

Shared Care Medicines

Medicines which are initiated by a specialist, but where continuing treatment by primary care prescribers may be appropriate under a shared care agreement to ensure safe prescribing and monitoring.

The specialist requesting shared care is responsible for providing the primary care clinician with a shared care agreement at the time that the request to transfer prescribing responsibility is made.

The practice must review all requests for shared care and return the paperwork in a timely manner.

Shared care medicines are indicated on the [PTHB formulary](#) as follows:

Formulary Status: AMBER - Drugs initiated by hospital specialist, but where continuing treatment by Primary Care Prescribers may be appropriate under a shared care arrangement. SCP

Common medications and conditions where medicines may be continued in Primary Care under a shared care agreement include:	
Cardiac medications	Amiodarone
	Dronedarone
ADHD / mental health medications	Atomoxetine
	Dexamfetamine
	Lisdexamfetamine
	Methylphenidate
	Melatonin
	Lithium
Growth hormones	Somatropin
Immunosuppressants / Specialist medications often used in long term conditions	Apomorphine
	Azathioprine
	Ciclosporin
	Cyclophosphamide
	Hydroxycarbamide
	Leflunomide
	Mercaptopurine
	Methotrexate
	Mycophenolate
	Penicillamine
	Riluzole
Sulfasalazine	
Tobramycin (nebules)	
<i>This list is not exhaustive and prescribers should always check the PTHB formulary for the most up to date information.</i>	