ATHLETES & PRESCRIBING PHYSICIANS PLEASE READ

USADA can grant a Therapeutic Use Exemption (TUE) in compliance with the World Anti-Doping Agency International Standard for TUEs. The TUE application process is thorough and designed to balance the need to provide athletes access to critical medication while protecting the rights of clean athletes to complete on a level playing field.

Included in this document is a checklist of items necessary for a complete TUE Application and the WADA Guidelines used to evaluate TUE Applications for your specific condition. (Please be aware that the TUE Committee may ask for additional information while evaluating TUE Applications). It is important that the TUE Application include all the documentation outlined in the checklist below. Please reference the included guidelines for details related to types of diagnoses, specific laboratory tests, and more.

**TUE APPLICATION CHECKLIST – MALE INFERTILITY**

- Complete and legible TUE Application form
- Copies of all relevant examinations and clinical notes from the original diagnosis through present
  - Overall physical examination of the athlete and testicular examination
  - Documentation of 12-month period of unprotected intercourse (can be annotated in clinical notes) and confirmation of fertility assessment in female partner
- Copies of all laboratory results/reports related to the diagnosis
  - Two sperm counts collected prior to treatment obtained at least a week apart, but within a 4-week period (after 2-7 days of abstinence from ejaculation)
  - Early morning serum T, FH, and LH levels
  - Scrotal ultrasound, if applicable
- A statement from the physician explaining why the Prohibited Substance is needed
  - Why other treatments (with either permitted or prohibited substances/methods) failed or are not appropriated for treating the condition.
- A statement from the physician ruling out alternative causes of male subfertility or infertility
  - Sexual disorders (erectile dysfunction, failure to have intercourse), obesity, drug/alcohol use, Klinefelter syndrome, improper testicular temperature, etc.