

## Georgia AIDS Drug Assistance Program (ADAP) Formulary

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### Nucleoside Analogues (RTIs)

Epivir  
Zidovudine  
Zerit  
Didanosine/EC  
Combivir\*\*  
Ziagen  
Trizivir  
Viread  
Emtriva  
Epzicom  
Truvada  
Stavudine

### Non-Nucleosides (NNRTIs)

Rescriptor  
Viramune  
Sustiva  
Intelence™

### Protease Inhibitors (PIs)

Crixivan  
Viracept  
Norvir  
Invirase  
Agenerase  
Kaletra  
Reyataz  
Lexiva  
Prezista  
Aptivus

### Fusion Inhibitor

Fuzeon\*\*

### Integrase Inhibitor

Isentress™ \*\*

### Combination Products

Atripla

### CCR5 Entry Inhibitor

Selzentry™ \*\*

### Expanded Formulary (OIs)

Acyclovir  
Mepron  
Azithromycin  
Biaxin  
Clindamycin  
Clotrimazole  
Dapsone  
Procrit  
Epogen  
Ethambutol  
Ancobon  
Fluconazole  
Gabapentin  
Ganciclovir  
Hydroxyurea  
Isoniazid  
Itraconazole  
Ketoconazole (Oral)  
Leucovorin  
Loperamide  
Nystatin  
Prednisone  
Primaquine  
Prochlorperazine  
Daraprim  
Pyrazinamide  
Mycobutin  
Rifampin  
Sulfadiazine  
TMP/SMX  
TMP/SMX DS & SS  
Trimethoprim  
Valcyte

\*\*A Prior Approval Application is required