

\$4 Dog Generic Medication List



(Generic Drug Name / Strength)	Form	30-day qty. \$4	90-day qty. \$10	(Generic Drug Name / Strength)	Form	30-day qty. \$4	90-day qty. \$10	(Generic Drug Name / Strength)	Form	30-day qty. \$4	90-day qty. \$10
A				D				P			
ALBUTEROL 2 MG/5 ML	Syrup	120	360	DEXAMETHASONE .75 MG	Tablet	12	36	METOPROLOL TARTRATE 100 MG*	Tablet	60	180
ALBUTEROL NEB 0.083%*	Solution	75	225	DEXAMETHASONE 0.5 MG	Tablet	30	90	METOPROLOL TARTRATE 25 MG	Tablet	60	180
ALENDRONATE SOD 35 MG	Tablet	4 (\$9)	12 (\$24)	DEXAMETHASONE 4 MG	Tablet	6	18	METOPROLOL TARTRATE 50 MG	Tablet	60	180
ALENDRONATE SOD 70 MG	Tablet	4 (\$9)	12 (\$24)	DICYCLOMINE 10 MG	Capsule	90	270	R			
AMITRIPTYLINE 10 MG	Tablet	30	90	DICYCLOMINE 20 MG	Tablet	60	180	PAROXETINE 10 MG*	Tablet	30	90
AMOXICILLIN 125 MG/5 ML	Suspension	80	240	E				PAROXETINE 10 MG*	Tablet	30	90
AMOXICILLIN 125 MG/5 ML	Suspension	100	300	ESTRADIOL 0.5 MG	Tablet	30	90	PAROXETINE 20 MG*	Tablet	30	90
AMOXICILLIN 125 MG/5 ML	Suspension	150	450	ESTRADIOL 2 MG	Tablet	30	90	PAROXETINE 20 MG*	Tablet	30	90
AMOXICILLIN 200 MG/5 ML	Suspension	50	150	F				PENICILLIN VK 125 MG/5 ML	Solution	100	300
AMOXICILLIN 200 MG/5 ML*	Suspension	75	225	FINASTERIDE 5 MG	Tablet	30 (\$9)	NA	PENICILLIN VK 125 MG/5 ML	Solution	200	600
AMOXICILLIN 200 MG/5 ML*	Suspension	100	300	FLUCONAZOLE 150 MG	Tablet	1	3	PENICILLIN VK 250 MG	Tablet	28	84
AMOXICILLIN 250 MG	Capsule	30	90	FLUOXETINE 10 MG	Capsule	30	90	PREDNISONE 2.5 MG	Tablet	30	90
AMOXICILLIN 250 MG/5 ML	Suspension	80	240	FLUOXETINE 20 MG	Capsule	30	90	PREDNISONE 5 MG	Tablet	30	90
AMOXICILLIN 250 MG/5 ML	Suspension	100	300	FLUOXETINE 40 MG*	Capsule	30	90	PROCHLORPERAZINE 10 MG	Tablet	30	90
AMOXICILLIN 250 MG/5 ML	Suspension	150	450	FOLIC ACID 1 MG	Tablet	30	90	PROCHLORPERAZINE 10 MG	Tablet	30	90
AMOXICILLIN 400 MG/5 ML	Suspension	50	150	FUROSEMIDE 20 MG	Tablet	30	90	PROMETHAZINE 25 MG*	Tablet	12	36
AMOXICILLIN 400 MG/5 ML*	Suspension	75	225	FUROSEMIDE 40 MG	Tablet	30	90	S			
AMOXICILLIN 400 MG/5 ML*	Suspension	100	300	FUROSEMIDE 80 MG	Tablet	30	90	SMZ/TMP 400/80 MG	Tablet	28	84
AMOXICILLIN 500 MG	Capsule	30	90	G				SMZ/TMP DS 800/160 MG	Tablet	20	60
B				GLYBURIDE 2.5 MG	Tablet	30	90	SOTALOL HCL 80 MG*	Tablet	30	90
BENAZEPRIL 10 MG	Tablet	30	90	GLYBURIDE 5 MG	Tablet	30	90	SPIRONOLACTONE 25 MG*	Tablet	30	90
BENAZEPRIL 20 MG	Tablet	30	90	GUANFACINE 1 MG	Tablet	30	90	T			
BENAZEPRIL 40 MG	Tablet	30	90	H				TERBINAFINE 250 MG*	Tablet	30	90
BENAZEPRIL 5 MG	Tablet	30	90	HYDRALAZINE 10 MG	Tablet	30	90	TRAZODONE 100 MG	Tablet	30	90
BUSPIRONE 10 MG*	Tablet	60	180	HYDRALAZINE 25 MG	Tablet	30	90	TRAZODONE 150 MG	Tablet	30	90
BUSPIRONE 5 MG	Tablet	60	180	HYDROCHLOROTHIAZIDE 12.5 MG*	Capsule	30	90	TRAZODONE 50 MG	Tablet	30	90
C				HYDROCHLOROTHIAZIDE 25 MG	Tablet	30	90	TRIAMTERENE/HCTZ 75/50 MG	Tablet	30	90
CARVEDILOL 12.5 MG	Tablet	60	180	HYDROCHLOROTHIAZIDE 50 MG	Tablet	30	90	V			
CARVEDILOL 25 MG*	Tablet	60	180	L				VERAPAMIL 120 MG	Tablet	30	90
CARVEDILOL 3.125 MG	Tablet	60	180	LACTULOSE 10 GM/15 ML	Syrup	237	711	VERAPAMIL 80 MG	Tablet	30	90
CARVEDILOL 6.25 MG	Tablet	60	180	LISINAPRIL 10 MG	Tablet	30	90				
CEPHALEXIN 250 MG	Capsule	28	84	LISINAPRIL 2.5 MG	Tablet	30	90				
CEPHALEXIN 500 MG	Capsule	30	90	LISINAPRIL 20 MG	Tablet	30	90				
CHLORHEXIDINE GLUCONATE 0.12%	Solution	473	1419	LISINAPRIL 5 MG	Tablet	30	90				
CIPROFLOXACIN 250 MG	Tablet	14	42	M							
CIPROFLOXACIN 500 MG	Tablet	20	60	MEDROXYPROGESTERONE 10 MG	Tablet	10	30				
CLONIDINE 0.1 MG	Tablet	30	90	MEDROXYPROGESTERONE 2.5 MG	Tablet	30	90				
CLONIDINE 0.2 MG	Tablet	30	90	MEDROXYPROGESTERONE 5 MG	Tablet	30	90				
				MEGESTROL 20 MG*	Tablet	30	90				
				MEGESTROL 20 MG*	Tablet	30	90				

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(Generic Drug Name / Strength)	Form	30-day qty. \$4	90-day qty. \$10
W			
WARFARIN 10 MG	Tablet	30	90
WARFARIN 1 MG	Tablet	30	90
WARFARIN 2.5 MG	Tablet	30	90
WARFARIN 2 MG	Tablet	30	90
WARFARIN 3 MG	Tablet	30	90
WARFARIN 4 MG	Tablet	30	90
WARFARIN 5 MG*	Tablet	30	90
WARFARIN 6 MG	Tablet	30	90
WARFARIN 7.5 MG	Tablet	30	90

Disclaimer: \$4 prescriptions include up to a 30-day supply of covered drugs at commonly prescribed dosages. \$10 prescriptions include up to a 90-day supply of covered drugs at commonly prescribed dosages. Physician permission may be required to change a 30-day prescription to a 90-day prescription. This list is subject to change.

*Drug and/or strength may be priced differently. These drugs may be priced differently in CA, HI, MN, MT, PA, RI, TN, WI and WY. Please ask your Target pharmacist for specific pricing in these states.

This list is also available at [Target.com/Petrx](https://www.target.com/Petrx)