

United States Anti-Doping Agency (USADA)

Examples of Permitted Medications



* May be prohibited by certain international federations

- **Antacids:** Di Gel, Gaviscon, Maalox, Mylanta, Tums
- **Anti-Anxiety*:** Atarax, Ativan, Buspar, Librium, Valium, Vistaril
- **Antibiotics:** All are permitted.
- **Anti-Diabetics:** Actose, Amaryl, DiaBeta, Diabinese, Glucophage, Glucotrol, Glyburide, Glynase, Micronase, Prandin, Precose, Rezulin
- **Antidiarrheals:** Bismuth subsalicylate, diphenoxylate w/ atropine, Imodium, kaolin w/ pectin, Kaopectate, Lomotil, Lonox, loperamide, Pepto Bismol
- **Topical Antifungals:** Cruex, Desenex, Lamisil, Lotrimin, Micatin, Monistat, Mycostatin, Tinactin
- **Anti-Nausea/Antivertigo*:** Antivert, Bonine, Bucladin S, Compazine, diphenhydramine, Dramamine, Emetrol, Motion Aid, Tigan
- **Antiviral:** Acyclovir, didanosine, Famvir, Reltenza, Stavudine, Tamiflu, Valtrex, Zidovudine
- **Asthma:** Cromolyn sodium, ipratropium, nedocromil sodium, Singulair, theophylline
 - **Restricted Beta-2 agonists:** **NOTE: See restrictions under Anabolic Agents.**
 - **Restricted Glucocorticosteroids:** Aerobid, Azmacort, Beconase, Beclovent, Flonase, Flovent, Nasacort, Nasonex, Pulmicort, Rhinocort, Vanceril - **NOTE: Restricted to inhalant and/or nasal forms only. Medical notification form required on file with USADA.**
- **Cold Medications:**
 - **Antihistamines*:** Allegra, Benadryl, chlorpheniramine, Claritin, clemastine, diphenhydramine, Zyrtec
 - **Decongestants:** Naphazoline, oxymetazoline, phenylephrine, tetrahydrozoline, xylometazoline
NOTE: Decongestants allowed in topical form only, e.g., nasal spray.
 - **Cough preparations:** Codeine, dextromethorphan, guaifenesin, iodinated glycerol
CAUTION: Many combination cold medications contain prohibited substances.
 - **Expectorant:** Guaifenesin
- **Contraceptives:** Demulen, Desogen, Genora, Loestrin, Lo-Ovral, Modicon, Nelova, Nordette, Ortho-Cyclen, Ortho-Tri-Cyclen, Ovcon, Ovral, Triphasil.
- **Ear preparations:** Auralgan, Auro Ear Drops, Cerumenex, Cortisporin, Debrox, Murine Ear Drops, Otic Domeboro, Vosol
- **Eye preparations:** Artificial Tears, boric acid, Murine Plus, Mycitracin, Naphcon-A, Neo-Synephrine, oxymetazoline, Polysporin, Relief, tetrahydrozoline, Vasocon-A, Visine
- **Hemorrhoidals:** Anusol, Anusol-HC, Preparation H - **NOTE: External cream or ointment only.**
- **Injectable Local Anesthetics:**
 - Bupivacaine, lidocaine, mepivacaine, procaine, etc. can be used (**not cocaine**).
 - Vasoconstrictors (e.g. adrenaline) may be used in conjunction with local anesthetics.
 - Only local or intra-articular may be administered.
 - Only when medically justified.**NOTE: Where the rules of a responsible authority so provide, a medical notification form on file with USADA is required.**
- **Laxatives:** Correctol, Dulcolax, Ex-Lax, Fibercon, Fleet Enema, Metamucil, Milk of Magnesia
- **Liniments/Topicals:** Aspercreme, Ben-Gay, capsaicin, Flex-All 454, Icy Hot Balm, Myoflex Cream, Sportscreme, Vicks Vaporub, Zostrix, Zovirax
- **Muscle Relaxants*:** Baclofen, Flexeril, Norflex, Soma, Zanaflex
- **Pain/Anti-Inflammatory:** Acetaminophen, aspirin, Bayer Aspirin, Bufferin, Celebrex, codeine, Dolobid, Ecotrin, Empirin, ibuprofen, naproxen, Panadol, Phenaphen w/ Codeine, piroxicam, propoxyphene, Tylenol (Plain, Ex-Strength), Tylenol w/ Codeine, Vioxx
 - **Non-steroidal anti-inflammatory agents (NSAIDS):** All are permitted.
 - **Topical glucocorticosteroids:** Administration of aural (ear), ophthalmological (eye), and dermatological (skin) preparations are permitted.
- **Sedatives/Sleep Aids*:** Antivert, Ativan, Compaz, Dalmane, diphenhydramine, Halcion, Nytol, Restonil, Sominex, Unisom, Valium, Xanax
- **Supplements:** **CAUTION: Some may contain prohibited substances; use of these products is at the athlete's own risk.**
- **Ulcer Medications:** Antacids, Axid, Carafate, Pepcid, Prevacid, Prilosec, Propulsid, Tagamet, Zantac
- **Vaginal Preparations:** AVC, Femstat, Gyne Lotrimin, Metrogel, Monistat, Mycelex, Mycostatin, vaginal tablets, Terazol, Vagistat

* May be prohibited by certain international federations.

Consult your physician for specific information on appropriate medications for treatment. Use of foreign products is at the athlete's OWN risk.

Check the USADA Guide (p. 29-30) for a more extensive list of permitted substances.

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Effective beginning September 2001

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PROHIBITED CLASSES *(All related compounds are prohibited)*

- ⊗ **Anabolic Agents:**
 - *Anabolic-androgenic steroids:* Androstenediol, androstenedione, danazol, DHEA, nandrolone, oxandrolone, stanozolol, testosterone
 - *Beta-2 agonists:* Advair*, bambuterol, bitolterol, clenbuterol, fenoterol, formoterol* (e.g., Foradil), metaproterenol, orciprenaline, pirbuterol, reproterol, rimeterol, salbutamol* (e.g., Albuterol, Proventil, Ventolin, Combivent), salmeterol* (e.g., Serevent), terbutaline* (e.g., Brethaire)

*NOTE: * Allowed by inhaler only to prevent or treat asthma and exercise-induced asthma. Medical notification form required on file with USADA.*
 - ⊗ **Diuretics:** Acetazolamide, bendroflumethiazide, bumetanide, canrenone, chlorthalidone, ethacrynic acid, furosemide, hydrochlorothiazide, indapamide, mannitol (IV injection), mersalyl, spironolactone, triamterene
 - ⊗ **Narcotics:** Buprenorphine, dextromoramide, diamorphine (heroin), hydrocodone, meperidine, methadone, morphine, oxycodone, oxymorphone, pentazocine
 - ⊗ **Peptide Hormones, Mimetics and Analogues *(and all releasing factors):***
 - *Chorionic Gonadotrophin (hCG)* - *NOTE: Prohibited in males only*
 - *Pituitary & synthetic gonadotrophins (LH)* - *NOTE: Prohibited in males only*
 - *Corticotrophins (ACTH, tetracosactide)*
 - *Growth hormone (hGH)*
 - *Insulin-like Growth Factor (IGF-1)*
 - *Erythropoietin (EPO)*
 - *Insulin* - *NOTE: Allowed only to treat certified insulin-dependent diabetes. Medical notification form required on file with USADA.*
 - *Clomiphen, cyclofenil, tamoxifen, aromatase inhibitors* - *NOTE: Prohibited in males only*
 - ⊗ **Stimulants:** Amphetamine (e.g., Adderall, Dexedrine), prohibited Beta-2 agonists, bromantan, bupropion (e.g., Wellbutrin, Zyban), caffeine (>12mcg/ml), cocaine, ephedrine, Ma Huang (herbal ephedrine), methylphenidate (e.g., Ritalin, Concerta), norpseudoephedrine, pemoline, phenylephrine (systemic), phenylpropanolamine, pseudoephedrine
- NOTE: Some international federations have different substances on their respective prohibited list. Please review both the IOC and your respective IF prohibited lists.*

CLASSES OF PROHIBITED SUBSTANCES IN CERTAIN CIRCUMSTANCES

- ⊗ **Alcohol*:** Ethanol
- ⊗ **Beta-Blockers*:** Acebutolol, alprenolol, atenolol, betaxolol, bisoprolol, esmolol, labetalol, metoprolol, nadolol, oxprenolol, pindolol, propranolol, sotalol, timolol
- * Tested for where rules of a responsible authority so provide.
- ⊗ **Cannabinoids*:** Hashish, marijuana (THC) *NOTE: Tested for at Olympic Games.*
- ⊗ **Local Anesthetics:** Cocaine (IM and IV administration prohibited)
- NOTE: See regulations under allowed medication section.*
- ⊗ **Glucocorticosteroids:** Systemic use is prohibited when administered orally, rectally, or by intravenous or intramuscular injection. *NOTE: Some international federations require written notification for intra-articular and local injections. Medical notification form required on file with USADA.*

This list is not complete and is subject to change.

It is the athlete's responsibility to check the status of all medications.

PROHIBITED METHODS

- ⊗ **Blood Doping:** The administration of blood, red blood cells, and related blood products to an athlete, which may be preceded by withdrawal of blood from the athlete who continues to train in such a blood-depleted state
- ⊗ **Administering Artificial Oxygen Carriers or Plasma Expanders**
- ⊗ **Pharmacological, Chemical and Physical Manipulation:** Bromantan, catheterization, diuretics, epitestosterone, glutaraldehyde, probenecid, substitution

OUT-OF-COMPETITION (OOC) TESTING

Unless requested by the responsible authority, out-of-competition (OOC) testing is directed solely at the following classes - Anabolic Agents, Diuretics, Peptide Hormones, Mimetics and Analogues, and Prohibited Methods.

QUESTIONS: Call USADA's Drug Reference Line - 1-800-233-0393

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United States Anti-Doping Agency



WHAT IS U.S. ANTI-DOPING AGENCY (USADA)?

The United States Anti-Doping Agency (USADA) is the independent anti-doping agency for Olympic sports in the United States. USADA was created as the result of recommendations set forth by the United States Olympic Committee's Select Task Force on Externalization. USADA began operations Oct. 1, 2000, with full authority for testing, education, research and adjudication for U.S. Olympic, Pan Am and Paralympic athletes. It is USADA's responsibility to develop a comprehensive national anti-doping program for the Olympic Movement in the United States.

As a non-profit corporation under the leadership of an independent board of directors, USADA has the authority to set forth guiding principles in anti-doping policy and to enforce any doping violations. In addition to managing collection and testing procedures, USADA is also responsible for enhancing research efforts and promoting educational programs to inform athletes of the rules governing the use of performance enhancing substances, the ethics of doping and its harmful health effects.

HISTORY OF USADA

In October 1999, the United States Olympic Committee (USOC) announced the creation of the United States Anti-Doping Agency (USADA), effective Oct. 1, 2000, following the USOC Board of Directors Meeting in Colorado Springs, Colo.

USADA's objective is to conduct a comprehensive anti-doping program. The USOC Select Task Force on Drug Externalization recommended that an independent organization manage the anti-doping program on the USOC's behalf.

A number of factors contributed to the recommendation:

- The creation of an organization independent from the USOC and the National Governing Bodies (NGB) would enhance the international credibility of the United States' anti-doping efforts by eliminating the negative perceptions inherent in the existing self-regulated program.
- An organization dedicated to anti-doping efforts would be better suited to expand and improve existing programs.
- An independent organization would be able to support the athletes while meeting the regulations of the International Federations (IF), as well as the International Olympic Committee (IOC).

By USOC Constitution and Bylaws, chapter 23, section 2, paragraph G, USADA has the jurisdiction for conducting drug testing.

"As a condition of membership in the USOC and recognition as a National Governing Body or Paralympic Sports Organization shall comply with the procedures pertaining to drug testing and adjudication of related doping offenses of the independent anti-doping organization designated by the USOC to conduct drug testing. No exceptions to such procedures shall be allowed unless granted by the Executive Committee, or its designee, after a hearing at which the National Governing Body is allowed to present the reasons for such exceptions."

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USADA MISSION STATEMENT

The U.S. Anti-Doping Agency (USADA) is dedicated to eliminating the practice of doping in sport, including U.S. Olympic, Pan American and Paralympic athletes. USADA is the independent anti-doping agency for Olympic sports in the United States, and is responsible for managing the testing and adjudication process for the athletes. USADA is dedicated to preserving the well being of sport, the integrity of competition and ensuring the health of athletes through research initiatives and educational programs.

USADA VISION STATEMENT

USADA will work with all athletes, while giving special emphasis to U.S. Olympic, Pan American and Paralympic athletes, in its efforts to eliminate doping in sport. In addition,

- USADA will develop and manage a testing process program that is fair and impartial in its attempt to identify athletes who use performance enhancing compounds and methods, either intentionally to gain a competitive advantage or inadvertently;

- USADA will develop and institute an adjudication program that will be fair and sustainable when an athlete is found to be in violation of anti-doping rules and regulations;

- USADA will support and foster research and educational programs in areas of performance-enhancing substances and methods to better understand their adverse effects and to improve upon current and future testing procedures;

- USADA will participate with other anti-doping organizations, both nationally and internationally, to accomplish our mission.

USADA LEADERSHIP

Terry Madden serves as the organization's Chief Executive Officer, while two-time Olympic medallist Frank Shorter is the chair to the USADA Board of Directors.

"With the leadership of this board of directors, and the dedication of our professional staff, USADA will establish a program for the United States that sets a new international standard for doping control." - Frank Shorter, USADA Board of Directors Chair.

"USADA will be responsible for much more than simply testing athletes. One of the most critical responsibilities will be presiding over the adjudication process after the positive tests. As an independent organization overseeing the adjudication process, USADA relieves the national governing bodies from determining sanctions for their own athletes, which had been perceived as a conflict of interest. USADA's role in adjudication provides immediate international credibility to our entire process." - Shorter

"Success in the nation's effort to eliminate the use of performance enhancing drugs and to protect the integrity of sport and the health of our athletes will only be achieved through a cooperative effort involving the United States Anti-Doping Agency, all national governing bodies, the USOC and our athletes." - Terry Madden, USADA CEO.

USADA FOCUS

A comprehensive drug control program as envisioned by USADA has three major components: testing, adjudication and education. The framework for the program also requires scientific, ethical and educational research.

- **Testing**—Managing the collection and testing for both In-Competition and No-Advance-Notice (NAN) testing. USADA is working closely with the NGBs and IFs to increase the number of NAN tests.
- **Adjudication**—USADA's adjudication process is fair, and credible. USADA's process eliminates the national governing bodies' involvement in sanctioning its athletes. The simplified procedures reduce the time and financial burdens common in appeal procedures. USADA's adjudication process relies on the American Arbitration Association (AAA)/Court of Arbitration for Sport (CAS) for an arbitrated hearing under the modified AAA Commercial Rules.
- **Education**—In addition to creating a strong ethical and health-related education program for elite athletes, USADA is also developing an education program designed for America's youth in sport. Focusing on the ethics and morals of using prohibited substances and the health risks associated with doping, USADA hopes to inform athletes at a young age of the dangers and consequences of using performance-enhancing substances.
- **Research**—Because research is the cornerstone of an effective anti-doping program, USADA is allocating \$2 million annually toward the study of prohibited substances. This commitment to research ranks among the world leaders. USADA will communicate with WADA's leadership to coordinate research efforts with WADA's scientific committee. The inaugural USADA research summit was held Oct. 20-21, 2000 with approximately 50 scientists and researchers attending from such nations as the United States, Canada, France, Great Britain and Switzerland.

USADA ADJUDICATION PROCESS

The objective of the proposed USADA adjudication system is to provide a process which: 1) is fair to athletes; 2) has international credibility; 3) minimizes the number of hearings; 4) decreases the likelihood that an athlete will be subject to subsequent proceedings initiated by an International Federation; and 5) does not put NGBs and athletes in an adversarial position.

Please refer to attached chart for additional information.

USADA FUNDING

As an independent, non-profit organization, USADA receives funding through a grant from the United States government. The agency also has a contractual agreement with the USOC for conducting an Olympic Anti-Doping Program, testing U.S. athletes and the adjudication process for doping violations.

USADA PARTNERSHIPS

In its early stages, USADA is working with national, international and governmental agencies to develop a comprehensive anti-doping initiative for U.S. athletes. USADA is working closely with the Salt Lake Organizing Committee (SLOC) to assist SLOC with the preparation of conducting doping tests during the 2002 Olympic and Paralympic Winter Games and its test events. Additionally, USADA is working closely with the Office of National Drug Control Policy (ONDCP), the World Anti-Doping Agency (WADA), the Council of Europe, the Canadian Centre for Ethics in Sport, the Australian Sports Drug Agency, and other national and international drug testing and education agencies in the fight against doping in sport.

In 2001, USADA signed bilateral agreements with CCES and ASDA, as well as working with the Drug Free Sport Consortium (DFSC).

UNITED STATES ANTI-DOPING AGENCY



PROTOCOL FOR OLYMPIC MOVEMENT TESTING

Effective : December 1, 2001

www.usantidoping.org

**UNITED STATES ANTI-DOPING AGENCY
PROTOCOL FOR OLYMPIC MOVEMENT TESTING**

(effective Dec. 1, 2001)

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USADA MISSION STATEMENT

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1. USADA's Relationship with the United States Olympic Committee ("USOC")

USADA is an independent legal entity not subject to the control of the USOC. The USOC has contracted with USADA to conduct drug testing and results management for participants in the Olympic movement within the United States and to provide educational information to those participants. For purposes of transmittal of information by USADA, the USOC is USADA's client. However, the USOC has authorized USADA to transmit information simultaneously to the relevant National Governing Body ("NGB"), International Federation ("IF") the World Anti-Doping Agency ("WADA") and involved athlete.

2. Athletes Subject to Testing by USADA

The USOC and NGBs have authorized USADA to test the following athletes:

- a. Any athlete who is a member of a NGB;
- b. Any athlete participating at a competition sanctioned by the USOC or a NGB;
- c. Any foreign athlete who would otherwise be subject to testing by USADA, the USOC or NGB; or
- d. Any other athlete who has given his/her consent to testing by USADA or who has submitted a USADA or IF out of competition testing location form within the previous twelve months and has not given his or her NGB or USADA written notice of retirement.
- e. Any athlete who has been named by the USOC or an NGB or is competing in a qualifying event to represent the USOC or NGB in international competition.

USADA will not allow the testing process to be used to harass any athlete. In selecting athletes for testing, USADA will focus primarily on athletes who are participating or have the potential to participate, in international competition.

3. Choice of Rules

In conducting drug testing and results management under this protocol, USADA will look to the following sources of rules:

- a. The selection and collection procedures set forth in paragraphs 4, 5 & 6 herein shall apply to all testing done by USADA unless different procedures are agreed to between USADA and the party requesting the test for a particular event.

- b. All tests performed by USADA shall be analyzed by IOC (or WADA accredited laboratories). In analyzing samples for USADA, those laboratories shall follow the standards established by the IOC (or WADA).
- c. Tests performed by USADA shall be analyzed for the categories of prohibited and restricted substances and methods set forth in the rules of the applicable IF unless agreed otherwise between USADA and the party ordering the test.
- d. USADA shall be responsible for results management of all tests performed by it and all other tests for which the applicable IF rules require the initial adjudication to be done by an NGB, including adjudication of reported positive cases and other potential violations of IF or USOC anti-doping rules, unless otherwise referred by USADA to a foreign sports organization having jurisdiction over the athlete.
- e. Any IF or NGB procedural rule inconsistent with this Protocol shall be superseded by this Protocol.
- f. The USOC may adopt its own Anti-Doping Policies which affect eligibility for USOC teams and benefits.

4. **Selection of Athletes to be Tested In-Competition**

USADA shall have the authority to determine which athletes will be selected for testing in all competitions tested by USADA. In making this determination, USADA will normally follow NGB or IF selection procedures and will include at a minimum the selection formulas or requests for target selection of particular athletes which are proposed by the USOC or a particular NGB or IF. USADA retains the right to test any athlete that it chooses with or without cause or explanation.

5. **Selection of Athletes to be Tested Out-of-Competition**

USADA shall have the authority to determine which athletes will be selected for out-of-competition testing by USADA. In making this determination, USADA will carefully consider selection formulas or requests for target selection of particular athletes which are proposed by the USOC or a particular NGB. USADA retains the right to test any athlete that it chooses, with or without cause or explanation.

Each NGB will provide USADA with a regularly updated list of athletes to have included in No Advance Notice or other out-of-competition testing. With respect to each athlete on such list and such additional athletes as may be designated by USADA, the NGB will provide USADA with the information as set forth on the athlete location form attached as Annex A. Thereafter it shall be the responsibility of each individual athlete to provide USADA with updated information as to his or her whereabouts.

6. **Sample Collection**

Sample collection by USADA, and third parties authorized by USADA to collect samples for USADA including other national anti-doping agencies pursuant to bilateral or multilateral agreements, will substantially conform to the standards set forth by the IOC (or WADA).

7. **Laboratory Analysis**

All samples collected by USADA will be sent for analysis only to IOC (or WADA)-accredited laboratories.

8. **Notification**

USADA will provide the following notification with respect to each specimen collected or attempted to be collected by USADA:

- a. Upon receipt of a negative laboratory report, USADA will promptly forward that result to the athlete, the USOC and the applicable NGB.
- b. Upon receipt of a positive laboratory A report or a report indicating an elevated testosterone to epitestosterone ratio or epitestosterone concentration, USADA will promptly notify the USOC, the applicable NGB, and athlete at the address on the Doping Control Notification/Signature Form and shall advise the athlete of the date on which the laboratory will conduct the B sample analysis. The athlete may attend the B sample analysis accompanied by a representative at his or her own expense. Prior to the B sample opening, USADA shall provide to the athlete the A sample laboratory documentation set forth on Annex B. A sample shall not be considered positive until after the B sample analysis confirms the A sample analysis or the athlete has expressly waived the B sample analysis.
- c. Upon receipt of the laboratory's B sample report, USADA shall promptly notify the USOC, the applicable NGB and the athlete. USADA shall then provide to the athlete the B sample documentation package set forth on Annex C. The laboratory shall not be required to produce any documentation in addition to Annexes B and C unless ordered to do so by an arbitrator(s) during adjudication, in which case it shall be produced at the athlete's expense unless ordered otherwise by an arbitrator(s).
- d. In special circumstances where USADA is conducting testing for an IF, regional or continental sports organization or other Olympic movement sporting body, other than the USOC or an NGB, the notification described in this section shall be made exclusively to that sporting body, the athlete, and, if applicable, to the USOC and NGB.

- e. At such time as USADA becomes aware of a potential violation of IF anti-doping rules or USOC Anti-Doping Policies (other than a positive test), then USADA shall provide notice of such potential violation to the athlete, the USOC and the applicable NGB.
- f. Notice to an athlete, for all purposes of this Protocol except for notice of negative laboratory reports, shall be effective when delivered by overnight courier to the athlete's most recent address on file with USADA. If USADA is not able to obtain delivery at such address, then USADA shall contact the NGB and send notice by overnight courier to the athlete's most recent address on file with the NGB if that is a different address than the most recent address on file with USADA. If the athlete's most recent address on file with USADA and the NGB is the same, or if USADA is unable to obtain delivery at the athlete's most recent address on file with the NGB, then notice to the athlete shall be effective upon the courier's last attempt to deliver.

9. **Results Management**

Whenever USADA receives a laboratory report confirming a positive test, an elevated testosterone to epitestosterone ratio or an elevated epitestosterone concentration, or when USADA has other reason to believe that a potential doping violation has occurred, such as admitted doping, refusal to test or trafficking under the rules of the applicable IF or when USADA determines that a violation of the USOC's Anti-Doping Policies has occurred, then USADA shall address that case through the following results management procedures:

a. **USADA ANTI-DOPING REVIEW BOARD**

The USADA Anti-Doping Review Board ("Review Board") is a group of experts independent of USADA with medical, technical and legal knowledge of anti-doping matters. The Review Board members shall be appointed for two year terms by the USADA Board of Directors. The Review Board shall review all sample test results reported by the laboratory as analytically positive or elevated in accordance with section 9(a)(i) below. Such review shall be undertaken by between three and five Review Board members appointed in each case by USADA's Chief Executive Officer and composed of at least one technical, one medical and one legal expert.

The Review Board shall also review all potential violations of IF or USOC anti-doping rules, other than positive or elevated tests, brought forward by USADA. Review of potential violations other than positive tests shall be undertaken by three Review Board members appointed in each case by USADA's Chief Executive Officer.

- i. Upon USADA's receipt of a laboratory report identifying an analytically positive or elevated B test result (or A test result when the B analysis has been expressly waived by the athlete), or when USADA determines that a potential violation of other IF or USOC anti-doping rules has occurred, the following steps shall be taken:

- (1) USADA's Chief Executive Officer shall appoint a Review Board as provided in Section (a) above.
- (2) The athlete shall be promptly notified that within ten days of date of notice he or she may submit to the Review Board, through USADA, any written materials for the Review Board's consideration. The athlete shall also be provided the name and telephone number of the Athlete Ombudsman.
- (3) The Review Board shall be provided the laboratory documentation and any additional information which USADA deems appropriate. Copies of this information shall be provided simultaneously to the athlete and the athlete shall be entitled to file a response with the Review Board.
- (4) The Review Board shall be entitled to request additional information from either USADA or the athlete.
- (5) Notwithstanding the forgoing, the process before the Review Board shall not be considered a "hearing." The Review Board shall only consider written submissions. Submittals to the Review Board shall not be used in any further hearing or proceeding without the consent of the party making the submittal. The Review Board's recommendations shall not be admissible in any further hearing or proceeding.
- (6) The Review Board shall consider the written information submitted to it and shall, by majority vote, make a recommendation to USADA with a copy to the athlete whether or not there is sufficient evidence of doping to proceed with the adjudication process.
- (7) USADA shall also forward the Review Board's recommendation to the USOC, the applicable NGB and IF and WADA.

b. ADJUDICATION

i. Following receipt of the Review Board recommendation, USADA shall notify the athlete in writing whether USADA considers the matter closed or alternatively what specific charges or alleged violations will be adjudicated and what sanction, consistent with IF rules, or USOC Anti-Doping Policy; USADA is seeking to have imposed (and other possible sanctions which could be imposed under the applicable IF rules and USOC Policies). The notice shall also include a copy of the USADA Protocol for Olympic Movement Testing and the American Arbitration Association Supplementary Procedures for Arbitration initiated by the United States Anti-Doping Agency attached as Annex D. Within ten (10) days following the date of such notice, the athlete must notify USADA in writing if he or she desires a hearing to contest the sanction sought by USADA. If the sanction is not contested in writing within such ten (10) day period, then the sanction shall be communicated by USADA to the athlete, USOC, the applicable NGB and IF and WADA and thereafter imposed by the NGB. Such sanction shall not be reopened or be subject to appeal unless the athlete can demonstrate by clear and convincing evidence in a subsequent appeal to CAS that he or she did not receive either actual or constructive notice of the opportunity to contest the sanction. The athlete may also elect to avoid the necessity for a hearing by accepting the sanction proposed by USADA. If the sanction is contested by the athlete, then a hearing shall be conducted pursuant to the procedure set forth below.

ii. The hearing will take place before the American Arbitration Association ("AAA") using a single arbitrator (or a three arbitrator panel if demanded by either of the parties) selected from a pool of the North American Court of Arbitration for Sport ("CAS") Arbitrators who shall also be AAA Arbitrators. The hearing will take place in the U.S., be administered by the AAA Vice President who is also the administrator for the Decentralized Office of CAS in the Americas (the "Administrator"), and be conducted under American Arbitration Association Supplementary Procedures for Arbitration initiated by the United States Anti-Doping Agency attached as Annex D. The parties will be USADA and the athlete. USADA shall also invite the applicable IF to participate either as a party or as an observer. For their information only, notice of the hearing date shall also be sent to the USOC, the applicable NGB and WADA.

iii. Either the athlete or the IF (whether a party or not) shall be entitled to appeal the AAA arbitrator(s) decision to CAS. A CAS appeal shall be filed with the Administrator and the CAS hearing will automatically take place in the U.S. Otherwise the regular CAS appellate rules apply. The decision of CAS shall be final and binding on all parties and shall not be subject to further review or appeal.

iv. The athlete, within ten (10) days following the Notice described in section (i) above, shall be entitled, at his or her option, to elect to bypass the hearing described in section (ii) above and proceed directly to a single final hearing before CAS conducted in the United States. The CAS decision shall be final and binding on all parties and shall not be subject to further review or appeal.

v. In all hearings conducted pursuant to this procedure the applicable IF's categories of prohibited substances, definition of doping and sanctions shall be applied unless modified by an applicable USOC Anti-Doping Policy. In the event an IF's rules and the USOC Anti-Doping Policy are silent on an issue, the rules set forth in the Olympic Movement Anti-Doping Code shall apply. Notwithstanding the foregoing; (a) The IOC laboratories used by USADA shall be presumed to have conducted testing and custodial procedures in accordance to prevailing and acceptable standards of scientific practice. This presumption can be rebutted by evidence to the contrary, but the accredited laboratory shall have no onus in the first instance to show that it conducted the procedures other than in accordance with its standard practices conforming to any applicable IOC requirements; (b) minor irregularities in sample collection, sample testing or other procedures set forth herein which cannot reasonably be considered to have effected the results of an otherwise valid test or collection shall have no effect on such results; and (c) if contested, USADA shall have the burden of establishing the integrity of the sample collection process, the chain of custody of the sample, and the accuracy of laboratory test results by clear and convincing evidence unless the rules of the applicable IF set a higher standard.

vi. All administrative costs of the USADA review and adjudication process will be borne by USADA except the CAS appeal fee which will be paid by the athlete and refunded to the athlete by USADA should the athlete prevail on appeal.

vii. The results of all hearings shall be communicated by USADA to the athlete, the USOC, the applicable NGB and IF and WADA. The NGB shall impose any sanction resulting from the adjudication process. The NGB shall not impose any sanctions until after the athlete has had the opportunity for a hearing pursuant to section 9(b)ii or 9(b) iv.

10. Ownership and Use of Samples

All samples collected by USADA shall be the property of USADA. USADA may authorize the use of negative samples for research; however, in such event all markings on the sample which identify the sample as coming from a particular athlete shall be obliterated.

11. Confidentiality

Except for the notifications to the USOC, NGB, IF and WADA (or other sporting body ordering the test) as otherwise provided in this protocol, USADA shall not publicly disclose an athlete's positive test result or other alleged doping violation until after the athlete has been found to have committed a doping violation in a hearing conducted under either article 9(b)(ii) or 9(b)(iv) above or the athlete has failed to request a hearing within the time set forth in 9(b)(i) or the athlete has agreed to the sanction sought by USADA. USADA does not control how information provided by USADA to the USOC, NGB's, IF's and WADA is disseminated. The USOC Policy is to publicly announce the name of the athlete and the positive test result or other alleged doping violation thirty (30) days after receipt of the Review Board recommendation. USADA may release aggregate statistics of testings and adjudication results.

12. Expedited Procedures

USADA may shorten any time period set forth in these procedures where doing so is reasonably necessary to resolve an athlete's eligibility before a protected competition.



UNITED STATES ANTI-DOPING AGENCY ATHLETE LOCATION FORM INSTRUCTIONS PLEASE READ BEFORE FILLING OUT THE ATHLETE LOCATION FORM

Athlete Information

This section is for gathering personal information to help the Doping Control Officers locate and correctly identify you.

A. Residence

1. **NAME:** Provide your complete last, first, and middle name.
2. **GENDER:** Check the appropriate box.
3. **DATE OF BIRTH:** Provide the month, day, and year of birth.
4. **PHYSICAL ADDRESS:** Provide the address where you will be residing for a majority of the upcoming quarter. This address cannot be a P.O. Box. Where indicated, provide the street, apartment number, city, state or province, zip code, and country if other than the U.S. Also, be sure to provide your e-mail address, home telephone number, cell phone number, and a fax number where you can be reached. An e-mail address is required for electronic submission of athlete location forms and change of plan forms.
5. **MAILING ADDRESS:** If your mailing address is different from your primary address, provide your mailing address. This is the address where USADA materials will be sent.
6. **PRIMARY CONTACT PERSON:** Provide the name and telephone number of a person, other than yourself, who will be able to tell us your whereabouts if we cannot locate you.
7. **NATIONAL GOVERNING BODY:** Provide the full name of the national governing body to which you belong, and your discipline. For example, if you compete in the sport of cross-country skiing, your national governing body would be the U.S. Ski and Snowboard Association and your discipline would be cross-country skiing.

Daily Schedule

This section is for gathering information concerning your daily schedule. This information will assist our Doping Control Officers in their effort to locate you during the week. We realize that it is difficult for you to know where you will be for each day of the upcoming quarter, but your best estimate will help significantly.

X. Primary Training Facility (if not applicable, write N/A and leave the schedule blank)

8. **FACILITY NAME:** Provide the full name of the facility where you will do most of your training during the upcoming quarter.
9. **FACILITY ADDRESS:** Provide the address of the facility where you will do most of your training during the upcoming quarter. This includes the street, city, and state.
10. **PRIMARY TRAINING FACILITY SCHEDULE (X):** Provide the times during the day when you will typically be training at your primary training facility during the upcoming quarter. Fill in all empty boxes on the schedule with "N/A". Please refer to the following example:

If Susan the swimmer trains at her primary training facility Monday through Friday from 5 a.m. to 7 a.m. and then again from 1 p.m. to 3 p.m., she would fill out the schedule as follows:

Day	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
A.M.	N/A	5:00 - 7:00	5:00 - 7:00	5:00 - 7:00	5:00 - 7:00	5:00 - 7:00	N/A
P.M.	N/A	1:00 - 3:00	1:00 - 3:00	1:00 - 3:00	1:00 - 3:00	1:00 - 3:00	N/A

Y. Secondary Training Facility (if not applicable, write N/A and leave the schedule blank)

11. **FACILITY NAME:** Provide the full name of the facility where you will spend the second most time training during the upcoming quarter.
12. **FACILITY ADDRESS:** Provide the address of the facility where you will spend the second most time training during the upcoming quarter. This includes the street, city, and state.
13. **SECONDARY TRAINING FACILITY SCHEDULE (Y):** Provide the times during the day when you will typically be training at your secondary training facility during the upcoming quarter. Fill in all empty boxes on the schedule with "N/A". Please refer to the following example:

If Susan the swimmer trains at her secondary training facility Saturday and Sunday from 10 a.m. to 2 p.m., she would fill out the schedule as follows:

Day	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
A.M.	10:00 -	N/A	N/A	N/A	N/A	N/A	10:00 -
P.M.	2:00	N/A	N/A	N/A	N/A	N/A	2:00

Z. Other Regularly Scheduled Activities

14. **OTHER REGULAR ACTIVITIES SCHEDULE (Z):** Provide the times during the day when you will typically have other commitments such as work or class during the upcoming quarter. Fill in all empty boxes on the schedule with "N/A". Please refer to the following example:

If Susan the swimmer works on Monday, Wednesday, and Friday from 7:30 a.m. to 10:30 a.m. and also has class from 11:00 a.m. to 1:00 p.m., she would fill out the schedule as follows:

Day	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
A.M.	N/A	7:30 - 10:30	N/A	7:30 - 10:30	N/A	7:30 - 10:30	N/A
A.M.	N/A	11:00 -	N/A	11:00 -	N/A	11:00 -	N/A
P.M.	N/A	1:00	N/A	1:00	N/A	1:00	N/A
P.M.	N/A	N/A	N/A	N/A	N/A	N/A	N/A

Quarterly Schedule

This information will serve to create a more comprehensive picture of where you will be on any given day of the upcoming quarter.

15. **NAME:** Provide your complete last, first, and middle name as you did for #1.
16. **ADDITIONAL TEMPORARY ADDRESSES (A, B, C, D):** Provide the addresses for any additional residences where you will stay during the upcoming quarter. Also, provide the corresponding training facility address where you will train while you are staying at each residence.
17. **COMPETITION SCHEDULE (E):** Provide the name, location, country, and dates of all competitions you will compete in during the upcoming quarter in the spaces provided. Attach additional pages if necessary.
18. **QUARTERLY SCHEDULE:** Fill in the schedule with the letters that correspond to the addresses where you will be on that day. For example, if you will be at your residence and your primary training facility January 1 through January 15, fill in each of those days on the schedule with the letters R and X. If you will be at your residence and your secondary training facility March 5 through March 20, fill in each of those days on the schedule with the letters R and Y. If you don't train on Wednesdays and usually will be at your physical residence, fill in each of those days on the schedule with the letter R. If you will be at one of the **ADDITIONAL TEMPORARY ADDRESSES** February 10 through 15, fill in those days on the schedule with the corresponding letter A, B, C, or D. Finally, if you have competitions January 20 through 22, February 1 through 3, and March 22 through 26, fill in each of those days on the schedule with the letter E. Fill in all empty boxes on the schedule with "N/A". For additional assistance, please refer to the following example:

In addition to her primary training facility, secondary training facility, and her primary residence, Susan the swimmer will be at an additional temporary address February 10 through 15. She also has a competition March 22 through 26. She will fill out the schedule as follows:

Month	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31
Jan 2001	X	R	R	X	R	R	X	R	R	X	R	R	X	R	R	X	R	R	X	R	R	X	R	R	X	R	R	X	R	R	X
Feb 2001	X	R	R	X	R	R	X	R	R	X	R	R	X	R	R	X	R	R	X	R	R	X	R	R	X	R	R	X	R	R	X
Mar 2001	X	R	R	X	R	R	X	R	R	X	R	R	X	R	R	X	R	R	X	R	R	X	R	R	X	R	R	X	R	R	X

R=Residence, X=Primary Training Location, Y=Secondary Training Location, Z=Other Regularly Scheduled Activities, A,B,C,D=Temporary Residence Addresses, E=Competition

19. **ATHLETE SIGNATURE:** Sign your name and provide the date of your signature.
20. **ADDITIONAL PAGES:** FEEL FREE TO ATTACH ADDITIONAL PAGES IF THERE IS INSUFFICIENT ROOM ON THIS FORM FOR YOU TO PROVIDE COMPLETE INFORMATION REGARDING YOUR PERSONAL INFORMATION, DAILY SCHEDULE, OR QUARTERLY SCHEDULE. YOU ARE ALSO ENCOURAGED TO ATTACH ADDITIONAL SCHEDULES IF APPLICABLE.
21. **QUESTIONS:** IF YOU HAVE ANY QUESTIONS ABOUT THE ATHLETE LOCATION FORM THAT CANNOT BE ANSWERED BY THIS INSTRUCTION SHEET, FEEL FREE TO CONTACT USADA, TOLL FREE, AT 1-866-401-2632.

FOR INFORMATION ABOUT USADA, VISIT US ON THE WEB AT: WWW.USANTIDOPING.ORG

22. **DUE DATE:** THE JANUARY 2002 - MARCH 2002 ATHLETE LOCATION FORM MUST BE RETURNED TO USADA BY DECEMBER 1, 2001.

WHEN YOU HAVE COMPLETED THE ATHLETE LOCATION FORM, DOUBLE CHECK THE FORM FOR ACCURACY, AND MAIL OR FAX THE FORM TO THE FOLLOWING ADDRESS:

UNITED STATES ANTI DOPING AGENCY
1265 LAKE PLAZA DR.
COLORADO SPRINGS, CO 80906

FAX: (719) 785-2001

If the form you most recently submitted to USADA includes a valid e-mail address, you may submit this location form electronically at www.usantidoping.org



UNITED STATES ANTI-DOPING AGENCY

ATHLETE LOCATION FORM

QUARTERLY UPDATE: January - March 2002

Return to USADA by December 1, 2001

If the form you most recently submitted to USADA includes a valid e-mail address, you may submit this location form electronically at www.usantidoping.org

Please type or print legibly and be as accurate and thorough as possible.

Athlete Information

R. Residence

1. **NAME:** _____

2. **GENDER:** ☐ MALE ☐ FEMALE

3. **DATE OF BIRTH:** _____ / _____ / _____

4. **PHYSICAL ADDRESS:** (No P.O. Boxes) _____

5. **MAILING ADDRESS:** (Address where you want USADA materials sent) _____

6. **PRIMARY CONTACT PERSON:** _____

7. **NATIONAL GOVERNING BODY:** _____

Days when you do not train but will be at your physical address should be filled in with an R on the Quarterly Schedule - page 2, #18.

Daily Schedule

We realize that it is difficult for you to know where you will be for each day of the upcoming quarter, but your best estimate will help significantly.

X. Primary Training Location

8. **FACILITY NAME:** _____

9. **FACILITY ADDRESS:** _____

10. **PRIMARY TRAINING LOCATION SCHEDULE:**

Day	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
A.M.							
P.M.							

Periods when you train at your primary training location should be filled in with an X on the Quarterly Schedule - page 2, #18.

Y. Secondary Training Location

11. **FACILITY NAME:** _____

12. **FACILITY ADDRESS:** _____

13. **SECONDARY TRAINING LOCATION SCHEDULE:**

Day	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
A.M.							
P.M.							

Periods when you train at your secondary training location should be filled in with a Y on the Quarterly Schedule - page 2, #18.

Z. Other Regularly Scheduled Activities

14. **OTHER REGULARLY SCHEDULED ACTIVITIES SCHEDULE (e.g. work, school, etc.):**

Day	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
A.M.							
P.M.							

Periods when you regularly participate in activities other than training should be filled in with a Z on the Quarterly Schedule - page 2, #18.



UNITED STATES ANTI-DOPING AGENCY
ATHLETE LOCATION FORM

Quarterly Schedule

15. NAME: _____

16. ADDITIONAL TEMPORARY ADDRESSES:

A.

A.		B.		C.		D.	
Temporary Residence Address		Temporary Residence Address		Temporary Residence Address		Temporary Residence Address	
Street	City	Street	City	Street	City	Street	City
State	Country (If other than U.S.)	State	Country (If other than U.S.)	State	Country (If other than U.S.)	State	Country (If other than U.S.)
Temporary Training Address		Temporary Training Address		Temporary Training Address		Temporary Training Address	
Street	City	Street	City	Street	City	Street	City
State	Country (If other than U.S.)	State	Country (If other than U.S.)	State	Country (If other than U.S.)	State	Country (If other than U.S.)

17. COMPETITION SCHEDULE:

E. Competition

E. Competition		Location		Country		Dates	
Name of competition		Name of competition		Name of competition		Name of competition	
Month	Day	Month	Day	Month	Day	Month	Day
1	2	3	4	5	6	7	8
9	10	11	12	13	14	15	16
17	18	19	20	21	22	23	24
25	26	27	28	29	30	31	
Jan 2002							
Feb 2002							
Mar 2002							

18. ATHLETE SIGNATURE: _____

ANNEX B

The following documents will accompany the initial notification to the athlete of a positive "A" sample analysis:

1. A standard notice setting forth the review procedures, athlete's rights, and contact information for the USOC Athlete Ombudsman.
2. Notification of the prohibited substance at issue which could result in a doping violation. In those cases where an administrative threshold concentration is employed, that threshold will be noted. When possible, the degree to which the athlete's sample exceeds the threshold will be reported.
3. An abbreviated analytical report to the "A" confirmation analysis. The abbreviated data should include applicable analytical confirmation technique (e.g., gas chromatography/mass spectrometric) graphical data for negative control urine, a positive control urine (including quantitative data where relevant), and the athlete's sample. The purpose of this data is to allow the athlete or their representative to determine a course of action. It is understood that due to time constraints involved, there is typically less time to review and organize this data prior to transmittal than with the documentation package to accompany the "B" sample which will also address documents related to the "A" analysis.

ANNEX C

The following documentation will be supplied as the standard documentation package:

- Table of contents/Sample identification information
 - Organization requesting the test
 - Date of sample collection and site identification
 - USADA sample identification number
 - Laboratory sample identification number
- Chain of custody documentation for sample container
 - Doping Control Notification form (Laboratory copy)
 - Transportation chain of custody (e.g., courier documentation, laboratory receipt of container)
 - Notices of any irregularities (e.g., memoranda for the record)
 - "A" sample container chain(s) of custody
- "A" Sample Screening Results
 - Relevant aliquot chain(s) of custody
 - Screening procedure data, including chromatograms (or other relevant data), for Negative control urine
 - Positive control urine (with concentration indicated, if relevant)
 - Sample urine aliquot(s)
- "A" Sample Confirmation Results
 - Summary of the analytical principles of the confirmation method
 - Aliquot chain of custody
 - Sequence verification data
 - Confirmation procedure data, including chromatograms (or other relevant data), for
 - Negative control urine
 - Positive control urine (with concentration indicated, if relevant)
 - Standard(s)/calibrator(s) (if relevant)
 - Sample urine aliquot(s)
 - Analytical run instrument validation data (e.g., tune data)
 - "A" sample report (including numerical data for threshold substances*)
 - pH, Specific Gravity, and other urine integrity test results (if applicable, including abnormal appearance of sample) performed in laboratory.
- "B" Sample Confirmation Results
 - "B" sample container chain(s) of custody
 - Summary of the analytical principles of the confirmation method (if different than "A")
 - Aliquot chain of custody
 - Sequence verification data
 - Confirmation procedure data, including chromatograms (or other relevant data), for
 - Negative control urine
 - Positive control urine (with concentration indicated, if relevant)
 - Standard(s)/calibrator(s) (if relevant)
 - Sample urine aliquot(s)
 - Analytical run instrument validation data (e.g., tune data)
 - "B" sample report (including numerical data for threshold substances*)
- Reports and Correspondence
 - All facsimiles or letters related to analysis and reporting of sample results

*For threshold substances, an estimate of the ratio or concentration or an estimate of the concentration relative to the threshold (i.e. 20 times the threshold concentration) is deemed acceptable.

ANNEX D

American Arbitration Association Supplementary Procedures for Arbitration initiated by the United States Anti-Doping Agency ("USADA")

R-1. Applicability

The Commercial Arbitration Rules of the American Arbitration Association, as modified by with these Supplementary Procedures shall apply to arbitrations which arise out of the United States Anti-Doping Agency's (USADA) Protocol for Olympic Movement Testing. To the extent that there is any variance between the Commercial Arbitration Rules and the Supplementary Procedures for Arbitrations initiated by USADA, the Supplementary Procedures shall control.

R-2. AAA and Delegation of Duties

Doping cases shall be administered by the AAA through the AAA Vice President then serving as the Secretary for the North American/Central American/Caribbean Islands Decentralized Office of The Court of Arbitration for Sport or his/her designee (the "Administrator").

R-3. National Panel of Arbitrators

The Panel of Arbitrators for doping cases shall consist of the North American Court of Arbitration of Sport ("CAS") Arbitrators who shall also be AAA Arbitrators (the "Arbitrator Pool").

R-4. Initiation under an Arbitration Provision in a Contract

Arbitration proceedings shall be initiated by USADA by sending a notice to the athlete and the Administrator which sets forth the sanction, consistent with the applicable International Federation rules, which USADA is seeking to have imposed and other possible sanctions which could be imposed under the applicable International Federation rules. The notice shall also advise the athlete of the name and telephone number of the Athlete Ombudsman and shall include a copy of the USADA Protocol for Olympic Sport Testing and the Modifications to AAA Commercial Rules. The parties to the proceeding shall be USADA and the athlete. The applicable International Federation shall also be invited to join in the proceeding as a party or as an observer.

R-5. Initiation under a Submission

Parties to any existing dispute may commence an arbitration under these rules by filing at any office of the AAA two copies of a written submission to arbitrate under these rules, signed by the parties. It shall contain a statement of the nature of the dispute, the names and addresses of all parties, any claims and counterclaims, the amount involved, if any, the remedy sought, and the hearing locale requested, together with the

appropriate filing fee as provided in the schedule included with these rules. Unless the parties state otherwise in the submission, all claims and counterclaims will be deemed to be denied by the other party.

R-6. Changes of Claim

After filing of a claim, if either party desires to make any new or different claim or counterclaim, it shall be made in writing and filed with the AAA. The party asserting such a claim or counterclaim shall provide a copy to the other party, who shall have 15 days from the date of such transmission within which to file an answering statement with the AAA. After the arbitrator is appointed, however, no new or different claim may be submitted except with the arbitrator's consent.

R-7. Applicable Procedures

All cases shall be administered in accordance with Sections R-1 through R-57 of these rules.

The applicable procedure shall be the regular procedure (as opposed to the Expedited or Complex procedures) set forth in the AAA Commercial Arbitration Rules.

R-8. Jurisdiction

(a) The arbitrator shall have the power to rule on his or her own jurisdiction, including any objections with respect to the existence, scope or validity of the arbitration agreement.

(b) The arbitrator shall have the power to determine the existence or validity of a contract of which an arbitration clause forms a part. Such an arbitration clause shall be treated as an agreement independent of the other terms of the contract. A decision by the arbitrator that the contract is null and void shall not for that reason alone render invalid the arbitration clause.

(c) A party must object to the jurisdiction of the arbitrator or to the arbitrability of a claim or counterclaim no later than the filing of the answering statement to the claim or counterclaim that gives rise to the objection. The arbitrator may rule on such objections as a preliminary matter or as part of the final award.

R-9. Mediation

The reference to mediation shall be deleted.

R-10. Administrative Conference

At the request of any party or upon the AAA's own initiative, the AAA may conduct an administrative conference, in person or by telephone, with the parties and/or their representatives. The conference may address such issues as arbitrator selection, potential mediation of the dispute, potential exchange of information, a timetable for hearings and any other administrative matters. There is no administrative fee for this service.

R-11. Fixing of Locale

The locale of the arbitration shall be in the United States at a location determined by the Administrator using criteria established by the AAA.

R-12. Qualifications of an Arbitrator

(a) Any neutral arbitrator appointed pursuant to Section R-13, R-14, R-15, or selected by mutual choice of the parties or their appointees, shall be subject to disqualification for the reasons specified in Section R-19. If the parties specifically so agree in writing, the arbitrator shall not be subject to disqualification for those reasons.

Delete R-12(b). Party-appointed arbitrators are expected to be neutral and may be disqualified for the reasons set forth in R-19.

R-13. Appointment from Panel

If the parties have not appointed an arbitrator and have not provided any other method of appointment, the arbitrator shall be appointed in the following manner:

(a) Immediately after the filing of the submission or the answering statement or the expiration of the time within which the answering statement is to be filed, the AAA shall send simultaneously to each party to the dispute an identical list of names of persons chosen from the panel. The parties are encouraged to agree to an arbitrator from the submitted list and to advise the AAA of their agreement.

(b) If the parties are unable to agree upon an arbitrator, each party to the dispute shall have 5 days from the transmittal date in which to strike names objected to, number the remaining names in order of preference, and return the list to the AAA. If a party does not return the list within the time specified, all persons named therein shall be deemed acceptable. From among the persons who have been approved on both lists, and in accordance with the designated order of mutual preference, the AAA shall invite the acceptance of an arbitrator to serve. If the parties fail to agree on any of the persons named, or if acceptable arbitrators are unable to act, or if for any other reason the appointment cannot be made from the submitted lists, the AAA shall have the power to make the appointment from among other members of the panel.

without the submission of additional lists. *The time limit for striking names and returning the list of arbitrators shall be five days instead of 15 days.*

Delete (c) and replace with the following: Within 5 days following the completion of the arbitrator selection process set forth in R-12(a) and (b), either party may elect instead to have the matter heard by a panel of three arbitrators. Any party so electing shall designate one arbitrator from the Arbitrator Pool within such 5 day period. The other party shall have an additional 5 days to designate an arbitrator from the Arbitrator Pool. A third arbitrator from the Arbitration Pool, who will not be from the original list, shall be designated by the Administrator as the chairman of the panel.

R-14. Direct Appointment by a Party

(a) If the agreement of the parties names an arbitrator or specifies a method of appointing an arbitrator, that designation or method shall be followed. The notice of appointment, with the name and address of the arbitrator, shall be filed with the AAA by the appointing party. Upon the request of any appointing party, the AAA shall submit a list of members of the panel from which the party may, if it so desires, make the appointment.

(b) If the agreement specifies a period of time within which an arbitrator shall be appointed and any party fails to make the appointment within that period, the AAA shall make the appointment.

(c) If no period of time is specified in the agreement, the AAA shall notify the party to make the appointment. If within 15 days after such notice has been sent, an arbitrator has not been appointed by a party, the AAA shall make the appointment.

R-15. Appointment of Neutral Arbitrator by Party-Appointed Arbitrators or Parties

(a) If the parties have selected party-appointed arbitrators, or if such arbitrators have been appointed as provided in Section R-14, and the parties have authorized them to appoint a neutral arbitrator within a specified time and no appointment is made within that time or any agreed extension, the AAA may appoint a neutral arbitrator, who shall act as chairperson.

(b) If no period of time is specified for appointment of the neutral arbitrator and the party-appointed arbitrators or the parties do not make the appointment within 15 days from the date of the appointment of the last party-appointed arbitrator, the AAA may appoint the neutral arbitrator, who shall act as chairperson.

(c) If the parties have agreed that their party-appointed arbitrators shall appoint the neutral arbitrator from the panel, the AAA shall furnish to the party-appointed arbitrators, in the manner provided in Section R-13, a list selected from the panel, and the appointment of the neutral arbitrator shall be made as provided in that section.

R-16. Nationality of Arbitrator

Where the parties are nationals or residents of different countries, the AAA, at the request of any party or on its own initiative, may appoint as a neutral arbitrator a national of a country other than that of any of the parties. The request must be made prior to the time set for the appointment of the arbitrator as agreed by the parties or set by these rules.

R-17. Number of Arbitrators

If the arbitration agreement does not specify the number of arbitrators, the dispute shall be heard and determined by one arbitrator, unless the AAA, in its discretion, directs that three arbitrators be appointed. The parties may request three arbitrators in their demand or answer, which request the AAA will consider in exercising its discretion regarding the number of arbitrators appointed to the dispute.

R-18. Notice to Arbitrator of Appointment

Notice of the appointment of the neutral arbitrator, whether appointed mutually by the parties or by the AAA, shall be sent to the arbitrator by the AAA, together with a copy of these rules, and the signed acceptance of the arbitrator shall be filed with the AAA prior to the opening of the first hearing.

R-19. Disclosure and Challenge Procedure

(a) Any person appointed as a neutral arbitrator shall disclose to the AAA any circumstance likely to affect impartiality or independence, including any bias or any financial or personal interest in the result of the arbitration or any past or present relationship with the parties or their representatives. Upon receipt of such information from the arbitrator or another source, the AAA shall communicate the information to the parties and, if it deems it appropriate to do so, to the arbitrator and others.

(b) Upon objection of a party to the continued service of a neutral arbitrator, the AAA shall determine whether the arbitrator should be disqualified and shall inform the parties of its decision, which shall be conclusive.

R-20. Communication with Arbitrator

(a) No party and no one acting on behalf of any party shall communicate unilaterally concerning the arbitration with a neutral arbitrator or a candidate for neutral arbitrator. Unless the parties agree otherwise or the arbitrator so directs, any communication from the parties to a neutral arbitrator shall be sent to the AAA for transmittal to the arbitrator.

(b) The parties or the arbitrators may also agree that once the panel has been constituted, no party and no one acting on behalf of any party shall communicate unilaterally concerning the arbitration with any party-appointed arbitrator.

R-21. Vacancies

(a) If for any reason an arbitrator is unable to perform the duties of the office, the AAA may, on proof satisfactory to it, declare the office vacant. Vacancies shall be filled in accordance with the applicable provisions of these rules.

(b) In the event of a vacancy in a panel of neutral arbitrators after the hearings have commenced, the remaining arbitrator or arbitrators may continue with the hearing and determination of the controversy, unless the parties agree otherwise.

(c) In the event of the appointment of a substitute arbitrator, the panel of arbitrators shall determine in its sole discretion whether it is necessary to repeat all or part of any prior hearings.

R-22. Preliminary Hearing

(a) At the request of any party or at the discretion of the arbitrator or the AAA, the arbitrator may schedule as soon as practicable a preliminary hearing with the parties and/or their representatives. The preliminary hearing may be conducted by telephone at the arbitrator's discretion. There is no administrative fee for the first preliminary hearing.

(b) During the preliminary hearing, the parties and the arbitrator should discuss the future conduct of the case, including clarification of the issues and claims, a schedule for the hearings and any other preliminary matters.

R-23. Exchange of Information

(a) At the request of any party or at the discretion of the arbitrator, consistent with the expedited nature of arbitration, the arbitrator may direct (i) the production of documents and other information, and (ii) the identification of any witnesses to be called.

(b) At least five (5) business days prior to the hearing, the parties shall exchange copies of all exhibits they intend to submit at the hearing.

(c) The arbitrator is authorized to resolve any disputes concerning the exchange of information.

R-24. Date, Time, and Place of Hearing

Except as may be mutually agreed by the parties or upon the request of a single party for good cause as may be determined by the arbitrator, the hearing, including any briefing ordered by the arbitrator, shall be completed within three months of the appointment of the arbitrator. On good cause shown by any party, the hearing process shall be expedited as may be necessary in order to resolve the determination of an athlete's eligibility prior to any protected competition or team selection for a protected competition.

R-25. Attendance at Hearings

The arbitrator and the AAA shall maintain the privacy of the hearings unless the law provides to the contrary. Any person having a direct interest in the arbitration is entitled to attend hearings. The arbitrator shall otherwise have the power to require the exclusion of any witness, other than a party or other essential person, during the testimony of any other witness. It shall be discretionary with the arbitrator to determine the propriety of the attendance of any other person other than a party and its representatives. *At the arbitrator's discretion, hearings may also be conducted telephonically.*

R-26. Representation

Any party may be represented by counsel or other authorized representative. A party intending to be so represented shall notify the other party and the AAA of the name and address of the representative at least three days prior to the date set for the hearing at which that person is first to appear. When such a representative initiates an arbitration or responds for a party, notice is deemed to have been given.

R-27. Oaths

Before proceeding with the first hearing, each arbitrator may take an oath of office and, if required by law, shall do so. The arbitrator may require witnesses to testify under oath administered by any duly qualified person and, if it is required by law or requested by any party, shall do so.

R-28. Stenographic Record

Any party desiring a stenographic record shall make arrangements directly with a stenographer and shall notify the other parties of these arrangements at least three days in advance of the hearing. The requesting party or parties shall pay the cost of the record. If the transcript is agreed by the parties, or determined by the arbitrator to be the official

record of the proceeding, it must be provided to the arbitrator and made available to the other parties for inspection, at a date, time, and place determined by the arbitrator.

R-29. Interpreters

Any party wishing an interpreter shall make all arrangements directly with the interpreter and shall assume the costs of the service.

R-30. Postponements

The arbitrator may postpone any hearing upon agreement of the parties, upon request of a party for good cause shown, or upon the arbitrator's own initiative. A party or parties causing a postponement of a hearing will be charged a postponement fee, as set forth in the administrative fee schedule.

R-31. Arbitration in the Absence of a Party or Representative

Unless the law provides to the contrary, the arbitration may proceed in the absence of any party or representative who, after due notice, fails to be present or fails to obtain a postponement. An award shall not be made solely on the default of a party. The arbitrator shall require the party who is present to submit such evidence as the arbitrator may require for the making of an award.

R-32. Conduct of Proceedings

(a) The claimant shall present evidence to support its claim. The respondent shall then present evidence to support its defense. Witnesses for each party shall also submit to questions from the arbitrator and the adverse party. The arbitrator has the discretion to vary this procedure, provided that the parties are treated with equality and that each party has the right to be heard and is given a fair opportunity to present its case.

(b) The arbitrator, exercising his or her discretion, shall conduct the proceedings with a view to expediting the resolution of the dispute and may direct the order of proof, bifurcate proceedings and direct the parties to focus their presentations on issues the decision of which could dispose of all or part of the case.

(c) The parties may agree to waive oral hearings in any case.

R-33. Evidence

(a) The parties may offer such evidence as is relevant and material to the dispute and shall produce such evidence as the arbitrator may deem necessary to an understanding and determination of the dispute. Conformity to legal rules of evidence shall not be necessary. All evidence shall be taken in the presence of all of the arbitrators and all of the parties, except where any of the parties is absent, in default or has waived the right to be present.

(b) The arbitrator shall determine the admissibility, relevance, and materiality of the evidence offered and may exclude evidence deemed by the arbitrator to be cumulative or irrelevant.

(c) The arbitrator shall take into account applicable principles of legal privilege, such as those involving the confidentiality of communications between a lawyer and client.

(d) An arbitrator or other person authorized by law to subpoena witnesses or documents may do so upon the request of any party or independently.

(e) *New Rule: In all hearings conducted pursuant to these rules, the applicable International Federation's categories of prohibited substances, definition of doping and sanctions shall be applied. In the event an IF's rules are silent on an issue, the rules set forth in the Olympic Movement Anti-Doping Code shall apply. IF and Code rules may be mitigated, as appropriate, by the principles set forth in the decisions of CAS. Notwithstanding the foregoing, (a) The IOC laboratories used by USADA shall be presumed to have conducted testing and custodial procedures in accordance to prevailing and acceptable standards of scientific practice. This presumption can be rebutted by evidence to the contrary, but the accredited laboratory shall have no onus in the first instance to show that it conducted the procedures other than in accordance with its standard practices conforming to any applicable IOC requirements; (b) laboratories shall only be required to produce the documentation provided for in USADA's Protocol for Olympic Sport Testing unless the arbitrator finds that the athlete has a compelling need for additional information. In such event, the cost from the laboratory of providing the additional information shall be borne by the athlete; (c) minor irregularities in sample collection, sample testing or other procedures set forth herein which cannot reasonably be considered to have effected the results of an otherwise valid test or collection shall have no effect on such results; and (d) if contested, USADA shall have the burden of establishing the integrity of the sample collection process, the chain of custody of the sample, and the accuracy of laboratory test results by clear and convincing evidence unless the rules of the applicable IF set a higher standard.*

R-34. Evidence by Affidavit and Posthearing Filing of Documents or Other Evidence

(a) The arbitrator may receive and consider the evidence of witnesses by declaration or affidavit, but shall give it only such weight as the arbitrator deems it entitled to after consideration of any objection made to its admission.

(b) If the parties agree or the arbitrator directs that documents or other evidence be submitted to the arbitrator after the hearing, the documents or other evidence shall be filed with the AAA for transmission to the arbitrator. All parties shall be afforded an opportunity to examine and respond to such documents or other evidence.

R-35. Inspection or Investigation

An arbitrator finding it necessary to make an inspection or investigation in connection with the arbitration shall direct the AAA to so advise the parties. The arbitrator shall set the date and time and the AAA shall notify the parties. Any party who so desires may be present at such an inspection or investigation. In the event that one or all parties are not present at the inspection or investigation, the arbitrator shall make an oral or written report to the parties and afford them an opportunity to comment.

R-36. Interim Measures

(a) The arbitrator may take whatever interim measures he or she deems necessary, including injunctive relief and measures for the protection or conservation of property and disposition of perishable goods.

(b) Such interim measures may take the form of an interim award, and the arbitrator may require security for the costs of such measures.

(c) A request for interim measures addressed by a party to a judicial authority shall not be deemed incompatible with the agreement to arbitrate or a waiver of the right to arbitrate.

R-37. Closing of Hearing

The arbitrator shall specifically inquire of all parties whether they have any further proofs to offer or witnesses to be heard. Upon receiving negative replies or if satisfied that the record is complete, the arbitrator shall declare the hearing closed.

If briefs are to be filed, the hearing shall be declared closed as of the final date set by the arbitrator for the receipt of briefs. If documents are to be filed as provided in Section

R-34 and the date set for their receipt is later than that set for the receipt of briefs, the later date shall be the closing date of the hearing. The time limit within which the arbitrator is required to make the award shall commence, in the absence of other agreements by the parties, upon the closing of the hearing.

R-38. Reopening of Hearing

The hearing may be reopened on the arbitrator's initiative, or upon application of a party, at any time before the award is made. If reopening the hearing would prevent the making of the award within the specific time agreed on by the parties in the contract(s) out of which the controversy has arisen, the matter may not be reopened unless the parties agree on an extension of time. When no specific date is fixed in the contract, the arbitrator may reopen the hearing and shall have 10 days from the closing of the reopened hearing within which to make an award. *The 30 day period for re-opening a hearing [under rule 38] shall be reduced to 10 days.*

R-39. Waiver of Rules

Any party who proceeds with the arbitration after knowledge that any provision or requirement of these rules has not been complied with and who fails to state an objection in writing shall be deemed to have waived the right to object.

R-40. Extensions of Time

The parties may modify any period of time by mutual agreement. The AAA or the arbitrator may for good cause extend any period of time established by these rules, except the time for making the award. The AAA shall notify the parties of any extension.

R-41. Serving of Notice

(a) Any papers, notices, or process necessary or proper for the initiation or continuation of an arbitration under these rules, for any court action in connection therewith, or for the entry of judgment on any award made under these rules may be served on a party by mail addressed to the party, or its representative at the last known address or by personal service, in or outside the state where the arbitration is to be held, provided that reasonable opportunity to be heard with regard to the dispute is or has been granted to the party.

(b) The AAA, the arbitrator and the parties may also use overnight delivery or electronic facsimile transmission (fax), to give the notices required by these rules. Where all parties and the arbitrator agree, notices may be transmitted by electronic mail (E-mail), or other methods of communication.

(c) Unless otherwise instructed by the AAA or by the arbitrator, any documents submitted by any party to the AAA or to the arbitrator shall simultaneously be provided to the other party or parties to the arbitration.

R-42. Majority Decision

When the panel consists of more than one arbitrator, unless required by law or by the arbitration agreement, a majority of the arbitrators must make all decisions.

R-43. Time of Award

The award shall be made promptly by the arbitrator and, unless otherwise agreed by the parties or specified by law, no later than 10 days from the date of closing the hearing, or, if oral hearings have been waived, from the date of the AAA's transmittal of the final statements and proofs to the arbitrator. *The 30 day period given to the arbitrator [under rule 43] for rendering an award shall be reduced to 10 days.*

R-44. Form of Award

(a) Any award shall be in writing and signed by a majority of the arbitrators. It shall be executed in the manner required by law. *In all cases, the arbitrator shall render a reasoned award.*

R-45. Scope of Award

(a) The arbitrator may grant any remedy or relief that the arbitrator deems just and equitable and within the scope of the agreement of the parties, including, but not limited to, specific performance of a contract.

(b) In addition to a final award, the arbitrator may make other decisions, including interim, interlocutory, or partial rulings, orders, and awards. In any interim, interlocutory, or partial award, the arbitrator may assess and apportion the fees, expenses, and compensation related to such award as the arbitrator determines is appropriate.

(c) In the final award, the arbitrator shall assess the fees, expenses, and compensation provided in Sections R-51, R-52, and R-53. The arbitrator may apportion such fees, expenses, and compensation among the parties in such amounts as the arbitrator determines is appropriate.

(d) The award of the arbitrator(s) may include: (a) interest at such rate and from such date as the arbitrator(s) may deem appropriate; and (b) an award of attorneys' fees if all parties have requested such an award or it is authorized by law or their arbitration agreement.

All fees and expenses payable to the AAA, the arbitrator or for witnesses or proof produced at the direct request of the arbitrator shall be paid solely by USADA.

R-46. Award upon Settlement

If the parties settle their dispute during the course of the arbitration and if the parties so request, the arbitrator may set forth the terms of the settlement in a "consent award."

R-47. Delivery of Award to Parties

Parties shall accept as notice and delivery of the award the placing of the award or a true copy thereof in the mail addressed to the parties or their representatives at the last known addresses, personal or electronic service of the award, or the filing of the award in any other manner that is permitted by law.

R-48. Modification of Award

Within 5 days after the transmittal of an award, any party, upon notice to the other parties, may request the arbitrator, through the AAA, to correct any clerical, typographical, or computational errors in the award. The arbitrator is not empowered to redetermine the merits of any claim already decided. The other parties shall be given 5 days to respond to the request. The arbitrator shall dispose of the request within 5 days after transmittal by the AAA to the arbitrator of the request and any response thereto. *The time periods provided for seeking modification of the award [under rule 48] shall be reduced to 5 days.*

R-49. Release of Documents for Judicial Proceedings

The AAA shall, upon the written request of a party, furnish to the party, at the party's expense, certified copies of any papers in the AAA's possession that may be required in judicial proceedings relating to the arbitration. *The AAA shall also furnish copies of documents required in connection with CAS proceedings.*

R-49 A. New Rule:

The arbitration award may be appealed to CAS by either the athlete or by the applicable International Federation (whether or not a party). Notice of appeal shall be filed with the Administrator within the time period provided in the CAS appellate rules. Appeals to CAS filed under these rules shall be heard in the United States. The decisions of CAS shall be final and binding on all parties and shall not be subject to any further review or appeal except as permitted by the Swiss Federal Judicial Organization Act or the Swiss statute on private international law.

R-50. Applications to Court and Exclusion of Liability

- (a) No judicial proceeding by a party relating to the subject matter of the arbitration shall be deemed a waiver of the party's right to arbitrate.
- (b) Neither the AAA nor any arbitrator in a proceeding under these rules is a necessary party in judicial proceedings relating to the arbitration.
- (c) Parties to an arbitration under these rules shall be deemed to have consented that judgment upon the arbitration award may be entered in any federal or state court having jurisdiction thereof.
- (d) Neither the AAA nor any arbitrator shall be liable to any party for any act or omission in connection with any arbitration conducted under these rules.

R-51. Administrative Fees

As a not-for-profit organization, the AAA shall prescribe filing and other administrative fees and service charges to compensate it for the cost of providing administrative services. The fees in effect when the fee or charge is incurred shall be applicable.

The filing fee shall be advanced by the party or parties making a claim or counterclaim, subject to final apportionment by the arbitrator in the award.

The AAA may, in the event of extreme hardship on the part of any party, defer or reduce the administrative fees.

R-52. Expenses

The expenses of witnesses for either side shall be paid by the party producing such witnesses. All other expenses of the arbitration, including required travel and other expenses of the arbitrator, AAA representatives, and any witness and the cost of any proof produced at the direct request of the arbitrator, shall be borne equally by the parties, unless they agree otherwise or unless the arbitrator in the award assesses such expenses or any part thereof against any specified party or parties.

R-53. Neutral Arbitrator's Compensation

- (a) Unless the parties agree otherwise, members of the National Panel of Commercial Arbitrators appointed as neutrals on cases administered under the Expedited Procedures with claims not exceeding \$10,000, will customarily serve without compensation for the first day of service. Thereafter, arbitrators shall receive compensation as set forth herein.

- (b) Arbitrators shall be compensated at a rate consistent with the arbitrator's stated rate of compensation, beginning with the first day of hearing in all cases with claims exceeding \$10,000.

- (c) If there is disagreement concerning the terms of compensation, an appropriate rate shall be established with the arbitrator by the AAA and confirmed to the parties.

- (d) Any arrangement for the compensation of a neutral arbitrator shall be made through the AAA and not directly between the parties and the arbitrator.

R-54. Deposits

The AAA may require the parties to deposit in advance of any hearings such sums of money as it deems necessary to cover the expense of the arbitration, including the arbitrator's fee, if any, and shall render an accounting to the parties and return any unexpended balance at the conclusion of the case.

R-55. Interpretation and Application of Rules

The arbitrator shall interpret and apply these rules insofar as they relate to the arbitrator's powers and duties. When there is more than one arbitrator and a difference arises among them concerning the meaning or application of these rules, it shall be decided by a majority vote. If that is not possible, either an arbitrator or a party may refer the question to the AAA for final decision. All other rules shall be interpreted and applied by the AAA.

R-56. Suspension for Nonpayment

If arbitrator compensation or administrative charges have not been paid in full, the AAA may so inform the parties in order that one of them may advance the required payment. If such payments are not made, the arbitrator may order the suspension or termination of the proceedings. If no arbitrator has yet been appointed, the AAA may suspend the proceedings.

R-57. New Rule:

Notwithstanding the foregoing, any athlete, within 10 days following the date of the notice described in R-4 above, shall be entitled, at his or her option, to elect to bypass the hearing process described above and proceed directly to a single final hearing before CAS, which hearing will be conducted in the United States.

The CAS decision shall be final and binding and shall not be subject to further review or appeal except as permitted by the Swiss Federal Judicial Organization Act or the Swiss statute on private international law.

**United States Anti-Doping Agency
1265 Lake Plaza Dr.
Colorado Springs, CO 80909**

Web Site

www.usantidoping.org

1-719-785-2000 (phone)

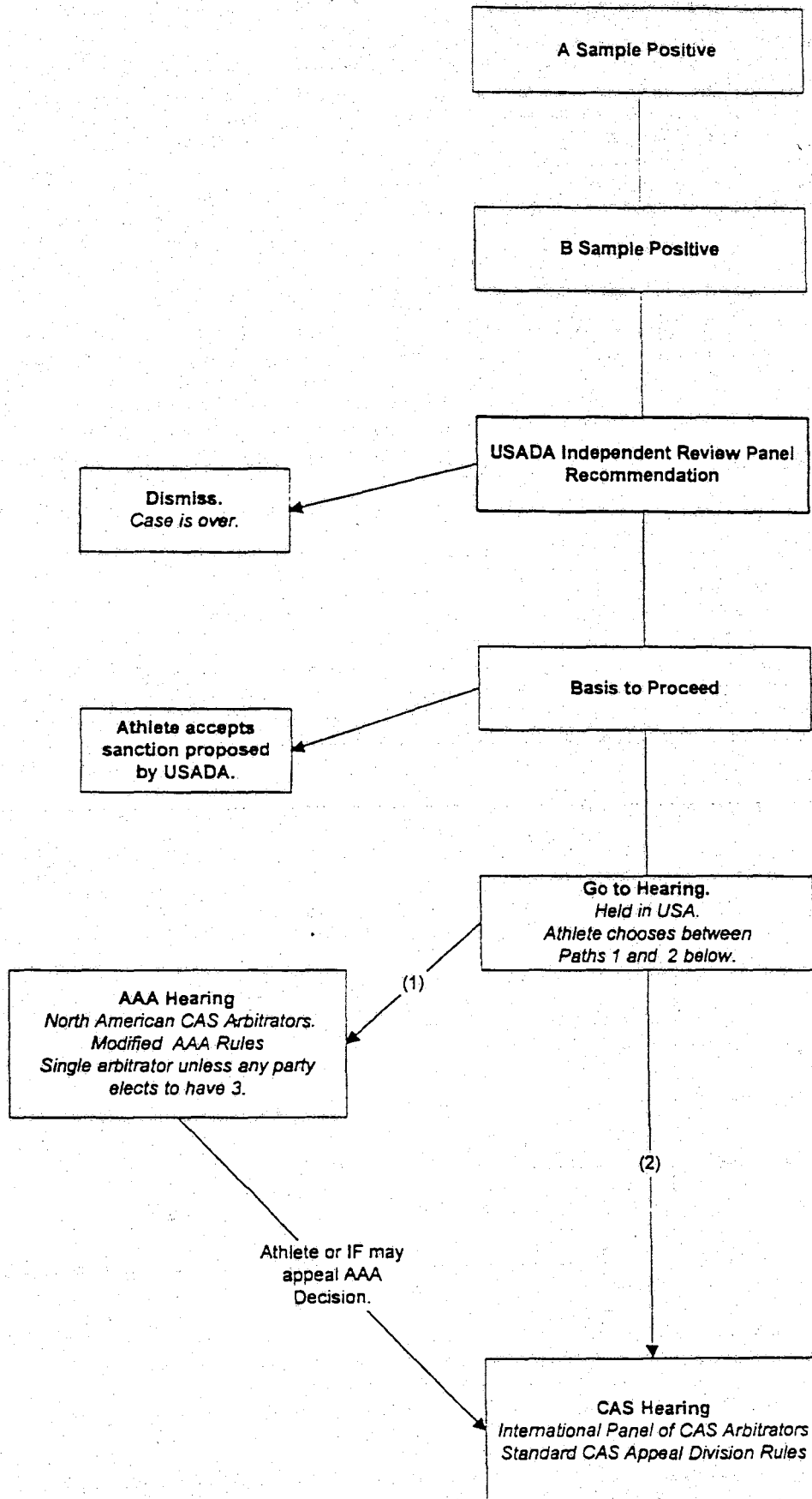
1-719-785-2001 (fax)

1-866-601-0392 (toll-free phone)

USADA Drug Reference Line

1-800-233-0393

USADA Results Management Diagram



Timeline and Notices Under USADA Protocol

STEP IN PROCESS		NOTICE GOES TO
Urine provided by Athlete		
- 2 weeks -		
Negative A laboratory report	➡	Athlete, NGB & USOC ¹
Positive (or elevated) A lab report	➡	Athlete & NGB & USOC
- 2 weeks -		
B lab report (positive or negative)	➡	Athlete, NGB & USOC
- 3 weeks -		
Review Panel Recommendation (to proceed or to dismiss)	➡	Athlete, NGB, USOC, IF & WADA
- 10 days -		
Notice that the athlete has accepted a sanction proposed by USADA	➡	Athlete, NGB, USOC, IF & WADA - Public announcement of sanction
Notice of hearing	➡	Athlete, IF, (NGB, USOC & WADA but not as parties)
- 3 months -		
AAA/CAS Decision	➡	Athlete, IF, NGB, USOC & WADA - Public announcement of sanction
- 20 days -		
Appeal by Athlete or IF of AAA decision to CAS	➡	Athlete, IF, NGB, USOC & WADA
- 3 months -		
Decision by CAS on appeal if first hearing is before AAA	➡	CAS decision is a public document

¹ Notice from USADA will include the date and location of the sample collection, the athlete's sample number and name and the laboratory test result. The IOC accredited laboratories are required to give notice to the IOC and relevant IF directly any time there is a positive A or B test. However, that notice does not include the athlete's name (samples sent to the labs are identified only by number - not by name). Most NGBs will, upon request, routinely forward the athlete's name to the IF and update the IF on the status of proceedings.

USADA LEADERSHIP BIOGRAPHIES

Frank Shorter, Chairman, U.S. Anti-Doping Agency

A two-time Olympian medal winner, Frank Shorter, became the Chairman of the U.S. Anti-Doping Agency (USADA) Board of Directors in April 2000.

A member of the U.S. Olympic Hall of Fame, Shorter has worked extensively in support of anti-doping initiatives worldwide and recently testified before the U. S. Congress on this issue. In addition, he was an advisor to President Clinton's Office of Drug Control Policy and Senator John McCain's Commerce Committee regarding International Olympic Committee reform.

Shorter, 53, won the gold medal in the marathon at the 1972 Olympic Games in Munich, Germany, and the silver medal at the 1976 Olympic Games in Montreal, Canada.

A 1969 graduate of Yale University (New Haven, Conn.), Shorter won the 1972 Sullivan Award as the most outstanding American amateur athlete. In 1971, he won the marathon and 10,000 meter gold medal at the Pan American Games in Cali, Colombia. Shorter also owns four 10,000-meter and marathon national titles.

He was admitted to the state of Colorado Bar Association in 1975, one year after earning his law degree from the University of Florida in Gainesville. Shorter graduated from Northfield-Mt. Hermon (Mass.) High School in 1965.

Among Shorter's other accolades are induction into the U.S. Track and Field Hall of Fame and the U.S. Distance Running Hall of Fame. He also has served as a color commentator for the past four Olympic Games for NBC.

Since 1977, he has served as president of Frank Shorter Sports, a sportswear company in the U.S., Canada and Japan.

Terry Madden, U.S. Anti-Doping Agency CEO

Terry Madden became the Chief Executive Officer of the U.S. Anti-Doping Agency (USADA) in April 2000 after serving as Chief of Staff to United States Olympic Committee (USOC) President Bill Hybl.

As Chief Executive Officer, Madden works closely with USADA Chairman of the Board Frank Shorter and other members of the agency's board of directors to strengthen the United States' position as the leader in the fight against prohibited substances in international sport.

Madden's diverse professional background includes serving as Executive Director of USA Badminton (1997-98), during which time he reorganized the management structure of the national governing body and implemented a streamlined system for financial management, budgeting and auditing.

From 1979-95, Madden worked as a U.S. Treasury Bond and Treasury Note Financial Futures Pit Broker at the Chicago Board of Trade. In addition to his work as a pit broker, he served as Secretary of the Board of Trade (1979) and was a member of the Office of Investigation and Audits (1978).

Madden, who graduated from the University of Notre Dame Law School in 1976, began his professional career as Assistant District Attorney for the Dallas (Texas) County District Attorney's Office (1976-78). He also earned a bachelor of business administration degree in finance from Notre Dame in 1973.

Madden and his wife, Lee, reside in Colorado Springs and are the parents of three children.



USADA LEADERSHIP BIOGRAPHIES

Larry Bowers, Senior Managing Director of Technical and Information Resources

Larry Bowers, Ph.D. joined the U.S. Anti-Doping Agency in September 2000 as the Senior Managing Director of Technical and Information Resources.

Prior to his appointment with USADA, Bowers spent the past eight years as the Director of Athletic Drug Testing and Toxicology Laboratory at Indiana University. He was a professor of Pathology and Laboratory Medicine, as well as in the Department of Chemistry at the Purdue University School of Science.

As senior managing director, Bowers will be responsible for leading the research efforts into prohibited substances, including detection. He will direct the development of an anti-doping educational program for America's youth in sport, as well as the resources for technical and educational anti-doping information for Olympic and elite athletes in the United States. He will also oversee the drug-testing program for USADA.

Bowers serves as a consultant with the U.S. Food and Drug Administration medical Devices Advisory Committee, and was deputy director of the Athletic Drug Testing Laboratory for the 1996 Olympic Games. He has published more than 100 papers on drug testing and chemistry and, in the past five years, made presentations at more than 35 conferences and scientific meetings. Bowers has also served as an expert on the doping control review panels.

He earned a Bachelor of Arts degree in chemistry from Franklin & Marshall College (Lancaster, Pa.) in 1972, and completed his Ph.D. in chemistry from the University of Georgia (Athens) in 1975. Two years later, Bowers finished his post-doctoral study at the University of Oregon Health Sciences Center.

Bowers was re-elected to the Federation Internationale de Natation Amateur (FINA, aquatic sports) Doping Review Board through 2005. He has also served as an expert witness on several international federation appeal cases, and was a past member of the International Amateur Athletics Federation (IAAF) review panel.

USADA Board of Directors

Frank Shorter (Chairman)
Dr. Ralph W. Hale (Vice Chairman)
Kate Hendrickson Borg (Secretary)

Barry Axelrod (Treasurer)
Peter Breen, ATC
Lawrence Brown, Jr., MD, MPH

Dr. Richard W. Cohen
Jean Fourcoy, M.D., PhD, MPH
Andrew Mecca, Dr.,



BIOGRAPHIES OF U.S. ANTI-DOPING AGENCY BOARD OF DIRECTORS

Frank Shorter, Chair

A two-time Olympian, Shorter won the gold medal in the marathon at the 1972 Olympic Games in Munich, Germany, and the silver medal at the 1976 Olympic Games in Montreal, Canada. A member of the U. S. Olympic Hall of Fame, Shorter has worked extensively in support of anti-doping initiatives worldwide and recently testified before the United States Congress on this issue.

Dr. Ralph W. Hale, Vice Chair

The executive vice president of the American College of Obstetricians and Gynecologists, Dr. Hale was a member of the U.S. delegation staff at four Olympic Games (1988, 1992, 1994 and 1996). Dr. Hale served on the USOC for 16 years as a representative of U.S. Water Polo. His extensive work in international sport includes serving as a member of the USOC/USSR Anti-Doping Commission (1989-92). Dr. Hale also served as USOC vice president (1993-96).

Kate Hendrickson Borg, Secretary

A member of the 1992 U.S. Olympic Team in the sport of canoe/kayak, Hendrickson Borg served as an athlete liaison and athlete services coordinator for the 1997 World University Games and the 1999 Pan American Games. Hendrickson Borg, who was a member of the U.S. Canoe/Kayak National Team from 1988 to 1996, remains active as a competitor in road races, marathons and triathlons.

Barry Axelrod, Treasurer

A graduate of UCLA Law School, Axelrod is an attorney specializing in sports, entertainment and business law. He represents such athletes as Olympians Willie Banks, Julianne McNamara and Mary Lou Retton, professional athletes Jeff Bagwell, Craig Biggio and Darryl Kile and entertainers Mark Harmon and Pam Dawber.

Peter Breen, ATC

A member of the 1992 U.S. Olympic Team in the sport of ice dancing, Breen has worked as a certified athletic trainer for the past eight years. He is currently completing requirements for a master's degree in physical therapy from Boston University. Breen has experience in a variety of physical rehabilitation settings across the U.S. and internationally.

Lawrence S. Brown, Jr., MD, MPH

Lawrence S. Brown, Jr., is a physician-researcher with training in internal medicine, neuroendocrinology and addiction medicine. Dr. Brown is the Senior Vice President at the Addiction Research and Treatment Corp. in Brooklyn, N.Y. He has appointments as Visiting Physician at Rockefeller Hospital and Clinical Assistant Professor of Public Health of the Weill Medical College at Cornell University. He also is a member of the Board of trustees of the American Society of Addiction Medicine. Dr. Brown provides consultation to a host of government and private agencies. This includes Dr. Brown's role as Medical Advisor to the National Football League.

Dr. Richard W. Cohen

A former member of the Doping Control Commission for USA Weightlifting and the U.S. Bobsled and Skeleton Federation, Dr. Cohen served as chairman of the Doping Control Commission for the 1996 Olympic Games in Atlanta. He served as an advisor on doping control to the Nagano Olympic Organizing Committee during the 1998 Olympic Winter Games in Nagano, Japan. A noted orthopaedic surgeon, Dr. Cohen is chairman of the Wellstar Health System Ethics Committee in Atlanta.

Jean Fourcroy, M.D., PhD, MPH

A medical officer with the Food and Drug Administration (FDA) in the Division of Clinical Laboratory Devices, Dr. Fourcroy is regarded as an expert on the subject of anabolic steroids, androgens, and their alternatives. A noted clinician, researcher, and scientist, Dr. Fourcroy has worked extensively with the U.S. Drug Enforcement Agency on the development of regulatory and educational formats both domestically and abroad.

Dr. Andrew Mecca

Dr. Mecca serves as President of the California Mentor Foundation. He served as the State of California's Drug Czar (1991-98). Dr. Mecca chaired the Governor's Policy Council on Drug and Alcohol Abuse. He also served as chairman of the California Commission on Improving Life Through Service. He has assisted in the development of programs designed to curb substance abuse in more than 15 countries. An accomplished triathlete and marathoner, Dr. Mecca also serves as chairman of the Governor's Policy Council on Drug and Alcohol Abuse for the State of California.

United States Anti-Doping Agency



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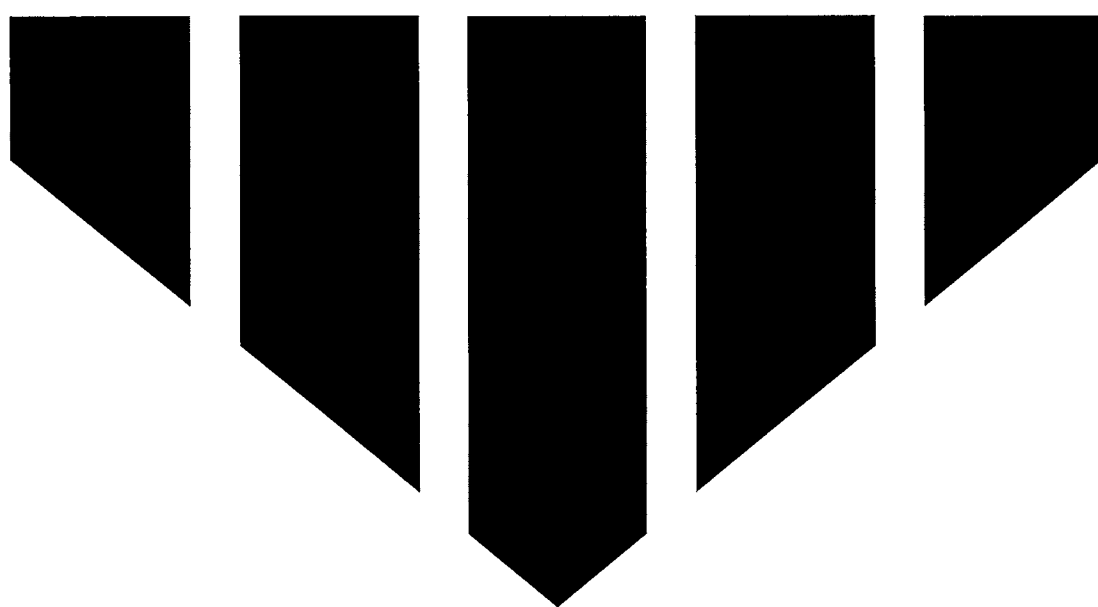
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UNITED STATES ANTI-DOPING AGENCY



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United States Anti-Doping Agency (USADA) Frequently Asked Questions (FAQs)

Q: What is USADA?

A: *USADA stands for the United States Anti-Doping Agency. USADA began all drug testing of Olympic and Pan American athletes on Oct. 2, 2000. USADA is dedicated to eliminating the practice of doping in sport, including U.S. Olympic, Pan American and Paralympic athletes. USADA is the independent anti-doping agency for Olympic sports in the United States.*

Q: What is USADA's mailing address, telephone and fax number?

A: *The mailing address is: United States Anti-Doping Agency, 1265 Lake Plaza Dr., Colorado Springs, CO 80906. USADA's toll-free telephone number is 1-866-601-2632. USADA's fax number is 719-785-2001.*

Q: What is USADA's website address?

A: www.usantidoping.org

Q: Whom will USADA test?

A: *USADA has the authority to test:*

- *any athlete who is a member of a National Governing Body (NGB);*
- *any athlete participating at a competition sanctioned by the United States Olympic Committee (USOC) or a NGB;*
- *any foreign athlete who would otherwise be subject to testing by USADA, the USOC or a NGB; any other athlete who has given his/her consent to testing by USADA; or*
- *any athlete who has been named by the USOC or a NGB or is competing in a qualifying event to represent the USOC or NGB in international competition.*

Q: What type of testing will USADA conduct?

A: *USADA will conduct event and out-of-competition (OOC) testing. It is USADA's goal to conduct an equal percentage of OOC and event tests.*

Q: What is Out-of-Competition (OOC) testing?

A: *OOC testing is testing of individual athletes without giving prior or advance notice of the test.*

Q: For what substances are tests performed in the OOC program?

A: *USADA tests the prohibited classes of substances and methods of an athlete's international federation. An athlete should check with the appropriate International Federation ("IF") to determine if these substances are prohibited. Generally, the substances in the following categories; anabolic agents, diuretics, masking agents and peptide hormones are tested under the OOC program. Substances in the above list are not found in over-the-counter cold/allergy medications. Over-the-counter dietary supplements, however, may contain prohibited substances in these categories.*

Q: For what substances are tests performed in the event program?

A: *USADA tests the prohibited classes of substances and methods of an athlete's international federation. An athlete should check with the appropriate International Federation ("IF") to determine if these substances are prohibited. The testing includes all of the categories included in the OOC program, **plus**, stimulants, narcotics, and classes of prohibited substance in certain circumstances (e.g., alcohol, marijuana, local anesthetics, corticosteroids, beta-blockers).*

Q: Who can be contacted with questions about prescriptions, vitamins or supplements that an athlete is taking?

A: *The USADA Athlete Drug Reference Line at 1-800-233-0393, or 1-719-785-2020 (outside the United States). In addition, requests can be emailed to drugreference@usantidoping.org.*

Q: How are athletes selected for Out of Competition (OOO) Testing?

A: *All NGBs are required to provide a list of athletes for inclusion in the OOC pool. Typically each NGB has criteria developed in consultation with USADA. Once an athlete's name is provided, that athlete will receive an enrollment packet from USADA.*

Once athletes are identified for inclusion in the OOC program, USADA will select athletes to test based on a weighted draw system that considers individual rankings, risk of doping with each sport, and other factors. Names will be selected from a pool that includes all eligible athletes in all sports.

Q: Who is responsible for the athlete's location or whereabouts for the OOC Testing Program?

A: *The athlete is responsible for directly informing USADA of his or her location or whereabouts at all times.*

Q: How can an athlete update his/her location information?

A: *The athlete can update his/her location information:*

- by mail at: United States Anti-Doping Agency, OOC Whereabouts, 1265 Lake Plaza Drive, Colorado Springs, CO 80906; or*
- by fax at 719-785-2001; or*

- via email to update@usantidoping.org if you are already part of the OOC pool and have turned in your email address with a previous USADA Athlete Location Form.

Q: What happens when a USADA Doping Control Officer (DCO) cannot locate the athlete for an out-of-competition test?

A: It is the responsibility of the athlete to inform USADA any time they will not be available for OOC testing. After the DCO makes a reasonable effort to locate the athlete for testing, the DCO is required to complete an Unavailable Athlete Form to verify a reasonable attempt was made to locate the athlete. If there appears to be a reasonable basis for calling this a missed test, then within 30 days after receipt of the Unavailable forms, USADA's Chief Executive Officer will inform the athlete and ask for an explanation. This begins the review process.

Under the USOC Anti-Doping Policy, any athlete with three missed tests within any rolling 18-month period shall be 'ineligible' for two years from the time of the last "missed test." An athlete may face additional sanctions from the international federation. No athlete shall be disciplined for having three missed tests with an 18-month period unless the athlete has been offered an opportunity for a hearing.

Q: What is the policy for a retired player to return to competition?

A: If the athlete was a member of the USADA OOC program, IF or USOC OOC program, the athlete must be enrolled for at least six months in advance of regaining eligible status.

Q: What should an athlete do when they retire from their sport?

A: For USADA purposes, any athlete who retires must promptly inform USADA and their respective NGB, in writing. Also, the athlete should check with their respective IF for their policy on retirement. Under the USOC Anti-Doping Policy, any athlete, who has not provided advance written notice of retirement to USADA and then refuses to participate in a USADA OOC test claiming retirement, shall be "ineligible" for a period of two years.

Q: If I am suspended for a doping violation, do I as an athlete, still participate in the OOC program?

A: The suspended athlete must comply with all requirements of the USADA OOC testing program during the period of suspension and must bear the costs associated with any OOC tests conducted by USADA on him/her during the suspension.

Q: What laboratory will analyze the samples collected by USADA?

A: USADA will use IOC-accredited laboratories such as the UCLA Olympic Analytical Laboratory to analyze samples collected under USADA's jurisdiction.

Q: What prohibited substance list will be used to determine if a doping violation has potentially occurred?

A: *USADA will use the International Federation (IF) prohibited substance list of the athlete's particular sport.*

Q: Will the athlete and the NGBs be informed of negative test results?

A: *Yes, USADA will inform the athlete, the USOC, and the NGB by letter of negative test results.*

Q: How is an athlete informed of an 'A' sample positive or elevated test result?

A: *USADA, after receiving notification from the laboratory of an 'A' sample positive or elevated test, will notify the athlete, the USOC and the particular NGB by letter.*

Q: How long after the 'A' sample positive or elevated test report will the 'B' sample opening and analysis occur?

A: *The 'B' sample opening and analysis will typically occur within two weeks after the 'A' sample positive or elevated test report.*

Q: Will the athlete have an opportunity to attend the 'B' sample opening and analysis?

A: *Yes. The athlete and the athlete's representative will be given the opportunity, at the athlete's expense, to attend the 'B' sample opening and analysis. This is another reason that maintaining a current address with USADA is important.*

Q: Who will be notified of the positive or elevated test results from the 'B' sample analysis?

A: *USADA will notify the athlete, the USOC, and the NGB.*

Q: What happens if the 'B' sample analysis confirms the 'A' sample positive or elevated test result?

A: *This is considered a positive test and the test results are turned over to USADA's Anti-Doping Review Board for its review.*

Q: What is the USADA Anti-Doping Review Board?

A: *The USADA Anti-Doping Review Board is a group of experts independent of USADA with medical, technical and legal knowledge of doping matters. These experts will meet to determine if there is sufficient evidence of doping to proceed to a hearing.*

Q: Will the athlete be permitted to attend the USADA Review Board meeting?

A: No. The USADA Review Board meeting is not a hearing. The USADA Review Board will accept written submittals from the athlete concerning the athlete's tests.

Q: How long after the 'B' sample positive or elevated report before the USADA Review Board meets?

A: The USADA Review Board will meet (typically by teleconference) within approximately three weeks after the B sample positive or elevated test report.

Q: What happens after the USADA Review Board makes its recommendation concerning the test?

A: The Review Board will present its recommendation to USADA. USADA will be responsible for proceeding to an adjudication of the matter or closing the matter based on the Review Board's recommendation. USADA will forward the Review Board's recommendation to the athlete, the NGB, the USOC, the relevant IF and the World Anti-Doping Agency (WADA).

Q: Does the athlete have the right to a hearing if USADA proceeds with adjudication as a result of a positive or elevated test?

A: Yes. The athlete has the right to choose between two separate hearing procedures.

- The athlete may elect to proceed to a hearing before the American Arbitration Association (AAA) using a single arbitrator (or a three-arbitrator panel, if demanded by either of the parties) selected from a pool of the North American Court Arbitration for Sport (NACAS) arbitrators, who shall also be AAA arbitrators.
- The athlete may elect to proceed directly to a hearing to a final and binding hearing before the Court of Arbitration for Sport held in the United States.

Q: What rules will apply to the hearing process?

A: Modified AAA Commercial Rules will apply to the hearing before AAA/CAS. The regular CAS Appellate rules will apply to hearings held before AAA.

Q: How long after the USADA Review Board's recommendation will the hearing take place?

A: The hearing will typically take place within three months of the USADA Review Board's recommendation.

Q: Under what rules will the sanctions for doping violations be applied?

A: The athlete's International Federation sanctions policy will apply.

Q: Who will receive notice of the arbitrator's decision?

A: *The decision and sanction, if any, will be sent to the athlete, the USOC, the NGB, the IF and WADA. A public announcement of the sanction, if any, will be made by USADA and/or the NGB.*

Q: Who will enforce the sanction, if any, received from the arbitrator's decision?

A: *The arbitrator's decision and sanction will be forwarded to the NGB to enforce.*

Q: Who pays for the adjudication process?

A: *USADA pays for the administration of the USADA review process and adjudication costs (except for the CAS appeal fee). The athlete pays for all of his/her defense costs, such as travel, legal fees, and expert witness costs.*

Q: If the IF conducts the test, will USADA adjudicate the positive results?

A: *Yes, for samples collected after Oct. 2, 2000. No matter where the test is conducted, if the IF refers the matter to the NGB, then USADA will adjudicate the case under USADA's protocol.*

Q: Will the IF have a role in the adjudication process?

A: *The IF will receive notice of all steps in the process from the Review Panel recommendation forward. The IF will be invited to appear as a party or observer at all hearings.*

Please note that the answers provided above are not comprehensive, and do not supersede the official protocol of USADA. This is intended to provide general information only. A copy of the Protocol for Olympic Movement Testing may be obtained upon request, or on USADA's web site at www.usantidoping.org.

United States Anti-Doping Agency



USADA ANNOUNCES ADDITIONAL RESEARCH GRANT RECIPIENTS

COLORADO SPRINGS, Colo. (June 13, 2002) – The United States Anti-Doping Agency (USADA) awarded two more research grants in the fight against doping. USADA Senior Managing Director Larry Bowers announced Thursday.

“Continued improvements in testing technology along with increased understanding of the potential dangers of steroids, particularly for adolescents, advances our ability to deter drug use in sports,” said Bowers.

Two research awards were given to the UCLA Olympic Analytical Lab; one grant is entitled “Improving The Detection of Erythropoietin [EPO] Administration, and focuses on the increasing the effectiveness of detecting EPO in drug testing. The second grant – “Improving Urine Testing for Endogenous Steroids by Isotope Ratio Mass Spectrometry,” – deals with increasing the ability of the laboratory to tell the difference between pharmaceutical and natural testosterone. Overall, the UCLA Olympic Analytical Lab will receive about \$900,000 for the two studies.

“The research that USADA is funding is very exciting and will likely lead to enhanced doping control. UCLA is delighted to be participating in the USADA research program,” said Dr. Don Catlin, Director of the UCLA Olympic Analytical Lab.

A special project award was presented to The Hormone Foundation for a proposal to plan a workshop on adolescent abuse of steroids and other performance-enhancing substances.” The Hormone Foundation, based in Bethesda, Md., will receive approximately \$50,000 to support the project, which involves a workshop as the first activity in a multi-stage, collaborative program to develop and implement a national initiative to prevent the abuse of these substances.

“I am delighted that the U.S. Anti-Doping Agency will be providing full funding for the program-planning workshop on adolescent abuse of steroids and other performance-enhancing substances. We believe that there is a window of opportunity to address this problem effectively before it becomes a major threat to the health and well being of the nation’s youngsters” said Patricia O. Moore, Director of The Hormone Foundation.

In February, USADA awarded the initial grants to The Hastings Center and University of Utah Center for Human Toxicology (CHT). The Hastings Center proposal focuses on the ethics and values involved in developing rules in the area of oxygen transport enhancement, including technologies from altitude tents to recombinant EPO and EPO gene therapy. One goal of the grant is to develop clear guidelines for sport and athletes as to where acceptable practices end and cheating begins. The University of Utah Center for Human Toxicology grant concentrates on the further development of analytical testing procedures.

USADA has budgeted \$2 million annually for anti-doping research. Announcements of grant funding will occur on a quarterly basis. A number of proposals are currently under review, with the next announcement expected in July.

USADA is the independent anti-doping agency for Olympic sports in the United States, and is responsible for managing the testing and adjudication process for U.S. Olympic, Pan Am and Paralympic athletes. USADA is equally dedicated to preserving the integrity of sport through research initiatives and educational programs.

FOR MEDIA ONLY: For additional information, please contact USADA Director, Communications and Public Affairs Rich Wanninger at 719-785-2009 or via email at rwanninger@usantidoping.org. The official USADA web site is www.usantidoping.org.

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United States Anti-Doping Agency



USADA ANNOUNCES INITIAL 2002 RESEARCH GRANT RECIPIENTS

COLORADO SPRINGS, Colo. (Feb. 15, 2002) – The United States Anti-Doping Agency (USADA) awarded its first two research grants in 2002 in the fight against doping. USADA Senior Managing Director Larry Bowers announced Friday.

“Research into the issues in doping and detection of new doping chemicals and techniques are an integral part of attacking the doping issue, along with education and testing,” said Bowers.

The first research grant was awarded to The Hastings Center for a proposal entitled “Ethical, Conceptual, and Scientific Issues in the Use of Performance Enhancing Technologies in Sport.” This study will focus on the ethics and values involved in developing rules in the area of oxygen transport enhancement, including technologies from altitude tents to recombinant EPO and EPO gene therapy. One goal of the grant is to develop clear guidelines for sport and athletes as to where acceptable practices end and cheating begins. The Hastings Center, based in Garrison, N.Y., received about \$385,000 to support the project.

“The Hastings Center is delighted to take on the challenge of trying to dispel confusion and articulate as clearly as possible the ethical considerations in performance enhancing drug use in sport,” said Dr. Tom Murray, President of the Hastings Center.

The second research award was given to the University of Utah Center for Human Toxicology (CHT) to develop analytical testing procedures. CHT will receive about \$40,000 for their study. These tests will be used in conjunction with animal models to assess the muscle-growing capability of various steroids.

“We’re pleased to be associated with USADA and receive this funding to address the growing concerns about steroid precursors available as dietary supplements,” said Dennis Crouch, co-director of the CHT.

USADA has budgeted \$2 million annually for anti-doping research. Announcements of grant funding will occur on a quarterly basis. A number of proposals are currently under review, with the next announcement expected in the spring.

USADA is the independent anti-doping agency for Olympic sports in the United States, and is responsible for managing the testing and adjudication process for U.S. Olympic, Pan Am and Paralympic athletes. USADA is equally dedicated to preserving the integrity of sport through research initiatives and educational programs.

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United States Anti-Doping Agency



ATHLETE ADVISORY - 2

Dietary Supplements

Many dietary supplements, which are sold over the counter or through the Internet, contain doping substances that are prohibited by the Olympic Movement Anti-Doping Code and the anti-doping rules of the International Federations and United States NGBs. These prohibited substances include steroid precursors like DHEA, androstenedione, androstenediol, norandrostenedione and norandrostenediol and stimulants like ephedrine (ephedra), pseudoephedrine, Ma Huang and Guarana.

While prohibited substances should be identified on the labels of dietary supplement products, that is not always the case. Because government regulation of dietary supplements is lax and manufacturing processes in the industry are uneven, some dietary supplements have been found to contain prohibited substances, which are not disclosed. Studies have shown that even minute traces of contamination of a dietary supplement with a prohibited substance like norandrostenedione can result in a positive doping test. Because anti-doping rules make the presence of a prohibited substance in an athlete's urine a doping offense regardless of how the substance got there, any athlete who takes a dietary supplement does so at his or her own risk.

International Testing

Aside from USADA testing, U.S. athletes could be subject to testing by the World Anti-Doping Agency (WADA), their respective international federation or other national anti-doping agencies. USADA has bilateral agreements with several countries that permit USADA to test athletes from those countries when they are training in the United States. When U.S. athletes are in those countries, they could be subject to OOC testing by the respective national anti-doping agency. WADA could also test athletes, whether or not they are part of the USADA out-of-competition pool of athletes. USADA does not provide location information to WADA or the international federation. In addition, the paperwork for tests done by WADA or other national is different than USADA forms.

Cold Medicines

Many over-the-counter cold medicines contain ephedrine or pseudoephedrine. These substances are prohibited in competition. If they are detected in an athlete's urine from an in-competition control it is a doping offense.

Medications for ADD and ADHD

Ritalin, Adderall, Pemoline, Wellbutrin and other medications prescribed for Attention Deficit Disorder and Attention Deficit Hyperactivity Disorder contain substances, which are prohibited in competition. Unless an athlete has obtained a prior medical authorization from his or her International Federation, the detection of these substances in an athlete's urine from an in-competition doping control is a doping offense. As a practical solution, many athletes with ADD or ADHD simply choose to discontinue their medication in advance of competitions.

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INTERNATIONAL OLYMPIC COMMITTEE PRESS RELEASE

IOC NUTRITIONAL SUPPLEMENTS STUDY POINTS TO NEED FOR GREATER QUALITY CONTROL - 04 April 2002

Based on the results of a study of 634 nutritional supplements, the Medical Commission of the International Olympic Committee (IOC) today reissued its warning to athletes against their use and strengthened its call for industry and government action to ensure their quality.

Out of the 634 samples tested, 94 (14.8%) contained substances, non listed on any label, that would have led to a positive doping test. Out of these 94 samples, 23 contained precursors (building blocks) of both nandrolone and testosterone, 64 contained precursors of testosterone alone and 7 contained precursors of nandrolone alone.

In addition to these 94 samples, 66 others (10.4%) returned borderline results for various unlabeled substances.

The 634 non-hormonal nutritional supplements were gathered from 215 different providers in 13 countries from October 2000 to November 2001. Ninety-one percent of them were purchased in stores or over the Internet. The others were obtained from the manufacturers. The IOC-accredited laboratory in Cologne, Germany, tested all supplements.

The results of the analysis by country follows:

Country	Number of products	Number "positive"	Percentage "positive"
Netherlands	31	8	25.8%
Austria	22	5	22.7%
UK	37	7	18.9%
USA	240	45	18.8%
Italy	35	5	14.3%
Spain	29	4	13.8%
Germany	129	15	11.6%
Belgium	30	2	6.7%
France	30	2	6.7%
Norway	30	1	3.3%
Switzerland	13	-	-
Sweden	6	-	-
Hungary	2	-	-
Total	634	94	14.8%

Under the Olympic Movement's rule of strict liability, athletes are responsible for whatever substance is found in their bodies.

The IOC Medical Commission has been warning against the potential risks linked to the use of nutritional supplements since 1997. The lack of oversight existing in some countries has prompted the IOC to intervene and to recommend to athletes not to take such products.

While the IOC has issued its warnings to elite athletes and their entourages, especially due to their liability under doping control tests, the fact that the public is unknowingly ingesting the precursors to hormones should be a matter of public health concern.

The IOC hopes the results of this study demonstrate to governments and the industry the need for greater quality control to ensure substances not found on the label are not found in the product. The IOC Medical Commission recommends controls, similar to those pertaining to the manufacture of pharmaceuticals, be applied to the production of nutritional supplements.

The IOC also will recommend to National Olympic Committees (NOCs), International Federations (IFs) and Organizing Committees (OCOGs) that they adopt a cautious stance toward forming relationships with companies that produce nutritional supplements of which the quality cannot be guaranteed.



USADA MISSION STATEMENT

The U.S. Anti-Doping Agency (USADA) is dedicated to eliminating the practice of doping in sport, including U.S. Olympic, Pan American and Paralympic athletes. USADA is the independent anti-doping agency for Olympic sports in the United States, and is responsible for managing the testing and adjudication process for the athletes. USADA is dedicated to preserving the well being of sport, the integrity of competition and ensuring the health of athletes through research initiatives and educational programs.



USADA VISION STATEMENT

USADA will work with all athletes, while giving special emphasis to U.S. Olympic, Pan American and Paralympic athletes, in its efforts to eliminate doping in sport. In addition,

- USADA will develop and manage a testing process program that is fair and impartial in its attempt to identify athletes who use performance enhancing compounds and methods, either intentionally to gain a competitive advantage or inadvertently;
- USADA will develop and institute an adjudication program that will be fair and sustainable when an athlete is found to be in violation of anti-doping rules and regulations;
- USADA will support and foster research and educational programs in areas of performance-enhancing substances and methods to better understand their adverse effects and to improve upon current and future testing procedures;
- USADA will participate with other anti-doping organizations, both nationally and internationally, to accomplish our mission.

The United States Anti-Doping Agency (USADA) was created as the result of recommendations set forth by the United States Olympic Committee's Select Task Force on Externalization. USADA began operations Oct. 1, 2000, with full authority for testing, education, research and adjudication for U.S. Olympic, Pan Am Games, and Paralympic athletes. It is USADA's responsibility to develop a comprehensive national anti-doping program for the Olympic Movement in the United States.



**United States Anti-Doping Agency
Guide to
Prohibited Classes of Substances
and
Prohibited Methods of Doping**

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INTRODUCTION

Doping violates the ethics of both sport and medical science, and is prohibited. The Olympic Movement Anti-Doping Code (OMADC), along with clarifications by the International Olympic Committee (IOC) and its Medical Commission, has been distributed for the year 2001 with the List of Prohibited Classes of Substances and Prohibited Methods of Doping.

The OMADC states that doping:

- contravenes the fundamental principles of Olympism and sports and medical ethics,
- is forbidden, and
- recommending, proposing, authorizing, condoning or facilitating the use of any substance or method covered by the definition of doping or trafficking therein is also forbidden.

The OMADC defines doping as:

- the use of an expedient (substance or method) which is potentially harmful to athletes' health and/or capable of enhancing their performance, or
- the presence in the athlete's body of a Prohibited Substance or evidence of the use thereof or evidence of the use of a Prohibited Method.

The definitions used by individual international federations may vary, as may their respective list of prohibited substances and methods.

A fundamental objective of the Olympic Movement is to eliminate doping from sport. Doping threatens the health of the athlete, the integrity and dignity of amateur sport, and public support of the Olympic Movement. Drug testing followed by punitive action and the threat of public disclosure, in tandem with drug abuse education and ethical considerations, are in place as deterrents to doping.

The United States Anti-Doping Agency maintains a drug testing and education program, distributes this Guide, seeks to enhance research efforts and utilizes an impartial adjudication system. It also provides the confidential toll-free USADA Drug Reference Line for clarification on relevant matters (1-800-233-0393).

MEDICATION CAUTIONS

- Prior to taking any medication or supplement, check whether any substance in the product is prohibited or restricted. Call USADA's Drug Reference Line (1-800-233-0393) for more information.
- Know the exact name of your medication since many products sound alike. For example, Tylenol and Afrin Nasal Spray are allowed, however, Co-Tylenol, Afrin tablets and Afrinol contain prohibited substances.
- Plain antihistamines are allowed in most sports, however, any combination of an antihistamine with a decongestant is prohibited and may not be in your system when you compete. New products of this type appear on the market on a regular basis.
- This Guide provides examples of substances in prohibited classes. **Not all prohibited substances are listed in this Guide. The list is subject to change and is updated and revised as necessary.** Check to make sure you have the most up-to-date information.
- The detected presence of a prohibited substance constitutes doping even if the substance is not listed as an example.
- New drugs containing prohibited substances, some of which may be especially designed for doping purposes, are prohibited by inclusion as "related substances." The term "and related substances" describes drugs having pharmacological action(s) and/or chemical structure similar to a prohibited substance. If a substance is not listed, it may still be prohibited as a "related substance."
- Even when used for legitimate medical treatment, the detected presence of a prohibited substance constitutes doping and will be subject to penalties.
- The Dietary Supplement Health and Education Act of 1994 specifically exempted certain products from evaluation for safety and efficacy by the Food and Drug Administration (FDA). Thus the commonly held belief that the government approves these over the counter supplements is not correct. In addition, there has been some evidence that some products may not contain the amount of ingredient listed on the label, may not contain the ingredient listed at all, or may be adulterated with other prohibited substances not listed on the label. Imported herbal products, in particular, are often mislabeled concerning their actual ingredients.

IMPORTANT FACTS

- Ignorance is never an excuse. It is the personal responsibility of each athlete to ensure that he or she does not allow any prohibited substance to enter his or her system or use or allow the use of any prohibited method.
- Whether or not the use of a prohibited substance or prohibited method enhances performance does not matter.
- The presence of a prohibited substance in an athlete's urine (or blood, when applicable) constitutes an offense, regardless of the manner in which the prohibited substance came to be in the athlete's system.
- The inclusion of a prohibited substance or prohibited method in the OMADC is not subject to appeal.
- The IOC List of Prohibited Substances and Prohibited Methods contained in the Code and reported in this Guide may be changed at any time. It is the athlete's responsibility to stay current with those changes.
- Certain international federations (IFs) have their own lists of prohibited substances. It is the athlete's responsibility to know the rules of his or her IF.
- References to specific products are for example purposes only and do not constitute an endorsement or recommendation of these drugs by USADA.

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IOC LIST OF PROHIBITED CLASSES OF SUBSTANCES AND PROHIBITED METHODS OF DOPING

(effective Sept. 1, 2001)

I. PROHIBITED CLASSES OF SUBSTANCES

- A. Stimulants (including Beta-2 Agonists)
- B. Narcotics
- C. Anabolic Agents*
 - 1. Anabolic Androgenic Steroids*
 - 2. Beta-2 Agonists*
- D. Diuretics*
- E. Peptide Hormones, Mimetics and Analogues (and all releasing factors)*

II. PROHIBITED METHODS*

- A. Blood doping - the administration of blood, red blood cells, and related blood products to an athlete, which may be preceded by withdrawal of blood from the athlete who continues to train in such a blood-depleted state.
- B. Administering artificial oxygen carriers or plasma expanders
- C. Pharmacological, chemical and physical manipulation

III. CLASSES OF PROHIBITED SUBSTANCES IN CERTAIN CIRCUMSTANCES

- A. Alcohol**
- B. Cannabinoids**
- C. Local Anesthetics**
- D. Glucocorticosteroids
- E. Beta-Blockers**

* These classes of Prohibited Substances (and related substances) and Prohibited Methods are typically tested in the Out-of-Competition (OOC) Program. Note, however, that some IFs may have more extensive OOC testing lists.

** These classes of prohibited substances (and related substances) and prohibited methods may be tested at the request of the Responsible Authority (i.e. USADA, WADA). Normally, these substances are only tested for if prohibited by the International Federation (IF). (Tests will be conducted for cannabinoids at the Olympic Games.)

Out-of-Competition Testing

Unless specifically requested by the responsible authority, out-of-competition testing is directed solely at the following prohibited substances; anabolic agents, diuretics, peptide hormones, mimetics and analogues and prohibited methods.

At the 2002 Olympic Games, athletes who require an inhaled beta-2 agonist to treat asthma or exercise-induced asthma may be required to submit to the IOC Medical Commission clinical and laboratory evidence that justifies such treatment. If done, it would need to be received by the IOC Medical Commission at least one week prior to the athlete's first competition.

I. PROHIBITED CLASSES

(All related substances are prohibited.)

A. STIMULANTS

Although these drugs produce both psychological and physical stimuli to athletic performance, it is important to note that the side effects can be harmful. Amphetamines and related compounds have the most notorious reputation for producing problems in athletes. There is no medical justification for the use or abuse of stimulants such as amphetamines or cocaine in sport.

Effects include:

- Increased alertness
- Insomnia
- Inhibited judgment/decision making
- Anxiety
- Possible increased competitiveness and hostility
- Addiction and withdrawal phenomena are common
- Reduced fatigue
- Aggressiveness
- Increased potential for dehydration
- Tremor
- Alterations in hemodynamics (increased heart rate and blood pressure)
- Increased risk of stroke, heart attack, cardiac arrhythmia, and sudden death

Examples: See Table 1: Prohibited Stimulants, Table 2 (page 10): Over-the-Counter Medications, Table 3 (page 11): Caffeine, and Table 4 (page 12): Beta-2 Agonists.

TABLE 1: Examples of Prohibited Stimulants

Generic Name	Pharmaceutical Preparations Examples
Amfepramone (Diethylpropion)	Apisate, Tenuate, Tepanil
Amphetaminil	AN-1
Amineptine	Survector
Amiphenazole	Amphisol, Dapti, Daptizole
Amphetamine (Dextroamphetamine)	Benzedrine, Delcobese, Dexedrine, Obetrol, Adderall
Bambuterol	Bambec
Bemegride	Megimide
Benzphetamine	Didrex
Bromantin	Bromantan
Caffeine* >12 mcg/ml	(see table #3, p. 11)
Carphedon	
Chlorphentermine	Lucofen, Pre Sate
Clobenzorex	Asenlix, Dinintel
Clorprenaline	Asthone, Vortel
Cropropamide	(Micoren)
Crotethamide	(Micoren)
Desoxyephedrine	(see table #2, p. 10)
Dimetamfetamine	Metrotonin
Ephedrine** >10mcg/ml	Asthmahaler, Asthmanefrin, Bronkaid, Primatene, Rynatuss, Tedral (see table #2, p. 10)
Etafedrine	Mercodal, Decapryn, Nethaprin
Etilefrine	Bioflutin N, Circupon, Confidol, Effortil, Eti-Pure, Tonus-Forte-Tablinen
Etamivan	Clairvan, Vandid

Etilamphetamine	Apetinil
Fencamfamine	Altimine, Envirol, Phencamine
Fenfluramine (Dexfenfluramine)	Dima-Fen, Fenured, Pesos, Ponderal, Ponderax, Pondimin, Ponfural, Redux
Fenetylline	Captagon
Fenproporex	Antiobes Retard, Appetizugler
Formoterol***	(see table #4, p. 12)
Furfenorex	Frugal, Frugalan
Heptaminol	Eoden, Heptanol
Isoetharine HCL	Bronkosol, Bronkometer, Dilabron, Numotac
Isoproterenol	Isuprel, Metihaler-ISO, Norisodrine
Meclofenoxate	Brenal, Lucidril
Mefenorex	Doracil, Podinil, Rondimen
Mephentermine	Wyamine
Mesocarb	Mesocarbi, Sydnocarb
Metaproterenol	Alupent, Metaprel
Methamphetamine	Crank, Crystal Meth, Desoxyn, Met-Ampi, Speed
Methyl-Benzoyllecgonine	Cocaine, Crack, Ecgonine
Methylenedioxymphetamine	Ecstasy, XTC
Methoxyphenamine	Orthoxicol Cough Syrup
Methylephedrine** >10mcg/ml	Methep, Tzbraine
Methylphenidate	Ritalin, Concerta
Morazone	Rosimon-Neu
Nikethamide	Coramine
Norfenfluramine	
Norpseudoephedrine** >5 mcg/ml	Cathine, Adiposetten N
Parahydroxyamphetamine	Amphetamine
Pemoline	Cylert, Dynalert, Tradon
Pentetrazol/Pentylene tetrazol	Leptazol
Phendimetrazine	Bontril, Phenazine, Plegine
Phenmetrazine	Preludin
Phenylephrine (systemic)	(Phenylephrine tablets)
Phenylpropanolamine** >25mcg/ml	(see table #2, p. 10)
Phentermine	Apidex-P, Fastin, Ionamin
Pholedrine	Adyston, Jatamasin, Kontagripp-RR, Ortho-Maren Retard, Pentavenon, Venosan
Picrotoxine	Cocculin
Pipradol	Alertonic, Meratran
Prolintane	Katovit, Promotil, Villescon
Propylhexedrine	Benzedrex Inhaler
Pseudoephedrine** >25mcg/ml	(see table #2, p. 10)
Pyrovalerone	Centroton, Thymergix
Reproterol	Bronchodil
Salbutamol***	(see table #4, p. 12)
Salmeterol***	(see table #4, p. 12)
Selegiline	Anipryl, Eldepryl, Plurimen
Strychnine	Movellan
Terbutaline***	(see table #4, p. 12)

* For caffeine the definition of a positive is a concentration in the urine greater than 12 mcg/ml.

** For norpseudoephedrine (cathine), the definition of a positive is a concentration in the urine greater than 5 mcg/ml. For ephedrine and methylephedrine, the definition of a positive is a concentration in the urine greater than 10 mcg/ml. For phenylpropanolamine and pseudoephedrine, the definition of a positive is a concentration in the urine greater than 25 mcg/ml.

*** Permitted by inhaler only to prevent and/or treat asthma and exercise-induced asthma. Written notification of asthma and/or exercise-induced asthma by a respiratory or team physician is necessary to the relevant medical authority. A medical notification form required on file with USADA.

NOTE: All imidazole preparations are acceptable for topical use. Vasoconstrictors may be administered with local anaesthetic agents. Topical preparations (e.g. nasal, ophthalmological, rectal) of adrenaline and phenylephrine are permitted.

Over-the-Counter Products Containing Stimulants

Prohibited stimulants are often present in over-the-counter (OTC) medications such as decongestants, diet aids, and headache remedies. Because these medications are readily available and commonly used, athletes must be careful not to inadvertently or unknowingly take items containing these prohibited substances. Athletes should call USADA's Drug Reference Line (1-800-233-0393) before taking any new drug (prescription or OTC) or supplement to ensure that the product does not contain any prohibited substances.

- Products for colds, flu, or hay fever should not be taken without first checking to ensure that the product does not contain a prohibited substance.
- New and changing products continuously appear on the market and products carrying the name "decongestant" are likely to contain prohibited substances.
- Certain medications may also contain prohibited narcotics.

Table 2: Over-the-Counter Products Containing Prohibited Stimulants

- This list of examples is not complete.
- Any product labeled "D," "cold," "sinus," "non-drowsy," etc., should be treated as suspect for containing a prohibited stimulant.
- Therapeutic weight loss aids should be treated suspiciously, as they may contain a prohibited stimulant.

Generic Name	Pharmaceutical Preparations Examples
I-Methamphetamine† (Desoxyephedrine)	Vicks Inhaler
Pseudoephedrine** >25 mcg/ml	Actifed, Afrinol, Claritin D, Co-Tylenol, Drixoral, Efidac 24, Formula 44M Multi Symptom Cough, Mini Thin Pseudo, Sudafed, Sine-Off
Phenylpropanolamine** >25mcg/ml	Acutrim 16 Hour, Alka-Seltzer Plus, Allerest, Contac, Dexatrim, Entex, Sinarest, Sine-Aid, Tavist D, Triaminic
Propylhexedrine	Benzedrex Inhaler
Ephedrine** >10 mcg/ml	Bronkaid, Ephedra, Thermogenics Supplement, Vicks Nighttime Cold Medicine
Herbal Ephedrine** >10 mcg/ml	Ma Huang (Other examples include: Bishop's Tea, Brigham Tea, Chi Powder, Energy Rise, Excel, Joint Fir, Mexican Tea, Miner's Tea, Poptillo, Super Charge, Teamster's Tea)

† I-Methamphetamine cannot be distinguished from the street drug d-Methamphetamine in routine tests.

** For ephedrine and methylephedrine, the definition of a positive is a concentration in the urine greater than 10 mcg/ml. For phenylpropanolamine and pseudoephedrine, the definition of a positive is a concentration in the urine greater than 25 mcg/ml.

Know the exact name of your medication since many products sound alike. For example, Tylenol and Afrin Nasal Spray are allowed, however Co-Tylenol, Afrin tablets and Afrinol contain prohibited substances.

Caffeine

Caffeine is a central nervous system stimulant that is commonly found in coffee, tea, chocolate, and soft drinks. In addition, many cough and cold, supplement, and pain reliever combinations contain caffeine. A concentration greater than 12 micrograms of caffeine per milliliter in the urine is considered doping. Typically, a couple of cups of U.S. brewed coffee should not result in urinary concentrations of greater than 12 mcg/ml. However, one should not attempt to predict the urinary concentrations of caffeine since they vary significantly for each individual and are influenced by factors such as age, gender, body size, weight, diet, and metabolic rate. Be aware that other forms of caffeine (e.g., tablets) do not metabolize at the same rate and produce much higher urine concentrations of caffeine. **Do not take any pill containing caffeine before or during a competition.**

- The detection of caffeine in urine in a concentration greater than 12 mcg/ml is a doping violation.
- Urinary concentrations of caffeine are affected by age, gender, body size, weight, diet, and metabolic rate.

GUARANA

Often, Guarana is promoted as an energy enhancing herbal product. Guarana (paullinea cupana) is a tropical Brazilian fruit with seeds, that has a caffeine content two to four times of coffee. Therefore, the same precautions need to be taken with Guarana as with any product containing caffeine. Examples of products containing Guarana include Bawls Guarana, Energy Guarana, Energy Guarana Powder, Guts, and Tropisoda.

Table 3: Products Containing Caffeine (now alphabetical)

Product	Approximate Amount/Dose
Anacin*	0-32 mg per tablet
Chocolate	Varies
Coca Cola	46 mg per 12 ounces
Decaffeinated coffee	2-4 mg per 7 ounces
Diet Pepsi	36 mg per 12 ounces
Dr. Pepper	40 mg per 12 ounces
Excedrin*	0-65 mg per tablet
Midol*	0-60 mg per tablet
No Doz*	200 mg per tablet
Tab	47 mg per 12 ounces
Tea	40-60 mg per 7 ounces
U.S. brewed coffee	80-135 mg per 7 ounces
Vivarin	200 mg per tablet

**Amount of caffeine depends upon particular formulation*

CAUTION

Do not use the caffeine table above to estimate clearance times of various caffeine products.

Beta-2 Agonists

The choice of medications in the treatment of asthma and respiratory ailments has traditionally posed challenges in sport because many commonly prescribed drugs are powerful stimulants. Some of these agents also possess anabolic properties, especially when taken orally or by injection. Because of their stimulatory and potential anabolic effects, limitations have been placed on their use. Beta-2 Agonists are prohibited with the exception of those listed in Table 4 (see below).

Also refer to Table 8 - Anabolic Agents and Beta-2 Agonists (p. 17) and the USADA Restricted Substance Medical Notification Form (p. 32-33)

- All Beta-2 Agonists are prohibited when administered orally or by injection.
- Certain Beta-2 Agonists are allowed in the aerosol or inhalant forms only to prevent and/or treat asthma and exercise-induced asthma (see Table 4).
- Written notification of asthma and/or exercise-induced asthma by a respiratory or team physician is necessary and must be provided to USADA and the relevant medical authority prior to competition.
- Some IFs also require notification directly to them.
- Notification (see p. 33) may be submitted to: **United States Anti-Doping Agency, 1265 Lake Plaza Dr., Colorado Springs, CO 80906 or by faxing form to 719/785-2001.**
- **Effective Sept. 1, 2001, all medical notification forms expire after one year.**

At the 2002 Olympic Games, athletes who require an inhaled beta-2 agonist to treat asthma or exercise-induced asthma **may** be required to submit to the IOC Medical Commission clinical and laboratory evidence that justifies such treatment. If done, it would need to be received by the IOC Medical Commission at least one week prior to the athlete's first competition.

TABLE 4: Beta-2 Agonists Allowed Under Certain Circumstances

Generic Name	Pharmaceutical Preparations Examples
Formoterol	Foradil
Salbutamol	Albuterol (Proventil, Ventolin)
Salbutamol/Ipratropium	Combivent
Salmeterol	Serevent
Terbutaline	Brethaire

Attention Deficit Disorder (ADD) and Attention Deficit Hyperactivity Disorder (ADHD) Medications

The most commonly prescribed medications to treat ADD and ADHD (e.g., Ritalin, Concerta, Adderall, and Cylert) contain prohibited stimulants. Where the applicable IF tests for stimulants in competition only, athletes prescribed these medications should, in consultation with their physician, discontinue use in advance of competition in order for the medication to clear their systems.

B. NARCOTICS

The drugs belonging to this class are represented by morphine and its chemical and pharmacological analogues. Evidence exists indicating that narcotics have been and are abused in sport, and therefore all products in this class are prohibited except for those indicated in Table 6 (p. 14). Please refer to Table 5 for examples of prohibited narcotics. There are alternative medications for treatment of mild to moderate pain (see Table 7, p. 14).

Narcotics are typically used for the relief of pain. Some of the effects include:

- Sensation of euphoria;
- Psychological stimulation;
- A false feeling of invincibility;
- Illusions of athletic prowess beyond an athlete's inherent ability;
- Increased pain threshold and failure to recognize injury;
- Dangerous situations may be perceived as safe, resulting in an increased risk for injury;
- Physical and psychological dependence, leading to addiction and withdrawal symptoms; and
- Narcotic overdoses are always a medical emergency and can lead to respiratory depression and death.

TABLE 5: Prohibited Narcotics

Generic Name	Pharmaceutical Preparations Examples
Alphaprodine	Nisentil
Anileridine	Apodol, Leritine
Buprenorphine	Buprenex
Dextromoramide	D-Moramid, Dimorlin, Jetrium, Palfium
Diamorphine	Heroin
Dipipanone	Diconal, Pipadone, Wellconal
Ethoheptazine	Equagesic, Panalgin
Fentanyl	Duragesic, Sublimaze
Hydrocodone	Hycodan, Lortab, Vicodin
Hydromorphone	Dilaudid
Levorphanol	Levo-Dromoran
Methadone	Amidon, Dolophine
Meperidine	Demerol, Mepergan
Morphine	Cyclimorph, Duromorph, MS Contin, Oramorph, Roxanol
Nalbuphine	Nubain
Oxycodone	Oxycontin, Percodan, Roxicodone, Tylox
Oxymorphone	Numorphan
Pentazocine	Talwin
Pethidine	Centralgine, Dolantin, Dolosal
Phenazocine	Narphen
Tincture Opium	Paregoric

TABLE 6: Permitted Narcotics

Generic Name	Pharmaceutical Preparations Examples
Codeine	Tylenol w/ Codeine
Dextromethorphan	Benylin
Dihydrocodeine	
Diphenoxylate	Lomotil
Ethylmorphine	Collins Elixir, Dionina
Pholcodine	Actuss, Adaphol, Dia-Tuss, Duro-Tuss, Evaphol, Expulin Dry Cough, Famel Linctus, Galenphol, Linctus Tussinol, Pavacol-D, Pholcolin, Pholcomed, Pholtrate, Tixylix Daytime
Propoxyphene (Dextropropoxyphene)	Darvon-N
Tramadol	Ultram

TABLE 7: Other Medications for Treatment of Mild to Moderate Pain

- Mild to moderate pain can be effectively treated using medications other than narcotics.
- Caution:** Some pharmaceutical preparations of these medications may be in combination with a prohibited substance.

Generic Name	Pharmaceutical Preparations Examples
Acetaminophen	Tylenol
Aspirin	Bufferin
Diclofenac	Voltaren
Diflunisal	Dolobid
Floctafenine	Idalon
Glafenine	Gilfanan
Ibuprofen	Advil, Motrin
Indomethacin	Indocin
Ketoprofen	Orudis
Mefenamic Acid	Ponstel
Naproxen	Anaprox, Naprosyn
Sulindac	Clinoril

This Guide provides examples of substances in prohibited classes. Not all prohibited substances are listed in this Guide. The list is subject to change and is updated and revised as necessary. Please check to make sure you have the most up-to-date information.
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C. ANABOLIC AGENTS

Anabolic Androgenic Steroids and Beta-2 Agonists

Anabolic Androgenic Steroids (AASs)

This prohibited class is made up of the male hormone testosterone and its synthetic derivatives. Natural testosterone regulates, promotes, and maintains physical and sexual development. In combination with training, muscular size and strength may increase from the use of AAS. Because these drugs are hormones, they greatly interfere with normal hormonal balance, thereby producing detrimental and sometimes permanent side effects like gynecomastia and testicular atrophy. AAS abuse can also lead to liver damage, heart disease, hypertension, stroke, psychotic reactions, addiction, and withdrawal symptoms. Recently it has been discovered that steroid use may make tendons stiffer, resulting in an increased potential for muscle strains or ruptures. Additionally, the risk of acquiring AIDS, hepatitis, and other blood-borne diseases increase greatly with the use of injectable forms of AASs.

Medical Uses of Anabolic Steroids

- Relief of bone pain from osteoporosis
- Severe anemia
- Metastatic breast cancer in women
- Weight gain for chronic nutritional deficiencies or AIDS wasting syndrome
- Corticosteroid-induced catabolism
- Hereditary angioedema
- Hormone deficiencies in males

The Federal Government designated AAS as Schedule III controlled substances in 1990, thus tightening down the control and availability of steroids. The dangers of today's black market manufactured drugs include impurities and/or false ingredients, which can produce unpredictable and potentially severe side effects in users.

Side Effects Of Androgenic Anabolic Steroid Use Include:

- Acne ♂ ♀
- Liver dysfunction* ♂ ♀
- Premature closure of the growth centers of long bones (in adolescents) which may result in stunted growth* ♂ ♀
- Increased aggressiveness and sexual appetite, sometimes resulting in aberrant sexual and criminal behavior ♂
- Impotence with chronic or repeated use ♂
- Testicular shrinkage (testicular atrophy)* ♂
- Breast enlargement (gynecomastia)* ♂
- Enlargement of prostate gland ♂
- Reduction of sperm production (cessation of spermatogenesis) ♂
- Premature baldness* ♂
- Masculinization ♀
- Excessive hair growth on the face and body* ♀
- Deepening of the voice* ♀
- Enlargement of the clitoris* ♀
- Abnormal menstrual cycles (suppression of ovarian function and menstruation) ♀

♂ - Side effects observed in males ♀ - Side effects observed in females.

* Effects may be permanent

Other side effects observed include muscle tightness and cramps, alteration of the libido, edema, diarrhea, constipation, functional/structural liver damage, and polycystic ovarian syndrome.

IOC regulations pertaining to the detection of anabolic agents, which are also produced naturally by the body, include the following:

- Evidence obtained from metabolic profiles and/or isotopic ratio measurements may be used to draw definitive conclusions regarding the use of anabolic androgenic steroids.
- The presence of a testosterone to epitestosterone (T:E) ratio greater than six to one (6:1) in the urine of an athlete, constitutes an offense unless there is evidence that this ratio is due to a physiological or pathological condition.
- In the case of T:E greater than 6:1 or an epitestosterone concentration in the urine greater than 200 nanograms/ml, an investigation will be conducted by the USADA before the sample is declared positive.
 - The USADA investigation will be limited to (a) a review of previous tests, if available, and/or a review of subsequent tests including Out-of-Competition (OOC) tests, and/or (b) analysis by Carbon Isotope Ratio measurement.
 - The athlete may submit his or her own evidence, including, but not limited to endocrine investigations, for consideration.
 - The sample will be declared positive unless the USADA's investigation and/or the information submitted by the athlete reveals that the elevated ratio is due to a physiological or pathological condition.
 - If the athlete fails to cooperate in the USADA investigation, the sample will be declared positive.

Beta-2 Agonists

Beta-2 Agonists have been shown to have anabolic effects when consistently high levels are present in the blood. The detection of salbutamol in the urine in a quantity greater than 1,000 nanograms/milliliter is considered doping with anabolic steroids. See also regulations pertaining to use of Beta-2 Agonists under Section A – Stimulants, and Table 4 (p. 11).

In particular, **clenbuterol** is prohibited both as an anabolic agent and as a stimulant. This Beta-2 Agonist has not been approved for use in the United States. It is considered a prohibited substance because of its anabolic and stimulatory effects and misuse by athletes. Clenbuterol is available in foreign countries under a variety of brand names. Health food and nutrition companies sell imitation versions described as “nutritional supplements.”

Effects include:

- | | |
|---|---|
| • Possible “repartitioning” or increasing muscle mass while decreasing body fat
(based on animal and recent human studies) | • Increased heart rate and blood pressure |
| • Nausea | • Headache |
| • Nervousness | • Insomnia |
| | • Tremors |

Androstenedione, Androstenediol, and Dehydroepiandrosterone (DHEA)

Androstenedione, Androstenediol, and DHEA are steroids that are precursors to testosterone. They are widely available in dietary supplements being sold over-the-counter in health food stores and over the Internet. They are specifically included on the IOC Examples of Prohibited Substances List. They are naturally produced in the adrenal gland and are claimed to reduce body fat, increase muscle mass, and lower cholesterol levels. They are sometimes used to treat certain types of cancer and to boost the immune system. Potential side effects include acne, water retention, male pattern baldness, moodiness, irritability, and changes in sex drive.

19-Norandrostenedione and 19-Norandrostenediol

19-Norandrostenedione and 19-Norandrostenediol are prohibited steroids that are precursors of nandrolone. They are also widely available in dietary supplements sold over-the-counter, through the mail, and over the Internet, sometimes in combination with other steroids such as androstenedione. Claims made include increased muscularity, strength, endurance and vascularity, as well as fat loss. Potential side effects are considered to be similar to those listed for androstenedione products.

TABLE 8: Anabolic Agents and Beta-2 Agonists

Generic Name	Pharmaceutical Preparations Examples
Androstenediol	Androstederm, 4-androstenediol, 5-androstenediol
Androstenedione	Andro Stack 850, Andro-Gen, Androsten, Androstene 100, Testro Rx
Bambuterol*	Astra, Bambec
Bolasterone	Dimethyltestosterone, Myagen
Boldenone	Equipoise, Vebonol
Bitolterol*	Tornalate
Clenbuterol*	Broncodil, Clenasma, Clenbutol, Contrasma, Monores, Novegan, Prontovent, Spiropent, Ventolase
Clostebol	Steranabol
Danazol	Cyclomen, Danatrol, Danocrine, Danokrin, Danol, Ladogar, Win 17757, Winobanin
Dehydrochlormethyltestosterone	Turinabol
Dehydroepiandrosterone	DHEA
Dihydrotestosterone	Stanolone
Dromostanolone	Drolban, Masteril
Fenoterol*	Berotec
Fluoxymesterone	Android F, Halotestin, Ora-Testryl, Ultradren
Formebolone	Esiclone, Hubernol
Formoterol*†	(see Table #4, p.12)
Gestrinone	Tridomose
Growth Hormone	hGH
Human Chorionic Gonadotrophin	hCG
Mesterolone	Androviron, Proviron
Metandienone	Danabol, Dianabol
Metaproterenol*	Alupent, Metaprel
Metenolone	Primobolan, Primobol-Depot
Methandriol	Stenediol, Trofomone
Methandrostenolone	Dianabol
Methyltestosterone	Android, Estratest, Metandren, Oreton Methyl, Testred
Mibolerone	
Nandrolone	Deca-Durabolin, Durabolin, Kabolin, Nandrobolic
19-Norandrostenediol	19-Diol, 19-Norandrobol, Norandrodiol, Norandronate
19-Norandrostenedione	19-Nor Androstene, 19-Nora Force, Anabolic Stack, Androbolic, Androdyne, Androstat Poppers, Androstat Pro 6, Ultimate Release 24
Norethandrolone	Nilevar
Orciprenaline*	
Oxandrolone	Anavar
Oxymesterone	Oranabol 10
Oxymetholone	Adroyd, Anadrol, Anapolon
Pirbuterol*	Maxair
Reproterol*	Bronchodil
Rimiterol*	Pulmadil
Salbutamol*† (>100 nanograms/ml as a stimulant, >1,000 nanograms/ml as an anabolic agent)	(see Table 4, p. 12)
Salmeterol*†	(see Table 4, p. 12)
Stanozolol	Stromba, Winstrol
Terbutaline*†	(see Table 4 p. 12)
Testosterone (T:E >6:1)	Delatestyl, Malogen, Malogex
Trenbolone	Finajet, Parabolan

* Beta-2 Agonists are included in the class of Anabolic Agents.

† Authorized in the aerosol or inhalant forms only to prevent and/or treat asthma and exercise-induced asthma (EIA and EIB). Written notification by a respiratory or team physician is necessary and must be provided to USADA and the Relevant Medical Authority. (See Stimulants and Table, p. 12.)

D. DIURETICS

Diuretics are drugs that help the body to eliminate fluids (water and salts) by increasing the rate of urine formation. Diuresis increases urine volume and net loss of salts (especially sodium, potassium, and/or chloride). Although diuretics, under strict medical supervision, have important therapeutic indications for the elimination of excess fluid from the body tissue in certain disease states and for management of high blood pressure, they are nonetheless prohibited.

- Diuretics may be abused by competitors for two main reasons:
 1. To reduce weight quickly in sports where weight categories are involved; and/or
 2. To produce a more rapid excretion of urine (to reduce the concentration of prohibited substances in the urine in an attempt to minimize detection).
- Drastic reduction of weight in sport cannot be medically justified. The potential for serious side effects such as dehydration, muscle cramps, volume depletion, drop in blood pressure, and severe electrolyte imbalance exists. Deliberate attempts to reduce weight artificially, in order to compete in lower weight classes or to dilute urine, constitutes clear manipulation, which is ethically unacceptable.
- For sports involving weight classes, the responsible authorities (i.e. international federations) reserve the right to obtain urine samples at the time of weigh-in.
- Taken without medical supervision, diuretics can result in potassium depletion and death.

TABLE 9: Diuretics

Generic Name	Pharmaceutical Preparations Examples
Acetazolamide	AK-ZOL, Dazamide, Diamox
Amiloride	Midamor
Bendroflumethiazide	Naturetin
Benzthiazide	Aquatag, Exna, Hyres, Marazide, Proaqua
Bumetanide	Bumex
Canrenone	Aldadiene, Aldactone, Phanurane, Soldactone
Chlormerodrin	Orimercur
Chlorthalidone	Hygroton, Hylidone, Thalitone
Diclofenamide	Daranide, Fenamide, Oratrol
Ethacrynic Acid	Edecrin
Furosemide	Lasix
Hydrochlorothiazide	Esidrix, Hydro-Diuril, Oretic, Thiuretic
Indapamide	Lozol, Natrilix, Servier
Mannitol (intravenous only)	Osmitrol
Mersalyl	Salyrgan
Spirolactone	Alatone, Aldactone
Torsemide	Demadex
Triamterene	Dyazide, Maxide

E. PEPTIDE HORMONES, MIMETICS AND ANALOGUES

- The presence of an abnormal concentration of an endogenous hormone or its diagnostic marker(s) in the urine (or other specimen) of a competitor constitutes doping, unless it has been conclusively documented to be solely due to a physiological or pathological condition.
- All of these hormones and all of their respective releasing factors and their analogs are prohibited.

TABLE 10: Peptide Hormones, Mimetics and Analogues

EXAMPLE	
Chorionic Gonadotropin	Human Chorionic Gonadotropin (hCG) Prohibited for males only. The administration to males leads to an increased rate of production of endogenous male hormones and is considered equivalent to the exogenous administration of testosterone.
Pituitary and Synthetic Gonadotropins	Leutinizing Hormone (LH) <i>Prohibited for males only.</i>
Corticotropin	ACTH, tetracosactide Corticotropin has been used to increase blood levels of endogenous corticosteroids. Administration is considered to be equivalent to the systemic administration of corticosteroids (see Glucocorticosteroids, p. 21).
Growth Hormone	hGH, Somatotropin Use is dangerous and may result in various adverse effects: allergic reactions, diabetes, and acromegaly. Contamination of some growth hormone preparations of human origin can cause Creutzfeldt Jacob Disease, a fatal neurological condition.
Insulin-like Growth Factor	IGF-1 Primarily secreted by the liver, IGF-I stimulates growth and anabolism.
Erythropoietin	EPO, Epogen This naturally occurring hormone is produced in the kidney and stimulates red blood cell production. Administration equates with blood doping and is prohibited (see Blood Doping, p. 19).
Insulin	Permitted only to treat insulin-dependent diabetes mellitus (IDDM). Prior to the particular competition, written notification of IDDM by an endocrinologist or team physician to the Relevant Medical Authority is necessary.
Related substances	Clomiphene* (Clomid, Milophene, Serophene) Cyclofenil* (Fertodur, Neoclym, Rehibin) Tamoxifen* (Nolvadex) <i>*Prohibited for males only.</i>

Even when used for legitimate medical treatment, the detected presence of a prohibited substance constitutes doping.

II. PROHIBITED DOPING METHODS

The following procedures are prohibited:

- Blood doping
- Administering artificial oxygen carriers or plasma expanders
- Pharmacological, chemical and physical manipulation

A. BLOOD DOPING

Blood doping means the administration of blood, red blood cells, and/or related blood products to an athlete, which may be preceded by withdrawal of blood from the athlete who continues to train in such a blood-depleted state.

Risks involved in the transfusion of blood and blood-related products include:

- Allergic reactions (rash, fever, etc.)
- Acute hemolytic reaction with kidney damage if incorrectly typed blood is used
- Delayed transfusion reactions resulting in fever and jaundice (can be fatal)
- Transmission of infectious diseases (e.g., viral hepatitis and AIDS)
- Overload of the circulatory system
- Blood clots
- Metabolic shock

B. ADMINISTERING ARTIFICIAL OXYGEN CARRIERS OR PLASMA EXPANDERS

Oxyglobin® and perfluorocarbons (PFCs) are examples of compounds used to enhance oxygen transport, and are prohibited by the IOC and International Federations. Plasma expanders, such as hydroxyethyl starch, used to increase the water content of the blood, are also prohibited.

C. PHARMACOLOGICAL, CHEMICAL AND PHYSICAL MANIPULATION

Pharmacological, chemical and physical manipulation means the 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, including, without limitation, catheterization, urine substitution and/or tampering, inhibition of renal excretion such as by probenecid and related substances, and alterations of testosterone and epitestosterone measurements such as epitestosterone application or bromantin administration.

TABLE 11: Prohibited Methods (*without limitation*)

Alterations of testosterone and epitestosterone measurements	Epitestosterone administration to alter T:E ratio
Diuretics	Can be used to dilute the urine and mask other substances.
Catheterization	A way of obtaining a urine sample through a thin rubber tube inserted through the urethra into the bladder.
Sample substitution and/or tampering	
Inhibition of renal excretion	Bromantin, probenecid and related compounds
Masking Agents	Includes use of commercially produced products such as "Defend," "Test Free," "Test Clean," "Jamaica Me Clean," and "UrinAid."

Whether or not the use of a prohibited substance or prohibited method enhances performance does not matter. It is enough that the prohibited substance or prohibited method was used or attempted to be used to be considered a sanctionable doping violation.

III. CLASSES OF PROHIBITED SUBSTANCES IN CERTAIN CIRCUMSTANCES

A. ALCOHOL

Although alcohol is the most widely abused drug in the country, it does not generally improve sports performance. It depresses the central nervous system and affects coordination and fine hand-eye movements. Nevertheless, breath or blood alcohol levels may be determined at the request of the responsible authorities (i.e., WADA, IOC, NOC, USOC, IF, and/or NGB) and positive tests may lead to sanctions.

B. CANNABINOIDS

Cannabinoids (e.g., marijuana, hashish, cannabis) are illegal substances. Possession and/or use of these substances are illegal and may subject a person to arrest and criminal prosecution. The IOC at the Olympic Games, and many IFs include cannabinoids on their lists of prohibited substances. In those cases a concentration in the urine of carboxy-THC greater than 15 nanograms per milliliter constitutes doping.

The body absorbs THC, which is the mind-altering ingredient in cannabinoids, and transforms it into metabolites, which can be detected in the urine for weeks after use. Its metabolites can be detected in urine four (4) to ten (10) days after smoking a single joint, and up to several weeks or months following chronic use.

- Where the rules of a responsible authority so provide, tests will be conducted for cannabinoids (e.g., marijuana, hashish).
- At the Olympic Games, tests will be conducted for cannabinoids

Side effects include:

- Increased heart rate;
- Impaired short-term memory and distorted sense of time and space;
- Diminished ability to concentrate and react with slowing of coordination and reflexes;
- Fear of losing control, and impaired thinking and reading comprehension; and
- Chest pain and airway irritation.

C. LOCAL ANESTHETICS

- Systemic injections are prohibited.
- Injectable local anesthetics are permitted under the following conditions:
 - a) Bupivacaine, lidocaine, mepivacaine, procaine and related substances can be used, but not cocaine. Vasoconstrictor agents (e.g. adrenaline, epinephrine) may be used in conjunction with local anesthetics.
 - b) Only local or intra-articular injections may be administered.
 - c) These are permitted only when medically justified.
 - d) Where the rules of a responsible authority so provide, notification of administration of local and intra-articular injections of anesthetics may be necessary in advance of competition, or during the competition in matters of medical urgency.*

* See outline of regulations pertaining to written notification on "RESTRICTED SUBSTANCE MEDICAL NOTIFICATION FORM" (p. 32-33).

D. GLUCOCORTICOSTEROIDS

Corticosteroids (also called glucocorticoids or glucocorticosteroids) are naturally occurring substances secreted by the adrenal glands that regulate the metabolism of carbohydrates, proteins, and fats. Their indications for use include treating allergies, asthma, inflammatory conditions, skin disorders, and many other diseases.

Corticosteroids **ARE NOT** the same as androgenic anabolic agents, which are used to build muscle mass. They can cause a different spectrum of dangerous side effects. Naturally occurring and synthetic, corticosteroids are mainly used as anti-inflammatory drugs. They influence circulating concentrations of natural hormones in the body and may produce mood changes including euphoria and other side effects. Their use, except when administered topically, requires medical control.

- The systemic use of corticosteroids is prohibited [i.e., when administered orally, rectally (internal), or by intravenous or intramuscular injection].
- Anal (topical), aural, dermatological, inhalational, nasal, and ophthalmological administration is permitted.
- Topical use (in the ear, the eye, or on the skin) is permitted.
- Inhalation therapy* (i.e., for treatment of asthma) is permitted.
- Intra-articular* and local injections* of corticosteroids are permitted.

** Where the rules of a responsible authority so provide, notification of administration may be necessary. Any physician wishing to administer corticosteroids intra-articularly or locally to an athlete may be required to give prior written notification to the relevant medical authority. (See outline of regulations pertaining to written notification on "RESTRICTED SUBSTANCE MEDICAL NOTIFICATION FORM," p. 32-33.)*

Ignorance is never an excuse. It is the personal responsibility of each athlete to ensure that he or she does not allow any prohibited substance to enter his or her system or use or allow the use of any prohibited method.

E. BETA-BLOCKERS

The IOC Medical Commission has reviewed the therapeutic indications for the use of beta-blocking drugs and noted that there is a wide range of effective alternative preparations available to control hypertension, cardiac arrhythmias, angina pectoris, migraine, and nervous or anxiety-related conditions.

Due to the continued misuse of beta-blockers in some anaerobic sports, tests for beta-blockers are performed in agreement with the rules of the International Federation and/or at the direction of the responsible authority.

- Where the rules of a responsible authority so provide, tests will be conducted for beta-blockers. It is the athlete's responsibility to check whether beta-blockers are included on his or her IFs testing list.
- Sports that may be tested are unlikely to include endurance events that necessitate prolonged periods of high cardiac output and large stores of metabolic substances in which beta-blockers would severely decrease performance capacity.
- Other sports may test for beta-blockers if indicated or deemed appropriate.

TABLE 12: Examples of Beta-Blockers

Generic Name	Pharmaceutical Preparations Examples
Acebutolol	Sectral
Alprenolol	Aptine
Atenolol	Tenoretic, Tenormin
Betaxolol	Kerlone
Bisoprolol	Zebeta
Bunolol	
Bunitrolol	Stresson
Carteolol	Cartrol
Celiprolol	Selecor
Esmolol	Brevibloc
Labetalol	Normodyne, Trandate
Metoprolol	Lopressor, Toprol XL
Nadolol	Corgard, Corzide
Oxprenolol	Trasicor, Trepress
Pindolol	Viskin
Propranolol	Inderal, Inderide
Sotalol	Betapace
Timolol	Blocadren

URINARY CONCENTRATIONS

Below is a summary of urinary concentrations that the IOC-accredited laboratories must report findings for specific prohibited substances

- A case is considered as positive when the analytical laboratory test gives a result that is above the cut-off limit.

TABLE 13: Urinary Concentrations

SUBSTANCE	LEVEL
Caffeine	> 12 mcg/ml
Carboxy-THC	> 15 nanograms/ml
Ephedrine / Methylephedrine	> 10 mcg/ml
Epitestosterone	> 200 nanograms/ml
Morphine	> 1 mcg/ml
19-Norandrosterone	> 2 nanograms/ml (<i>Males</i>) > 5 nanograms/ml (<i>Females</i>)
Norpseudoephedrine (Cathine)	> 5 mcg/ml
Phenylpropanolamine	> 25 mcg/ml
Pseudoephedrine	> 25 mcg/ml
Salbutamol	> 100 nanograms/ml (as a stimulant) > 1,000 nanograms/ml (as an anabolic agent)
T:E Ratio	> 6:1 or positive carbon isotope ratio analysis

The presence of a prohibited substance in an athlete's urine constitutes an offense, regardless of the manner in which the prohibited substance came to be in the athlete's system.

SUPPLEMENTS AND OTHER SUBSTANCES

The Dietary Supplement Health and Education Act of 1994 specifically exempted certain products from evaluation for safety and efficacy by the Food and Drug Administration (FDA). Thus, the commonly held belief that the government approves these over-the-counter supplements is not correct. In addition, there has been some evidence that some products may not contain the amount of ingredient listed on the label, may not contain the ingredient listed at all, or may be adulterated with other prohibited substances not listed on the label. Imported herbal products, in particular, are often mislabeled concerning their actual ingredients. In addition, a State of California study documented the presence of other toxins such as arsenic and strychnine in these herbal preparations¹.

Herbal Products

Some herbal and plant products such as Ma Huang, ginseng, oryzanol, beta-sitosterol, diosterol and yohimbe bark which are alleged to be ergogenic or anabolic alternatives, and are purported to produce increased weight, strength, and other performance enhancing actions, are either prohibited substances or may inadvertently contain prohibited substances. Although there is substantial research being conducted on herbals to determine effectiveness, safety, and quality standards, there is currently little scientific evidence to support these claims. **The contents and safety of these products cannot be guaranteed.**

Other Supplements

CREATINE is a natural compound that is a critical part of the energy storage system in the body. Energy is stored in the cells as creatine phosphate. Under anaerobic conditions, the creatine phosphate is used to regenerate adenosine triphosphate (ATP), the main form of cellular energy. Creatine is obtained primarily from meat in the diet. Creatine supplementation presumes that additional intake will provide additional cellular levels, and therefore provide larger amounts of stored energy. In general, any creatine ingested in excess is excreted in the urine.

Creatine allegedly speeds muscle recovery, increases initial work output, and delays fatigue in anaerobic (high intensity, short duration) exercise. Research studies are nearly evenly divided on whether performance is actually improved. The long-term effects of taking supplemental creatine have not yet been established, but there appears to be a greater incidence of dehydration, nausea, stomach cramps, diarrhea, muscle cramping, pulled muscles, and muscle tightness according to a survey of creatine users². There are also two published reports of individuals with pre-existing liver and kidney problems having further complications while using creatine³.

Since there are no regulations guaranteeing the actual content of creatine or other supplements, the use of any of these products may result in a positive drug test. THE USE OF DIETARY SUPPLEMENTS IS COMPLETELY AT THE ATHLETE'S OWN RISK.

GLUTAMINE levels have been shown to decrease significantly after intense training. It has been proposed that this deficiency can lead to a suppressed immune system in over-trained athletes. Glutamine supplementation studies in athletes have failed to show improvements in athletic performance or immune function⁴.

COENZYME Q-10 is associated with energy transport within muscle and heart cells at basic levels. This supplement is believed to be beneficial in treating various heart conditions and other diseases. Advocates have proposed that Coenzyme Q-10 improves exercise performance and recovery time. Studies on its performance enhancing abilities have had mixed results with some reporting an increase in performance and others showing no effect. One study revealed that Coenzyme Q-10 was not readily absorbed into muscle without a preexisting deficiency in the athlete⁵. No serious side effects are proven with Coenzyme Q-10 but decreased appetite, nausea, and diarrhea are potential adverse effects.

PYRUVATE has been promoted to enhance weight loss and to improve endurance. In studies, pyruvate, a product of glucose metabolism, has been substituted for a portion of an individual's carbohydrate intake in low calorie diets. These studies of obese individuals demonstrated slightly increased weight loss in the pyruvate-substituted group. In non-athletes studies have shown increased muscle endurance⁶; however, these results are not repeated in studies of athletes.

Companies promoting pyruvate recommend supplementation with doses that have not been studied or shown to improve weight loss or endurance.

GLUCOSAMINE supplementation has been shown in quality research to promote the regeneration of cartilage in patients with osteoarthritic (damage due to overuse) knees. Improvement was seen with relieving pain, morning stiffness, walking stiffness, and the ability to perform general activities. There is no research available on the ability of glucosamine to prevent osteoarthritis in the athlete. Gastrointestinal discomfort and distress, and allergic reactions are reported adverse effects.

OTHER SUBSTANCES such as octacosanol, chromium picolinate, boron, and dibenzozide are found in a variety of supplemental products that claim to have ergogenic effects. They are often sold in combination with other supplements also not proven to be performance enhancing in athletes. Similarly, they may actually be in combination with prohibited diuretics and stimulants such as Ma Huang, ephedrine, and caffeine. Health food and nutrition stores, pharmacies, grocery stores, mail order companies, or Internet companies often sell these products. Unfortunately, there are no approved medical references that identify all of them by brand name or active ingredient. Since there are no regulations guaranteeing the actual content of these supplements, the **USE OF ANY OF THESE PRODUCTS MAY RESULT IN A POSITIVE DRUG TEST. USE IS COMPLETELY AT THE ATHLETE'S OWN RISK.**

SOURCES:

1. Ko, R.J. Adulterants in Asian Patent Medicines. *New England Journal of Medicine*. 339(12):847, 1998.
2. Coleman, E. Risky Business: Knowing the facts before you decide to take one of these four common supplements. *Volleyball*. April: 66-73, 1998.
3. Balsom, P.D., K. Soderland, and B. Ekblom. Creatine in humans with special reference to creatine supplementation. *Sports Med*. 18(4):268-280, 1994.
4. Nieman, D.C., and B.K. Pedersen. Exercise and immune function: Recent developments. *Sports Med*. 27: 72-80, 1999.
5. Burnham, T.H., R.C. Hagermann, and D.S. Threlkeld (Eds.). *The review of natural products*. St. Louis: Facts and Comparisons, Inc. 1997.
6. Stone, M.H., K. Sanborn, L. Smith, et al. Effects of in-season (5 weeks) creatine and pyruvate supplementation on anaerobic performance and body composition in American football players. *International Journal of Sports Nutrition*. 9:146-165, 1999.

Manufacturers frequently claim that products "naturally" increase the concentrations of naturally occurring and prohibited substances (e.g. testosterone, growth hormone). The purpose of doping control is to level the playing field and any attempts to pharmacologically or chemically enhance performance are unethical.

If you have questions, call USADA's Drug Reference Line at 1-800-233-0393

FREQUENTLY ASKED QUESTIONS

WHAT IF THE ATHLETE HAS A COLD OR THE FLU? CAN HE OR SHE BE EXCUSED WHEN TAKING MEDICINE TO GET WELL?

NO. If an athlete has a cold, flu, or hay fever he or she **SHOULD NOT** take any medication or substance without first being sure that it does not contain a prohibited substance. This includes both over-the-counter (OTC) and prescription medications from a doctor. Most IFs test for the stimulants found in cold medications in-competition only. However, some IFs also may include stimulants in their out-of-competition (OOC) testing list. A positive test whether inadvertent or due to medical treatment is still a positive test.

WHY IS CAFFEINE PROHIBITED? IS IT HARMLESS?

Caffeine, though a commonly used substance in our society, is a stimulant and has similar effects to those of other stimulant substances. In the past, athletes have attempted to improve their performance by using large amounts of caffeine. This is considered cheating and caffeine use is limited in that an amount greater than 12 micrograms per milliliter in the urine is classified as doping.

IF THE ATHLETE DOES NOT DRINK COFFEE, SHOULD HE OR SHE WORRY ABOUT CAFFEINE?

YES. Many other products contain caffeine, including soft drinks, chocolate, and medications such as No Doz, Vivarin, Midol, Anacin, Excedrin and Fiorinal.

WHAT IF THE ATHLETE NEEDS A PAINKILLER FOR AN INJURY?

Slight to moderate pain can be effectively treated using non-narcotic drugs (see Table 7, p. 13). These drugs are generally referred to as non-steroidal anti-inflammatory drugs (NSAIDs). They have anti-inflammatory and analgesic (pain-killing) actions. For management of severe pain, codeine, dihydrocodeine (dihydrocodone is prohibited), and pholcodine are allowed. These drugs are available alone or in combination with analgesics such as acetaminophen.

WHAT ABOUT CLENBUTEROL?

Clenbuterol, a foreign drug not available in the U.S., is classified as a Beta-2 Agonist. Some athletes have abused it because of its reported anabolic effect in building muscle mass in livestock. It is often used in combination with anabolic agents and growth hormone, and is prohibited both as an anabolic agent and as a stimulant.

BIRTH CONTROL PILLS ARE STEROIDAL HORMONES. ARE THEY PROHIBITED?

NO. These substances have not been found to be performance enhancing and are not prohibited. IOC accredited laboratories can distinguish between birth control pills and Prohibited Substances.

HOW LONG DOES IT TAKE PROHIBITED SUBSTANCES TO LEAVE THE SYSTEM?

Individual metabolism, amount of substance used, frequency of use, duration of use, and nominal biodegradation process in any given individual varies. In addition, some drugs are stored in the body and have highly variable elimination rates. Elimination time **ESTIMATES** for specific substances can be determined by contacting the manufacturer, the prescribing physician, or the dispensing pharmacist.

WHY ISN'T IT OKAY TO USE A PROHIBITED MEDICATION THAT HAS BEEN PRESCRIBED BY A DOCTOR?

Since some medications prescribed by physicians for treatment of legitimate medical conditions have the potential to enhance athletic performance, they are prohibited. A prohibited drug is still prohibited, even if prescribed by a doctor.

WHAT CAN BE DONE ABOUT IT? IF THE MEDICINE IS NEEDED, WHAT SHOULD A PERSON DO?

Alternative medications that are not prohibited can oftentimes be prescribed to treat medical problems. An athlete's personal physician may not be aware of the complicated drug restrictions in amateur sports and should be advised to call USADA's Drug Reference Line (1-800-233-0393) for information. In extreme situations, the IOC and several IFs have procedures for obtaining advance waivers permitting the use of a prohibited substance (p. 32-33).

IF AN ATHLETE IS NOT TAKING DRUGS ON THE PROHIBITED LIST, SHOULD HE OR SHE STILL BE CONCERNED?

YES! Many commonly used medications contain small amounts of prohibited drugs. Remember, many prescribed and OTC medications (e.g. cold medicines, diet pills, asthma medications, pain killers, nasal sprays, sleeping pills, etc.) contain prohibited substances. Even a small amount of a prohibited substance can cause a positive test. Be aware that formulations and ingredients of OTC products and dietary supplements may change frequently, so these products can switch from being an allowed to a prohibited substance without notice.

HOW CAN AN ATHLETE BE SAFE?

- Call USADA's Drug Reference Line (1-800-233-0393) for information about contents of medications or supplements to be taken before or during competition.
- Do not take any unknown substances (e.g., from a friend or acquaintance who offers something to help a cold or headache).
- The use of foreign medications is strongly discouraged.

IS THERE A COMPLETE LIST OF DRUGS THAT WON'T CAUSE A POSITIVE TEST?

NO. No list can ever be complete. New names and new products come on the market daily. Foreign drugs may not appear in the U.S. drug reference books. The list of prohibited substances is subject to change without notice. In addition, drugs not listed or different formulations of the same brand name may not be allowed. For any of these reasons, a "complete" or "safe list" that is accurate and up-to-date is not available for distribution. This is why it is important for athletes to call USADA's Drug Reference Line (1-800-233-0393) to find out the current status of any substance they may consider taking.

HOW CAN AN ATHLETE KNOW WHAT IS NOT PROHIBITED?

Refer to the "USADA Guide to Permitted Medications" (p. 29-30) and the USADA Athlete Wallet Card for examples of substances currently not on the prohibited substance list. However, this list is not complete and could change at any time. USADA's Drug Reference Line (1-800-233-0393) is also available for athletes to call and check the status of any medication.

WHAT ABOUT SUPPLEMENTS? IS THERE A LIST OF THOSE THAT ARE SAFE?

NO, there is not a list of "safe supplements." **Supplemental products are taken at the athlete's own risk.** Many contain Prohibited Substances that occasionally are not included on the label as ingredients. Be aware that these products may not be consistent from batch to batch and formulations often change without warning or notification. We recommend that athletes avoid these products, especially close to competition.

I AM INVOLVED IN A SPORT THAT DOES NOT HAVE WEIGHT CLASSES, SO WHY IS THE DIURETIC I TAKE FOR HIGH BLOOD PRESSURE BANNED?

It is true that diuretics have been used to rid the body of extra fluids to drop body weight. However, they also have been abused in an attempt to dilute or reduce concentration of other banned substances (i.e. anabolic steroids) in the body. Consequently, diuretics are banned for several reasons.

MANY SUPPLEMENTS ON THE MARKET CLAIM TO BE ALL-NATURAL.. DO I HAVE ANYTHING TO BE CONCERNED ABOUT WHEN I AM TESTED?

NO. Do not be fooled by the "all-natural" claim. First of all, some substances that are banned are also derived from plants, and therefore are considered natural. In addition, the regulations overseeing the nutritional industry are such that there is no guarantee that any of the ingredients listed on the package are even in the product. Likewise, there is no guarantee that there are not ingredients in the product that are not listed in the package. **It is important to remember that the use of ALL nutritional products is completely at the athlete's own risk.**

MY PHYSICIAN WANTS TO PRESCRIBE AN ANTIBIOTIC AND COLD MEDICATION FOR MY ILLNESS. ARE ANTIBIOTICS AND COLD MEDICATIONS PERMITTED WITH A PRESCRIPTION?

All antibiotics are allowed. Most cold medications contain an antihistamine and/or decongestant. Any cold medication that contains a decongestant and is taken orally, is banned in competition, with no exceptions. Certain International Federations may ban some cold medications that contain an antihistamine.

I AM SEEING MORE ARTICLES ABOUT ATHLETES TESTING POSITIVE FOR NANDROLONE BELIEVED TO BE INCLUDED IN THEIR NUTRITIONAL SUPPLEMENTS. NANDROLONE IS AN ANABOLIC STEROID; DON'T YOU NEED A PRESCRIPTION TO OBTAIN IT?

There have been confirmed reports that show traces of nandrolone precursors and other anabolic steroids found in nutritional products. Currently, nutritional products are **HIGHLY UNREGULATED**, so use caution and discretion because the status of **ALL** nutritional substances is "Use is completely at the athlete's own risk."

I WOULD LIKE TO OBTAIN REFERENCE MATERIALS, CAN USADA MAIL OUT INFORMATION TO ME?

USADA produces an annual reference guide and wallet card that contains information regarding the prohibited classes, substances, and methods of doping, as well as some examples of permitted medications. This information is also available on the USADA web site at www.usantidoping.org/prohibited_substances. You can also request information to be mailed to you by calling the USADA Drug Reference Line at 1-800-233-0393 or by emailing us at webmaster@usantidoping.org.

WHAT IS THE DIFFERENCE BETWEEN EVENT AND OUT-OF-COMPETITION TESTING IN REGARDS TO THE TESTED SUBSTANCES?

During event testing, more performance-enhancing substances are testing for (stimulants, narcotics, anabolic agents, diuretics, peptide hormones and analogues, corticosteroids and in certain circumstances, alcohol, marijuana and beta-blockers.

During out-of-competition testing, a shorter menu of substances are tested for (anabolic agents, beta-2 agonists, diuretics, peptide hormones and analogues, and blood doping).

WHAT IS THE STATUS OF PRESCRIPTION TABLETS FOR ALLERGIES?

The non-sedating prescription antihistamines are not banned (i.e. Claritin, Allegra, Zyrtec). However, it is important to note that many antihistamines also come as combination products that contain pseudoephedrine (i.e. Claritin-D, Claritin-D-24-hour, Allegra-D), which are banned in competition as stimulants. Certain International Federations may ban prescription and over-the-counter sedating antihistamines.

**IF YOU HAVE ANY QUESTIONS,
CALL USADA's DRUG REFERENCE LINE (1-800-233-0393), or write to
USADA, 1265 LAKE PLAZA DR., COLORADO SPRINGS, CO 80906**

USADA GUIDE TO PERMITTED MEDICATIONS

WARNING

- Be especially cautious with any over-the-counter medications. Formulations may be changed at any time resulting in a change of status (from permitted to prohibited).
- Be aware that many brand names sound alike. One may be permitted, while the other may be prohibited.
- While vitamins, minerals and amino acids are not prohibited, they may be in combination with prohibited substances that may not be disclosed on the labels.
- USADA's Drug Reference Line (1-800-233-0393) cannot guarantee the status of herbals, supplements, and other health food store products. **Supplements are taken at the athlete's own risk.**
- References to specific products are for example purposes only and do not constitute an endorsement by USADA.

ANALGESIC & ANTI-INFLAMMATORY <i>(Note: All Non-Steroidal Anti-Inflammatory Drugs (NSAIDs) are allowed.)</i> Acetaminophen Acetaminophen with Codeine Aspirin Aspirin with Codeine Celebrex Codeine Coducept Darvocet Dihydrocodeine Propoxyphene (Darvon N, Darvon Pulvules) Tylenol Tylenol with Codeine Ultram Vioxx ANTI-ANXIETY & ANTI-DEPRESSANT <i>(Caution: May be prohibited by some IFs.)</i> Atarax Ativan Buspar Celexa Effexor Elavil Librium Pamelor Paxil Prozac Valium Vistaril Xanax Zoloft	ANTIBIOTIC ALL ANTIBIOTICS ARE ALLOWED. ANTI-DIABETIC Actose Amaryl Avandia Diabeta Diabinese Glipizide Glucophage Glucotrol Glyburide Glynase Micronase Prandin Precose Rezulin ANTI-DIARRHEAL Bismuth subsalicylate Diphenoxylate w/ atropine Donnagel Imodium Kaopectate Lomotil Lonox Loperamide Pepto Bismol ANTIFUNGAL Cruex Diflucan Desenex Lamisil Lotrimin Micatin Monistat Mycostatin Nystatin Sporonox Tinactin	ANTI-HISTAMINE <i>(Caution: May be prohibited by some IFs. Decongestant products are prohibited.)</i> Allegra Benadryl Cetirizine Chlorpheniramine Chlor-Trimeton Clamastine Claritin Diphenhydramine Fexofenadine Loratadine Tavist I Zyrtec ANTACID Di Gel Gaviscon Maalox Mylanta Tums ANTI-NAUSEA & ANTIVERTIGO <i>(Caution: May be prohibited by some IFs.)</i> Antivert Bonine Bucladin S Compazine Diphenhydramine Dramamine Emetrol Kytril Motion-aid Phenergan Promethazine Reglan Tigan Zofran	ANTIVIRAL Acyclovir Amantadine Didanosine Famciclovir Famvir Flumadine Relenza Stavudine Tamiflu Valtrex Zidovudine Zovirax ANTI-SEIZURE <i>(Caution: May be prohibited by some IFs.)</i> Depakote Neurontin Phenobarbital Tegretol Topamax ASTHMA PRODUCT Accolate Aminophylline Atrovent Cromolyn sodium Intal Ipratropium Nedocromil sodium Singulair Theophylline Tilade Zyflo COUGH PREPARATION <i>(Caution: Decongestant products are prohibited.)</i> Codeine Dextromethorphan Guaifenesin Iodinated glycerol
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USADA's Drug Reference Line 1-800-233-0393 Fax 1-719-785-2001

CHOLESTEROL LOWERING Baycol Lescol Lipitor Lopid Mevacor Niacin Niaspan Pravachol Tricor Zocor	EXPECTORANT & ANTI-TUSSIVE <i>(Caution: Oral decongestants are prohibited. Similar sounding nasal products may be prohibited.)</i> Benzonatate Cheracol plain Cheracol-D Delsym Dextromethorphan Guaifenesin Humibid LA Humibid DM Robitussin (plain, DM, AC) Tessalon Pearls Tussi-Organidin-DM	LAXATIVE Citrucel Colace Correctol Dulcolax Ex-Lax Fibercon Fleet Enema Metamucil Milk of Magnesia Peri-Colace	SLEEP AID / SEDATIVE <i>(Caution: May be prohibited by some IFs.)</i> Ambien Antivert Ativan Compoz Dalmane Diphenhydramine Halcion Meclizine Nytol Restoril Sominex Sonata Unisom Valium Xanax
CONTRACEPTIVE Alesse Demulen Desogen Genora Loestrin Lo-Ovral Modicon Nelova Nordette Ortho-Cept Ortho-Cyclen Ortho-Tri-Cyclen Ovcon Ovral Triphasil	EAR PRODUCT <i>(Note: All antibiotic eardrops are allowed.)</i> Auralgan Auro Ear Drops Cerumenex Cortisporin Debrox Murine Ear Drops Domeboro Otic Vosol Vosol-HC	MUSCLE RELAXER <i>[Caution: May be prohibited by some International federations (IFs).]</i> Baclofen Carisoprodol Cyclobenzaprine Flexeril Norflex Norgesic Norgesic Forte Parafon Forte Robaxin Soma Zanaflex	TOPICAL Antibiotics (all are allowed) Aspercreme Ben-Gay Capsaicin Myoflex cream Cortaid Flex-All 454 Icy Hot Balm Sports Cream Vicks Vaporub Zostrix Zovirax
DECONGESTANT <i>(Caution: Oral decongestants are prohibited. Similar sounding nasal products may be prohibited.)</i> 4-Way Long Lasting Nasal Afrin Nasal Spray Afrin Children's Drops Allerest 12 Hour Nasal Spray Dristan Nasal Spray Naphazoline Neo-Synephrine Nasal Spray Nostrilla Nasal Otrivin Oxymetazoline Privine Sinex Tetrahydrozoline Tyzine Xylometazoline	EYE PRODUCT <i>(Note: All antibiotic eye drops are allowed.)</i> Artificial Tears Boric acid Crolom Murine Plus Naphcon-A Neo-Synephrine Oxymetazoline Relief Tetrahydrozoline Vasocon-A Visine	NASAL PRODUCT Astelin Atrovent Nasal AYR Saline Beconase (& AQ) Flonase Nasacort (& AQ) Nasalcrom Nasonex Rhinocort (& Aqua) Ocean Salinex Vancenase (& AQ)	ULCER Antacids Axid Carafate Pepcid Prevacid Prilosec Propulsid Tagamet Zantac
ANTI-MIGRAINE Imitrex Amerge Zomig	HEMORRHOIDAL <i>[Caution: Suppositories and foams used internally (rectal) and containing hydrocortisone are prohibited.]</i> Anusol Anusol-HC (external only) Preparation-H	PAIN <i>(Refer to Tables 6 & 7, p. 14)</i>	MISCELLANEOUS Accutane Amino Acids (alone) DDAVP Estrace Levoxyl Minerals (alone) Premarin Provera Synthroid Viagra Vitamins (alone)

U.S. Anti-Doping Agency
1265 Lake Plaza Dr.
Colorado Springs, CO 80906

Drug Reference Line
1-800-233-0393
Staff Line
1-866-601-2632
FAX
1-719-785-2001
Web site
www.usantidoping.org

Remember this list is intended for use as a guideline for treatment of certain medical conditions. It is not a complete list, nor should it be considered an endorsement or recommendation of these drugs. **It is the athlete's responsibility to check the status of all medications.**

RESTRICTED SUBSTANCE MEDICAL NOTIFICATION INFORMATION

- Do not submit this form for prohibited or permitted substances.
- Completion of this form does NOT permit use of prohibited substances.

BETA-2 AGONISTS

The following Beta-2 Agonists are permitted in the aerosol or inhalant forms only to prevent and/or treat asthma and exercise-induced asthma. Written notification by a respiratory or team physician is necessary and must be provided to USADA and the Relevant Medical Authority prior to competition.

Formoterol	(Foradil)
Salbutamol	(Albuterol, Proventil, Ventolin)
Salmeterol	(Serevent)
Salbutamol/Ipratropium	(Combivent)
Terbutaline	(Brethaire)

Beta-2 Agonists, such as the following, are prohibited even in the inhaled form:

Bambuterol	(Astra, Bambec)
Bitolterol	(Tornalate)
Clenbuterol	(Broncodil, Clenasma, Clenbutol, Contrasma, Monores, Novegan, Prontovent, Spiropent, Ventolase)
Fenoterol	(Berotec)
Metaproterenol	(Alupent, Metaprel)
Orciprenaline	
Pirbuterol	(Maxair)
Reproterol	(Bronchodil)
Rimiterol	(Pulmadil)

INSULIN

Insulin is permitted only to treat insulin-dependent diabetes. Written notification of insulin-dependent diabetes (IDDM) by an endocrinologist or team physician is necessary.

LOCAL ANESTHETICS (Local anesthetics are permitted.)

Systemic injections are prohibited, and injectable local anesthetics are permitted under the following conditions:

1. Bupivacaine, lidocaine, mepivacaine, procaine, etc. can be used, but not cocaine.
2. Vasoconstrictor agents (e.g. adrenaline, epinephrine) may be used in conjunction with local anesthetics.
3. Only local or intra-articular injections may be administered.
4. These are permitted only when medically justified.

Where the rules of a responsible authority so provide, notification of administration of local and intra-articular injections of anesthetics may be necessary. Written notice must be made prior to the particular competition to USADA and the relevant medical authority, when applicable, or during the competition in matters of medical urgency.

CORTICOSTEROIDS

1. The systemic use of corticosteroids is prohibited [i.e., when administered orally, rectally (internal) or by intravenous or intramuscular injection].
2. Anal (topical), aural, dermatological, inhalational, nasal, and ophthalmological (but not rectal) administration is permitted.
3. Topical use (in the ear, the eye, or on the skin) is permitted.
4. Inhalation therapy* (i.e., for treatment of asthma) is permitted.
5. Intra-articular* and local injections* of corticosteroids are permitted.

* Where the rules of a responsible authority so provide, notification of administration may be necessary. Any physician wishing to administer corticosteroids intra-articularly or locally to an athlete may be required to give prior written notification to USADA and the relevant medical authority.



UNITED STATES ANTI-DOPING AGENCY
Restricted Substance Medical Notification Form
(effective Sept. 1, 2001)



- All appropriate areas must be printed legibly in order to process this form.
- Resubmit only if the prescription, diagnosis or other pertinent information has changed.
- Keep a copy to present at drug testing occasions.
- Effective Sept. 1, 2001, all medical notification forms expire ONE YEAR after signed by the athlete's physician.

Athlete's Last Name, First, Middle

Sex

Sport

Street Address, City, State, ZIP

Day Phone

Evening Phone

The purpose of the USADA medical notification form is to notify the relevant medical authorities of the prescribed medical use of prohibited substances that are permitted under certain circumstances. This form may be shared with the medical authorities of other relevant sporting bodies (for example, the applicable International Federation, the International Olympic Committee, or the World Anti-Doping Agency). It is understood that there is no physician/patient relationship between USADA and the athlete on whose behalf this form is submitted. It is also understood that nothing contained in this form is to be considered confidential medical information. Physicians completing this form should take care not to include specific information that their patients would expect to remain confidential. **NOTE:** Some IFs may require specific medical forms to be filed directly with them. This is the athlete's responsibility.

BETA-2 INHALERS - No others are permitted. **Athlete must** have diagnosis of Asthma, EIA, or EIB.

DIAGNOSIS: _____

MEDICATION	DOSE (SIG)	ROUTE
Formoterol (Foradil)		
Salbutamol (Albuterol, Proventil, Ventolin)		
Salbutamol/Ipratropium (Combivent)		
Salmeterol (Serevent)		
Terbutaline (Brethaire)		

Notification is necessary for the following, only if required by the Responsible Authority:
LOCAL OR INTRA-ARTICULAR INJECTIONS (i.e., anesthetics, corticosteroids) and/or **INHALED CORTICOSTEROIDS**.

DIAGNOSIS: _____

MEDICATION	DOSE	ROUTE	Date/Time of Administration

INSULIN - Permitted only to treat insulin-dependent diabetes. Must have diagnosis of IDDM.

DIAGNOSIS: _____

MEDICATION	DOSE	ROUTE	Date/Time of Administration

Print Physician Name (MD, DO)

Physician Signature (MD, DO, etc.)

Date

Street Address, City, State, ZIP

Phone

FAX

Mail to: USADA, Medical Notification, 1265 Lake Plaza Dr., Colorado Springs, CO 80906 or fax to USADA at (719) 785-2001.

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Updated August 2001

Drug Reference Line: (800) 233-0393

Web Site: www.usantidoping.org

USOC ANTI-DOPING POLICIES

1. Retirement

- a. Any athlete enrolled in the USADA Out-of-Competition ("OOC") program who wishes to be removed from the program on account of retirement must promptly notify USADA and the applicable National Governing Body in writing in order for retirement from the OOC program to be effective. Any athlete who has not provided advance written notice of retirement to USADA and then refuses to participate in a USADA OOC test claiming retirement, shall be "ineligible" for a period of two (2) years following such refusal.
- b. Any athlete who has ever been enrolled in a OOC program of an international federation, the U.S. Olympic Committee or USADA who retires and then wishes to return to eligible status must enroll in the USADA OOC program at least six (6) months in advance of regaining eligible status.
- c. USADA shall not suspend or terminate the prosecution of a doping offense related to a positive sample as a result of an athlete's subsequent retirement.

2. Missed OOC Tests

- a. Under the OOC testing program implemented by USADA, it is the responsibility of each athlete designated by a National Governing Body for OOC participation to provide USADA with up to date information on his or her whereabouts so that he or she can be located for NAN testing. Athletes identified for Out-of-Competition testing are required to file Athlete Location Forms with USADA on a quarterly basis. They are also responsible for notifying USADA any time they will not be available for testing at the location specified on their Athlete Location Form. USADA has provided all athletes subject to OOC testing both a facsimile number and e-mail address to use in updating their Athlete Location Forms or to notify USADA that they will not be available for testing at the specified location at a particular time. The USADA procedure for determining that an athlete participating in the NAN program has a "missed test" is attached.
- b. Any athlete having three missed tests within any rolling 18-month period shall be ineligible for a period of two years from the athlete's last "missed test." No athlete shall be disciplined for having three missed tests within an eighteen-month period unless the athlete has been offered an opportunity for a hearing. Missed tests shall not be announced publicly until the conclusion of the hearing process.
- c. The effectiveness of the policy set forth in this resolution shall be reviewed on an ongoing basis.

d. **QUICK REFERENCE GUIDE TO USADA WEB SITE**

(www.usantidoping.org)

- Athlete Section <http://www.usantidoping.org/athletes>
 - Links to NGBs, IFs and other anti-doping organizations
<http://www.usantidoping.org/links/index.htm>
 - Prohibited Substances Section http://www.usantidoping.org/prohibited_sub/index.htm
(includes prohibited Substance List and enlarged USADA Wallet Card)
 - USADA Protocol for Olympic Movement Testing
http://www.usantidoping.org/files/USADA_Protocol.pdf
 - USADA Athlete Location Form http://www.usantidoping.org/files/Athlete_Locator_Form.pdf
 - USADA Change of Plan Form http://www.usantidoping.org/files/Change_of_Plan.pdf
(Note: The USADA Change of Plan Form information can now be emailed to USADA at update@usantidoping.org. The USADA Change of Plan Form cannot be used in place of the Athlete Location Form. The USADA Quarterly Athlete Location Form must be on file with USADA before the USADA Change of Plan Form can be accepted. Remember, each athlete must complete and return an athlete location form each quarter.
- To utilize this service, you must have your email account registered with USADA through USADA Quarterly Athlete Location forms. In addition, the email must come from the account that is your email account of record with USADA.
- USADA Restricted Substance Medical Notification Form
http://www.usantidoping.org/files/Restricted_Medical_Form.pdf



U.S. ANTI-DOPING AGENCY
1265 Lake Plaza Dr.
Colorado Springs, CO 80909
719-785-2000
www.usantidoping.org

STEROID

USE -

→ IOC

→ Anti-doping Agency
(Fed Funded thru
ONDCP)

Tickle: Fitness Event

Sept - South Lawn