

Client Name: _____ **OHDAP FORMULARY**

Please check the appropriate box next to any of the following medications you are prescribing for the above-referenced patient.
 This list is the current OHDAP Formulary effective July 1, 2010.

-89		Anti Fungals	
<input type="checkbox"/>	Delavirdine, DLV (Rescriptor ®)	<input type="checkbox"/>	Clotrimazole (Mycelex ® Troche)
<input type="checkbox"/>	Efavirenz, EFV (Sustiva ®)	<input type="checkbox"/>	Fluconazole (Diflucan ®)
<input type="checkbox"/>	Etravirine (Intelence ®)	<input type="checkbox"/>	Itraconazole (Sporanox ®)
<input type="checkbox"/>	Nevirapine (Viramune ®)	<input type="checkbox"/>	Ketoconazole (2% topical only)
NRTIs		Herpes Treatment	
<input type="checkbox"/>	Abacavir (Ziagen ®)	<input type="checkbox"/>	Acyclovir (Zovirax ®)
<input type="checkbox"/>	Didanosine, ddI (Videx EC ®)	MAI Prophylaxis & Tx	
<input type="checkbox"/>	Emtricitabine, FTC (Emtriva ®)	<input type="checkbox"/>	Azithromycin (Zithromax ®)
<input type="checkbox"/>	Lamivudine, 3TC (Epivir ®) NOT including Epivir HBV	Mental Health	
<input type="checkbox"/>	Stavudine, d4T (Zerit ®)	<input type="checkbox"/>	Amitriptyline (generic only)
<input type="checkbox"/>	Zidovudine, AZT (Retrovir ®)	<input type="checkbox"/>	Bupropion/Budeprion (generic only)
<input type="checkbox"/>	AZT + 3TC (Combivir ®)	<input type="checkbox"/>	Citalopram HBr (Celexa ®)
<input type="checkbox"/>	AZT + 3TC + Abacavir (Trizivir ®)	<input type="checkbox"/>	Fluoxetine (Prozac ®)
<input type="checkbox"/>	Abacavir + Lamivudine (Epzicom ®)	<input type="checkbox"/>	Paroxetine (Paxil ®)
<input type="checkbox"/>		<input type="checkbox"/>	Sertraline (Zoloft ®)
Nucleotide Analogues		<input type="checkbox"/>	Trazodone (Desyre ®, Trialodine ®)
<input type="checkbox"/>	Tenofovir (Viread ®)	<input type="checkbox"/>	Venlafaxine (Effexor ®)
<input type="checkbox"/>	Emtricitabine + Tenofovir (Truvada ®)	PCP Prophylaxis & Tx	
<input type="checkbox"/>		<input type="checkbox"/>	Dapsone (Dapsone ®)
Protease Inhibitors		<input type="checkbox"/>	TMP/SMZ (Bactrim ®/ Septra ®)
<input type="checkbox"/>	Amprenavir (Agenerase ®)	Toxo Prophylaxis & Tx	
<input type="checkbox"/>	Atazanavir (Reyataz ®)	<input type="checkbox"/>	Leucovorin
<input type="checkbox"/>	Darunavir (Prezista ®)	<input type="checkbox"/>	Pyrimethamine (Daraprim ®)
<input type="checkbox"/>	Fosamprenavir (Lexiva ®)	<input type="checkbox"/>	Sulfadiazine
<input type="checkbox"/>	Indinavir sulfate (Crixivan ®)	TB Treatment	
<input type="checkbox"/>	Nelfinavir (Viracept ®)	<input type="checkbox"/>	Ethambutol (Myambutol ®)
<input type="checkbox"/>	Ritonavir (Norvir ®)	<input type="checkbox"/>	Isoniazid (INH)
<input type="checkbox"/>	Ritonavir + Lopinavir (Kaletra ®)	Other Formulary Medications	
<input type="checkbox"/>	Saquinavir (Invirase ®)	<input type="checkbox"/>	Penicillin G benzathine (Bicillin LA ®)
<input type="checkbox"/>	Tipranavir (Aptivus ®)	<input type="checkbox"/>	Valganciclovir (Valcyte ®)
<input type="checkbox"/>		<input type="checkbox"/>	Imiquimod (Aldara ® Cream)
<input type="checkbox"/>		<input type="checkbox"/>	
Cross-Class Combos		PRIOR AUTHORIZATION	
<input type="checkbox"/>	Efavirenz + Emtricitabine + Tenofovir (Atripla ®)	The medications below require prior authorization/medical exception to obtain the product through OHDAP. Please use the medical exception form.	
Integrase Inhibitors		CCR5 Antagonists	
<input type="checkbox"/>	Raltegravir (Isentress ®)	<input type="checkbox"/>	Maraviroc (Selzentry ®)
<input type="checkbox"/>		Fusion Inhibitors	
<input type="checkbox"/>		<input type="checkbox"/>	Enfuvirtide (Fuzeon ®)
Vaccines		PCP Prophylaxis & Tx	
<input type="checkbox"/>	Hep A vaccine (Havrix ®)	<input type="checkbox"/>	Atovaquone (Mepron ®)
<input type="checkbox"/>	Hep B vaccine (Engerix ®/ Recombivax ®)	<input type="checkbox"/>	Pentamidine (Pentam ®)
<input type="checkbox"/>	Hep A/Hep B vaccine (Twinrix ®)	<input type="checkbox"/>	albuterol sulfate inhaler (generic only)
<input type="checkbox"/>	Pneumococcal Pneumonia Vaccine	<input type="checkbox"/>	
<input type="checkbox"/>	Tetanus Vaccine	<input type="checkbox"/>	