



ATHLETE HANDBOOK 2018

U.S. ANTI-DOPING AGENCY



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USADA MISSION STATEMENT

We hold the public trust to:

PRESERVE the integrity of competition

INSPIRE true sport

PROTECT the rights of athletes



The information in this publication is provided for reference purposes and should be considered a summary. Please also note that the categories of prohibited substances and prohibited methods in this handbook are subject to change. In the case of any discrepancy between the information contained within this handbook and the World Anti-Doping Code and relevant International Standards, the Code prevails. For the most up-to-date information, visit our website: USADA.org, or Global Drug Reference Online: GlobalDRO.com.



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“The idea of coming by a win or a victory by taking a shortcut or cheating, just at a very basic level seems wrong. If I did win in that way, I know I would always believe that it was illegitimate.”

— Lowell Bailey, 2017 IBU World Biathlon Champion

INTRODUCTION

ATHLETES AND ATHLETE SUPPORT PERSONNEL play a critical role in helping to protect the integrity of sport at every level. USADA’s mission is based on the fundamental truth that all athletes deserve the opportunity to compete on a clean and level playing field, where the results of any competition are determined by talent and hard work. USADA works to ensure that no athlete is ever cheated by a competitor engaging in the use of performance-enhancing drugs.

THIS HANDBOOK IS DESIGNED to provide athletes with a summary of the information needed to successfully participate in the anti-doping program governing their sport. Access to accurate information ensures that athletes are not only fully prepared for training and competition, but also for the important role they play in the broader global anti-doping movement.



THE UNITED STATES ANTI-DOPING AGENCY® (USADA) is recognized by the United States Congress as the official anti-doping agency for all Olympic, Paralympic, Pan American, and Para Pan American sport in the United States. Further, USADA is the sole administrator of the UFC® Anti-Doping Program, which was launched in July 2015. USADA began operations on October 1, 2000 and is an independent, non-profit, non-governmental agency whose mission is to preserve the integrity of competition, inspire true sport, and protect the rights of athletes.

As a signatory to the World Anti-Doping Code (the Code), USADA complies with all of the International Standards developed by the World Anti-Doping Agency (WADA) in order to harmonize anti-doping efforts around the world.



WADA PREPARES AND PUBLISHES the Prohibited List (List) each year following an extensive consultation process. The List identifies substances and methods prohibited at all times, in-competition only, and in particular sports.

How does a substance or method get placed on the Prohibited List?

A substance or method is included on the List if it meets at least two of the following three criteria:

- It enhances, or has the potential to enhance, sport performance.
- It represents an actual or potential health risk to the athlete.
- It violates the spirit of sport.¹

USADA has created several resources to help athletes determine if their substances are prohibited. One of the fastest ways to search the status of a medication is by using Global Drug Reference Online (GlobalDRO.com), which provides easily accessible and accurate information on the status of specific pharmaceutical products sold in Australia, Canada, Japan, Switzerland, the United Kingdom, and the United States. Some over-the-counter medicinal products are also included in the database. **Global DRO™ does not contain information on, or applicable to, dietary supplements.** If an athlete can't find the brand name of their medication on Global DRO, they can also search the active ingredients listed on the medication, which is often necessary in the case of cold, flu, and other such over-the-counter medications.

On Supplement411.org, athletes can find information about the many risks associated with supplements, as well as a growing list of supplements that have been determined to be high risk.

For additional assistance, contact USADA by calling or emailing Athlete Express® to find out if a medication, supplement, or ingredient is prohibited in sport before choosing to use it. Reach Athlete Express at (719) 785-2000, Toll-Free at (866) 601-2632, or email athleteexpress@USADA.org.

Monitoring Program

The WADA Monitoring Program aims to identify patterns of substance misuse in sport. Substances or methods may be added to the Prohibited List based on outcomes of the Monitoring Program. For more information about the Monitoring Program, please visit USADA.org/monitoring-program.

¹ As defined in the Code, the spirit of sport is the essence of Olympism; it is the celebration of the human spirit, body, and mind. It is characterized by ethics, fair play, honesty, character, joy, teamwork, dedication, respect for rules and one's self, and other similar values.

HEALTH & SAFETY SUMMARY OF PROHIBITED SUBSTANCES

THIS SECTION PROVIDES ANSWERS to common questions about the health and safety risks associated with substances and methods included on the Prohibited List. Details are provided by category as outlined on the List. It also provides information concerning the legitimate medical use of substances.

See [USADA.org/effects-of-substances](https://www.usada.org/effects-of-substances) for more information.

SUMMARY OF SUBSTANCES PROHIBITED AT ALL TIMES

Anabolic Agents

The primary medical use of these compounds is to treat delayed puberty, types of impotence, muscle-wasting diseases, hypogonadism, and menopause in women, among other ailments. Examples of anabolic agents include testosterone, nandrolone, DHEA, clenbuterol, and Selective Androgen Receptor Modulators (SARMs).

What are some potential side effects of anabolic steroid abuse?

The physiological and psychological side effects of anabolic steroid abuse have the potential to impact any user, while other side effects are gender specific. The list below is not comprehensive.

Physiological

- Acne
- Male pattern baldness
- Liver damage*
- Premature closure of the growth centers of long bones (in adolescents) which may result in stunted growth*

Males

- Breast tissue development*
- Shrinking of the testicles*
- Impotence
- Reduction in sperm production

Psychological

- Increased aggressiveness and sexual appetite, sometimes resulting in abnormal sexual and criminal behavior, often referred to as "Roid Rage"
- Withdrawal from anabolic steroid use can be associated with depression and suicide

Females

- Deepening of the voice*
- Cessation of breast development
- Growth of hair on the face, stomach, and upper back*
- Enlarged clitoris*
- Abnormal menstrual cycles

*NOTE: *Effects may be permanent and can vary by individual.*

Peptide Hormones, Growth Factors, Related Substances and Mimetics

The primary medical uses of these compounds vary, but include treatment for chronic kidney disease, acute anemia, short stature, and aiding those born prematurely. Some examples within this category include erythropoiesis-stimulating agents (ESAs), like erythropoietin

(EPO), human growth hormone (hGH), and human chorionic gonadotrophin (hCG), as well as hypoxia-inducible factor (HIF) stabilizers or activators like cobalt or xenon gas.

What are some potential side effects and health risks of this category?

- Hypertension (ESAs/hGH)
- Blood cancers/leukemia (ESAs/hGH)
- Anemia (ESAs)
- Stroke (ESAs)
- Heart attack
- Pulmonary embolism (ESAs)
- Feminization (hCG)
- Thyroid problems (hGH)

Beta-2 Agonists

The primary medical use of these compounds is to treat conditions like asthma and other respiratory ailments. Some studies have shown specific beta-2 agonists have performance-enhancing effects when consistently high levels are present in the blood.

What are some potential side effects of beta-2 agonists?

- Rapid heart rate
- Headaches
- Sweating
- Nausea
- Muscle cramps
- Nervousness

Are there limitations placed on the use of asthma medications?

These agents, when inhaled, are the first line for rescue therapy, especially with asthma. They are also powerful stimulants. Some of these agents also possess anabolic properties, especially when taken orally or by injection. Due to their stimulatory and potential anabolic effects, limitations have been placed on their use.

NOTE: See Therapeutic Use Exemption policies pertaining to the use of prohibited medications at USADA.org/tue.

Hormone and Metabolic Modulators

Hormone antagonists are agents that modify hormone functions. Specific classes of hormone antagonists and modulators are prohibited, including:

- Aromatase inhibitors
- Selective estrogen receptor modulators (SERMS)
- Agents modifying myostatin function(s)
- Other anti-estrogenic substances such as clomiphene
- Insulins and insulin-mimetics
- Meldonium, trimetazidine, AICAR

What are some potential side effects and health risks of hormone and metabolic modulators?

- Dramatic change in blood sugar levels (Insulin)
- Endocrine system disruption (Clomiphene)
- Liver damage (AICAR)
- Cholesterol imbalance (Aromatase Inhibitors)
- Motor function disorders and tremors (Trimetazidine)

Diuretics and Masking Agents

The primary medical use of these compounds is to treat conditions like hypertension, kidney disease, and congestive heart failure. Blood plasma expanders (e.g. intravenous administration of albumin, dextran, hydroxyethyl starch, and mannitol) are also prohibited.

What are some potential side effects and health risks of diuretic abuse?

- Dehydration
- Dizziness or fainting
- Muscle cramping and heart arrhythmia due to potassium depletion
- Drop in blood pressure
- Loss of coordination and balance
- Death

Non-Approved Substances

This category refers to substances that are not addressed by any of the other sections of the List and that have no current approval by any governmental regulatory health authority for human therapeutic use (i.e. drugs under pre-clinical or clinical development, discontinued designer drugs, and substances approved only for veterinary use).

What are some potential side effects of non-approved substance use?

Substances that have not undergone safety and clinical efficacy testing for use in humans do not have a safety profile and their potential side effects are unknown.

SUMMARY OF SUBSTANCES PROHIBITED IN-COMPETITION ONLY

Stimulants

The primary medical use of these compounds is to treat conditions like Attention Deficit Disorders, asthma, narcolepsy, and obesity.

What are some potential side effects and health risks of stimulant use?

- Insomnia
- Anxiety
- Weight loss
- Dependence and addiction
- Dehydration
- Tremors
- Increased heart rate and blood pressure
- Increased risk of stroke, heart attack, and cardiac arrhythmia

Could over-the-counter medications possibly contain stimulants?

Prohibited stimulants are often present in over-the-counter products, such as pre-workout powders, diet aids, and headache/cold remedies. The prohibited stimulant pseudoephedrine is commonly found in cold and flu medications.

Athletes should ensure they do not take medications with pseudoephedrine during or within the 24 hours before a competition.

Dietary supplements, which can be purchased over-the-counter, can also contain prohibited stimulants like methylhexanamine and oxilofrine, also known as methylsynephrine. Be sure to visit Supplement411.org for more information, and call Athlete Express at (719) 785-2000, toll-free at (866) 601-2632, or email athleteexpress@USADA.org with questions.

Narcotics

When dosed appropriately, narcotics have medical uses like relieving or managing severe pain.

What are some potential side effects and health risks of narcotics?

While a sensation of euphoria or psychological stimulation are effects common to the use of narcotics, misuse of narcotics can pose serious health risks. Those include:

- A false sense of invincibility
- Nausea and vomiting
- Increased pain threshold and failure to recognize injury
- Decreased heart rate
- Physical and psychological dependence, leading to addiction
- Respiratory depression
- Death

What should I do if painkillers are needed for an injury?

Check GlobalDRO.com, consult the Wallet Card, call Athlete Express at (719) 785-2000 or Toll-Free at (866) 601-2632, or email athleteexpress@USADA.org for more information. Go to the Therapeutic Use Exemption (TUE) section to learn more about applying for a TUE.

Cannabinoids

Cannabinoids (cannabis, hashish, marijuana, synthetic THC) are illegal substances in many jurisdictions and are prohibited in-competition. Cannabimimetics (JWH-018, JWH-073, HU-210) are also prohibited. While cannabidiol (e.g., CBD oil) is no longer prohibited, cannabidiol extracted from cannabis plants may contain varying concentrations of THC, which remains a prohibited substance.

The body absorbs THC, which is the active ingredient in cannabinoids, and breaks it down into metabolites. These metabolites are stored in fat cells and can be detected in the urine for many weeks after use depending on the user's metabolism and other habits.

What are some potential side effects and health risks of marijuana use?

- Increased heart rate
- Impaired short-term memory
- Distorted sense of time and space
- Diminished ability to concentrate
- Slowed coordination and reaction of reflexes
- Mood instability
- Impaired thinking and reading comprehension
- Respiratory diseases



Glucocorticoids

The primary medical use of these compounds is to treat allergies, asthma, inflammatory conditions, and skin disorders, among other ailments.

Glucocorticoids are often found in asthma control inhalers, eye or ear drops, topical creams, and nasal sprays.

Glucocorticoids are prohibited in-competition when taken by oral, intramuscular, intravenous, or rectal routes of administration. Athletes should exercise care when glucocorticoids are used as injections, infusions, suppositories, or pills taken by mouth and apply for a TUE in advance. Depending on the dose, frequency, and proximity to competition, these specific routes of administration may result in the medication taking weeks to clear from the body.

What are some of the potential side effects of glucocorticoids?

- Loss of muscle mass and bone density
- Weakening of injured areas in muscle, bone, tendons, or ligaments
- Decrease in, or cessation of, growth in young people
- Suppression of immune system

SUMMARY OF SUBSTANCES PROHIBITED IN PARTICULAR SPORTS

Beta-Blockers

The primary medical use of beta-blockers is to control hypertension, cardiac arrhythmias, angina pectoris (severe chest pain), migraine, and nervous or anxiety-related conditions.

Beta-blockers are prohibited in-competition only in the following sports, and are also prohibited out-of-competition where indicated: Archery (WA)*, Automobile (FIA), Billiards (WCBS), Darts (WDF), Golf (IGF), Shooting (ISSF, IPC)*, Skiing/Snowboarding (FIS) in ski jumping, freestyle aerials/halfpipe and snowboard halfpipe/big air, and Underwater sports (CMAS).

**Also prohibited out-of-competition*

What are some potential side effects of beta-blockers?

- Fainting or loss of consciousness
- Sleep disorders
- Decreased heart rate
- Spasm of the airways

Medical information used for the Prohibited List section was taken from the WADA Sport Physician's ToolKit, available at wada-ama.org and used with permission.

Manipulation of Blood and Blood Components

Blood doping is a prohibited method of increasing oxygen transport to the tissues. Blood doping is used to artificially increase the number of red blood cells in the body by transfusion of one's own blood (autologous transfusion) or blood from donors matched by blood type (homologous). The end result is that the hemoglobin mass (amount of red cells in the blood) is increased for a period of time and translates into the potential for increased endurance, work load, and recovery.

What are the health risks of blood doping?

Adding more red blood cells to the cardiovascular system can cause the blood to be more viscous and cause the heart to overload. A person with already thickened blood is at greater risk of dehydration. Artificially boosting the number of red blood cells increases the risk of:

- Increased stress on the heart and cardiovascular system, leading to an enlarged heart
- Blood clotting
- Stroke
- Adverse immune response, including allergic reaction

With transfusions, there is an increased risk of infectious disease, such as AIDS or hepatitis.

Chemical and Physical Manipulation

Chemical and physical manipulation is tampering or attempting to tamper with the sample in order to alter its integrity, using intravenous infusions, or sequentially withdrawing, manipulating, and reinfusing whole blood or extra fluids.

Gene Doping

Gene doping is the use of normal or genetically modified cells, the transfer of nucleic acids or nucleic acid sequences, or the use of agents that directly or indirectly affect functions known to influence performance by altering gene expression. Most gene transfer technologies are still in experimental phases. The long-term effects of altering genetic material are unknown, although several deaths have occurred during experimentation.

Intravenous (IV) Infusions

IV infusions or injections of any substance more than 100 mL per 12 hour period are prohibited unless they are received during a hospital treatment, surgical procedure, or as part of a clinical diagnostic investigation. Small volume intravenous injections (under 100 mL) are not prohibited as long as the substance delivered is not prohibited. TUEs are still required for all IV infusions that exceed the volume threshold outside of hospital treatment, surgical procedures, or clinical diagnostic investigations. IV infusions provided through on-site event medical services, ambulatory treatment, outpatient clinics, doctors' or medical offices, home visits, mobile IV clinics, boutique IV clinics, etc., ALL require a TUE and will be strictly evaluated under the relevant criteria. A precise description of the clinical situation and specific medical indication for the IV infusion must be given in the TUE application, to include a complete medical file, diagnosis, and physical exam at minimum. Emergency TUEs will be considered in exceptional circumstances. Please note that the health and well-being of the athlete must always remain the priority in emergency circumstances.

For more information regarding IV infusions or injections, call Athlete Express at (719) 785-2000.

REFERENCE CHART OF PROHIBITED SUBSTANCES AND METHODS

PEDs	Anabolic Agents	Hormones and Related Substances	Beta-2 Agonists	Diuretics and Masking Agents	Stimulants	Narcotics	Other	Enhancement of Oxygen Transfer	Chemical and Physical Manipulation	Gene Doping
Examples	<ul style="list-style-type: none"> • Testosterone • Nandrolone • Stanozolol • Methandrostenolone (Dianabol) • Androstenedione (Andro) • Tetrahydrogestrinone (THG, The Clear) • Dehydroepiandrosterone (DHEA) • Deca-Durabolin (Deca) • Selective Androgen Receptor Modulators (SARMs) 	<ul style="list-style-type: none"> • hGH (human growth hormone) • EPO (erythropoietin) • IGF-1 (Insulin-like Growth Factor 1) • Growth Hormone Releasing Peptides (GHRPs) • hCG (human chorionic gonadotrophin) in males only • ACTH (adrenocorticotrophin) • Insulin and insulin mimetics 	<ul style="list-style-type: none"> • Salbutamol • Formoterol • Salmeterol • Clenbuterol • Terbutaline • Fenoterol • Bambuterol • Higenamine • Vilanterol • Indacaterol 	<ul style="list-style-type: none"> • Furosemide • Hydrochlorothiazide • Probenecid • Spironolactone 	<ul style="list-style-type: none"> • Epi-Pen (epinephrine) • Amphetamine • Methylphenidate • Cocaine • Ephedrine • Modafinil • Phenethylamine and its derivatives • Lisdexamfetamine 	<ul style="list-style-type: none"> • Morphine • Heroin • Fentanyl and Derivatives • Oxycodone 	<p>Anti-Estrogenic Agents:</p> <ul style="list-style-type: none"> • Tamoxifen • Selective Endrogen Receptor Modulators (SERMs) <p>Cannabinoids:</p> <ul style="list-style-type: none"> • Marijuana • Hashish <p>Glucocorticoids:</p> <ul style="list-style-type: none"> • Betamethasone • Prednisolone • Cortisone • Prednisone 	<p>Blood doping (used to increase the number of red blood cells in the body by transfusion of one's own blood (autologous transfusion) or blood from donors matched by blood type (homologous))</p>	<p>Tampering, diluting urine, substituting urine samples, use of substances and methods, including masking agents which alter, attempt to alter, or may reasonably be expected to alter the integrity and validity of urine samples used in doping controls</p>	<p>Gene doping is the non-therapeutic use of cells, genes, or genetic elements to modify gene expression, thereby having the capacity to enhance athletic performance</p>
Athlete Rationale	<ul style="list-style-type: none"> • Building mass and muscular strength • Recovery • Reduction of joint pain 	<ul style="list-style-type: none"> • Builds mass and strength when combined with steroids • Improve blood's oxygen transport capacity (hGH/EPO) • Endurance, improved metabolism of sugar (hGH/Insulin) • Compensate for reduction of testicular size (hCG) 	<ul style="list-style-type: none"> • Improved respiratory capacity 	<ul style="list-style-type: none"> • Quick weight loss • Reduce urine concentration of PEDs to minimize detection • Limit excretion of anabolic agents 	<ul style="list-style-type: none"> • Alertness • Awareness • Will to win • Reduces fatigue • Maintain aggressiveness • Heart, lungs, brain function faster • Limits hunger 	<ul style="list-style-type: none"> • Relax and cope with the pressures of competition • Steadiness for athletes 	<p>Anti-Estrogenic Agents:</p> <ul style="list-style-type: none"> • Regulation of estrogen levels, <p>Cannabinoids:</p> <ul style="list-style-type: none"> • Reduce pain • Heightened sense of well-being • Euphoria <p>Glucocorticoids:</p> <ul style="list-style-type: none"> • Reduces pain and soreness • Reduces tiredness 	<ul style="list-style-type: none"> • Hematocrit (percent of red cells in the blood) is increased for a period of time and the blood can carry more oxygen to tissues that are performing work 	<ul style="list-style-type: none"> • Hiding the use of prohibited substances • Reduce the chances of prohibited substances being detected by intentionally diluting or manipulating the sample 	<ul style="list-style-type: none"> • Muscle development • Stimulate endogenous hormones
Legitimate Medical Uses	<ul style="list-style-type: none"> • Weight gain for wasting conditions (AIDS, Cancer) • Decreased gonadal function in males • Delayed puberty in males • Osteoporosis • Severe anemia • Hereditary angioedema • Metastatic breast cancer 	<ul style="list-style-type: none"> • EPO—kidney failure • Anemia • hGH—growth problems • Dwarfism • Insulin—diabetes • hCG—testosterone deficiency • Naturally produced during pregnancy 	<ul style="list-style-type: none"> • Treatment of asthma and other respiratory ailments. 	<ul style="list-style-type: none"> • Treat kidney disease and congestive heart failure • Reduce excess fluid from body • Management of high blood pressure 	<ul style="list-style-type: none"> • Treat conditions such as Attention Deficit Disorders (ADD/ADHD), asthma, narcolepsy, and obesity • Suppress hunger 	<ul style="list-style-type: none"> • Relieving severe pain, including in terminally ill cancer patients, or after surgery or injury • Help people relax because it reduces activity in the brain and nervous system • Induces sleep 	<p>Anti-Estrogenic Agents:</p> <ul style="list-style-type: none"> • Cancer and osteoporosis treatments <p>Cannabinoids:</p> <ul style="list-style-type: none"> • Reduce stress <p>Glucocorticoids:</p> <ul style="list-style-type: none"> • Treatment of allergies • Inflammations • Asthma 	<ul style="list-style-type: none"> • Blood transfusion 	<ul style="list-style-type: none"> • Legitimate medical indications for IV infusions and/or injections are well documented and are most commonly associated with either medical emergencies or in-patient care 	<ul style="list-style-type: none"> • Treatment of genetic diseases
Risks	<ul style="list-style-type: none"> • Rage • Liver and kidney dysfunction • Cancer • Clotting disorders • Stunted growth <p>Women:</p> <ul style="list-style-type: none"> • Masculinization • Abnormal menstrual cycles • Reduced breast size <p>Men:</p> <ul style="list-style-type: none"> • Impotence • Sperm reduction • Testicular shrinkage • Breast and prostate gland enlargement 	<ul style="list-style-type: none"> • Hypertension (ESAs/hGH) • Blood cancers/ leukemia (ESAs/hGH) • Anemia (ESAs) • Strokes (ESAs) • Heart attacks • Pulmonary embolism (ESAs) • Feminization in males (hCG) • Thyroid problems (hGH) • Diabetes (insulin) 	<ul style="list-style-type: none"> • Hypertension • Cardiac arrhythmia and high blood pressure • Nausea • Headaches and dizziness (constricting blood vessels in the brain) • Muscle cramps (constricting blood vessels in muscles) 	<ul style="list-style-type: none"> • Severe dehydration • Excessive weight loss • Muscle cramps • Blood volume depletion • Drop in blood pressure • Electrolyte imbalance • Potassium depletion • Cardiac arrhythmia • Death 	<ul style="list-style-type: none"> • Anxiety • Insomnia • Increased aggressiveness • Addiction • Dehydration • Shaking • Convulsions • High blood pressure • Sudden death • Increased risk of stroke • Heart attack and cardiac arrhythmia 	<ul style="list-style-type: none"> • Hallucinations • Fatigue • Increase/slow the heart rate, • Impair mental functions • Lower than normal blood pressure (hypotension) • A false sense of invincibility and failure to recognize injury • Addiction • Overdose 	<p>Anti-estrogenic Agents:</p> <ul style="list-style-type: none"> • Hormonal imbalance • Menopausal symptoms (i.e. hot flashes, sweating, insomnia) <p>Cannabinoids:</p> <ul style="list-style-type: none"> • Poor coordination • Mental and respiratory problems • Impairment <p>Glucocorticoids:</p> <ul style="list-style-type: none"> • Fragilization of tendons and muscles • Chronic fatigue • Hypertension • Immune suppression 	<ul style="list-style-type: none"> • Adding more red blood cells to the cardiovascular system can cause the heart to overload during exercise, increase stress on the heart, and cause blood clotting and stroke. With transfusions, there is an additional risk of infectious disease such as AIDS or hepatitis, or life threatening autoimmune responses 	<ul style="list-style-type: none"> • Complications of IV infusions and/or injections may include infiltration into the surrounding tissue, hematoma, an air embolism, inflammation of the vein, extravascular drug administration, accidental intra-arterial injection or post-treatment infection 	<ul style="list-style-type: none"> • Depends on manipulated genes (flu-like symptoms, increased risk of stroke and heart attack, risk of tumor development, and adverse events leading to death)

THERAPEUTIC USE EXEMPTIONS (TUEs)

THERE MAY BE A TIME during an athlete's career when they have a legitimate medical need to use a prohibited substance or method. If that situation arises, athletes must submit a Therapeutic Use Exemption (TUE) application before beginning the use of the medication or method. All TUEs are evaluated in accordance with the WADA International Standard for TUEs (ISTUE).

NOTE: In rare circumstances when a prohibited substance or method is required for emergency treatment, an athlete must file a TUE application with full medical documentation from the emergency as soon as reasonably possible after the treatment. Emergency treatment should not be withheld, as the athlete's health and well-being remain the top priority. In such cases, the emergency TUE request will be considered by a TUE Committee after treatment has taken place, per the WADA ISTUE.

USADA has several resources available to help athletes determine if they need to apply for a TUE. GlobalDRO.com allows athletes to search for the prohibited status of their medication online and its responsive web design is mobile friendly. USADA also provides a drug reference hotline with an expert available to answer any additional questions an athlete may have. The Drug Reference Line is available Monday through Friday, 8 a.m. to 4 p.m. MT, by calling (719) 785-2000 and selecting option 2.

Upon application, USADA must receive the entire medical file relevant to a given diagnosis because the TUE Committee has to be able to reach the same diagnosis and arrive at the same treatment plan as the athlete's physician. The most common reason for delayed or denied TUEs is a lack of medical documentation or a clear diagnosis. A prescription from a physician is not sufficient grounds in itself to obtain a TUE.

Please visit USADA.org/tue for more information on TUEs and the application process.

HOW TO APPLY FOR A TUE:

1. Print and complete the TUE application form with the treating physician.
2. Provide medical documentation to support the use of the prohibited substance (a complete and comprehensive medical history of the diagnosis, symptoms, management strategies, lab results, and a clear statement from the physician indicating why the use of non-prohibited alternatives are not effective in symptom management).
3. Submit the completed TUE application and medical documentation to USADA by email at tue@USADA.org or by fax at (719) 785-2029.
4. USADA will contact the athlete upon receipt of the TUE application, and it can take up to 21 days after receipt of a complete application for a decision to be made. All TUE applications are reviewed in accordance with the WADA ISTUE.
5. If a TUE is approved, the athlete will receive a certificate indicating the approval length for the prohibited substance and/or method. The period of validity for a TUE varies among cases. All medical information submitted to USADA remains confidential.



SUBSTANCE CLARIFICATIONS

Orthobiologics: Stem cell injections and PRP treatments

According to WADA regulations, “stem cell injections may or may not be prohibited, depending on how the cellular material is manipulated or modified for use.” PRP, or platelet-rich plasma, is not prohibited, although individual growth factors are still prohibited when given separately as purified substances, per S.2.5 of the WADA Prohibited List.

In most cases, PRP and stem cell therapy is allowed if no prohibited substances are added to the material and the stem cells are locally applied only to the injury with no intent to enhance performance. The sole outcome of PRP or stem cell therapy should be the return to pre-injury level of function, or a normal state of health.

As such, both treatments are prohibited if the product is modified in a way that can offer performance-enhancing benefits. WADA further clarifies that it’s prohibited to use both normal and genetically modified cells in any way if the process causes performance enhancement. Based on these regulations, athletes should be aware that the use of PRP and stem cell products cannot justify a positive doping test if any prohibited substances are identified in a sample.

Blood Donation

WADA has issued a public statement confirming that plasmapheresis is prohibited under M1.1 for the donor because the donor’s own red blood cells and other blood components are reintroduced into the circulatory system after the plasma has been separated. However, donating whole blood is permitted.

PRODUCTS MARKETED AS DIETARY SUPPLEMENTS are regulated differently than medications. It is very important for athletes who are considering using supplements to be aware of the potential risks, including:

- 1) A positive anti-doping test result
- 2) Negative and potentially dangerous health issues

USADA has created an online resource designed to provide athletes with the best possible information to evaluate the risks associated with the use of supplements. On [Supplement411.org](https://www.supplement411.org), athletes will find information that will help them **realize** that risk exists, **recognize** risk when they see it, and **reduce** their risk of testing positive or experiencing harmful health effects from the use of dietary supplements. The following information can be found at [Supplement411.org](https://www.supplement411.org), in greater detail.



Red Flags

There are many danger signs that athletes should look out for when determining if a specific supplement may pose a risk, such as claims that a supplement is an alternative to prescription medication or has performance-enhancing benefits.

Contamination

Another risk in the supplement industry is the issue of contamination. A manufacturer may produce a variety of products in a single facility. It's possible that the machines being used to manufacture one supplement may contain remnants of ingredients from other manufactured products.

Third-Party Testing

While it's not a guarantee, one way to investigate the safety of a dietary supplement and reduce the risk of a positive anti-doping test is to have the product tested and vetted by a third-party testing agency.

Question the Label

Some supplement manufacturers have been known to provide misleading information on their product labels, including leaving off prohibited substances that may be included in the product. They also may simply be unaware of compounds included in ingredients from overseas suppliers.

High Risk List

Because of inadequate industry oversight, the use of dietary supplements is very risky and can result in a positive drug test for substances that are not listed on the label or listed by a name different than the one used on the Prohibited List.

USADA has compiled a list of products that are considered to be of high risk to athletes and consumers. This can be found at [Supplement411.org](https://www.supplement411.org). The absence of a product on the list is not proof of minimal risk for a potential positive test.

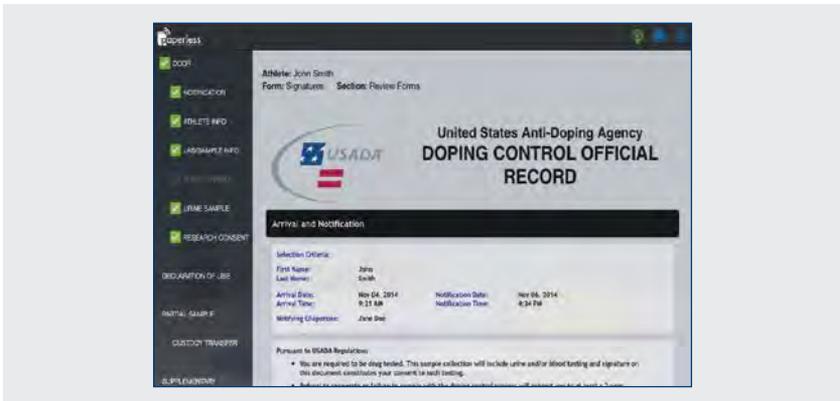
Athletes are subject to both **in-competition** and **out-of-competition** testing if they compete in events sanctioned by, or are members or license holders of, a National Governing Body, or fall under the USADA testing jurisdiction as defined in the USADA Protocol for Olympic and Paralympic Movement Testing.

The USADA anti-doping program utilizes in-competition (event) testing, as well as no-notice, out-of-competition testing, to help protect the rights of clean athletes and maximize the deterrent value of testing. Athletes are subject to both urine and blood testing 365 days a year and tests can occur at any time and any place. The sample collection process is designed to be safe, consistent, and as comfortable as possible for athletes.

The following information identifies athlete rights and responsibilities, the processes unique to each type of test, and the procedures athletes can expect to follow when providing a sample. The steps for blood and urine sample collection and processing are similar for both in-competition and out-of-competition testing.

Paperless Sample Collection

USADA's Doping Control Officers (DCOs) predominantly use a paperless format (iPads) to document a test on the Doping Control Official Record (DCOR). The paperless DCOR on the iPad provides excellent security and allows athletes to access their own testing data through their secure online USADA accounts.



Selection

There are a variety of reasons why an athlete might be selected for testing, including the:

- Physical demands of the sport
- Benefit an athlete would receive from doping in the sport
- History of doping in the sport and/or discipline

These key considerations are in accordance with WADA's International Standards for Testing and Investigations (ISTI).

SAMPLE COLLECTION PROCESS

WHILE DRUG TESTING may not be the most glamorous part of an athlete's career, it is critical to the global fight for clean sport. By participating in the anti-doping program, athletes are doing their part to help protect the integrity of competition.

The following information provides an overview of the sample collection process. Tests can be conducted by USADA, the International Federation (IF) for the athlete's sport, and/or WADA.

Sample Collection Process - Urine



1 Athletes selected for testing will be notified by a Doping Control Officer (DCO) or chaperone. They will ask the athlete to provide photo identification.



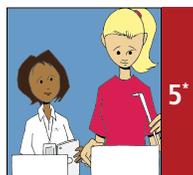
2 Following notification, athletes must stay within direct observation of the DCO or chaperone. Athletes should report to the doping control station (in-competition), or to an appropriate location (out-of-competition) immediately, unless a valid reason[‡] is discussed with, and permitted by, a DCO or chaperone.



3 Athletes will be asked to select a sealed sample collection vessel from a choice of vessels. They will check and inspect the collection vessel to ensure that it has not been tampered with and rinse their hands with water only before opening the vessel.



4 Athletes will be required to provide a urine sample of 90 mL under direct observation of a DCO or witnessing chaperone of the same gender. Minor athletes will be required to be accompanied by a representative of their choice. If 90 mL are not immediately provided, athletes will use additional collection vessels to provide the remainder when capable.



5* Athletes will be offered a choice of sealed sample collection equipment (which includes A sample and B sample bottles). They should check and inspect the equipment thoroughly prior to using.



6* Athletes will then divide their sample between the A and B sample bottles as instructed and seal them. The DCO will not handle any of the equipment during the procedure unless requested to do so by the athlete. Athletes are to maintain direct observation and control of their sample until the sample is sealed.



7* Once the sample is sealed, athletes will be asked to place the A and B sample bottles into plastic transport bags and back into the original box for secure transport to the laboratory.



8 The DCO will check the specific gravity (density) with what's left of the sample. Additional samples may be requested if the sample is not within the required range.



9 When instructed by the DCO, athletes will declare any prescription/non-prescription medications, injections, and/or dietary supplements they are taking on the Doping Control Official Record (DCOR), along with details of any Therapeutic Use Exemptions (TUEs) they have obtained. Finally, any comments should be included on the digital athlete evaluation form.



10 Athletes should check the entire DCOR thoroughly to ensure that the information is correct. Their name is not on the documentation that goes to the laboratory. The laboratory reports all results based on the unique sample code numbers to ensure the athlete's anonymity is protected. Athletes will then receive a copy of the test session documentation via email.

[‡] Valid reasons for delay include receiving medical attention, media commitments, or attending a medal ceremony.

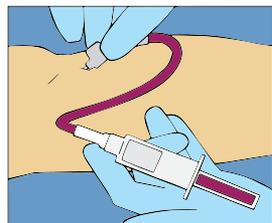
* While sample collection equipment may vary slightly according to the sample collection agency or region, the integrity of the sample will always be maintained.

Sample Collection Process – Blood

Athletes who compete in events sanctioned by, or are members or license holders of a National Governing Body, or who fall under the USADA testing jurisdiction as defined in the USADA Protocol for Olympic and Paralympic Movement Testing, are subject to blood testing. Every sample that USADA collects is evaluated through the Athlete Biological Passport program that examines levels of multiple biomarkers that can indicate doping.

The blood collection process closely resembles the urine collection process described previously, and it is not uncommon to provide both a urine and blood sample during a sample collection session. Here are a few differences and processes to expect:

- Some USADA DCOs will be qualified phlebotomists, but if they are not, a certified and/or licensed phlebotomist, called a blood collection officer (BCO), will perform the blood draw.
- To control for blood plasma volume changes, the athlete will be asked to remain seated for a specified period of time (usually about 20 minutes) prior to providing a blood sample.
- The BCO or DCO will select an area, typically the non-dominant arm, from which to draw the blood. The amount of blood drawn, which is less than two tablespoons, is unlikely to affect performance.



Protocols Related to Sample Collection

Sample Shipment and Notification

After the conclusion of the collection session, the DCO will ship the sample(s) to a WADA-accredited laboratory. The chain of custody of the sample is closely monitored by USADA, and the sample collection documentation that accompanies the sample(s) to the WADA-accredited lab does not include the athlete's name. The sample may be stored for up to 10 years.

An athlete will receive notification (either electronic and/or postal mail) from USADA that states the analysis has been completed. If the sample(s) was collected by another anti-doping organization, the athlete may not receive the results or any form of notification.

Providing Feedback

Athletes have the right to provide feedback about their USADA collection session. After each session, a USADA DCO will provide them with an evaluation form to provide feedback related to the collection session. USADA encourages athletes to provide feedback about their experience, and every form that is submitted to USADA is reviewed.

If the athlete or the athlete's representative is interested in submitting written comments specific to their sample collection session, this is done on a supplementary report form. This form is available from the DCO at the time of the sample collection.

Giving Consent for Research

Recognizing that research is the cornerstone of an effective anti-doping program, USADA has always placed emphasis on the study of prohibited substances, the development of tests, and advancing other research impacting anti-doping science.

During the drug testing process, a DCO will ask about the athlete's consent for research. When an athlete voluntarily chooses to contribute their sample to anti-doping research, all identification is removed so that the sample can never be traced back to the particular athlete. This anonymous sample can then be used in various anti-doping research projects. An athlete's consent to have their sample used for anti-doping research does not affect the selection or frequency of testing.

Minor Athletes (Under the Age of 18) and Athletes With a Disability

Minor athletes and those athletes with a disability requiring extra assistance are strongly encouraged to have a representative present. Athletes with a disability may also request modifications to the testing process. To ensure a minor athlete's well-being, a third party must always be in the toilet area to observe the witnessing chaperone, according to the ISTI minor athlete policy.



The minor athlete's representative may observe the provision of the sample, but only if authorized by the athlete and approved by the DCO.

Being Tested Outside the United States

As a member of the global anti-doping community, USADA works with many other Anti-Doping Organizations (ADOs) from around the world to coordinate testing of U.S. athletes living and training abroad. If the athlete is selected for testing under USADA's program, and the attempt is made outside of the United States, the sample collection authority will provide the athlete with a Letter of Authority confirming their selection for testing under the USADA program.

In addition to USADA, U.S. athletes are subject to doping control by:

- The ADO of the country or region in which they are living, training, or competing
- The World Anti-Doping Agency (WADA)
- The International Federation (IF) governing the athlete's sport, or a testing agency appointed by the athlete's IF
- Major games organizations, such as the International Olympic or Paralympic Committees, all continental championships, etc.

When the athlete is contacted or notified for testing, it's important to be aware of which entity is conducting the test. Ask for the DCO's credentials and have an understanding of an athlete's basic rights and responsibilities (see page 23). While many aspects of the testing process are identical worldwide, minor modifications to notification and collection protocols are normal. Ask to document any irregularities in writing should they arise and be of concern.





Testing FAQs

How are athletes selected for USADA testing at a competition or event?

In-competition testing plans are primarily developed by coordinating with each National Governing Body (NGB) and are often created in accordance with International Federation (IF) rules. Athletes may be selected for testing by USADA based on criteria that typically includes established rules set forth by an athlete's IF. An example of how athletes would be selected for in-competition or event testing could be: placed finishers, such as the top three finishers, as well as randomly selected athletes, such as 5th, 7th, 12th, 18th, 19th, etc.

How are athletes selected for USADA's out-of-competition testing?

USADA's test distribution plan establishes the number of tests per sport based upon the number of athletes in the USADA Registered Testing Pool and through evaluation of the International Standard for Testing and Investigations (ISTI). Tests are then allocated to periods throughout the year when out-of-competition testing is most effective, and according to selection criteria. Athletes may also be selected randomly or based on finishing place.

To maintain an effective anti-doping program, USADA retains the right to test athletes at any time and location.

How is an athlete notified for testing?

A Doping Control Officer (DCO) or a notifying chaperone will notify an athlete in person of their selection for doping control and will provide them with his/her credentials. The athlete will then be asked to acknowledge in writing on the Doping Control Official Record (DCOR) that they were notified. A DCO or chaperone can notify athletes at any time and any location, including their home, training facility/area, work, school, etc. If an athlete refuses to submit a sample, they are subject to an anti-doping rule violation.

The DCO or notifying chaperone will keep the athlete in direct observation and accompany them at all times until they report to the doping control station (in-competition), or to an appropriate location (out-of-competition), where they will complete the sample collection process.

Where does an athlete report for testing?

In-competition testing: An athlete, their representative (if applicable), and the notifying chaperone will report to the on-site doping control station immediately, unless there is a valid reason for delay, such as:

1. Attending a medal ceremony
2. Media commitments
3. Medical obligation (e.g., receiving treatment or cooling down)
4. Competing in further events

After notification, in order to discourage excessive hydration before providing a urine sample, athletes are encouraged to limit their consumption of liquids. However, they may consume food at their own risk.

Out-of-competition testing: A safe, secure, and private location (e.g., a home or training facility) will be used as the doping control station during the sample collection session. Sample collection documentation may be started at the initial location of notification and athletes may choose to eat at their own risk while waiting to provide the sample.

How can athletes provide feedback or comments about their testing experience?

Once a test has been completed, athletes are emailed copies of their DCOR, along with a link to an evaluation form.

If an athlete or the athlete's representative are interested in submitting comments specific to their sample or the testing session, this may be done via the form located at the bottom of the email.

What kind of information accompanies the urine and/or blood sample to the lab?

Every sample sent to a WADA-accredited laboratory includes an abbreviated copy of the DCOR and a Declaration of Use, which does NOT include the athlete's name. The information on the laboratory copy of the DCOR and Declaration of Use contains:

- Athlete gender
- The testing menu for which the sample is analyzed
- If it was an out-of-competition test, or the name of the event if it was an in-competition test
- The athlete's sport and discipline (if applicable)
- City and state where the test occurred
- The sample code number that matches the numbers on the sample collection kit
- The date and time of the sample collection
- Indication of whether the athlete wants their sample to be donated for research
- The list of medications, supplements, and other substances or methods that the athlete declares
- The athlete's current age, but not birth date, for certain types of blood testing

Athlete Rights and Responsibilities

Athletes have a number of rights and responsibilities in regards to doping control. These rights and responsibilities are essentially the same for both in-competition and out-of-competition testing.

When selected for testing, athletes have the RIGHT to:

- Have a representative accompany the athlete throughout the doping control process
- Have a language interpreter present, if one is available
- Complete a training session or other activities while the DCO or notifying chaperone observes the athlete (out-of-competition)
- Have the testing procedures explained to the athlete, including how the sample collection equipment works
- Request to view the DCO's credentials
- Choose a collection vessel and sample collection kit
- Receive a copy of the sample collection documentation used to document the processing of the athlete's sample
- Provide feedback on the USADA Athlete Evaluation Form and/or a Supplementary Report Form
- Request a delay in reporting to the doping control station for valid reasons (in-competition testing)
- Request modifications if the athlete has a disability

During a test, athletes are RESPONSIBLE for:

- Complying with the sample collection procedure**
- Reporting immediately to the doping control station unless there are approved reasons for delay
- Presenting government issued photo identification at the time of notification
- Staying in direct observation of the DCO or notifying chaperone from the time of notification until the sample collection session is complete
- Keeping the collection vessel in their possession and in view of the DCO at all times
- Having control of the sample until it is sealed in the sample collection bottles (the DCO may assist upon request)
- Ensuring the sample code number is correctly documented on the sample collection documentation
- Ensuring all appropriate sample collection documentation is accurate, complete, and signed

***NOTE: As defined by the Code: "Refusing, or failing without compelling justification, to submit to Sample Collection after notification as authorized in applicable anti-doping rules or otherwise evading Sample Collection is an anti-doping rule violation."*

THE USADA REGISTERED TESTING POOL

Athletes who have been identified and notified that they are part of the USADA Registered Testing Pool (RTP) are responsible for directly keeping USADA informed of their Whereabouts so as to be available for out-of-competition testing. Providing thorough, accurate Whereabouts information helps USADA provide athletes with the best anti-doping program possible.

How will an athlete know if they are in USADA's RTP?

The RTP selection criteria is established by USADA. Athletes will receive an email notification from USADA if they are in the RTP and need to provide Whereabouts.

How long may an athlete be subject to the requirements of the RTP?

If an athlete no longer meets the requirements to be included in the RTP, or has provided written notification of their retirement to USADA, their NGB, and their IF, he or she will be notified of their pool removal and the end of their need to provide Whereabouts information.

USADA REGISTERED TESTING POOL (RTP)

INTERNATIONAL TESTING POOL (ITP)

- All International Federation (IF) RTP athletes
- Sanctioned athletes
- Athletes returning from retirement who were previously in an IF, RTP, or the ITP
- Any athlete whom USADA chooses to add to this pool

NATIONAL TESTING POOL (NTP)

- Athletes meeting NGB, USOC, and/or USADA criteria
- Any athlete whom USADA chooses to add to this pool

Whereabouts Filing Requirements (ITP)

- Address of the athlete's overnight location(s)
- Address and usual attendance time for each location where the athlete trains, works, or conducts regular activities (school, church, etc.)
- Athlete's competition schedule
- A daily 60-minute time slot

Whereabouts Filing Requirements (NTP)

- Address of the athlete's overnight location(s)
- Address and usual attendance time for each location where the athlete trains, works, or conducts regular activities (school, church, etc.)
- Athlete's competition schedule

Notification (ITP)

- Phone call made to athlete in last five minutes of 60-minute time slot
- The phone call is for confirming unavailability of athlete, not to locate an athlete for testing

Notification (NTP)

- Phone call made to athlete after a reasonable attempt is made to confirm the athlete's location and unavailability

Athlete Whereabouts Requirements

What do athletes need to do to be sure that they are in compliance with the Whereabouts Policy?

Under the International Standard for Testing and Investigations (ISTI) and the USADA Whereabouts Policy, if an athlete is in the USADA RTP, they are responsible for informing USADA of their Whereabouts. It is required that they submit accurate and complete quarterly Whereabouts filings and updates so that USADA can locate them for testing.

To ensure compliance with Whereabouts requirements, athletes must:

- File accurate and complete Whereabouts.
- Update their Whereabouts as soon as their plans change (don't wait until the last minute, or until after arrival at a new location). Athletes also need to delete old locations when adding a new location.

Information Required for Whereabouts Filings

Whereabouts filings must contain specific schedule and contact information that is complete and accurate, including **locations of regular activities, work or school locations, an overnight residence, and training facilities.**

How to Submit Whereabouts Information

Athletes can use USADA's online system to submit Whereabouts filings. USADA will provide athletes with a username and password to access the online Whereabouts system. To obtain a username and password, call Athlete Express at (719) 785-2000 or toll-free at (866) 601-2632, or email athleteexpress@USADA.org.

Quarterly Filing Deadlines

Whereabouts filings must be submitted quarterly (every three months) and are due one day prior to the beginning of each quarter. Deadlines for submitting Whereabouts filings are:

- **December 31** for the first quarter (beginning January 1)
- **March 31** for the second quarter (beginning April 1)
- **June 30** for the third quarter (beginning July 1)
- **September 30** for the fourth quarter (beginning October 1)

At least once a year, an athlete must also complete Athlete's Advantage[®], an online education tutorial that provides information related to anti-doping requirements for USADA RTP athletes. Athletes must complete the tutorial prior to submitting Whereabouts filings.

Whereabouts Updates

If an athlete's schedule changes during the quarter, they must submit an update to USADA as soon as possible. For example, if an athlete will be in a location different from what they provided on their quarterly Whereabouts filing, such as traveling for a competition, they must submit an update.

Access to an athlete's Whereabouts account is located at Athlete.USADA.org.

60-Minute Time Slot

For athletes in the ITP, in addition to their regularly-scheduled activities, they must provide a specific 60-minute time slot every day between 5 a.m. – 11 p.m. when they are available and accessible for testing. Athletes choose the 60-minute time slot to best fit their schedule and can be subject to a missed test if not available during this window.

THE BEST WAYS TO SEND UPDATES:



Online:

Login to Athlete Express at [USADA.org](https://www.usada.org)



**Athlete Express
Updater App:**

**Update your Whereabouts instantly
through the mobile app**

Helpful Hints - Updates

- Athletes in both the ITP and NTP must submit updates to USADA if their schedule changes.
- Athletes can be tested at any time during the day, even outside their 60-minute time slot.
- Update USADA immediately! Even if you don't know the address or exact details, update USADA with the city, state, or other available location information.
- Heading out of town? Athletes often receive a Whereabouts Failure when they wait to update until they are at the airport, on the airplane, or after they arrive at their destination. Update before leaving home!
- Make sure to add travel days when updating your schedule and delete outdated locations.
- If an athlete moves or changes their primary residence or training facility, they need to update their Whereabouts filing.
- Athletes need to update their overnight location for every day they are required to submit Whereabouts.
- Whereabouts Failures often occur when athletes are attempted at home, but the DCO learns the athlete was actually at a training facility, work, or out of town. Remember to provide all required Whereabouts information on your Whereabouts filing and in subsequent updates!
- When updating information, make sure to delete any information that is no longer accurate.

For questions about updates, USADA's online system, or help with username or password issues, contact Athlete Express by calling (719) 785-2000, toll-free at (866) 601-2632, or by emailing athleteexpress@USADA.org.

It is an athlete's responsibility to update USADA any time their schedule changes from the information submitted on their quarterly Whereabouts filing, even if the task of updating has been delegated to someone else.

Whereabouts Failures

Providing timely and accurate Whereabouts information is vitally important to ensure USADA can provide the best anti-doping program to clean athletes. It is critical that athletes submit their Whereabouts filing by each deadline, update their Whereabouts information when plans change, and make sure that they are available at the locations and times specified on their Whereabouts filing or updates.

What constitutes a Whereabouts Failure?

A Whereabouts Failure is a filing failure or a missed test. Whereabouts Failures are listed on the athlete website when an athlete logs into their account.

How could an athlete receive a missed test?

Athletes could receive a missed test if they are in the ITP and are unavailable during the 60-minute time slot at the location specified on their Whereabouts filing or update.

How could an athlete receive a filing failure?

An athlete could receive a filing failure if he/she is in the ITP or NTP and if:

- A quarterly Whereabouts filing has not been submitted to USADA by the specified deadline
- They have not updated their Whereabouts information in a prompt and timely manner
- Their Whereabouts information is inaccurate or too incomplete to reasonably locate them for testing

How will an athlete be notified of a Whereabouts Failure?

Athletes will be sent initial notice* by email and mail of an apparent Whereabouts Failure no later than 14 days after the discovery of the Whereabouts Failure. Athletes can also choose to have a secondary contact receive notification of their Whereabouts Failure(s).

- After notice is received, athletes will be responsible for subsequent Whereabouts Failures, regardless of whether the subsequent failure involves the same type of Whereabouts Failure or a different type of Whereabouts Failure. For example, an athlete whose first failure resulted from a failure to file Whereabouts by the deadline will be held responsible for a second failure whether it's related to the continued failure to file by the subsequent deadline, or another missed test or filing failure.
- Athletes have the opportunity to provide a response to the initial letter and explain their actions in writing within 14 days of the initial notification.
- If a response is received, USADA will review the response and make a final determination within 14 days of receipt of the response. The athlete is then notified* of the final decision.
- If no response is provided by the athlete, the initial decision will be upheld and the athlete will be notified.*
- If the athlete chooses to contest the final determination of a Whereabouts Failure, they can request an administrative review, in writing, within 14 days of the final notification letter.
- WADA and each IF also have a right to appeal USADA's final Whereabouts Failure decisions.

**The USOC and an athletes' NGB are copied on all correspondence. WADA and an athlete's IF also have access to all Whereabouts Failure information through the Clearinghouse.*

How many Whereabouts Failures make an athlete ineligible?

An athlete could be subject to an anti-doping rule violation (ADRV) should they accumulate **three Whereabouts Failures in any rolling 12-month period**. Please note that any combination of three missed tests and/or filing failures declared by any Anti-Doping Organization or an International Federation may constitute an ADRV.

An ADRV could lead to ineligibility, which means the athlete would be banned for a specific period of time (up to two years for a first violation) from participating in any competition or other activity authorized by the athlete's NGB or the USOC.

For a complete copy of the Whereabouts Failure Policy, visit USADA's website at [USADA.org/whereabouts](https://www.usada.org/whereabouts).

MARK YOUR CALENDARS!



3 IN 12

THREE Whereabouts Failures
in **12 MONTHS** will be a Violation.

Athlete Retirement

At some point in an athlete's career, they may make the decision to retire from sport. When they are ready for retirement, there are steps that must be taken to make it official and to remove themselves from the testing pool. They must promptly inform USADA, their NGB, and their IF in writing via mail or email that they are retiring. They should also check with their IF to determine if there are additional steps they need to follow to complete the retirement process.

Until an athlete has finalized all of the necessary retirement steps, they are still subject to the requirements of an athlete in a USADA Registered Testing Pool.

If an athlete does not provide advance written notice of retirement and is notified for testing, but refuses to provide a sample for an out-of-competition test, this is a refusal to test. If they refuse to cooperate or fail to report to testing within the given time frame, the athlete will be subject to all consequences consistent with an anti-doping rule violation.

What if an athlete wants to come out of retirement and return to competition?

Athletes are required to notify USADA and their IF, in writing, of their return from retirement and be in the RTP for at least six months before participating in any national or international events. At the start of the six months, athletes have to submit Whereabouts and make themselves available to be tested. If they wish to seek an exemption from the six-month written notice rule, they must apply to WADA, not the USOC.

NOTE: USADA will not suspend or terminate the prosecution of an anti-doping rule violation as a result of an athlete's subsequent retirement.

All Potential Major Games Athletes

In accordance with the USOC National Anti-Doping Policies, all American athletes who are credentialed for the Olympic, Paralympic, Pan American, Para Pan American, and Youth Olympic Games are required to undergo anti-doping education in the months prior to the event.

All athletes appointed to a U.S. team may also be subject to additional testing throughout the Games by the International Olympic Committee and International Paralympic Committee (IOC/IPC) or the Games Organizing Committee.

RESULTS MANAGEMENT

USADA is responsible for the results management and adjudication process for the U.S. anti-doping program of the Olympic and Paralympic movement in the United States. To facilitate that process, USADA utilizes the Protocol for Olympic and Paralympic Movement Testing (the Protocol).

The objective of the Protocol is to provide a process that:

- Is fair to athletes and others
- Has international credibility
- Provides for a full evidentiary hearing with the right of appeal
- Eliminates the conflicts that could arise from NGBs directly sanctioning their own members

Anti-Doping Rule Violations (ADRVs)

Doping, as defined by the Code, is the occurrence of one or more of the following anti-doping rule violations (ADRV):

- Presence of a prohibited substance or its metabolites or markers in an athlete's sample
- Use or attempted use by an athlete of a prohibited substance or a prohibited method
- Evading, refusing, or failing to submit to sample collection
- Violation of applicable requirements regarding athlete availability for out-of-competition testing, including failure to file required Whereabouts information and missed tests
- Any combination of three missed tests and/or filing failures, as defined in the International Standard for Testing and Investigations, within a 12-month period by an athlete in a Registered Testing Pool
- Tampering or attempted tampering with any part of doping control
- Possession of a prohibited substance or a prohibited method
- Trafficking or attempted trafficking of any prohibited substance or prohibited method
- Administration or attempted administration to any athlete in-competition of any prohibited substance or prohibited method, or administration or attempted administration to any athlete out-of-competition of any prohibited substance or any prohibited method that is prohibited out-of-competition

- **Complicity:** Assisting, encouraging, aiding, abetting, conspiring, covering up, or any other type of intentional complicity involving an anti-doping rule violation, or attempted anti-doping rule violation
- Association by an athlete or other person subject to the authority of an Anti-Doping Organization in a professional or sport-related capacity with any athlete support person who:
 - is serving a period of ineligibility related to one of the above ADRVs
 - has been convicted outside of sport to have engaged in conduct that would be considered an ADRV

Specified Substances

While an ADRV generally carries a standard sanction of four years of ineligibility for a first violation and a loss of results, an athlete may receive a reduced sanction for an ADRV related to a "Specified Substance."

On the Prohibited List, all prohibited substances are considered "Specified Substances" **except** for:

- Anabolic agents
- Peptide hormones, such as erythropoiesis-stimulating agents (ESAs)
- Growth hormone, growth hormone releasing peptides (GHRPs) and related substances, and mimetics
- Certain hormone and metabolic modulators, such as agents modifying myostatin function(s) and insulins
- Non-specified stimulants

In addition, prohibited methods are NOT "Specified Substances."

What is the notification process for test results?

Laboratory results reports are sent to USADA. USADA provides notification of the test result to the athlete, the athlete's NGB, and the USOC. The athlete's written notification will either be sent through email, if an email address was provided during the test session, and/or by first class/priority mail. The results letter is also available through the athlete's online account. In general, athletes will typically receive their test results within six to eight weeks.

What are the consequences if an athlete commits an ADRV?

Sanctions on athletes may include, but are not limited to:

- Disqualification of results in a particular competition or event
- Forfeiture of any medals, points, and prizes
- Team disqualification and forfeiture
- Fines
- Loss of benefits, grants, awards, employment, and training facilities provided by the USOC
- An ineligibility period that may vary according to circumstances
- Public announcement

For more information on consequences of ADRVs, please refer to the Protocol at [USADA.org/publications-policies](https://www.usada.org/publications-policies).

When are doping violations publicly announced?

USADA publicly announces doping violations following the conclusion of its results management process or as otherwise provided in the applicable rules. USADA also announces aggregate data for all test results and arbitration outcomes on its website. USADA does not comment on cases in process; however, if an athlete or their representative publicly comments while their USADA case is pending, USADA may respond publicly by providing details about the athlete's case.

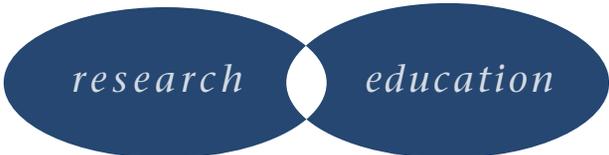
What is an Adverse Analytical Finding (AAF)?

An AAF is a report from a WADA-accredited laboratory that identifies the presence of a prohibited substance and/or its metabolites or markers in a sample.





U.S. Anti-Doping Agency



Athletes in the U.S. are supported by a gold standard testing process aimed at detecting and deterring doping, following the worldwide harmonized practices for testing and results management. At the same time, significant efforts in education are undertaken to prevent doping in future generations and investment in research is committed to advance anti-doping science.

TESTING

■ SAMPLE COLLECTION

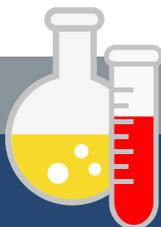
Two types of testing:

- In-competition and out-of-competition (no notice)

Athletes are subject to both urine and blood collection for analysis.

■ LABORATORY ANALYSIS

Samples are collected and processed, sent to WADA-accredited labs for analysis, and stored for up to ten years for possible retesting as new testing detection methods are developed.



RESULTS MANAGEMENT

■ NO ADVERSE ANALYTICAL FINDING

- No prohibited substances detected.
- Notice is sent to the athlete, the athlete's national governing body (NGB), and U.S. Olympic Committee (USOC).
- **No further action taken.**

■ ADVERSE ANALYTICAL FINDING



- One or more prohibited substances detected in sample; USADA receives adverse analytical finding "A" lab report.
- Notice of finding sent to athlete, NGB, USOC, athlete's international federation (IF) and WADA.
- Athlete has the option to proceed with the "B" sample analysis at the lab. Athlete and/or athlete's representative has the right to attend processing of "B" sample.
- "B" sample finding received by USADA and copy is sent to athlete, NGB, IF, WADA and USOC.
- **Independent review panel conducts full review and makes recommendation.**

■ NO ANTI-DOPING RULE VIOLATION

- Athlete, NGB, IF, WADA and USOC receive notification.

■ ANTI-DOPING RULE VIOLATION (ADRV)

Acceptance of Sanction

- Athlete receives notice and accepts proposed sanction.
- **Public announcement made of sanction.**

Request for Hearing

- Athlete exercises right to request American Arbitration Association (AAA) hearing.
- Athlete either accepts AAA ruling (and if any, sanction) or has right to appeal to CAS.

CAS Ruling is Final

- **Public announcement made of AAA ruling and, if applicable, CAS ruling.**



The WADA International Standards for Testing and Investigations (ISTI) is a set of specifications that requires USADA and other Anti-Doping Organizations (ADOs) around the world to incorporate processes that ensure their ability to gather intelligence from analytical and non-analytical information. This knowledge allows ADOs to rule out the possibility of anti-doping rule violations (ADRVs), or to initiate those proceedings if a violation is thought to have been committed.

While investigations have been a part of ADO procedures long before the ISTI (formerly the International Standards for Testing) went into effect, these standards for collaboration between ADOs and law enforcement place an even greater emphasis on intelligence gathering from all available resources.

Many of USADA's investigations stem from tips left on its Play Clean Tip Line. In addition to ensuring that tips can be submitted anonymously, USADA handles all tips in a secure and systematic manner to ensure their reliability, relevance, and accuracy. Through its Play Clean Tip Center, USADA makes available a number of ways to report the abuse of performance-enhancing drugs in sport, which can help protect clean athletes and promote clean competition.

Play Clean Tip Center:

- (877) 752-9253
- playclean@USADA.org
- USADA.org/playclean



[U.S. Anti-Doping Agency]



Need help? Contact Athlete Express:

- (719) 785-2000 or Toll-Free (866) 601-2632
- athleteexpress@USADA.org



Don't forget to check the status of your medications:

- GlobalDRO.com
- Call the Drug Reference line at (719) 785-2000, Option 2



NOTE: USADA's Drug Reference resources do not provide medical advice, but provide the status of medications under anti-doping rules in the sport.

Recognize, Realize, and Reduce your risk from dietary supplements:

- [Supplement 411.org](http://Supplement411.org)



Help keep your sport clean:

- (877) 752-9253
- playclean@USADA.org
- USADA.org/playclean



If you're an RTP athlete who needs to file Whereabouts:

- Visit the Whereabouts section of the USADA website to log in to your Whereabouts account: USADA.org/whereabouts

Want to know if you need a TUE?

- TUE Information: USADA.org/tue
- Email: tue@usada.org

For more education:

- Request a group presentation, webinar, or e-learning materials from USADA: education@USADA.org

Publications & Policies:

- Visit USADA.org/publications-policies for:
 - General anti-doping information for athletes and coaches
 - Testing and results management processes and procedures
 - Prohibited substance and TUE information





What Is TrueSport?

TrueSport® is a grassroots movement dedicated to promoting a positive youth sport experience. An experience that helps young athletes build the life skills and core values for success...on and off the field. Our mission is simple and bold: to change the culture. To ensure that youth sport in America delivers on its bright, amazing promise.

Get Informed. Get Inspired. Get Involved.

Explore a world of resources at TrueSport.org, a place where coaches, parents, and kids can teach, learn, and play.

- For a collection of lesson plans visit: teach.truesport.org
- Parents, teachers, and coaches can learn more at: learn.truesport.org
- Youth athletes can play games that reinforce positive values here: play.truesport.org
- Sign up to receive the TrueSport newsletter at: <http://engage.TrueSport.org/newsletter-signup>

TrueSport Ambassadors: Proud to Live TrueSport

- TrueSport Ambassadors give back to the sports they love and to future generations of athletes. They believe in the ideals of TrueSport and serve as powerful role models and advocates for millions of young up-and-coming athletes, as well as the parents, coaches, teachers, and others who nurture and support them.



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