



Doping Control Guide

June 2017

PURPOSE OF THE DOPING CONTROL GUIDE

The purpose of this guide is to give Games participants information about the anti-doping programme and how it will be conducted.

This guide is not a technical document describing each step of doping control or other aspects of the anti-doping programme at the Games.

This guide is not a detailed set of rules but rather a summary of key aspects of the rules.

This guide complements the International Paralympic Committee (IPC) Anti-Doping Code but does not replace or supersede it.

Contents

1 GOVERNANCE OF THE PARALYMPIC WINTER GAMES PYEONGCHANG 2018ANTI-DOPING PROGRAMME	4
2 PYEONGCHANG IN-COMPETITION AND OUT-OF- COMPETITION TESTING	5
3 ANTI-DOPING RULE VIOLATIONS – CONSEQUENCES FOR TEAM SPORTS (IPC ANTI-DOPING CODE, ART. 11.3)	5
4 ADDITIONAL SAMPLE REQUESTS	6
5 LABORATORY	6
6 WADA PROHIBITED SUBSTANCES AND METHODS	6
7 PRESCRIPTION AND NON-PRESCRIPTION MEDICATION USE	7
8 SUPPLEMENT USE	7
9 INTERNATIONAL LEVEL ATHLETES	8
10 THERAPEUTIC USE EXEMPTIONS (TUE)	8
10.1 ATHLETES THAT ALREADY HAVE A VALID TUE CERTIFICATE OF APPROVAL (ARTICLE 4.4.2.1)	9
10.2 ATHLETES THAT NEED TO APPLY FOR A NEW TUE (ARTICLE 20.3.5.1)	9
10.3 RETROACTIVE TUES	9
11 USE OF CATHETERS	10
12 WHEREABOUTS INFORMATION	11
13 SHARING OF INFORMATION THROUGH SECURE DATABASES	11
14 RESOLVING PENDING CASESINVOLVING POSSIBLE VIOLATIONS OF ANTI-DOPING RULES	12
15 WADA OUTREACH EDUCATION PROGRAMME	12
16 WADA INDEPENDENT OBSERVER PROGRAMME	12
17 DOPING CONTROL TECHNICAL PROCEDURES FOR PYEONGCHANG 2018 PARALYMPIC WINTER GAMES	13
ANNEX A: Doping Control Role of IPC Anti-Doping Committee at Games Time	14

1 GOVERNANCE OF THE PARALYMPIC WINTER GAMES PYEONGCHANG 2018 ANTI-DOPING PROGRAMME

The International Paralympic Committee (IPC) is responsible for directing the Paralympic Winter Games PyeongChang 2018 (the Games) Anti-Doping Programme IN-COMPETITION and OUT-OF-COMPETITION testing, from the opening of the Athletes' Village (the Village) on 3 March 2018 up to and including the day of the closing ceremony on 18 March 2018 (the Games Period) inclusively.

Sample collection responsibilities for the Games have been delegated to the PyeongChang Organising Committee for the 2018 Olympic and Paralympic Games (PyeongChang 2018).

The IPC is a signatory to the World Anti-Doping Code (the Code). The IPC has established the IPC Anti-Doping Code (the IPC Code) in compliance with the general principles of the Code. The World Anti-Doping Agency (WADA) has confirmed that the IPC Anti-Doping Code is in line with the Code. The IPC Code outlines the various anti-doping rule violations and the detailed result management process following a possible anti-doping rule violation. The IPC Code is complemented by the Code and mandatory International Standards and other internal IPC policies and procedures.

The IPC Code shall apply during the Games Period. Athletes qualified and registered by their National Paralympic Committees (NPCs) are participants in the Games and may be tested at any time during the Games Period, as well as in the lead up to the Games, regardless of their location. All participants (athletes, guides and athlete support personnel) accept the IPC Code as a condition of participation and are presumed to have agreed to comply with the IPC Code. All NPCs and International Federations (IFs) will have formally declared their acceptance of the IPC Code through their membership status with the IPC. Any NPC or IF that has not accepted the IPC Code shall be deemed ineligible to participate in the Games.

The IPC Anti-Doping Committee is responsible for anti-doping policies, guidelines and procedures applicable to the Games, including the test distribution plan and anti-doping rule violation management. The roles and responsibilities of the IPC Anti-Doping Committee are outlined in Annex A. The IPC Medical Committee is responsible for the management of the Therapeutic Use Exemptions (TUEs) as outlined in the IPC Code. Unless specifically directed in the IPC Code, the person responsible for the administration of the provisions of the IPC Code is the IPC Medical & Scientific Director. The IPC Medical & Scientific Department will have its offices in the Paralympic Village Polyclinic.

2 PYEONGCHANG IN-COMPETITION AND OUT-OF-COMPETITION TESTING

The standard definition of IN-COMPETITION and OUT-OF-COMPETITION as per the IPC Anti-Doping Code applies to the Games.

The definition of IN-COMPETITION means “the period commencing 12 hours before a competition in which the athlete is scheduled to participate through to the end of such competition and the sample collection process related to such competition.”

The definition of OUT-OF-COMPETITION is “any doping control which is not in competition.”

The term “competition” is defined as “a single race, match, game or singular sport contest,” for example, a 100-metre race in athletics.

Both urine and blood samples may be collected and the IN-COMPETITION and OUT-OF-COMPETITION testing analysis screens will apply throughout the Games.

3 ANTI-DOPING RULE VIOLATIONS – CONSEQUENCES FOR TEAM SPORTS (IPC ANTI-DOPING CODE, ART. 11.3)

As the ruling body of the Games, the IPC will impose consequences for team sports in accordance with Articles 11.1 and 11.2 for all team sports on the Games programme.

The following sports are identified as team sports: Para Ice Hockey and Wheelchair Curling.

4 ADDITIONAL SAMPLE REQUESTS

NPCs or IFs that want to collect additional samples from athletes that fall under their regular jurisdiction during the Games Period should seek prior approval from the IPC by emailing antidoping@paralympic.org. There may be a fee associated with the request. In such instances, the IPC will act as the result management authority for those samples collected as referenced in IPC Code, Article 20.3.7.

5 LABORATORY

Samples collected by PyeongChang 2018 will be analysed at the WADA-accredited laboratory in Seoul, Korea Institute of Science and Technology Doping Control centre (KIST), or any other WADA-accredited laboratory as agreed to by the IPC.

The results of the tests will be provided to the IPC and WADA from the laboratory via the WADA Anti-Doping Administration and Management System (ADAMS). Results are typically provided within 24 to 72 hours of receipt by the laboratory. More time may be required for those samples requiring additional analyses, including, but not limited to confirmations. The IPC intends to keep the samples for long-term storage for future reanalysis as per the statute of limitations in the WADA International Standard for Privacy and Protection of Personal Information (ISPPPI).

Some samples will be subject to analysis following the closing ceremony. Any anti-doping rule violation discovered as a result of that analysis will be dealt with under the IPC Code.

6 WADA PROHIBITED SUBSTANCES AND METHODS

The WADA 2018 Prohibited List contains the substances and methods prohibited for the PyeongChang 2018 Games. If, at the time of the Games, the 2018 Prohibited List is amended, the valid version that can be found on the WADA website is applicable: <https://www.wada-ama.org>. All athletes and athlete support personnel must familiarise themselves with the Prohibited List.

7 PRESCRIPTION AND NON-PRESCRIPTION MEDICATION USE

It is the responsibility of the athlete to determine whether a substance and/or method he/she is using or considering using is prohibited or permitted according to the WADA Prohibited List. At all times, athletes are strongly advised to check the status of all medications with their team doctors and medical support staff. If further classification is required during the Games, the athlete should check with their NPC team physician or medical staff at the PyeongChang 2018 Polyclinic.

When bringing medication into Korea, all NPCs should be familiar with the PyeongChang 2018 process pertaining to the importation of medication, pharmaceutical products and medical equipment which is referenced in both the PyeongChang 2018 Health Care Guide and the POCOG customs and freight forwarding guide.

8 SUPPLEMENT USE

Extreme caution is recommended regarding supplement use due to the risk of a positive anti-doping tests and/or an adverse health event. The use of supplements by athletes is a concern because in many countries the manufacturing and labelling of supplements may not follow good manufacturing practices or undergo any pre-market regulation for safety or efficacy, as is required for medications, which may lead to a supplement containing declared or undeclared prohibited substances under anti-doping regulations. A significant number of adverse analytical findings globally have been attributed to supplement use. Supplements which are associated with weight loss, sexual enhancement, muscle growth promoters, and pre-workout energy boosting should be specifically avoided because of extreme risks of containing a prohibited substance.

NPCs are encouraged to discuss the risks associated with supplement use with their athletes and develop a plan to manage supplement use by their athletes.

9 INTERNATIONAL LEVEL ATHLETES

From 1 February 2018, all athletes registered to compete at the Games are considered International-level Athletes through the duration of the Games Period as defined in the IPC Anti-Doping Code. Therefore, from 1 February 2018, the IPC becomes responsible for Therapeutic Use Exemptions (TUE) and Games Period TUE rules apply to all athletes.

10 THERAPEUTIC USE EXEMPTIONS (TUE)

It is an athlete's responsibility to ensure that any medication or method they take to treat an illness or medical condition is not prohibited according to the WADA Prohibited List.

Athletes may have to take a medication that is on the WADA Prohibited List to treat an acute or chronic illness or medical condition. Before doing so, they must apply for a TUE and be given an approval for the particular medication and/or method. Athletes should consult with their NPC team physician to guide them through this process. All TUEs will be managed per the WADA International Standard for TUEs (ISTUE) and entered into ADAMS.

NPCs are encouraged to:

- Be proactive in assisting their athletes in verifying the status of their medications
- Identify, along with the athlete's physician, therapeutic use alternatives to prohibited medications or methods, if appropriate
- Submit legible and complete TUE application forms in a timely manner
- The IPC Medical Committee can be consulted with any questions or to obtain TUE application forms.
- The most common reason a TUE is denied is because of lack of proper medical documentation. Athletes and NPC medical staff are encouraged to carefully document any and all medical treatment including proper diagnoses and treatment plans.

10.1 ATHLETES THAT ALREADY HAVE A VALID TUE CERTIFICATE OF APPROVAL (ARTICLE 4.4.2.1)

A copy of any currently valid TUE approval certificate and supporting medical documentation must be submitted to the IPC Medical Committee for review by 1 February 2018 at the latest.

Submissions must be in English and entered into ADAMS or by email to tue@paralympic.org. The IPC will notify the athlete through the NPC whether the TUE is recognized. Particular care should be given to any TUEs which may expire during the Games Period.

10.2 ATHLETES THAT NEED TO APPLY FOR A NEW TUE (ARTICLE 20.3.5.1)

Prior to 1 February 2018, athletes must determine whether they are an International-level Athlete by their International Federation (IF). If they are International-level Athletes, they should apply to their IF. If not, athletes may contact their National Anti-Doping Organisation (NADO).

From 1 February 2018, ALL athletes must apply to the IPC Medical Committee and submit the completed TUE application with supporting medical documentation either through ADAMS or by email to tue@paralympic.org. Submissions must be in English. If approved, the TUE will only be valid for the duration of the Games (unless the IPC is the International Federation of the sport). The decisions of the IPC Medical Committee will be communicated to the athlete's NPC, NADO, the IF and to WADA.

10.3 RETROACTIVE TUES

Article 4.3 of the ISTUE will apply in the event of an emergency. Details of the TUE process, including the TUE application process, the medical documentation in support of the application needed, and the criteria for granting a TUE are outlined in the IPC Code and ISTUE. Further information on the TUE process can be found on the IPC website:

<http://www.paralympic.org/the-ipc/anti-doping/tue>.

11 USE OF CATHETERS

The IPC considers the use of a urinary catheter by an athlete with a need for self catheterisation as “personal equipment”. There are potential hazards to using different catheters, such as urethral trauma, infection and/or allergic reactions.

Athletes who use urinary catheters for urinary sample collection for anti-doping purposes should supply their own catheter. This is the responsibility of the athlete. It is also the athlete's responsibility to use a catheter in accordance with the manufacturer's instructions.

PyeongChang 2018 will equip doping control stations with a number of sealed, sterile catheters; however, this will never include all brands, sizes and/or materials. This shall be regarded as a complimentary service offered to athletes.

The IPC is aware of exceptional cases of adverse analytical findings (AAFs) caused by self-catheterisation in doping control related to the use of glycerol. Glycerol is widely used as an anti-septic in the storage of urethral catheters and as a lubricant for urethral catheters. The World Anti-Doping Agency (WADA) has increased the threshold for reporting an adverse analytical finding (AAF) for glycerol (WADA TD2014DL), reducing the likelihood of an AAF resulting from glycerol lubrication.

However, athletes should consult with their physician on any alternatives that do not involve the use of glycerol. As a matter of precaution, all catheters supplied by PyeongChang 2018 for both medical and anti-doping purposes will be free of glycerol.

The IPC Position Statement on the Use of Catheters in Doping Control can be found here:

https://www.paralympic.org/sites/default/files/document/150528104836631_2015_01_30+IPC+Position+Statement+on+Use+of+Catheters+in+Doping+Control_FINAL.pdf

12 WHEREABOUTS INFORMATION

Effective OUT-OF-COMPETITION testing programmes are essential to the fight against doping in sport. This largely depends on accurate and complete athlete whereabouts information.

The IPC and PyeongChang 2018 therefore request that all NPCs:

- Ensure that athletes who are nominated to the IPC/IF/National Registered Testing Pool (RTP) have provided accurate and detailed whereabouts information to the respective anti-doping organisation
- Provide timely information on travel schedules, specific rooming list allocations and training schedules for the Games

These components are of paramount importance to enable locating athletes for testing in the lead up to the competition period.

In the event that information received from the NPCs is incomplete, or when NPCs fail to share information with the IPC and PyeongChang 2018, the IPC has the right to ask the NPC for more detailed whereabouts information for all or some of their athletes. NPCs have the responsibility of familiarising themselves with the use of ADAMS.

13 SHARING OF INFORMATION THROUGH SECURE DATABASES

The IPC welcomes temporary access to national/IF anti-doping databases other than ADAMS to access both TUE and whereabouts information for athletes competing at the Games.

Please contact your National Anti-Doping Organisation (NADO) and email antidoping@paralympic.org if your NADO wishes to share information this way.

14 RESOLVING PENDING CASES INVOLVING POSSIBLE VIOLATIONS OF ANTI-DOPING RULES

The IPC would appreciate every effort made by NPCs, NADOs and IFs to ensure that pending cases involving possible violations of anti-doping rules committed by athletes or athlete support personnel, who intend to participate in the PyeongChang 2018 Winter Games, are resolved before the athletes validate their accreditation card for the Games. Any outstanding result management matters in the lead up to the Games should be reported by the NPC without delay to antidoping@paralympic.org.

15 WADA OUTREACH EDUCATION PROGRAMME

The WADA Outreach Programme has developed into an effective means of reaching out and educating athletes and their entourage on the dangers and consequences of doping. The outreach booth will be located in the main dining hall, PyeongChang Athletes' Village, where competitors can approach anti-doping experts from around the world.

Critical to the success of the programme is one-on-one interaction in various languages that athletes, coaches and officials receive with anti-doping experts. This is supported by a variety of educational materials and a quiz that is designed to be fun as well as informative.

16 WADA INDEPENDENT OBSERVER PROGRAMME

WADA will have an Independent Observer (IO) Programme to monitor the various phases of doping control and results management processes. Expert teams will observe the programmes and provide real-time feedback to the IPC and PyeongChang 2018, who will be conducting the anti-doping programmes. This audit-style approach will ensure immediate progress can be made, and will give athletes and the public further confidence in the anti-doping system.

17 DOPING CONTROL TECHNICAL PROCEDURES FOR PYEONGCHANG 2018 PARALYMPIC WINTER GAMES

All doping control procedures will be implemented in accordance with the WADA International Standard for Testing and Investigations (ISTI). The ISTI can be found in full here:

https://www.wada-ama.org/sites/default/files/resources/files/2016-09-30_-_isti_final_january_2017.pdf.

The following information is to complement the ISTI requirements:

- For the purposes of these Games, the Testing Authority and Results Management Authority is the IPC. The Sample Collection Authority is PyeongChang 2018.
- PyeongChang 2018 will use Berlinger sample collection equipment for urine and blood samples and temperature monitoring system.

PyeongChang 2018 will have further detailed procedures that are compliant with the ISTI.

ANNEX A: Doping Control Role of IPC Anti-Doping Committee at Games Time

The IPC AD Code provides that the IPC has in-competition Testing authority for the Event Period and out-of-competition Testing authority over all Athletes entered into one of its Events (Article 20.3.6.2.1). The IPC has the exclusive authority to initiate and direct Testing at the Event Venue during the Event period (Article 20.3.6.2.3), and the authority to appoint the Sample Collection Authority (Article 20.3.6.3.1) to collect samples on its behalf.

The IPC Anti-Doping Committee (ADC) is responsible for overseeing all Doping control conducted by any Sample Collection Authority collecting samples under the IPC's authority (Article 20.3.6.3.2). To carry out this responsibility, Doping Control may be monitored by members of the IPC ADC or by other qualified persons so authorized by the IPC (Article 20.3.6.3.3).

These provisions are adapted virtually verbatim from the WADA Model Rules for MEOs.

Because they have responsibility to the IPC for anti-doping oversight and monitoring, members of the IPC ADC are not mere observers. Their doping control-related activities include establishing the in-competition and out-of-competition testing policies, the test distribution planning and implementation of the TDP, and oversight of sample collection at the doping control stations (IPC ADC By-laws). All of this in cooperation with the Sample Collection Authority.

It is within this mandate that members of the IPC ADC visit the Games Doping Control Stations and work with Doping Control personnel to execute sample collection. In the Doping Control Stations, IPC ADC members may:

- Ask questions to Doping Control personnel about the organization and functioning of the venue and its Doping Control station, and execution of the day's testing missions.
- Respond to questions or requests for advice from Doping Control personnel. (Note that IPC ADC members do not sign-off Doping Control documents, even if it is a sport for which the IPC is the IF.)
- Make suggestions to Doping Control personnel where there appears to be an opportunity for improvement.
 - Suggestions that are within the Station Manager's discretion, and acceptable to the Station Manager, will be implemented in a collegial way, making best use of the experience of the Station Manager (and his/her team) and the member of the IPC ADC. These should be reported back to the Doping Control Command Centre after the fact in case they ought to be

implemented at other Doping Control Stations.

- Suggestions that are not within the Station Manager’s discretion (because, for example, they are not consistent with the established technical practices of the Sample Collection Authority) should be referred to the Doping Control Command Centre for consideration and decision. This may require the Command Centre to liaise with the Chair of the IPC ADC and the IPC Medical and Scientific Director.
- Less frequently, give direction to Doping Control personnel. This will usually occur for one of two purposes:
 - To direct Doping Control personnel to make specific athlete selections and/or changes to the planned athlete selections, and assign or reassign test type and/or special analyses as required to fulfill the goal of intelligent testing, maximizing deterrence and management of the overall Games-time test distribution plan.
 - When the IPC ADC member sees a practice that is contrary to the World Anti-Doping Programme (Code + Standards + mandatory technical documents) or contrary to the approved technical practices for the Games. Such direction should be discussed with the Doping Control Command Centre whenever possible. But if it is not possible (for reasons of urgency, for example) Doping Control personnel should implement the direction right away. These cases should then be reviewed between the IPC and the Sample Collection Authority as quickly as possible to ensure any system adjustments to the Doping Control programme, or other corrective actions, are made.