Prices of Prescribed Drugs, Brand Name and Generic

Bimonthly Diary for February, April, June, August, October and December

Confidential when completed

If necessary, please make address label corrections in the boxes below (please print).

- Business Name
- Address (number and street)
- City
- Province / Territory
- Postal Code

Please Read Before Completing

Collected under the authority of the Statistics Act, Revised Statutes of Canada, 1985, Chapter S19. Completion of this questionnaire is a legal requirement under this Act.

Purpose of the Survey

This survey is being conducted every second month to collect the prices of prescribed drugs. The prices you report are essential to the production of the Consumer Price Index (CPI), an important indicator of how the Canadian economy is performing. This index, used by governments, businesses and private citizens, affects interest rates, taxes, wages, pensions and many other monetary transfers. Your information may also be used by Statistics Canada for other statistical and research purposes. Please access **www.statcan.gc.ca/survey** for more information on this survey.

Confidentiality

The Statistics Act protects the confidentiality of information collected by Statistics Canada. Statistics Canada is prohibited by law from releasing any information it collects which could identify any person, business, or organization, unless consent has been given by the respondent or as permitted by the Statistics Act. Statistics Canada will use the information from this survey for statistical purposes.

Additional Information

Information on data-sharing agreements, record linkages, and fax or e-mail transmission disclosures are on the information sheet that the Statistics Canada interviewer provided to you.

Assistance

If you require assistance in completing this questionnaire or if you have any questions or comments, please call **1-800-263-1136** or e-mail **infostats@statcan.gc.ca.**

A Statistics Canada representative will pick up the completed questionnaire within 48 hours.

Instructions

1 Brand Name drugs

a) For each brand name drug listed below, please provide the Name, the Drug Identification Number (DIN), the total price including the dispensing fee for the quantity and strength indicated and the associated drug dispensing fee (DDF), if available.

The price provided should be on a cash payment basis (uninsured) and should be provided for the current month only.

- b) For all subsequent data collection months, *price the same brand name drug* that was reported for the previous period.
- c) If that drug is no longer available for sale, provide the information (for the same strength and quantity) for another brand name drug, within the same therapeutic class.
- d) Please use the comments section on page 7 to provide reasons for changes to reported data.

1.1

STC RP#	Brand N	ame Drug	DIN	Strength Quanti	ty
Month	Brand Name Drug	DIN Strength	Quantity	Price (including DDF)	DDF
Feb. 2016					
Apr. 2016					
June 2016					
Aug. 2016			_ (
Oct. 2016			X \		
Dec. 2016					

1.2

STC RP#		Brand N	ame [Orug	DIN	Strength	Quanti	ty
Month	Brand N	ame Drug	DIN	Strength	Quantity	Price (includ	ing DDF)	DDF
Feb. 2016								
Apr. 2016								
June 2016								
Aug. 2016								
Oct. 2016								
Dec. 2016								

1.3

STC RP#	Bran	nd Name D	rug	DIN	Strength	Quanti	ty
Month	Brand Name D	rug DIN	Strength	Quantity	Price (includ	ing DDF)	DDF
Feb. 2016							
Apr. 2016							
June 2016							
Aug. 2016							
Oct. 2016							

Dec. 2016				
	I	I		

1.4

STC RP#	STC RP#		ame [Orug	DIN	Strengt	h	Quanti	ity
Month	Bra	nd Name Drug	DIN	Strength	Quantit	y Price (i	nclud	ing DDF)	DDF
Feb. 2016							_		
Apr. 2016						1			
June 2016							1		
Aug. 2016									
Oct. 2016									
Dec. 2016								•	

1.5

STC RP#	Brand N	ame l	Drug	DIN	Strength	Quanti	ty
Month	Brand Name Drug	DIN	Strength	Quantity	Price (inclu	ling DDF)	DDF
Feb. 2016							
Apr. 2016							
June 2016							
Aug. 2016						*	
Oct. 2016							
Dec. 2016							

Instructions

2 Generic drugs

a) For each active ingredient listed below, please report, based on the number of prescriptions, your best selling generic drug along with the Drug Identification Number (DIN), the total price including the dispensing fee for the quantity and strength indicated and the associated drug dispensing fee (DDF) if available.

The price should be based on a cash payment basis (uninsured) for the current month.

- b) For all subsequent data collection months, price the same generic drug that was reported for the previous period.
- c) If a generic drug selected in the previous period is no longer available for sale, substitute with the generic drug currently available with the same active ingredient for the same strength and quantity.
- d) Please use the comments section on page 7 to provide reasons for changes to reported data.

2.1

STC RP#		Active Ingredient				S	trength	Quantity	
Month	Gene	ric Drug Name	DIN	Strength	Qua	ntity	Price (incl	uding DDF)	DDF
Feb. 2016									
Apr. 2016									

June 2016			
Aug. 2016			
Oct. 2016			
Dec. 2016			

2.2

STC RP#		Active Ingredient					Strength			Quantity		/
Month	Gene	ric Drug	Name	DIN	Strength	Qua	ntity	Price	(inc	luding [DF)	DDF
Feb. 2016												
Apr. 2016								V				
June 2016								77				
Aug. 2016												
Oct. 2016							1					
Dec. 2016												

2.3

STC RP#		Active Ingredient						Strength Quantity				
Month	Gene	ric Drug	g Name	DIN	Strength	Quar	ntity	Price (inc	cluding DDF)	DDF		
Feb. 2016												
Apr. 2016												
June 2016												
Aug. 2016												
Oct. 2016												
Dec. 2016												

2.4

STC RP#	Active	Ingredient	S	trength	Quantity	
Month	Generic Drug Name	DIN Strength	Quantity	Price (incl	DDF	
Feb. 2016						
Apr. 2016						
June 2016						
Aug. 2016						
Oct. 2016						
Dec. 2016						

2.5

STC RP#			Active Ingredient					trength	Quantity	
Month Generic Drug Na			Name	DIN	Strength	Qua	ntity	Price (incl	uding DDF)	DDF
Feb. 2016										
Apr. 2016										
June 2016										
Aug. 2016										

Oct. 2016			
Dec. 2016			

2.6

STC RP#	A	Active Ingredient				trength	Quantit	Quantity	
Month	Generic Drug N	ame DIN	DIN Strength		ntity	Price (including DDF)		DDF	
Feb. 2016									
Apr. 2016									
June 2016									
Aug. 2016									
Oct. 2016							•		
Dec. 2016									

2.7

STC RP#	Active	Active Ingredient			trength	Quantity	
Month	Generic Drug Name	DIN	Strength	Quantity	Price (incl	uding DDF)	DDF
Feb. 2016							
Apr. 2016							
June 2016							
Aug. 2016							
Oct. 2016							
Dec. 2016							

Comments

Month:
DIN number:
Comments:

Month: DIN number: Comments:

Month: DIN number: Comments:

Month:
DIN number:
Comments:

Month: DIN number: Comments:

Month: DIN number: Comments: Month: DIN number: Comments: Month: DIN number: Comments: Month: DIN number: Comments: Month: DIN number: Comments: Month: DIN number: Comments: Month: DIN number: Comments: Thank you for your cooperation