101

Insulin Glargine Cartridges, Pens and Needles

Part A

Prescriber Criteria: Consultant Endocrinology & Diabetes
Specialist Family Medicine [Renewals only]

Outpatient and Inpatient use:

1. Diabetes Mellitus Type 1

Patients with Type 1 Diabetes Mellitus.

Duration of Approval:
3 years

Part B

Prescriber Criteria: Consultant Endocrinology & Diabetes
Consultant Geriatrician
Specialist Family Medicine [Renewals only]

Outpatient and Inpatient use:

1. Diabetes Mellitus Type 2

Patients with Type 2 Diabetes Mellitus with:

- An HbA1c>7% after 3 months on a conventional insulin
  AND/OR
- 2 or more hypoglycaemic attacks per month on a conventional insulin

Duration of Approval:
3 years