# 29 FORM 2—NON-ANTI-VIRAL DRUGS

**COMPLETE THE FOLLOWING FOR EACH DRUG LISTED IN QUESTION 18.B.(2).**

- Atovaquone (BW566C80, Mepron)
- Azithromycin (Zithromax)
- Bactrim (Saptra)
- Ciprofloxacin (CIPRO)
- Clarithromycin (Biaxin)
- Clofazimine (Lamprene)
- Co-enzyme Q
- Colony stimulating factors (GM-CSF, G-CSF, Neupogen)
- Dapsone
- DNBC
- Ethambutol
- Erythromycin (Epojen)
- Flagyl (metronidazole)
- Fluconazole (Diflucon)
- Ganciclovir (DHPG)
- Hypericin (HY)
- Interleukin-2 (IL-2)
- Itraconazole
- Ketoconazole (Nizoral)
- Megace
- Mycelax (clostidazole)
- NAC (N-acetyl-cysteine)
- Nystatin (Mycostatin)
- Pentamidine (aerosolized)
- Pentamidine (IV)
- Rifabutin (Ansamyacin, Mycobutin)
- Rifampin (Rifadin)
- Tagamet (cimetidine)
- Trental (pentoxifylline)
- Vaccine trial (generic)

**You said you were taking (DRUG) since your last visit:**

1. A. Did you take this drug as part of a research study?
   - NO  (GO TO Q2)
   - YES

2. **2. How often did you take this drug?**
   (RECORD MOST RECENT NUMBER OF TIMES PER DAY OR TIMES PER WEEK OR TIMES PER MONTH OR TIMES PER YEAR)

   **NUMBER OF TIMES**
   - 0 0
   - 1 1
   - 2 2
   - 3 3
   - 4 4
   - 5 5
   - 6 6
   - 7 7
   - 8 8
   - 9 9

   **PER**
   - Day or
   - Week or
   - Month or
   - Year

   **Don't Know**

3. **3. How many (days, weeks, months) did you use (DRUG) since your last visit?**

   **Days**
   - 0
   - 1
   - 2
   - 3
   - 4
   - 5
   - 6
   - 7
   - 8
   - 9

   **Weeks**
   - 0
   - 1
   - 2
   - 3
   - 4
   - 5
   - 6
   - 7
   - 8
   - 9

   **Months**
   - 0
   - 1
   - 2
   - 3
   - 4
   - 5
   - 6
   - 7
   - 8
   - 9

   **Don't Know**

4. **4. Are you currently taking this drug [not as part of a research study]?**
   - NO
   - YES

**STOP IF PARTICIPANT WAS BLINDED TO THE TREATMENT AND GO TO NEXT DRUG.**