECTION

(Methylcobalamin 2500 mg, Pyridoxine Hydrochloride 100 mg, and Nicotinamide 100 mg)

1. Fixed dose combinations approved by the DCG. Available from: https://cdsco.gov.in/opencms/resources/UploadCDSCOWeb/2018/ Upload Approval NewDrugs/dciApprovedfdc.pdf 2. Indian J. Clin. Pract. 2009 Jun;20:17-21. Available from: https://www.researchgate.net/ publication/289916259 _Methylcobalamin_pyridoxine_and_nicotinamide_in_diabetic_neuropathy_A_review 3. Methylcobalamin + Nicotinamide + Pyridoxine Hydrochloride. 1 mg. Available from: https://www.1mg.com/generics/methylcobalamin-nicotinamide-pyridoxine-hydrochloride-510106?srsltid= AfmBOoosmA8GqZbH27O2gH70EbchfS0alcOa4bV7QHiL6WRBKB-qGOGV

Rheumatic And Orthopedic Conditions Demand More Than Just Pain Relief

MPS-A MASTER

Methylprednisolone Acetate 80 mg/2 ml

INJECTION



- **FDA approved** anti-inflammatory glucocorticoid having superior potency than prednisone[1,2]
- Marked pain and mobility improvement seen within 4 weeks in NSSP[3]
- Provides greater pain relief and functional gains than piroxicam in NSSP[3]
- Exhibits superior clinical outcomes in trigger finger than dexamethasone[4]

*NSSP: Non-specific shoulder pain

INDICATIONS

- **Rheumatic And Orthopedic Disorders**

Treat inflammation, Restore mobility



DOSAGE

Administer 40–120 mg intramuscularly once weekly, based on condition severity and clinical response.

***Disclaimer:** Doses may vary depending on individual patient needs and clinical discretion.

1. Methylprednisolone acetate. Center for Drug Evaluation and Research. Available from: https://www.accessdata.fda.gov/drugsatfda_docs/anda/2006/040620Orig1s000.pdf 2. Methylprednisolone acetate. DrugBank [DBSALT001157]. Available from: https://go.drugbank.com/salts/DBSALT001157 3. J Acupunct Res 2024;41:357-367. https://doi.org/10.13045/jar.24.0041. 4. J Hand Surg Am 2005;30:479-82. doi: http://dx.doi.org/10.31584/jhsmr.2021794.

Dual-action Therapy That Restores Strength And Mobility

NANDROMED

Nandrolone Decanoate

INJECTION

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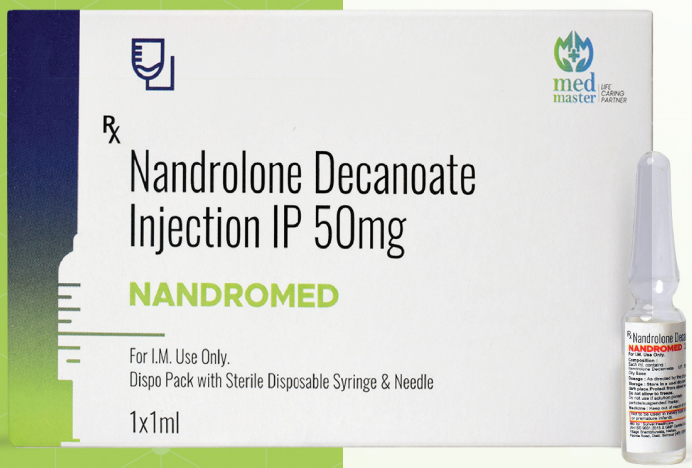


- **CDSCO approved** anabolic steroid for treating kidney-related anemia[1,2]
- Exhibits a progressive increase in hemoglobin and hematocrit levels after six months[3]
- Ensures anemia control and improved nutritional condition in dialysis patients[3]
- Improves chronic anemia in rheumatoid arthritis without affecting bone metabolism[4]

INDICATIONS

- **Anemia due to renal insufficiency**
- **Rheumatoid arthritis**

Gives Better Quality Of Life



DOSAGE

Administered in total doses ranging from 800 mg to 2250 mg depending on the condition.

***Disclaimer:** Doses may vary depending on individual patient needs and clinical discretion.

1. Nandrolone decanoate. CDSCO. Available from: https://cdscoonline.gov.in/CDSCO/Drugs 2. Nandrolone decanoate. DrugBank [DB08804]. Available from https://go.drugbank.com/drugs/DB08804 3. Geriatr Nephrol Urol. 1999;9(2):67-72. doi: 10.1023/a:1008306301255.

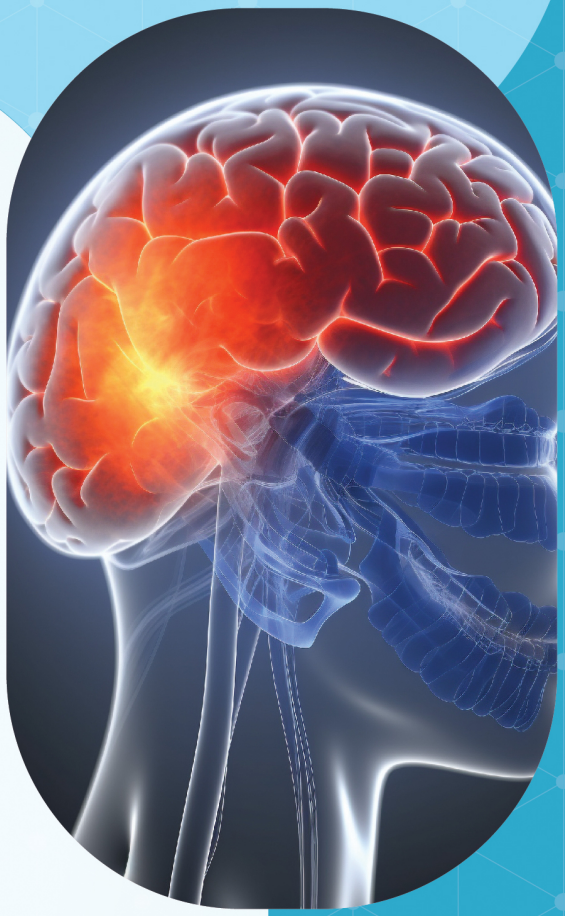
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When Shock Strikes, B1 Saves

B1 BOOST MED

Thiamine 2 ml

INJECTION



- FDA approved, water-soluble B vitamin recommended for Wernicke encephalopathy[1,2]
- Enhances outcomes and increases survival without need for renal replacement therapy in septic shock[3]
- Significantly lowers diastolic and mean arterial pressure, with a trend toward reduced systolic pressure[4]
- Improves LVEF* by 3.9%, showing cardiac benefit in diuretic-treated chronic heart failure patients[5]

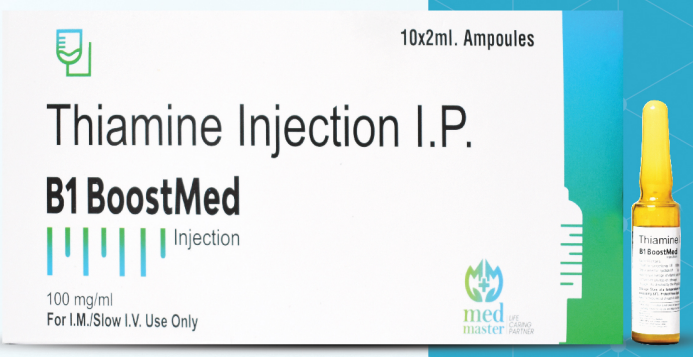
INDICATIONS

- **Cardiovascular disease due to thiamine deficiency**
- **Septic shock**
- **Wernicke encephalopathy**

The Trusted Shot In Critical Times

DOSAGE
Administer 100 mg IV/IM per day for 3 to 5 days.

***Disclaimer:** Doses may vary depending on individual patient needs and clinical discretion.



1. Vitamin B1 (Thiamine). NIH StatPearls. Available from: https://www.ncbi.nlm.nih.gov/books/NBK482360/#:~:text=Thiamine%20is%20approved%20by%20the,disease%20resulting%20from%20thiamine%20deficiency. 2. Indian J Psychiatry. 2021 Apr 14;63(2):121–126. doi: 10.4103/psychiatry.IndianJPsychiatry_440_20. 3. Crit Care. 2024 Feb 6;28(1):41. doi: 10.1186/s13054-024-04818-1. 4. Diabetes Metab Syndr. 2015 Oct-Dec;9(4):213-7. doi: 10.1016/j.dsx.2015.04.014. 5. Clin Res Cardiol. 2012 Mar;101(3):159-64. doi: 10.1007/s00392-011-0376-2.

From weakness to wellness

OMNIMASTER

INJECTION

Vit A 10000 IU, Vit D3 1000 IU, Vit E 5 mg, Thiamine 5 mg, Pyridoxine 15 mg, Riboflavin 14 mg, Ascorbic Acid 500 mcg, Nicotinamide 100 mg, D-Panthenol 25 mg, Benzyl Alcohol 1.5% v/v WFI

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- Supports the body's natural defense with antioxidant, anti-inflammatory, and antimicrobial actions[1]
- Clinically proven to relieve pain, numbness, and paraesthesia in over 80% of patients within 4 weeks in DPN[2]
- Improves overall fatigue symptoms, promotes wound healing, and also supports iron mobilization and absorption[3,4]
- Safely slows cognitive decline by improving verbal memory and sustaining cognitive function[5]

INDICATIONS

- **General debility and fatigue**
- **Diabetic peripheral neuropathy (DPN)**
- **Metabolic and cognitive support**
- **Vitamin deficiency**
- **Wound healing**





The Trusted Multivitamin For Faster Recovery

DOSAGE

Administer one daily dose of 10 mL diluted in at least 500 mL, preferably 1,000 mL, of IV dextrose, saline, or similar infusion solution.

***Disclaimer:** Doses may vary depending on individual patient needs and clinical discretion.

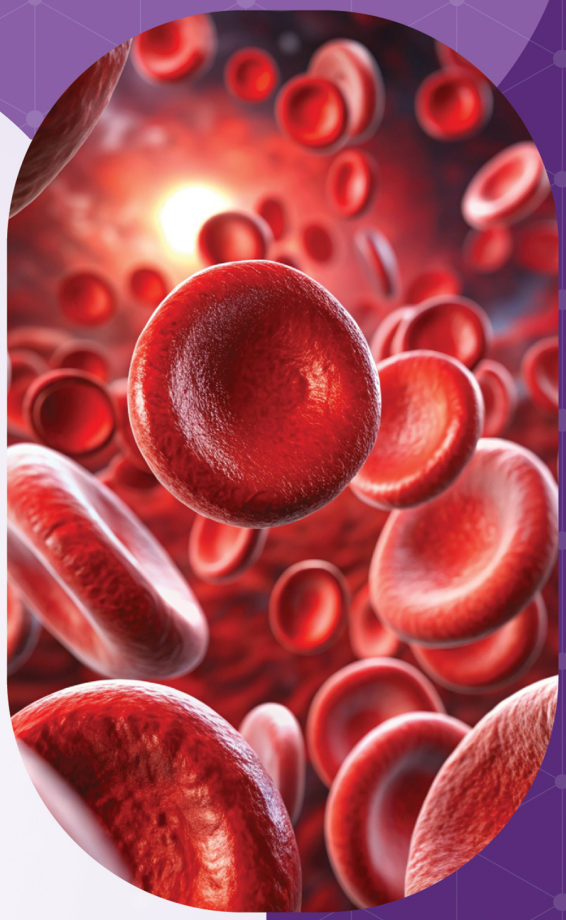
1. Pharmacol Rep. 2023 Sep 6;75(5):1096–1114. doi: 10.1007/s43440-023-00520-1. 2. East Afr Med J. 1997 Dec;74(12):803-8. 3. Nutrients. 2020 Jan 16;12(1):228. doi: 10.3390/nu12010228. 4. Curr Issues Mol Biol. 2021 Sep 28;43(3):1361–1373. doi: 10.3390/cimb43030097. 5. Am J Clin Nutr. 2023 Jul;118(1):273-282. doi: 10.1016/j.ajcnut.2023.05.011.

Helping You Manage Bleeding, Case After Case

HEMOSTATMED

Tranexamic Acid 500 mg/5 ml

INJECTION



- **FDA-approved** safe and effective, well-tolerated antifibrinolytic for diverse bleeding conditions[1,2,4]
- Decreases relative risk of death due to bleeding by 32% if given within 1 hour post injury[3]
- Reduces rebleeding risk and decreases hospital stay duration in upper GI bleeds5
- Lowers blood loss and transfusion need post-dental extraction in hemophilia without side effects[6]
- Improves quality of life and lowers death risk in heavy menstrual and postpartum bleeding[7]

INDICATIONS

- **Hemophilia**
- **Menorrhagia**
- **Prevent hemorrhage**
- **Post-tooth extraction in hemophilic patients**

Achieve Comprehensive Bleeding Control

DOSAGE

Administer 10 mg/kg IV before dental extraction and 1 g IV diluted in 100 mL normal saline, infused over 10 minutes for postpartum hemorrhage or trauma-related bleeding.

***Disclaimer:** Doses may vary depending on individual patient needs and clinical discretion.



1. Eur J Haematol. 2019 Dec 16;104(2):79–87. doi: 10.1111/ejh.13348. 2. Tranexamic Acid. FDA Label. Available from: https://www.accessdata.fda.gov/drugsatfda_docs/label/2021/019281s047lbl.pdf 3. Tranexamic Acid. NIH StatPearls. Available from: https://www.ncbi.nlm.nih.gov/books/NBK532909/ 4. Braz J Anesthesiol. 2021 Oct 7;72(6):795–812. doi: 10.1016/j.bjane.2021.08.022. Cureus. 2023 Jan 8;15(1):e33503. doi: 10.7759/cureus.33503. 6. Br Med J. 1972 May 6;2(5809):311-3. 7. Res Pract Thromb Haemost. 2024 Mar 19;8(3):102389. doi: 10.1016/j.rpth.2024.102389

Powerful Anti-inflammatory And Anti-allergic Treatment For A Variety Of Conditions.

YANACORT

Triamcinolone Acetonide 40 mg/ml

INJECTION

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- **FDA-approved** anti-inflammatory and anti-allergic treatment for diverse skin infections[1,2]
- Improves visual acuity up to 24% and reduces central foveal thickness by 28% in DME[3]
- Delivers a 71% reduction in keloid size compared to 57% by 5-fluorouracil[4]
- Effectively treats prednisone-resistant asthma with fewer side effects than prednisone[5]
- Reduces pain and improves quality of life in symptomatic knee osteoarthritis[6]

INDICATIONS

- **Asthma**
- **Diabetic macular edema (DME)**
- **Osteoarthritis**
- **Seasonal or allergic rhinitis**
- **Skin conditions**



Reducing Symptoms, Improving Lives

DOSAGE

Administer 60 mg IM every 6 weeks for arthritis; 40–80 mg IM for inflammatory or allergic conditions.

***Disclaimer:** Doses may vary depending on individual patient needs and clinical discretion.

1. Triamcinolone Acetonide. Center for Drug Evaluation and Research. Available from: https://www.accessdata.fda.gov/ drugsatfda_docs/nda/ 2008/022220s000_Approv.pdf
2. Triamcinolone Acetonide. PubChem [6436]. Available from: https://pubchem.ncbi.nlm. nih.gov/compound/Triamcinolone-Acetonide 3. PLoS One. 2021 Oct 1;16(10):e0257695. doi: 10.1371/journal.pone.0257695. 4. Journal of the Scientific Society 39(1):p 19-25, Jan–Apr 2012. doi: 10.4103/0974-5009.96466. 5. Arch Bronconeumol. 2008 Jun;44(6):324-7. 6. BMC Musculoskelet Disord. 2023 Feb 3;24:92. doi: 10.1186/s12891-023-06191-6.

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Calm The Chaos

MEDVALPRO

Sodium Valproate 100 mg/ml

INJECTION

- FDA approved and WHO recommended first line drug for generalized onset seizures[1,2]
- Offers rapid relief in acute migraine, with meaningful headache reduction seen within 2 hours[3]
- Proven effective and safe as a mood stabilizer in mania[4]
- Outperforms lamotrigine with higher long-term seizure freedom rates[5]



INDICATIONS

- **Epilepsy**
- **Mania**
- **Migraine**

Restore Neurological Balance



DOSAGE

Administer starting dose of 10–15 mg/kg/-day, increasing by 5–10 mg/kg/week until optimal clinical response is achieved.

***Disclaimer:** Doses may vary depending on individual patient needs and clinical discretion.

1. Valproate sodium. FDA Label. Available from: https://www.accessdata.fda.gov/drugsatfda_docs/label/2013/020593s026lbl.pdf 2. Mental Health, Brain Health and Substance Use. WHO. Available from: https://www.who.int/teams/mental-health-and-substance-use/treatment-care/mental-health-gap-action-programme/evidence-centre/epilepsy-and-seizures/antiseizure-medicines-for-management-of-epilepsy-in-adults-and-children 3. Neuro Endocrinol Lett. 2007 Feb;28(1):59-64. 4. Indian J Psychiatry. 2006 Apr-Jun;48(2):118–120. doi: 10.4103/0019-5545.31603. 5. Seizure. 2017 Oct:51:95-101. doi: 10.1016/j.seizure.2017.08.001.

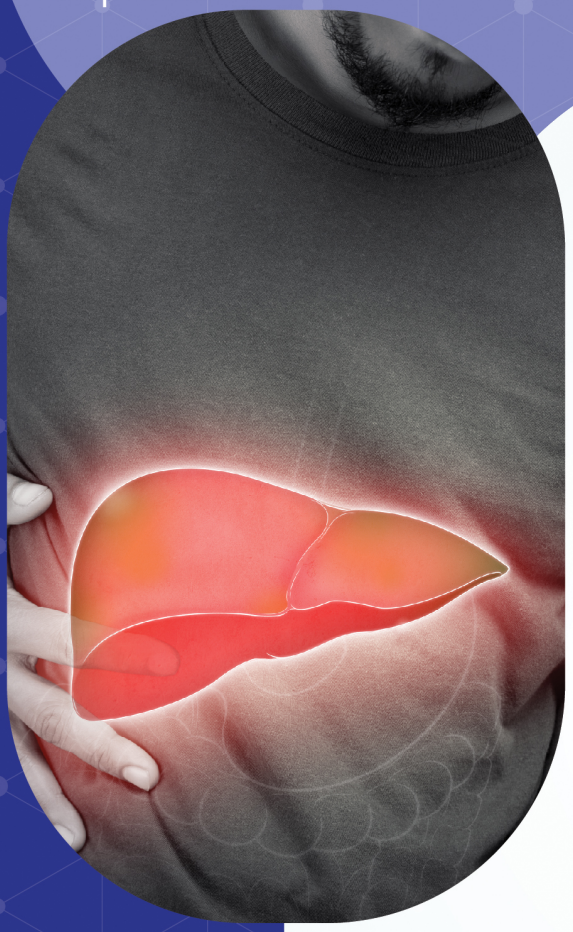
For Life-threatening Bleeds...

TERLIPRESMED

Terlipressin 10 ml

INJECTION

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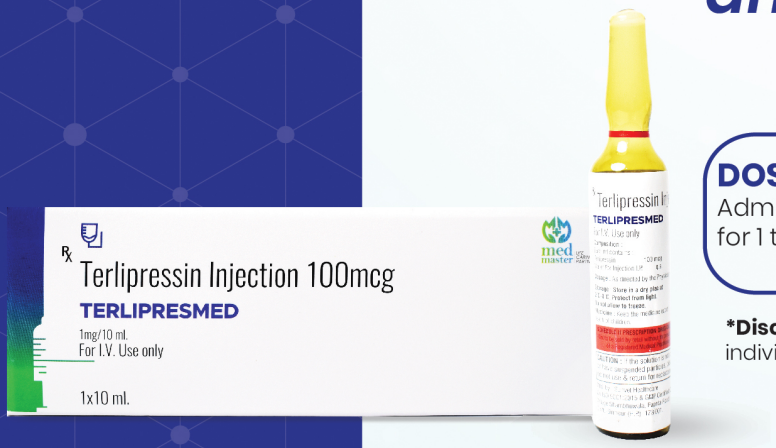


- FDA-approved preferred vasoactive agent for ACH with a good safety profile[1]
- Achieves bleeding control within 48 hours and reduces in-hospital mortality in ACH[2]
- Potent vasopressor that lowers rebleeding risk while ensuring haemostasis in variceal bleeding[3,4]
- Offers advantage over endogenous vasopressin due to its longer half-life and greater V1 receptor selectivity[4]
- Effectively improves HRS reversal, creatinine levels, and renal function in HRS type 1[5]

INDICATIONS

- **Hepatorenal syndrome (HRS)**
- **Acute variceal hemorrhage (ACH)**

Acts quickly when liver and kidney are in danger



DOSAGE

Administer 0.85 mg IV every 6 hours for 1 to 3 days.

***Disclaimer:** Doses may vary depending on individual patient needs and clinical discretion.

1. Cochrane Database Syst Rev. 2003 Jan 20;2003(1):CD002147. doi: 10.1002/14651858.CD002147. 2. Medicine (Baltimore). 2018 Nov;97(48):e13437. doi: 10.1097/MD.0000000000013437. 3. Gastroenterology guideline: Terlipressin. NHS. Available from: https://www.gloshospitals.nhs.uk/media/documents/Terlipressin_Pal1AUr.pdf 4. Terlipressin. PubChem [72081]. Available from: https://pubchem.ncbi.nlm.nih.gov/compound/Terlipressin 5. Gastroenterology. 2008 May;134(5):1360-8. doi: 10.1053/j.gastro.2008.02.014.

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In Cardiac Arrest, Timing Is Life.

NORAMED

Noradrenaline 2 ml

INJECTION



- **FDA-approved,** listed in the National List of Essential Medicines by CDSCO[1,2]
- First-line drug for hypotension that prevents incidence with minimal adverse effects[2,3]
- Decreases hypotension by 37.9% while maintaining blood pressure stability[3]
- Lowers the chances for recurrent cardiac arrest by 63%[4]
- Reduces mortality, fluid overload, and time to stabilize MAP*, while increasing ventilator-free days in septic shock[5]

*MAP: Mean arterial pressure

INDICATIONS

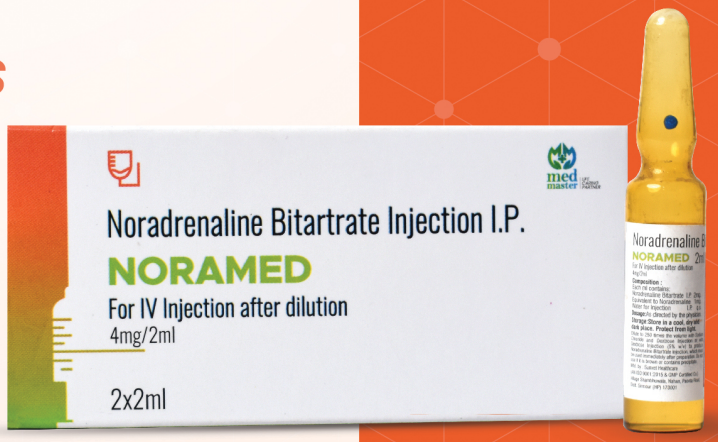
- **Cardiac arrest**
- **Hypotension**
- **Septic shock**

A Single Solution For Life-threatening Lows

DOSAGE

Administer noradrenaline starting at 8–12 µg/min, then titrate to maintain target blood pressure; typical maintenance dose ranges from 2–4 µg/min.

***Disclaimer:** Doses may vary depending on individual patient needs and clinical discretion.



1. Noradrenaline. National List of Essential Medicines (2022). Available from: https://cdsco.gov.in/opencms/resources/UploadCDSCOWeb/2018/UploadConsumer/nlem2022.pdf 2. Norepinephrine. NIH StatPearls. Available from: https://www.ncbi.nlm.nih.gov/books/NBK537259/
3. Biomed Res Int. 2018 May 23;2018:2708175. 4. Am J Emerg Med. 2025 May 22:95:107-114. doi: 10.1016/j.ajem.2025.05.038.
5. Crit Care. 2025 May 6;29(1):182. doi: 10.1186/s13054-025-05400-z.

When Growth Hormone Overwhelms Or Bowel Activity Disrupts..

OCTREOMED HS

Octreotide 50 mcg

INJECTION



- **FDA-approved** peptide drug offering valuable long-term treatment for acromegaly1,2,3
- Clinically more effective than bromocriptine in treating acromegaly4
- First-line therapy for reducing stool and fistula output in high-output secretory diarrhea4
- Alleviates headache, fatigue, sweating, and joint pain in up to 95% of patients with acromegaly3
- Normalizes plasma IGF-I* levels in 64% of patients over long-term treatment3

*IGF-I: Insulin-like growth factor I

INDICATIONS

- **Acromegaly**
- **Diarrhea**

Calms The Urgency

Also available as:

OCTEROMED -DS



DOSAGE

Administer 50 mcg three times daily for 2 weeks, then maintain with 100–500 mcg three times daily based on response.

***Disclaimer:** Doses may vary depending on individual patient needs and clinical discretion.

1. Octreotide. FDA Label. Available from: https://www.accessdata.fda.gov/drugsatfda_docs/label/2023/019667s076lbl.pdf+ 2. Octreotide. DrugBank [DB00104]. Available from: https://go.drugbank.com/drugs/DB00104 3. J Clin Endocrinol Metab. 1995 Sep;80(9):2768-75. doi: 10.1210/jcem.80.9.7673422. 4. Octreotide. NIH StatPearls. Available from: https://www.ncbi.nlm.nih.gov/books/NBK544333/

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Block The Nausea, Boost The Recovery

ONDAMED

Ondansetron 2 ml

INJECTION



- **FDA-approved,** serotonin receptor antagonist for nausea and vomiting[1,2]
- Reduces early postoperative vomiting and pain in appendectomy patients as early as 2 hours[3]
- Safe antiemetic listed in the WHO's list of essential medicines[4]
- Proven effective in managing acute and delayed CINV with a good safety profile[5]

INDICATIONS

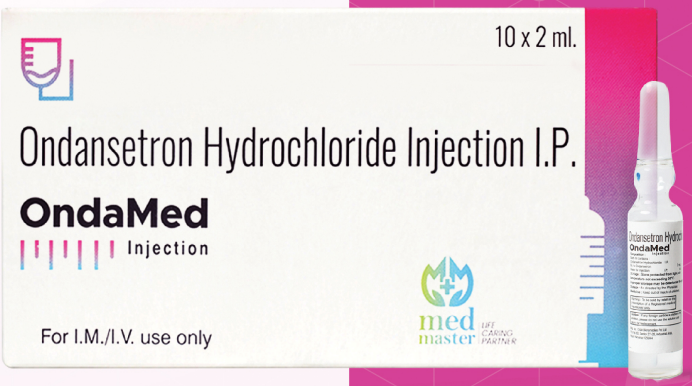
- **Prevention of postoperative nausea and vomiting**
- **Chemotherapy-induced nausea and vomiting (CINV)**

For Smoother Recoveries and Satisfied Outcomes

DOSAGE

Administer ondansetron 0.15 mg/kg IV over 15 minutes, starting 30 minutes before chemotherapy, then repeat at 4 and 8 hours after the first dose; maximum total dose not to exceed 16 mg

***Disclaimer:** Doses may vary depending on individual patient needs and clinical discretion.



1. Ondansetron. Drugs@FDA. Available from: https://www.accessdata.fda.gov/scripts/cder/daf/index.cfm?event=overview.process&ApplNo=079032
2. Ondansetron. DrugBank [DB00904]. Available from: https://go.drugbank.com/drugs/DB00904 3. Pain Res Manag. 2024 Jun 12:2024:6429874. doi: 10.1155/2024/6429874. 4. Ondansetron. NIH StatPearls. Available from: https://www.ncbi.nlm.nih.gov/books/NBK499839/
5. Front Pharmacol. 2023 Nov 23;14:1310455. doi: 10.3389/fphar.2023.1310455.

A Complete Solution For Fever And Pain

MASDOL

Paracetamol 150 mg/ml

INJECTION

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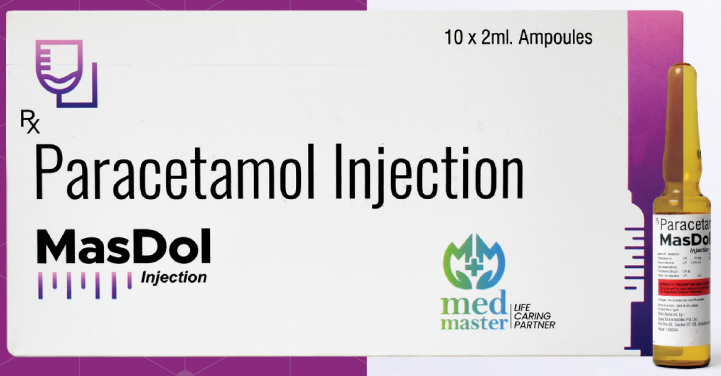


- Trusted first-line analgesic for fever and acute pain, with FDA approval and global use1,2
- Significantly reduces labor pain and shortens delivery time, boosting natural birth satisfaction3
- WHO-endorsed standard treatment for pain, trusted for over a century4
- Antipyretic for rapid and sustainable fever reduction in 80% of patients within 3 hours4,5

INDICATIONS

- **Pain Management**
- **Fever**

Fast-acting Therapy



DOSAGE

Administer 1 g every 4–6 hours (maximum 4 g/day) in adults >50 kg; for adults <50 kg, administer 15 mg/kg every 4–6 hours (maximum 60 mg/kg/day or 3 g/day).

***Disclaimer:** Doses may vary depending on individual patient needs and clinical discretion.

1. Acetaminophen. Drugs@FDA. Available from: https://www.accessdata.fda.gov/scripts/cder/daf/index.cfm?event=BasicSearch.process 2. Temperature (Austin). 2021 Mar 16;8(4):351–371. doi: 10.1080/23328940.2021.1886392. 3. J Pharm Bioallied Sci. 2025 Apr 17;17(Suppl 1):S745–S747. doi: 10.4103/jpbs.jpbs_1629_24. 4. Acetaminophen. DrugBank [DB00316]. Available from: https://go.drugbank.com/drugs/DB00316 5. Br J Clin Pharmacol. 2016 Dec 7;83(4):742–750. doi: 10.1111/bcp.13173.

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Allergy Care Made Simple

PHENIMED

Pheniramine Maleate

INJECTION

- Potent antiallergic agent widely used for managing rhinitis and allergic conditions[1]
- Significantly reduces fentanyl-induced cough from 20% to 2.5%, outperforming lidocaine[2]
- Provides a more cost-effective alternative to cinnarizine with good efficacy for motion sickness[3]
- Preferred daytime antihistamine with potent H1-blocking action and lower risk of sedation[4]



INDICATIONS

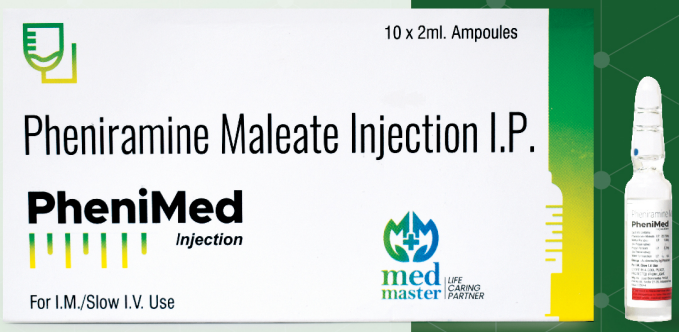
- **Allergic dermatoses**
- **Hay fever**
- **Motion sickness**
- **Pruritus**
- **Rhinitis**

Control The Symptoms, Improve Comfort

DOSAGE
Administer 22.75–40 mg via IM/IV in 24 hours.

***Disclaimer:** Doses may vary depending on individual patient needs and clinical discretion.

Also available IN 10ML



1. J Family Med Prim Care. 2023 Jan 17;11(12):7953–7956. doi: 10.4103/jfmpc.jfmpc_853_22. 2. Pak J Med Sci. 2016 May-Jun;32(3):715–719. doi: 10.12669/pjms.323.9496.
3. IOSR Journal of Dental and Medical Sciences (IOSR-JDMS), vol. 17, no. 3, 2018, pp 01-04.doi: 10.9790/0853-1703140104.
4. Toxicol Int. 2014 Sep-Dec;21(3):319–321. doi: 10.4103/0971-6580.155384.

Calm The Misfiring Neurons

MEDTOIN

Phenytoin Sodium 50 mg/ml

INJECTION



- FDA-approved anticonvulsant that dampens overactive brainstem centers, helping control seizures[1]
- Effective and widely used second-line monotherapy for nonrefractory status epilepticus[2]
- Non-sedative antiepileptic backed by decades of clinical use and a well-established safety profile[2,3]
- Manages seizures without suppressing higher cortical function or cardiorespiratory centers[4]
- Prevents early post-traumatic seizures during the first week after severe head injury[5]

INDICATIONS

- **Epilepsy**
- **Seizures**

Restore The Rhythm Of Life



DOSAGE

Administer as a slow parenteral injection, not exceeding 50 mg per minute in adults.

***Disclaimer:** Doses may vary depending on individual patient needs and clinical discretion.

1. Phenytoin Sodium. FDA Label. Available from: https://www.accessdata.fda.gov/drugsatfda_docs/label/2011/010151s036lbl.pdf 2. J Pharm Technol. 2014 Oct 13;31(3):99–103. doi: 10.1177/8755122514554457. 3. Phenytoin Sodium. PubChem [657302]. Available from: https://pubchem.ncbi.nlm.nih.gov/compound/Phenytoin-Sodium 4. Ann Neurol. 1977 Jun;1(6):511-8. doi: 10.1002/ana.410010602. 5. N Engl J Med. 1990 Aug 23;323(8):497-502. doi: 10.1056/NEJM199008233230801.

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Multifunctional Therapy For Complex Neuro Challenges

PIRAMED

Piracetam 15 ml

INJECTION



- Well tolerated GABA derivative with neuroprotective and anticonvulsant properties[1,2]
- Proven effective in alcohol dependence by preventing early delirium and reducing lipofuscin accumulation[3]
- First nootropic clinically proven to boost cognitive function without sedative or stimulant effects[1]
- Provides sustained improvement in motor impairment and disability in progressive myoclonus epilepsy[4]

INDICATIONS

- **Alcohol dependence**
- **Cognitive disorders**
- **Myoclonus epilepsy**

Support Brain Recovery



DOSAGE
Administer 1–2 g intravenously or intramuscularly, three times daily.

***Disclaimer:** Doses may vary depending on individual patient needs and clinical discretion.

1. Piracetam. DrugBank [DB09210]. Available from: https://go.drugbank.com/drugs/DB09210 2. CNS Drug Rev. 2006 Jun 7;11(2):169–182. doi: 10.1111/j.1527-3458.2005.tb00268.x. 3. Orv Hetil. 2003 May 11;144(19):927-30. 4. Arch Neurol. 2001 May;58(5):781-6. doi: 10.1001/archneur.58.5.781.

Support Vascular Health and Cellular Stability, Together

K BOOST

Potassium Chloride 1.5 g/10 ml

INJECTION

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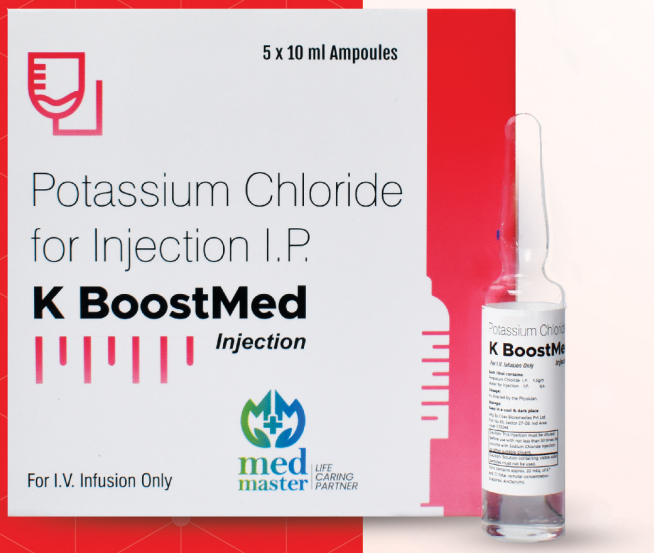


- FDA-approved effective electrolyte replenisher for treating hypokalemia[1,2,3]
- Maintains intracellular tonicity, fluids and significantly lowers blood pressure in hypertension[4,5]
- Well tolerated, reduce ventricular arrhythmia frequency without transient hyperkalemia[6]
- Proven safe for managing potassium deficiency in intensive care unit patients[7]

INDICATIONS

- **Hypertension**
- **Potassium deficiency**

Restore Potassium, Reinforce Cardiovascular Care



DOSAGE

Administer no more than 10 mEq/hour or 200 mEq/day if serum potassium >2.5 mEq/L.

***Disclaimer:** Doses may vary depending on individual patient needs and clinical discretion.

1. Potassium Chloride. FDA Label. Available from: https://www.accessdata.fda.gov/drugsatfda_docs/label/2019/019904s020lbl.pdf 2. Potassium chloride. DrugBank [DB00761]. Available from: https://go.drugbank.com/drugs/DB00761 3. Zhongguo Wei Zhong Bing Ji Jiu Yi Xue. 2008 Jul;20(7):416-8. 4. Potassium Chloride. PubChem [4873]. Available from: https://pubchem.ncbi.nlm.nih.gov/compound/Potassium-Chloride 5. Hypertension. 2005 Apr;45(4):571-4. doi:10.1161/01.HYP.0000158264.36590.19. 6. J Clin Pharmacol. 1994 Nov;34(11):1077-82. doi: 10.1002/j.1552-4604.1994.tb01984.x. 7. Arch Intern Med. 1990 Mar;150(3):613-7.

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Target Gastric Distress With Confidence And Control

RANITIMED

Ranitidine Hydrochloride 50 mg/2 ml **INJECTION**

- FDA-approved effective treatment for relieving symptoms of gastric acid related conditions[1,2]
- 4–10 times more potent than cimetidine in suppressing stimulated gastric acid secretion[3]
- H2-receptor antagonist which accelerates the healing of postinjection ulcers[2,4]
- Outperforms PPIs* in reducing the volume of gastric secretions and increasing gastric pH[5]

*PPIs: proton pump inhibitors



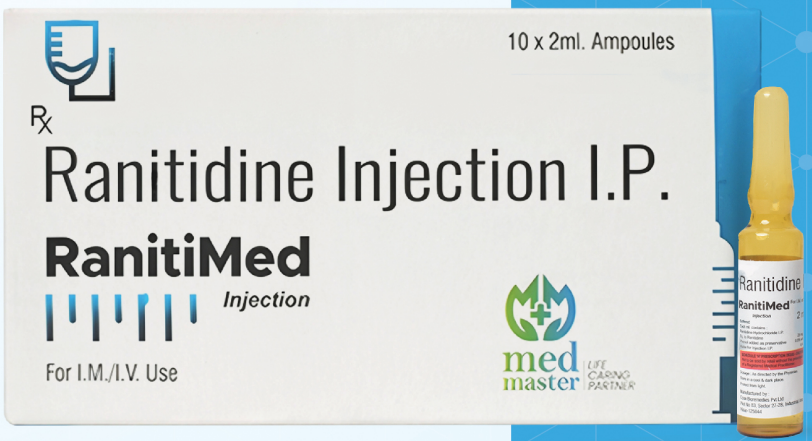
INDICATIONS

- **Gastric-acid related conditions**

Superior Acid Suppression

DOSAGE
Administer 50 mg (2 mL) intramuscularly every 6 to 8 hours.

***Disclaimer:** Doses may vary depending on individual patient needs and clinical discretion.



1. Ranitidine hydrochloride. FDA Label. Available from: https://www.accessdata.fda.gov/drugsatfda_docs/label/2009/019090s053,019593s042lbl.pdf
2. Ranitidine hydrochloride. DrugBank [DBSALT000487]. Available from: https://go.drugbank.com/salts/DBSALT000487 3. Drug Intell Clin Pharm. 1983 Dec;17 (12):873-85. doi: 10.1177/106002808301701201. 4. Am J Gastroenterol. 1991 Apr;86(4):477-80. 5. Anaesthesia. 2009 Jun;64(6):652-7. doi: 10.1111/j.1365-2044.2008.05861.x.

Essential Support When Metabolic Acidosis Strikes

MASTER SODA

Potassium Chloride 1.5 g/10 ml

INJECTION

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- An antacid that effectively increases arterial pH in critically ill patients with lactic acidosis[1,2]
- Systemic alkalizer with a strong safety profile, delays dialysis initiation[3]
- Protects bone health early by preventing acid-induced demineralization, unlike other interventions[3]
- Improves eGFR*, patient survival, and reduces hospitalization rates in metabolic acidosis 4,5

*eGFR: Estimated glomerular rate

INDICATIONS

- **Metabolic acidosis**

Rebalancing Ph, Rebuilding Patient Stability

Also available as:

MASTERSODA 8.4 %



DOSAGE

Administer 2–5 mEq/kg via IV infusion over 4–8 hours for metabolic acidosis.

***Disclaimer:** Doses may vary depending on individual patient needs and clinical discretion.

1. Chest. 2000 Jan;117(1):260-7. doi: 10.1378/chest.117.1.260. 2. Scientific World Journal. 2014 Oct 21;2014:627673. doi: 10.1155/2014/627673. 3. World J Nephrol. 2025 Mar 25;14(1):101078. doi: 10.5527/wjn. v14.i1.101078. 4. Clin J Am Soc Nephrol. 2024 Aug 1;19(8):959-969. doi: 10.2215/CJN.0000000000000487. 5. J Nephrol. 2019 Dec;32(6):989-1001. doi: 10.1007/s40620-019-00656-5.

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Speed Up Relief, Smooth Out Spasms

SPASMOMED-V

Valethamate Bromide 8 mg/ml

INJECTION



- **CDSCO-approved,** fast-acting cholinolytic for smooth muscle spasms[1,2]
- Demonstrates safe and significant reduction in overall duration of active labor[2,3]
- Reduces active labor duration by over an hour in first-time mothers[3]
- High clinician-rated success with 81% finding it effectives[3]

INDICATIONS

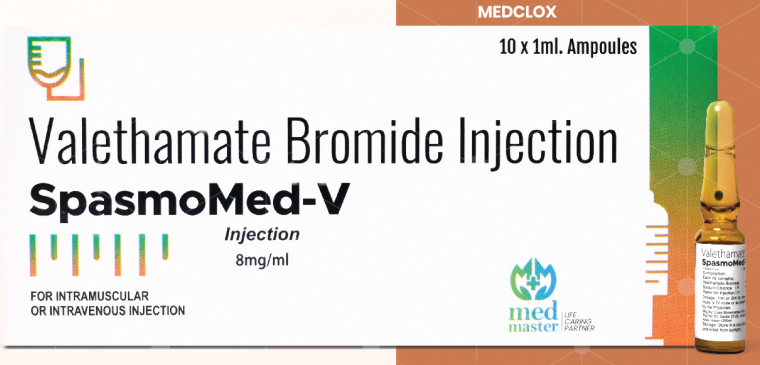
- **Smooth muscle spasms**
- **First-stage labor acceleration**

When Time And Comfort Matters The Most

DOSAGE

For Adults : Administer 8 mg intra-muscularly at 30-minute intervals for labor acceleration.

***Disclaimer:** Doses may vary depending on individual patient needs and clinical discretion.



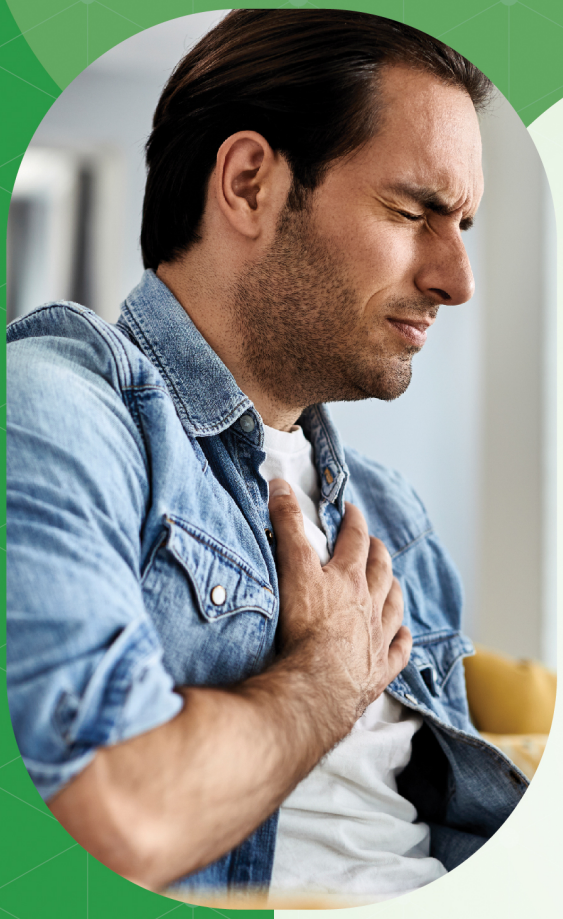
1. Valethamate Bromide. CDSCO. Available from: https://cdscoonline.gov.in/CDSCO/Drugs 2. Med J Armed Forces India. 2017 Jun 26;55(3):201–202. doi: 10.1016/S0377-1237(17)30441-0 3. J Turkish-German Gynecol Assoc. 2006;7(3):202-5. Available from: https://www.researchgate.net/publication/288787316

Designed To Quickly Improve Circulation In Severe Shock And Acute Emergencies

VASOPRESS MED

Vasopressin 20 Units/ml

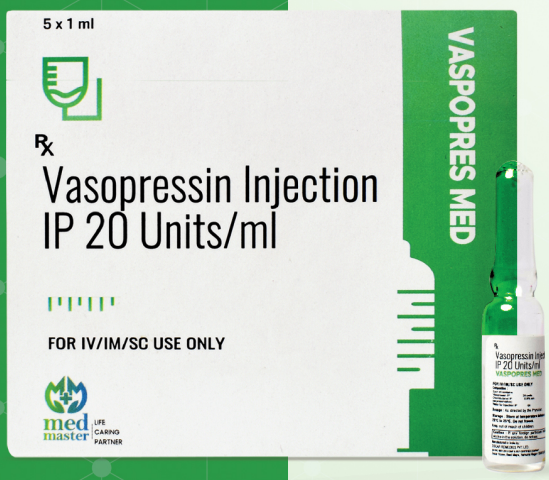
INJECTION



- **FDA-approved** safe, first-line therapy for distributive shock[1,2]
- Speeds shock reversal and lowers mortality in distributive shock[2]
- Trusted for 50+ years with reduced need for renal replacement therapy vs norepinephrine[3,4]
- Improves 24-hour survival in defibrillation-resistant ventricular fibrillation[5]

INDICATIONS

- **Acute kidney injury in septic shock**
- **Acute variceal bleeding**
- **Cardiovascular disorders**
- **Distributive shock**
- **Hemorrhagic shock due to trauma**
- **Pulmonary embolism**
- **Septic shock with renal dysfunction**
- **Vasodilatory shock**



DOSAGE

For dilution: 20 units/mL (in 3-mL single-dose or 10-mL multidose vials; must be diluted before use

1. Vasopressin. Drugs@FDA: FDA-Approved Drugs. Available from: https://www.accessdata.fda.gov/scripts/cder/daf/index.cfm?event=overview.process&ApplNo=212945
2. Ann Pharmacother. 2020 Mar;54(3):213-218. doi: 10.1177/1060028019882035. 3. Vasopressin. Drug Bank [DB00067]. Available from: https://go.drugbank.com/drugs/DB00067
4. Clin Exp Emerg Med. 2025 Jan 15;12(1):94–96. doi: 10.15441/ceem.24.35. 5. Arch Intern Med. 2005 Jan 10;165(1):17-24. doi: 10.1001/archinte.165.1.17