

Anti-Psychotic Prescribing Aid

This aid is a PDF version of the tables located at https://ohiomindsmatter.org/health-professionals/anti-psychotics and is intended to be used in conjunction with that web page.

Table: Atypical Oral Antipsychotic Medications

| Generic Name | Brand Name | Dosage Forms | Starting Dose | Max Daily Dose | Notes |
|--------------|------------|---|---------------|----------------|--|
| Aripiprazole | Abilify | 2 mg, 5mg, 10mg, 15 mg, 20 mg, 30 mg Oral dissolving tablet: 10 mg, 15 mg Liquid 1mg/ml | Oral: 2-5 mg | Oral: 30 mg | Can help to lower the prolactin level if it has been raised by other medications Works as partial agonist of Dopamine and Serotonin, whereas other antipsychotic medications are primarily Dopamine antagonists |
| Asenapine | Saphris | 2.5 mg, 5 mg, 10 mg (sublingual) | 2.5 mg | 20 mg | Sublingual, NOT swallowed; no PO for 10 minutes after; |



Table: Atypical Oral Antipsychotic Medications (Continued)

| Generic Name | Brand Name | Dosage Forms | Starting Dose | Max Daily Dose | Notes |
|--------------|------------|---|--------------------------|----------------|---|
| Asenapine | Secudo | 3.8 mg, 5.7 mg, 7.6 mg (transdermal) | 2.5 mg | 20 mg | Sublingual, NOT swallowed; no PO for 10 minutes after; |
| Clozapine | Clozaril | 25 mg, 50 mg, 100 mg, 200 mg Oral dissolving tablet: 12.5 mg, 25 mg, 100 mg, 150 mg, 200 mg | 12.5 mg or 12.5mg BID | 600-900 mg | May cause neutropenia or agranulocytosis, increase seizure risk; Patient-specific registry (REMS) and requires highly regulated monitoring protocol; rarely prescribed by primary care providers |
| Lurasidone | Latuda | 20 mg, 40 mg, 60 mg, 80 mg, 120 mg | 20 mg | 80 mg | Take with food (at least 350 cal) |
| Olanzapine | Zyprexa | 2.5 mg, 5 mg, 7.5 mg, 10 mg, 15 mg, 20 mg Oral dissolving tablet: 5 mg, 10 mg, 15 mg, 20 mg | 2.5 mg | 20-30 mg | Weight gain and other metabolic effects can be prominent |



Table: Atypical Oral Antipsychotic Medications (Continued)

| Generic Name | Brand Name | Dosage Forms | Starting Dose | Max Daily Dose | Notes |
|--------------------------------|-------------|---|---------------|--------------------------------|--|
| Paliperidone | Invega | 1.5 mg, 3 mg, 6 mg, 9 mg | 1.5-3 mg | 12 mg | Metabolite of risperidone with less hepatic metabolism; |
| | | | | | Associated with prolactin elevation |
| Quetiapine | Seroquel | 25 mg, 50 mg, 150 mg, 200 mg, 300 mg, 400 mg | 25-50 mg | 600-800 mg in divided doses | Can cause excessive sedation, orthostasis; Associated with less Extrapyramidal Symptoms (EPS) |
| Quetiapine Extended Release | Seroquel XR | 50 mg, 150 mg, 200 mg, 300 mg, 400 mg | 25-50 mg | 600-800 mg daily | Allows for once daily quetiapine dosing |
| Risperidone | Risperdal | 0.25 mg, 0.5 mg, 1 mg, 2mg, 3 mg, 4 mg Oral dissolving tab: 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg Liquid 1 mg/1 ml | 0.25-0.5 mg | 4-6 mg (Divided BID) | Associated with prolactin elevation, gynecomastia Dosedependent EPS |



Table: Atypical Oral Antipsychotic Medications (Continued)

| Generic Name | Brand Name | Dosage Forms | Starting Dose | Max Daily Dose | Notes |
|--------------|------------|-------------------------------|---------------|----------------------|------------------------------------|
| Ziprasidone | Geodon | 20 mg, 40 mg, 60 mg, 80 mg | 10-20 mg | 160 mg (Divided BID) | Can cause QTc prolongation |
| | | | | | Take with food (at least 500 kcal) |



Table: Newest Antipsychotic Medications (Use of these agents in children and adolescents is off-label and not currently mainstream practice)

| Generic Name | Brand Name | Dosage Forms | Starting Dose | Max Daily Dose | Notes |
|----------------|------------|--|---------------|----------------|--|
| Brexipiprazole | Rexulti | 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg | 0.5 mg | 4 mg | |
| Cariprazine | Vraylar | 1.5 mg, 3 mg, 4.5 mg, 6 mg | 1.5 mg | 6 mg | |
| Iloperidone | Fanapt | 1 mg, 2 mg, 4 mg, 6 mg, 8 mg, 10 mg, 12 mg | 1 mg | 12 mg | Can cause QTc prolongation, orthostasis |
| Lumateperone | Caplyta | 10.5 mg, 21 mg, 42 mg | 42 mg | 42 mg | Intended to be prescribed at 42 mg without titration |



Table: Antipsychotics: Long-Acting Injectable Medications (Consultation with a psychiatrist is recommended prior to initiation and monitoring.)

| Generic Name | Brand Name | Dosing Forms |
|--------------|-------------------------|--|
| Aripiprazole | Abilify Maintena | 300 mg, 400 mg |
| Aripiprazole | Abilify Aristada | 441 mg, 662 mg, 882 mg, 1064mg |
| Aripiprazole | Abilify Asimtufii | 720 mg, 960 mg |
| Olanzapine | Zyprexa Relprevv | 210 mg, 300 mg, 405 mg |
| Paliperidone | Invega Sustenna | 39 mg, 78 mg, 117 mg, 156 mg, 234 mg |
| Paliperidone | Invega Trinza | 273 mg, 410 mg, 546 mg, 819 mg |
| Paliperidone | Invega Hafyera | 1092 mg, 1560 mg |
| Risperidone | Risperdal Consta | 12.5 mg, 25 mg, 37.5 mg, 50 mg |
| Risperidone | Perseris (subcutaneous) | 90 mg, 120 mg |
| Risperidone | Uzedy (subcutaneous) | 50 mg, 75 mg, 100 mg, 125 mg, 150 mg, 200 mg, 250 mg |



Table: Atypical Antipsychotic FDA Approvals by Age Groups (Empty boxes not FDA approved)

| Generic Name | Manic/mixed, acute | Manic/mixed, maint. | Bipolar – depressed | Schizoaffective d/o | Schizophrenia | Irritability in ASD |
|---------------|------------------------|------------------------|------------------------|------------------------|---------------|---------------------|
| Aripiprazole | ≥10 | ≥10 | - | - | ≥13 | ≥6 |
| Asenapine | ≥10 | - | - | - | ≥18 | - |
| Brexpiprazole | - | - | - | - | ≥18 | - |
| Cariprazine | ≥18 | - | - | - | ≥18 | - |
| Clozapine | - | - | - | - | ≥18 | - |
| Iloperidone | - | - | - | - | ≥18 | - |
| Lumateperone | - | - | - | - | ≥18 | - |
| Lurasidone | - | - | ≥10 | - | ≥13 | - |
| Olanzapine | ≥13 | ≥13 | - | - | ≥13 | - |
| Paliperidone | | | ≥18 | ≥18 | ≥12 | |
| Quetiapine | ≥10 (Manic, not mixed) | - | - | - | ≥13 | - |
| Risperidone | ≥10 | - | - | - | ≥13 | ≥5 |
| Ziprasidone | ≥18 | - | - | - | ≥18 | - |



Table: Monitoring Guidelines for Most Atypical Antipsychotics (not clozapine)

| | Baseline | 3 mo. after starting | 6 month | Annually |
|--|----------|-------------------------|---------|----------|
| CBC/diff | Х | - | - | - |
| Fasting BMP (incl. glucose) | X | - | - | - |
| Fasting Glucose | - | - | X | - |
| Hemoglobin A1C* | X | - | X | - |
| LFTs | X | X | - | X |
| Fasting Lipid Panel | X | - | X | X |
| Height/weight/BMI | X | X | X | X |
| HR/BP | X | X | - | X |
| Abnormal Involuntary Movement Scale AIMS (to monitor tardive dyskinesia) | Χ | X | - | Х |

^{*}Checking Hemoglobin A1C is not a part of all guidelines, but is especially helpful if lab studies are not fasting



| Prolactin | EKG | | |
|--|---|--|--|
| Recommendations vary: Consider checking at baseline and q6months if taking risperidone/paliperidone or symptomatic (breast | Check if: | | |
| enlargement, nipple discharge, changes in menstruation and sexual functioning); | 1) fam history of prolonged QT or sudden cardiac death in 1st-degree relatives | | |
| | 2) personal history of murmur, arrhythmia, tachycardia at rest, dizziness/syncope on exertion | | |
| | 3) co-treatment with another QTc-prolonging medication | | |