CLEAN SPORT HANDBOOK

2024

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TrueSport®

USADA MISSION STATEMENT

We hold the public trust to:

Stand With Athletes To Champion Their Right To Clean Sport
Inspire True And Healthy Sport
Promote The Integrity Of Sport

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

"A level playing field in sport is not just important, it's to me, the number one central thing."

– Jen Armbruster
7x Paralympian and
4x Paralympic medalist, Goalball
and USADA Athlete Presenter

Introduction

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

This Clean Sport Handbook is designed to provide athletes and athlete support personnel with a summary of the information needed to successfully participate in the anti-doping program governing their sport. Access to accurate information ensures that athletes and support persons are not only fully prepared for training and competition, but also for the important role they play in the broader global anti-doping movement.

WORLDWIDE EFFORT FOR CLEAN SPORT

Who makes the rules?

As a signatory to the World Anti-Doping Code (the Code), USADA complies with all the International Standards developed by the World Anti-Doping Agency (WADA) in order to harmonize anti-doping efforts around the world. The Code was first implemented in 2004 and is amended approximately every six years (2009 and 2015). The latest version of the Code has been in effect since January 1, 2021.

What is USADA?

The United States Anti-Doping Agency (USADA) is recognized by the United States Congress as the official anti-doping agency for all Olympic, Paralympic, Pan American, and Parapan American sport in the United States. USADA began operations on October 1, 2000, and is an independent, nonprofit, non-governmental agency whose mission is to *stand with athletes to champion their right to clean sport, inspire true and healthy sport, and promote the integrity of sport.*

THE WADA PROHIBITED LIST

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

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

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

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

In consultation with signatories and governments, WADA also establishes a monitoring program regarding substances that are not yet on the List. The substances and methods added to this list are ones WADA wishes to monitor in order to detect potential patterns of misuse in sport.

If you would like a substance or method to be considered for the monitoring program, please contact WADA directly by visiting www.wada-ama.org/en/contact-us and completing a contact form.

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

Supplement Connect, USADA's dietary supplement safety education and awareness resource, is where athletes and support persons can find information about the many risks associated with supplements, as well as a growing list of supplements that have been determined to be high risk. Supplement Connect also provides information about third-party supplement certification, which USADA recommends to help athletes reduce their risk if they decide to use supplements despite the known risks.

For additional assistance, contact USADA's Drug Reference Department to find out if a medication or specific ingredient is prohibited in sport before choosing to use it. To contact the Drug Reference Line, call (719) 785-2000, and follow prompts, or email drugreference@USADA.org.

* *See Article 4.3.1 of the 2021 WADA Code for more information.*

[1] *As defined in the Code, the spirit of sport is the celebration of the human spirit, body, and mind. It is the essence of Olympism and is reflected in the values we find in and through sport, including health, ethics, fair play, honesty, character, joy, teamwork, dedication, respect for rules and one's self, and other similar values.*

HEALTH AND SAFETY SUMMARY OF PROHIBITED SUBSTANCES

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

See USADA.org/effects-of-substances for more information.

SUMMARY OF SUBSTANCES PROHIBITED AT ALL TIMES

ANABOLIC AGENTS

Anabolic androgenic steroids (AAS) are by far the most prevalent performance-enhancing drugs to build muscle strength and lean muscle mass. Due to scientific advances in detection sensitivity, AAS like testosterone, stanozolol, oxandrolone, and nandrolone are readily detectable in athlete samples.

What are some potential side effects of anabolic steroid abuse?

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

Physiological - All

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

Psychological - All

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

Male-Specific Side Effects

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

Female-Specific Side Effects

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

** Effects may be permanent but can vary by individual*

PEPTIDE HORMONES, GROWTH FACTORS, RELATED SUBSTANCES, AND MIMETICS

Some substances in this category have important medical uses, such as erythropoietin (EPO) to treat anemia and human growth hormone (hGH) for growth hormone insufficiency. However, many substances in this category are experimental and have no legitimate therapeutic use.

When misused, the substances in this category can lead to negative health effects. For example, some Erythropoietin-Stimulating Agents (ESAs) could cause high blood pressure (hypertension), a lack of healthy red blood cells (anemia), an interruption of blood supply to the brain (stroke), blood clots (pulmonary embolisms), and even blood cancers/leukemia. Additionally, the use of hGH and hCG could result in heart attack, feminization, and thyroid issues.

There are also many experimental peptide treatments offered by anti-aging or wellness clinics that have unknown or poorly understood safety profiles.

While the use of substances in this category affects individuals differently, it is important to understand the potential health risks.

BETA-2 AGONISTS

The primary medical use of these compounds is to treat conditions like asthma and other respiratory ailments.

The misuse of beta-2 agonists could lead to side effects including, but not limited to, a rapid heart rate, headaches, sweating, nausea, muscle cramps, and nervousness.

The anti-doping status of beta-2 agonists depends on the medication, the route of administration, whether it is being used in conjunction with another medication, and the dosage. It is essential that athletes check GlobalDRO.com before using any beta-2 agonist.

The following list describes the dosages for the four permitted inhaled beta-2 agonists:

- Inhaled albuterol (also called salbutamol): maximum 1,600 micrograms (mcgs) over 24 hours in divided doses, not to exceed 600 mcgs over 8 hours starting from any dose, as long as it is not used in conjunction with a diuretic or masking agent
- Inhaled formoterol: maximum delivered dose of 54 mcgs over 24 hours, as long as it is not used in conjunction with a diuretic or masking agent
- Inhaled salmeterol: maximum 200 mcgs over 24 hours
- Inhaled vilanterol: maximum 25 mcgs over 24 hours

Please be aware that threshold doses mentioned above do not apply to arformoterol or levalbuterol. Athletes using inhalers containing arformoterol or levalbuterol should refer to Global DRO to determine whether the inhaler is permitted in sport. If the status says, "Not Prohibited," then an athlete can use the inhaler as prescribed. If the status says "Conditional," it means there is a dosage threshold. The Conditions and Warnings section on the Global DRO search results will describe the permitted dose. If the status says "Prohibited," then an athlete should begin the Therapeutic Use Exemption (TUE) process for continued use. For more information on the process and criteria, review the TUE section.

All other beta-2 agonists, regardless of route of administration, are prohibited at all times and at all dosages!

How do I figure out the dosage per puff on my inhaler?

There are four permitted beta-2 agonists (vilanterol, formoterol, albuterol, and salmeterol) with limits to calculate. Your inhaler will show the dosage of each active ingredient in milligrams (mg) or micrograms (mcgs). If using a metered dose inhaler, you can use the dosage per puff, and the permitted dose, to calculate how many puffs you can have per day in sport.

For example, for an albuterol (salbutamol) inhaler that delivers 90 mcgs/puff:

- 90 mcgs per puff X 6 puffs = 540 mcgs
- From the WADA Prohibited List, the maximum permitted dosage of an albuterol (salbutamol) inhaler is 1,600 mcgs over 24 hours in divided doses, not to exceed 600 mcgs over 8 hours starting from any dose.
- **Takeaway:** You could take 6 puffs of the albuterol inhaler in an 8-hour period without incurring an anti-doping rule violation, but 7 puffs would exceed the maximum dosage allowed over an 8-hour period.

As another example, Symbicort is a combination product that contains budesonide and formoterol. It is common to see the dosages (prescription dependent) listed in this format: 160/4.5. One number is the dosage of the budesonide and the other number is the dosage of the formoterol. If you read the packaging carefully, it will state exactly how much of each ingredient is in each "actuation" (puff, or inhalation). In this example, you only need to calculate how many puffs you could take of the formoterol.

- 4.5 mcgs per puff X 12 puffs= 54 mcgs
- Per the WADA Prohibited List, the maximum permitted dose of formoterol is 54 mcgs over 24 hours
- **Takeaway:** You could take 12 puffs of Symbicort per day without incurring an anti-doping rule violation.

Albuterol syrups or tablets and nebulizers

If a doctor prescribes an albuterol syrup or tablet, athletes need to be aware that the use of an oral (swallowed) form of any beta-2 agonist, such as a tablet or syrup, is prohibited at all times and requires an approved TUE. Similarly, if an athlete uses a nebulizer (where the medication is inhaled as a mist using a mouthpiece or mask) instead of a metered-dose inhaler, they should apply for a Therapeutic Use Exemption (TUE).

Takeaway: Remember! The anti-doping status of beta-2 agonists depends on the medication, the route of administration, whether it is being used in conjunction with another medication, and the dosage.

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

HORMONE AND METABOLIC MODULATORS

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

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

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

- Dramatic change in blood sugar levels (insulin)
- Endocrine system disruption (clomiphene)
- Liver damage (AICAR)
- Cholesterol imbalance (aromatase inhibitors)
- Motor function disorders and tremors (trimetazidine)

DIURETICS AND MASKING AGENTS

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

There are some ophthalmic (topical eye) preparations of substances in this category that are permitted. **The use of diuretics or masking agents along with a beta-2 agonist inhaler invalidates the permitted dosages for the inhalers.** Athletes should check GlobalDRO.com for ALL their medications before use.

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

- Dehydration
- Dizziness or fainting
- Muscle cramping and heart arrhythmia due to potassium depletion

NON-APPROVED SUBSTANCES

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

Before participating in a clinical trial, athletes need to call or email the USADA Drug Reference Line to determine if a Therapeutic Use Exemption is required. A drug in development and undergoing clinical trials could be considered prohibited if it falls into one of the categories of banned substances on the WADA Prohibited List, or if it has the potential to be performance-enhancing.

SECTION TAKEAWAYS

- Anabolic androgenic steroids (AAS) can have both psychological and physiological effects on users, varying from minor to life threatening.
- Four inhaled beta-2 agonists are permitted up to certain dose thresholds and it is essential that athletes check GlobalDRO.com before using any beta-2 agonist.
  - If a threshold is identified, it is important to accurately determine the amount acceptable and file for a TUE, if necessary.
- If an athlete needs to use a hormone antagonist and/or modulator to modify hormone function, be advised that many are prohibited.
- Non-Approved Substances include those under pre-clinical or clinical development, discontinued designer drugs, drugs with orphan status, veterinary drugs, or other substances with no therapeutic use.

SUMMARY OF SUBSTANCES PROHIBITED IN-COMPETITION ONLY

STIMULANTS

The primary medical use of these compounds is to treat conditions like Attention Deficit Disorders, asthma, narcolepsy, and obesity. In contrast, some designer simulants, which mimic drugs like cocaine, amphetamine, MDMA (Ecstasy), and "bath salts," are used by athletes to impact performance. The use of stimulants outside of medical necessity may be unsafe and result in negative side effects, including an increased heart rate and blood pressure that leads to a greater risk of stroke, heart attack, and cardiac arrhythmia. In addition, misuse has led to involuntary shaking (tremors), dehydration, insomnia, anxiety, dependence, and addiction.

Though most medications containing stimulants are prescribed by a physician, some over-the-counter medications are known to contain prohibited compounds. For example, pseudoephedrine, levomethamphetamine, propylhexedrine, and epinephrine can be present in allergy, cold, and flu medications, or nasal sprays or inhalants. Other stimulants can be found in dietary supplements, such as pre-workout powders and diet aids.

Dietary supplements, which can be purchased over-the-counter, can also contain prohibited stimulants like methylhexaneamine and oxilofrine, also known as methylsynephrine. Be sure to visit Supplement Connect for more information, email drugreference@USADA.org or call the Drug Reference Line at (719) 785-2000 and follow the prompts.

In-Competition vs. Out-Of-Competition Use

Like other substances, it is difficult to predict the clearance times or washout periods for stimulants. Stimulants are prohibited in-competition, but even if taken out-of-competition, can remain in an athlete's system during the in-competition period, which could lead to an anti-doping rule violation if the athlete is selected for testing. For example, athletes should assume there is a risk of returning a positive test if the use of pseudoephedrine is during or close to a competition.

EPI PENS

Athletes with severe allergies to foods, insect bites/stings, medicines, and other substances may need to possess and use a life-saving epinephrine auto-injector, or Epi Pen. This device delivers a predetermined dose of epinephrine, a stimulant also known as adrenalin, into the muscle through a needle, in the event an athlete experiences anaphylaxis.

Epinephrine is prohibited in-competition as a stimulant on the WADA Prohibited List, however, the use of epinephrine is not prohibited out-of-competition.

Some event organizers have rules regarding the medications or equipment (such as needles) an athlete is allowed to bring to a competition. However, this does not apply to epinephrine auto-injectors. It is generally recognized that epinephrine is an emergency and potentially life-saving medicine, so athletes will not incur an anti-doping violation for being in possession of epinephrine auto-injectors at a competition.

Athletes do not need to submit a TUE Application in *advance* of using or being in possession of an auto-injector. In the event an athlete needs life-saving treatment, they may need to request a retroactive TUE if they used an epinephrine autoinjector in-competition. Once the emergency has subsided, an athlete should complete a TUE Pre-Check Form on the USADA website to learn whether a retroactive TUE is required. USADA will evaluate the TUE Pre-Check Form to determine what TUE requirements apply to the particular situation and will notify the athlete accordingly.

NARCOTICS

When dosed appropriately, narcotics such as oxycodone, morphine, tramadol, and other narcotic painkillers have medical uses like relieving or managing severe pain.

While a sensation of euphoria or psychological stimulation are effects common to the use of narcotics, misuse of narcotics can pose serious health risks. Side effects such as nausea and vomiting, respiratory depression, and a decreased heart rate are possible. In addition, the misuse of narcotics could lead to a false sense of invincibility, increased pain threshold and failure to recognize injury, and a physical and psychological dependence leading to addiction, and even death.

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

Check GlobalDRO.com, call USADA's Drug Reference Line at (719) 785-2000, or email drugreference@USADA.org for more information. Go to the Therapeutic Use Exemption (TUE) section to learn more about applying for a TUE if needed.

CANNABINOIDS

Cannabinoids (cannabis, hashish, marijuana, THC, synthetic THC) are prohibited in-competition, regardless of the legal status in the competition location. Cannabimimetics (JWH-018, JWH-073, HU-210) are also prohibited. While cannabidiol (CBD) is not prohibited, athletes should be extremely cautious with these products because it is nearly impossible to obtain a pure CBD extract or oil from the cannabis plant. Anyone who buys a CBD oil, extract, or other CBD product should assume that it is a mixture of CBD and other prohibited cannabinoids, such as THC. **Athletes should be aware of the risk that these products may still contain prohibited cannabinoids, even if they are certified or evaluated by a third party.**

The body absorbs THC, which is the psychoactive ingredient in cannabis, and breaks it down into metabolites. THC and its metabolites can accumulate in the body fat and tissues and are excreted in the urine over an extended period of time after use depending on the user's metabolism and other factors.

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

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

GLUCOCORTICOIDS

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

Glucocorticoids are often found in asthma control inhalers, eye or ear drops, topical creams, intra-muscular or intra-articular injections, and nasal sprays.

ALL glucocorticoid injections are prohibited during the in-competition period. This includes, but is not limited to, injections into joints, bursa, or the epidural space, which are all routes of administration that were previously allowed. Oral and rectal routes of administration also remain prohibited. For clarification, oral administration of glucocorticoids also includes oromucosal, buccal, gingival, and sublingual routes.

WADA has determined that these routes of administration result in a significant level of glucocorticoids circulating in the blood, which has the potential to result in performance enhancement or cause harm to health.

Glucocorticoids are permitted both in- and out-of-competition when administered by:

- inhalation (e.g., glucocorticoid inhalers)
- intranasal (e.g., nasal sprays for allergic rhinitis)
- ophthalmic (e.g., eye drops)
- perianal (e.g., topical hemorrhoid creams)
- dermal (e.g., topical creams to treat rashes or allergic reactions)
- dental intracanal application

Athletes who are required to have a TUE to use a glucocorticoid in-competition should apply for a TUE if the use of their medication will occur within the time periods established below. If the use of a glucocorticoid occurs out-of-competition, but within the washout periods below, athletes should maintain their medical records in the event they return a positive test. To reduce the risk of a positive test, athletes should follow the minimum washout periods* recommended by WADA. Athletes should check GlobalDRO.com before using any glucocorticoid. If athletes are concerned about their TUE Application not being processed prior to a positive test, they are encouraged to contact the Drug Reference Line at (719) 785-2000 and follow the prompts, or email tue@USADA.org.

ROUTE	APPLY FOR A TUE IF YOU USE:
Oral (swallowing, or cream or gel used inside the mouth/on gums/under tongue)	Triamcinolone acetonide within 30 days of a competition*
	All other glucocorticoids within 3 days of a competition
Intramuscular injections	Triamcinolone acetonide within 60 days of a competition
	Prednisolone & prednisone within 10 days of a competition
	Betamethasone, dexamethasone & methylprednisolone within 5 days of a competition
Injections into or around joints or tendons, as well as epidural, intrathecal, intrabursal, intralesional (e.g., intrakeloid), intradermal & subcutaneous injections	Triamcinolone acetonide, prednisolone & prednisone within 10 days of a competition
	All other glucocorticoids within 3 days of a competition
Rectal	All glucocorticoids-3 days
	Except Triamcinolone- 10 days

** Washout period refers to the time from the last administered dose to the time of the start of the in-competition period (i.e., beginning at 11:59 p.m. on the day before a competition in which the athlete is scheduled to participate, unless a different period was approved by WADA for a given sport). This is to allow elimination of the glucocorticoid to below the reporting level.*

What are some of the potential side effects of glucocorticoid misuse?

- Loss of muscle mass and bone density
- Weakening of injured areas in muscle, bone, tendons, or ligaments
- Halted or stunted growth in young people
- Immune system suppression
- Fluid retention
- Increased susceptibility to infection
- Psychiatric disorders, such as changes in mood and insomnia

BETA-BLOCKERS

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

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

The misuse of beta-blockers could lead individuals to experience fainting or loss of consciousness, sleep disorders, a decreased heart rate, and spasms of the airway. In some cases, users have also reported sleep disorders, constriction of blood vessels in the arms and legs, as well as feelings of tiredness and decreased performance ability in endurance activities.

**Also prohibited out-of-competition*

SECTION TAKEAWAYS

- Not only can the use of stimulants outside of medical necessity be unsafe, but athletes who intentionally or accidentally have stimulants in their system during an in-competition period, without proper documentation, could receive a positive test and/or further consequences.
- If painkillers are needed for an injury, it is important to check the prohibited status on GlobalDRO.com, call USADA's Drug Reference Line at (719) 785-2000 and follow the prompts, or email tue@USADA.org for more information on whether a TUE is needed.
- Cannabinoids (cannabis, hashish, marijuana, THC, synthetic THC) are prohibited in-competition, regardless of the legal status in the competition location.
  - While cannabidiol (CBD) is not prohibited, athletes should be extremely cautious as CBD oil, extract, or other CBD products usually contain a mixture of CBD and other prohibited cannabinoids, such as THC, even if third-party certified.
- ALL glucocorticoid injections are prohibited during the in-competition period.
  - Other routes of administration of glucocorticoids such as oral, intravenous, intramuscular, or rectal/suppository, are also prohibited during the in-competition period.
- Beta-blockers are prohibited in certain sports, so it is important for athletes to check the status of their medications on GlobalDRO.com.

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

MANIPULATION OF BLOOD AND BLOOD COMPONENTS

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

What are the health risks of blood doping?

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

- Stress on the heart and cardiovascular system, leading to an enlarged heart
- Blood clotting
- Stroke
- Adverse immune response, including anaphylactic reaction that could result in death

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

CHEMICAL AND PHYSICAL MANIPULATION

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

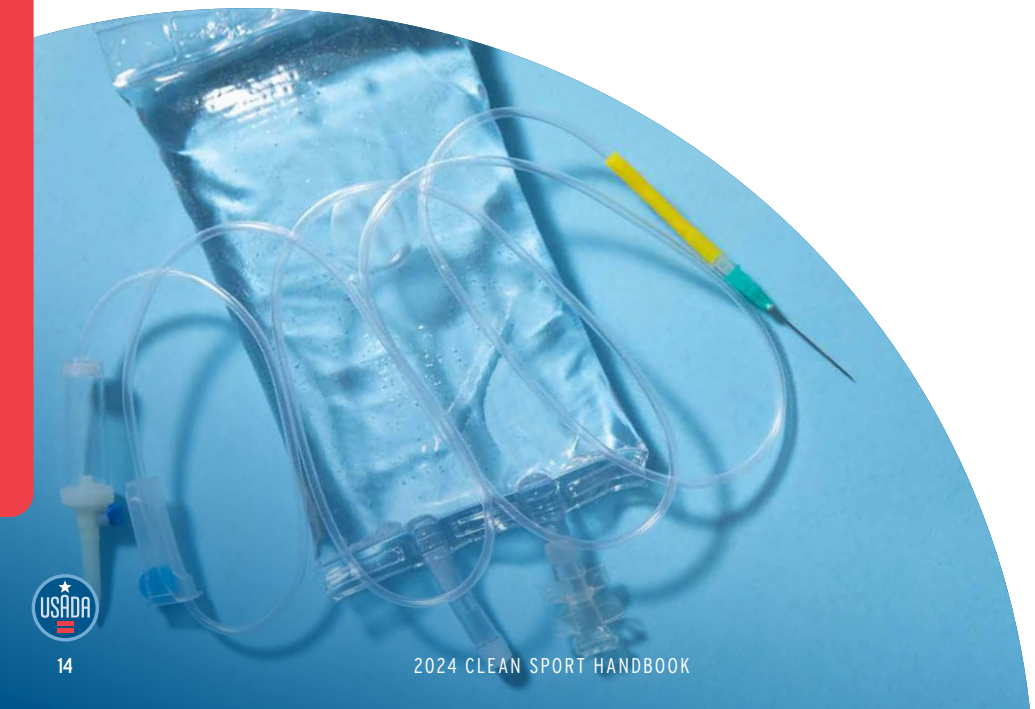
GENE AND CELL DOPING

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

INTRAVENOUS (IV) INFUSIONS AND/OR INJECTIONS

Intravenous infusions and/or injections of more than a total of 100 mL per 12-hour period are prohibited except for those legitimately received during hospital treatments, surgical procedures, or clinical diagnostic investigations. Small volume intravenous injections (under 100 mL) are not prohibited as long as the substance delivered is not prohibited and the total volume does not exceed 100 mL in 12 hours. IV infusions and/or injections provided through on-site event medical services, ambulatory treatment, outpatient clinics, doctors' or medical offices, home visits, mobile IV clinics, boutique IV clinics, etc., are prohibited if they exceed the 100 mL per 12-hour period limit and don't meet criteria for a TUE.

Keep in mind that sometimes hydration clinics sponsor sporting events and set up tents to provide IV services to athletes. Just because an IV service is offered at a sporting event doesn't mean it is permitted to use. It is still a prohibited method!



YES **A TUE is required if any of the below apply:**

- the permitted substance exceeds the 100 mL per 12-hour threshold, even if the athlete receives several small volume injections
  - e.g., saline
- the substances being administered are prohibited
- the athlete receives treatment outside of a hospital facility that is not part of a surgery or diagnostic test. The following are examples of non-suitable locations to receive an IV infusion or injection:
  - athletes' home with personal IV equipment
  - medical practitioner's office, clinic, suite, home, tent, hotel room, or vehicle
  - health clinic, health center, or wellness clinic
  - any kind of IV clinic, dialysis center, or treatment room
  - event organizers' medical facility, tent, first aid station, polyclinic, or start-finish line facility
  - home visit by IV services or therapies from boutique or concierge IV clinics
    - cleanses, detoxes, refreshes, food poisoning/jet lag/hangover cures, flu relief, or antioxidant treatments

NO **A TUE is not required if:**

- received in an emergency situation; instead apply for retroactive TUE as soon as possible after receiving treatment
- the total IV infusion/injection is less than 100 mL per 12-hour period
  - However, the athlete still needs to check the prohibited status of the substance being injected
- the IV infusion/injection is more than 100 mL in 12 hours but is received at the hospital or emergency room, part of urgent medical treatment in an urgent-care or after-hours clinic that is part of a hospital or a hospital system, as part of a surgery/surgical procedure (in or out of the hospital), or as part of a diagnostic procedure or test (in or out of the hospital) like an MRI or CT scan

TUEs will only be considered and granted retroactively (after the fact) in exceptional circumstances. Please note that the health and well-being of the athlete must always remain the priority in emergency circumstances. In an emergency, athletes should always receive medical care first, and then notify USADA afterwards. Athletes should obtain medical notes or records relating to the emergency treatment to submit with their TUE Application after the emergency has subsided.

For more information regarding IV infusions or injections, call USADA's Drug Reference Line at (719) 785-2000, following the prompts for service.

REFERENCE CHART OF PROHIBITED SUBSTANCES AND METHODS

PEDs	Anabolic Agents	Hormones and Related Substances	Beta-2 Agonists	Diuretics and Masking Agents	Stimulants	Narcotics	Other	Enhancement of Oxygen Transfer	Chemical and Physical Manipulation	Gene and Cell Doping
EXAMPLES	• Testosterone • Nandrolone • Stanozolol • Methandrostenolone (Dianabol) • Androstenedione (Andro) • Tetrahydrogestrinone (THG, The Clear) • Dehydroepiandrosterone (DHEA) • Deca-Durabolin (Deca) • Selective Androgen Receptor Modulators (SARMs)	• hGH (human growth hormone) • EPO (erythropoietin) • IGF-1 (Insulin-like Growth Factor 1) • Growth Hormone Releasing Peptides (GHRPs) • hCG (human chorionic gonadotrophin) in males only • ACTH (adrenocorticotrophin) • Insulin and insulin mimetics	• Salbutamol • Formoterol* • Salmeterol* • Clenbuterol • Terbutaline • Fenoterol • Bambuterol • Higenamine • Vilanterol* • Indacaterol ** Permitted up to a certain dose.*	• Furosemide • Hydrochlorothiazide • Probenecid • Spironolactone	• Epi-Pen (epinephrine) • Amphetamine • Methylphenidate • Cocaine • Ephedrine • Modafinil • Phenethylamine and its derivatives • Lisdexamfetamine	• Morphine • Heroin • Fentanyl and Derivatives • Oxycodone	**Anti-Estrogenic Agents:** • Tamoxifen • Selective Endrogen Receptor Modulators (SERMs) **Cannabinoids:** • Marijuana • Hashish **Glucocorticoids:** • Betamethasone • Prednisolone • Cortisone • Prednisone	Blood doping (used to increase the number of red blood cells in the body by transfusion of one's own blood (autologous transfusion) or blood from donors matched by blood type (homologous))	Tampering, diluting urine, substituting urine samples, use of substances and methods, including masking agents which alter, attempt to alter, or may reasonably be expected to alter the integrity and validity of urine samples used in doping controls	Gene doping is the non-therapeutic use of cells, genes, or genetic elements to modify gene expression, thereby having the capacity to enhance athletic performance
DOPING RATIONALE	• Building mass and muscular strength • Recovery • Reduction of joint pain	• Builds mass and strength when combined with steroids • Improve blood's oxygen transport capacity (hGH/EPO) • Endurance, improved metabolism of sugar (hGH/Insulin) • Compensate for reduction of testicular size (hCG)	• Improved respiratory capacity	• Quick weight loss • Reduce urine concentration of PEDs to minimize detection • Limit excretion of anabolic agents	• Alertness • Awareness • Will to win • Reduces fatigue • Maintain aggressiveness • Heart, lungs, brain function faster • Limits hunger	• Relax and cope with the pressures of competition • Steadiness for athletes	**Anti-Estrogenic Agents:** • Regulation of estrogen levels **Cannabinoids:** • Reduce pain • Heightened sense of well-being • Euphoria **Glucocorticoids:** • Reduces pain and soreness • Reduces tiredness	• Hematocrit (percent of red cells in the blood) is increased for a period of time and the blood can carry more oxygen to tissues that are performing work	• Hiding the use of prohibited substances • Reduce the chances of prohibited substances being detected by intentionally diluting or manipulating the sample	• Muscle development • Stimulate endogenous hormones
LEGITIMATE MEDICAL USES	• Weight gain for wasting conditions (AIDS, Cancer) • Decreased gonadal function in males • Delayed puberty in males • Osteoporosis • Hereditary angioedema • Metastic breast cancer	• EPO-kidney failure • Anemia • hGH-growth problems • Dwarfism • Insulin-diabetes • hCG-testosterone deficiency • Naturally produced during pregnancy	• Treatment of asthma and other respiratory ailments	• Treat kidney disease and congestive heart failure • Reduce excess fluid from body • Management of high blood pressure	• Treat conditions such as Attention Deficit Disorders (ADD/ADHD), asthma, narcolepsy, and obesity • Suppress hunger	• Relieving severe pain, including in terminally ill cancer patients, or after surgery or injury • Help people relax because it reduces activity in the brain and nervous system • Induces sleep	**Anti-Estrogenic Agents:** • Cancer and osteoporosis treatments **Cannabinoids:** • Reduce stress **Glucocorticoids:** • Treatment of allergies, inflammations, asthma	• Blood transfusion	• Legitimate medical indications for IV infusions and/or injections are well documented and are most commonly associated with either medical emergencies or in-patient care	• Treatment of genetic diseases
RISKS	• Rage • Liver and kidney dysfunction • Cancer • Clotting disorders • Stunted growth Women: • Masculinization • Abnormal menstrual cycles • Reduced breast size Men: • Impotence • Sperm reduction • Testicular shrinkage • Breast and prostate gland enlargement	• Hypertension (ESAs/hGH) • Blood cancers/leukemia (ESAs/hGH) • Strokes (ESAs) • Heart attacks • Pulmonary embolism (ESAs) • Feminization in males (hCG) • Thyroid problems (hGH) • Diabetes (insulin)	• Hypertension • Cardiac arrhythmia and high blood pressure • Nausea • Headaches and dizziness (constricting blood vessels in the brain) • Muscle cramps (constricting blood vessels in muscles)	• Severe dehydration • Excessive weight loss • Muscle cramps •Blood volume depletion • Drop in blood pressure • Electrolyte imbalance • Potassium depletion • Cardiac arrythmia • Death	• Anxiety • Insomnia • Increased aggressiveness • Addiction • Dehydration • Shaking • Convulsions • High blood pressure • Sudden death • Increased risk of stroke • Heart attack and cardiac arrhythmia	• Hallucinations • Fatigue • Increase/slow the heart rate, • Impair mental functions • Lower than normal blood pressure (hypotension) • A false sense of invincibility and failure to recognize injury • Addiction • Overdose	**Anti-estrogenic Agents:** • Hormonal imbalance • Menopausal symptoms (e.g., hot flashes, sweating, insomnia) **Cannabinoids:** • Poor coordination • Mental and respiratory problems • Impairment **Glucocorticoids:** • Fragilization of tendons and muscles • Chronic fatigue • Hypertension • Immune suppression	• Adding more red blood cells to the cardiovascular system can cause the heart to overload during exercise, increase stress on the heart, and cause blood clotting and stroke. With transfusions, there is an additional risk of infectious disease such as AIDS or hepatitis, or life threatening auto-immune responses	• Complications of IV infusions and/or injections may include infiltration into the surrounding tissue, hematoma, an air embolism, inflammation of the vein, extravascular drug administration, accidental intra-arterial injection or post-treatment infection	• Depends on manipulated genes (flu-like symptoms, increased risk of stroke and heart attack, risk of tumor development, and adverse events leading to death)

SECTION TAKEAWAYS

- Manipulating blood is considered a prohibited method in sport.
- Chemical and physical manipulation, such as using intravenous infusions, or sequentially withdrawing, manipulating, and reinfusing whole blood or extra fluids is considered tampering or attempted tampering with a sample and is prohibited at all times.
- Altering the integrity of normal or genetically modified cells, the transfer of nucleic acids or nucleic acid sequences, or the use of agents that directly or indirectly affect functions known to influence performance, is prohibited at all times.
- Intravenous infusions and/or injections of more than a total of 100 mL per 12-hour period are prohibited except for those legitimately received during hospital treatments, surgical procedures, or clinical diagnostic investigations.

THERAPEUTIC USE EXEMPTIONS

There may be a time during an athlete's career when they have a legitimate medical need to use a prohibited substance or method. GlobalDRO.com allows athletes to search for the prohibited and permitted status of a recommended medication online and is mobile friendly.

If the recommended medication is prohibited, athletes are required to take precautions to not only meet their medical needs but also abide by the anti-doping rules. Although athletes in the Registered Testing Pool (RTP), Clean Athlete Program (CAP), and Education Pool (EP) require a Therapeutic Use Exemption (TUE) in advance of the use of a prohibited substance or method, certain sports are exempted from needing a TUE ahead of time, meaning if they satisfy the TUE criteria, the TUE would automatically apply retroactively, giving them the necessary permission to use a prohibited substance or method. For more information on retroactive TUEs, refer to the Retroactive and Emergency TUEs section. All other athletes, including recreational athletes, should submit a TUE Pre-Check Form (USADA.org/tue-pre-check-form) to USADA to determine if a TUE is required.

After a TUE is granted, it is valid only at a national level. If an athlete becomes an international athlete or competes internationally, the TUE will not be valid unless it is recognized by an athlete's International Federation (IF). If the IF declines to recognize an athlete's TUE, then the presence, use, possession, or administration of the prohibited substance or prohibited method is prohibited. Athletes should reach out to USADA if they are unsure what TUE rules apply to them.

Athletes are strictly responsible for what is found in their body at the time of a drug test, therefore, it is important to understand that predicting the amount of time needed for a medication to clear completely from an individual's system is complicated and unique to an individual based upon the medication and various other factors. For this reason, USADA cannot advise on clearance times for athletes. If an athlete intends to temporarily stop using their medication, they will need to talk with their physician and/or pharmacist about the safety of doing so and potential health impacts. Once athletes have that information, they will need to decide whether the "clearance time" estimated by their physician or pharmacist is sufficient for them to compete. If an athlete is not certain that the medication will have cleared by the time they compete, they are encouraged to apply for a TUE.

USADA also provides a drug reference hotline with an expert available to answer any other questions an athlete may have. The Drug Reference Line is available Monday through Friday, 8 a.m.-4 p.m. MT, by calling (719) 785-2000 and selecting from the prompts, or by emailing drugreference@USADA.org. If an athlete needs a TUE, they should submit the appropriate application, along with all required medical documentation, at least 30 days before use.

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

Please visit USADA.org/tue for more information on TUEs and the application process. All TUEs are evaluated in accordance with the WADA International Standard for TUEs (ISTUE).

How to Apply For a TUE:

1. Download and complete pages 2-4 of the TUE Application form with the treating physician.
2. Provide medical documentation to support the use of the prohibited substance or method (a complete and comprehensive medical history of the diagnosis, symptoms, management strategies, lab results, and a clear statement from the physician indicating why the use of non-prohibited alternatives are not effective in symptom management). All documents must be legible – scanned photographs of documents will not be accepted.
3. Organize your TUE Application in chronological order with all required additional medical information. Decisions can be made faster or slower based on the quality of the medical information submitted and the complexity of the diagnosis. We recommend submitting at least 30 days in advance of any competitions/events.
4. Go to Step 5 of the USADA TUE Application process and use USADA's secure portal to submit all TUE Application files; alternatively, you can submit via fax at (719) 785-2029. DO NOT EMAIL your TUE or any medical information. We recommend that you personally submit the TUE information directly to USADA via the secure portal as you are ultimately responsible for your application.
5. If a TUE is approved, the athlete will receive approval documentation indicating the approval length for the prohibited substance and/or method. The period of validity for a TUE varies among cases. In the event a TUE needs to be renewed, the application must be received prior to the expiration date. All medical information submitted to USADA remains confidential.

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

Retroactive/ Emergency TUE

There are certain instances in an athlete's career when a TUE cannot be obtained before the use of a prohibited substance or method. A retroactive TUE may be considered under any one of the following circumstances:

1. Emergency or urgent treatment of a medical condition; or
2. There was insufficient time, opportunity, or other exceptional circumstance that prevented submission prior to sample collection; or
3. Due to prioritization of sports by the athlete's NADO, the athlete was not required to get a TUE in advance; or
4. The athlete used a substance/medication/method out-of-competition that is prohibited in-competition only.
5. If the previous four retroactive criteria do not apply, in exceptional circumstances, an athlete may apply for and be granted retroactive TUE approval if it would be manifestly unfair not to grant a retroactive TUE. This is called the "fairness" provision.

Athletes and athlete support persons are encouraged to call USADA directly if they have questions regarding a retroactive TUE and if it is necessary for their specific situation.

Emergency Hospital Treatment or Surgery

In any emergency situation, an athlete's health is always the top priority. When an athlete is able, they should inform their physicians and nurses that they are subject to drug testing and will need to get copies of all clinical notes listing the medications that they received during their treatment.

If it provides peace of mind, an athlete or a representative can contact USADA's Drug Reference department to let them know that the athlete is receiving emergency medical treatment. The athlete and their physicians should determine the best medical care, so contacting USADA to approve treatment is NOT necessary. The goal of notifying USADA is to allow us to help an athlete get all the necessary paperwork for a TUE Application if a TUE is needed. Athletes are **not** required to notify USADA at this stage.

When an athlete has time or when they are released from the hospital (whichever comes first), they should be sure to check all the medications on GlobalDRO.com or call Athlete Connect to determine if a TUE is necessary. If a TUE is required, please consider the following as it will aid in the TUE request:

- Provide copies of the hospital medical records outlining the clinical exam, diagnosis, treatment plan, and any prohibited substances and methods administered (ER admission/discharge notes, and a physician's clinical notes detailing the treatment).
- Completely fill out a TUE Application and indicate that this is an "EMERGENCY TUE."
- Provide written personal statement regarding the circumstances surrounding the events as they occurred, along with any other relevant information.

Planned Hospital Visit for Treatment or Surgery

In the event an athlete has a treatment or surgery scheduled ahead of time, the following details are important to keep in mind:

- Inform doctors and nurses that they are an athlete subject to drug testing and that the athlete would like to check the prohibited status of all medications and methods that they may receive during treatment.
- Search the medications on GlobalDRO.com or contact the Drug Reference Line at (719) 785-2000 following the prompts from the menu or by emailing drugreference@USADA.org to find out if any of the medications are prohibited. USADA can also help athletes and support persons determine if any of the methods are prohibited.

REMEMBER: All IV infusions and/or injections of any substance in excess of 100 mL per 12-hour period are prohibited at all times, except for those legitimately received during hospital treatment, surgical procedures, or clinical diagnostic investigations. In all other circumstances, an approved TUE is required in advance of an IV infusion above the limit and/or involving a prohibited substance.

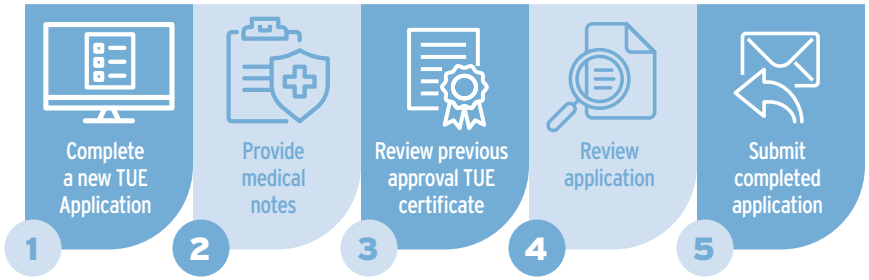
- If the proposed substances or methods are prohibited, athletes should ask their physician if any non-prohibited alternatives are appropriate for the treatment. Non-prohibited alternatives for most medications can be found by searching GlobalDRO.com.
- If athletes need to use a medication that is prohibited at all times, they must apply for a TUE. Submit the TUE to USADA in advance of their treatment involving a prohibited substance or method. On the application, athletes will inform USADA when their surgery (or other treatment) will take place.

REMEMBER: Athletes are responsible for everything that goes into and on their bodies. While checking GlobalDRO.com is an important step, the responsibility ultimately lies with the athlete.

How to Renew a TUE:

All Therapeutic Use Exemptions (TUEs) have an expiration date. If an athlete's TUE is nearing its expiration date or it has already expired, they will need to renew their TUE.

Athletes can follow the steps below and visit USADA.org/TUE for more information on the renewal process.



SECTION TAKEAWAYS

- GlobalDRO.com allows athletes to search for the prohibited status of prescription and over-the-counter medications.
- If a medication is prohibited, athletes in the Registered Testing Pool (RTP), Clean Athlete Program (CAP), and Education Pool (EP) should submit an application for a Therapeutic Use Exemption (TUE) before taking a medication.
  - However, certain sports are exempt from needing a TUE ahead of time, meaning athletes could be granted a TUE retroactively.
- After a TUE is granted, it is valid only at a national level. If an athlete becomes an international athlete, as defined by their International Federation (IF), or competes internationally, the TUE will not be valid unless it is recognized by an athlete's IF.
- If the dosage or medication identified on the TUE changes at any time, the athlete is responsible for connecting with the USADA Drug Reference Team to identify the steps for reapplying/ updating their existing TUE.
- A TUE has an expiration date, and the athlete will be responsible for renewing at the appropriate time.
- If a TUE cannot be obtained before the use of a prohibited substance or method, a Retroactive TUE may be available if certain criteria are met.
- If an athlete experiences an unexpected hospital stay where prohibited substances and/or methods were administered, athletes should contact USADA as soon as possible about the need for a retroactive TUE and be prepared to provide a statement and other relevant information about the circumstances in which the prohibited substances and/or methods were used.
- In the event an athlete has a treatment or surgery scheduled ahead of time, the following details are important for athletes to keep in mind:
  - Inform their doctors and nurses that they are an athlete subject to drug testing and that they would like to check the prohibited status of all medications and methods that they may receive during treatment.
  - Search their medications on GlobalDRO.com or contact the Drug Reference Line at 719-785-2000 following the prompts or by emailing drugreference@USADA.org to find out if any of the medications are prohibited. USADA can also help determine if any of the methods are prohibited.

SUBSTANCE CLARIFICATIONS

Regenerative Medicine: Stem cell injections and PRP treatments

As the field of regenerative medicine has advanced in recent years, athletes have increasingly turned to therapies that utilize biological substances, such as stem cells and amniotic or umbilical cord derived tissues to heal sports injuries faster. As these products and treatments vary widely, they may or may not be prohibited, depending on how the cellular material and its constituents are manufactured, purified, manipulated, or modified for use. The WADA Prohibited List states that it is prohibited to use both normal and genetically modified cells, in any way, if the process causes performance enhancement. Based on these regulations, athletes should be aware that the use of regenerative medicine products or treatments cannot justify a positive doping test if any prohibited substances are identified in a sample. Further, in the U.S., the FDA has issued warnings to consumers about some regenerative therapies because the safety and benefit of almost all these products are so far unproven.

Before administering any regenerative medical treatment, athletes and athlete support personnel should confirm the prohibited or permitted status by calling USADA's Drug Reference Line at (719) 785-2000 following the voice prompts, or emailing drugreference@USADA.org.

Plasma Donation

Plasma donation by plasmapheresis performed in a registered collection center is now permitted and does not require a Therapeutic Use Exemption (TUE) as of January 1, 2024. Previously, plasmapheresis was prohibited under M1. Manipulation of Blood and Blood Components because blood components are removed and then reintroduced to the circulatory system. However, donation by athletes of plasma or plasma components by plasmapheresis by an official registered blood donation facility is no longer prohibited, allowing athletes who donate for humanitarian or other personal reasons to do so. Athletes can donate whole blood, or donate plasma by plasmapheresis without requiring a TUE. It's best practice to keep a record of your donations in case any medical records are requested.

Clinical Trials

Before participating in a clinical trial, athletes need to call or email the USADA Drug Reference Line to determine if a Therapeutic Use Exemption (TUE) is required. A drug in development and undergoing clinical trials could be considered prohibited if it falls into one of the categories of banned substances on the WADA Prohibited List, or if it has the potential to be performance enhancing. To contact the Drug Reference Line, please call (719) 785-2000, following the prompts, or email drugreference@USADA.org.

DIETARY SUPPLEMENTS

No organization, including USADA, can guarantee the contents or safety of any dietary supplements. Consequently, athletes always assume some risk of testing positive for prohibited substances when they use supplements.

As always, athletes are strictly liable for substances they ingest, including those consumed through dietary supplements. It is very important for athletes who are considering using supplements to be aware of the potential risks associated, including:

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

Athletes also need to be aware that manufacturers may misidentify prohibited substances on labels, or they may omit prohibited substances from labels altogether. Because dietary supplements are regulated in a post-market manner, the Food and Drug Administration (FDA) does not analyze the safety, efficacy, or contents of supplements before they are sold to consumers.

There are many products on the market currently that aren't labeled as dietary supplements but are instead labeled as 'for research purposes only', or may not have any kind of label. As a reminder to athletes and athlete support persons, these products should be considered risky from both a health and anti-doping perspective.

Be an Informed Consumer

- Athletes should always investigate the source of the product. Never use a product unless you have checked the ingredients against the Prohibited List and fully investigated the source of that product. If you have any questions, always contact USADA before using the product.
- Never use a pill, capsule, powder, drink, injectable, or other product that has been removed from its packaging by anyone other than you.
- Use extreme caution when considering substances from supplement stores, vitamin stores, and online suppliers.
- Be aware of red flag marketing claims and never use products that make claims about weight-loss, sexual enhancement, muscle-building, testosterone-boosting, or pre-workout energy boosting.
- It is risky to use products from a seller that also sells products containing prohibited substances, markets to bodybuilders, or makes extreme claims about the performance-enhancing benefits of the product.
- No product should ever be used that is advertised as being for research purposes only, or not for human consumption.

Have questions about dietary supplements?

USADA has created an online resource designed to provide athletes and support persons with the best possible information to evaluate the risks associated with the use of supplements. From product contamination to issues with product labeling, Supplement Connect provides athletes and support persons with information that will help them **Realize** that safety issues exist, **Recognize** risk when they see it, and **Reduce** their risk of testing positive or experiencing harmful health effects from the use of dietary supplements. To learn more about the dietary supplement industry and access valuable information, including the TrueSport Supplement Guide, visit USADA.org/supplement-connect.

SUPPLEMENT CONNECT
Your hub for supplement resources.

Third-Party Certification

If an athlete chooses to use dietary supplements despite the known risks, USADA recommends the use of products that have been certified by a third-party. To be clear, using certified products reduces, but does not eliminate, the health and anti-doping risk athletes assume when using a supplement. To find out which third-party certifications USADA currently recognizes, visit USADA.org/supplement-connect.

High Risk List

USADA has compiled a growing list of products that are considered to be risky to athletes and consumers. The High Risk List can be accessed by visiting USADA.org/supplement-connect.

Where is Your Supplement?

SECTION TAKEAWAYS

- Dietary supplements are regulated in a post-market manner, so the Food and Drug Administration (FDA) does not analyze the safety, efficacy, or contents of supplements before they are sold to consumers. Athletes need to understand that they are strictly liable for substances they ingest.
- Supplement Connect is USADA's hub to provide athletes and support persons with information on supplements.
- USADA recommends athletes use third-party certified products to reduce their risk from supplements.

DOPING CONTROL PROCEDURES

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

Testing and education are both important factors to maintaining an effective anti-doping program, which is why all U.S. athletes who are credentialed for the Olympic, Paralympic, Pan American, Parapan American, and Youth Olympic Games are required to undergo anti-doping education in the months prior to the event, in accordance with the United States Olympic and Paralympic Committee (USOPC) National Anti-Doping Policy. All athletes appointed to a U.S. team may also be subject to additional testing throughout the Games by the International Olympic Committee or International Paralympic Committee (IOC/ IPC) or the Games Organizing Committee, which is why it is important athletes understand their rights and responsibilities.

The USADA anti-doping program utilizes in-competition (event) testing, as well as no-notice, out-of-competition testing, to help protect the rights of clean athletes and maximize unpredictability and the deterrent value of testing. The standard definition for "in-competition" is the period commencing at 11:59 p.m. on the day before a competition in which the athlete is scheduled to participate, through the end of the competition and the sample collection process related to the competition. Even if an athlete used a substance or method prohibited only in-competition, but used it out-of-competition, it could still be evident in their sample during the in-competition period. Athletes are strictly liable for what is found in their sample at the time of the test, regardless of their intent.

Out-of-competition testing is defined as testing at all other times and locations, such as an athlete's home or training location. Athletes are subject to both urine and blood testing 365 days a year and tests can occur at any time and any place. The sample collection process is designed to be safe, consistent, and as comfortable as possible for athletes.

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

SELECTION

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

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

All athlete selection and testing is conducted in accordance with WADA's International Standard for Testing and Investigations (ISTI).

URINE AND BLOOD SAMPLE COLLECTION EQUIPMENT

There are a variety of sample collection kits used by Anti-Doping Organizations (ADOs) across the world. Though the kits may look different, all sample collection equipment in use is WADA compliant. USADA currently uses SAFESystem by InnoVero. Below are the ways in which these sample collection kits ensure efficacy and safety:

- The SAFESystem A and B bottles are made from a proprietary polymer material, which is not only stronger and lighter than glass, but also contains tamper-evident and anti-counterfeit qualities to deliver state-of-the-art security.
- The bottle openings are approximately three time larger than other kits, making it much easier for athletes to distribute samples into the A and B bottles.
- The bottles feature a trihexagonal shape intended to improve grip and usability.
- The locking mechanism is entirely transparent and fully engages in just three clicks every time.
- Unique alpha-numeric IDs ensure the anonymity of athletes' samples.
- The SAFESystem features a partial sample vault and security tag to ensure the integrity of partial samples until the full sample is ready for processing.
- The SAFESystem is a universal collection kit and can secure both urine and blood samples, eliminating the need for two different kits and improving the consistency of collections.
- The SAFESystems Blood security kit is an additional way DCOs may seal and transport blood samples to a WADA accredited laboratory.

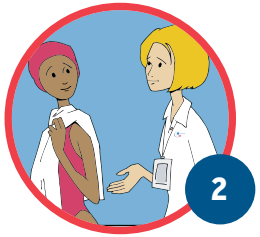
SAMPLE COLLECTION PROCESS

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

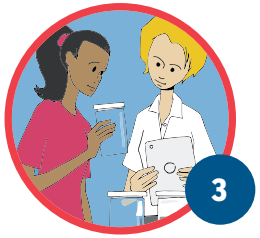
The following information provides an overview of the sample collection process. Tests can be conducted by USADA, another National Anti-Doping Organization (NADO), the International Federation (IF) for the athlete's sport, WADA, and/or other third-party sample collection agencies.

SAMPLE COLLECTION PROCESS – URINE

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

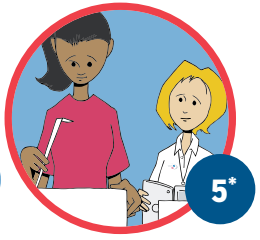


Following notification, athletes must stay within direct observation of the DCO or chaperone. Athletes should report to the doping control station (in-competition), or to an appropriate location (out-of-competition) immediately, unless a valid reason‡ is discussed with, and permitted by, a DCO or chaperone.

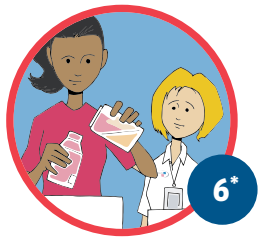


Athletes will be asked to select a sealed sample collection vessel from a choice of vessels. They will check and inspect the collection vessel to ensure that it has not been tampered with before opening the vessel.

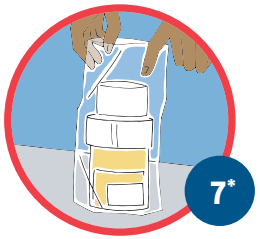
Athletes will be required to provide a urine sample of 90 mL under direct observation of a DCO or witnessing chaperone of the same gender. Minor athletes are encouraged to be accompanied by a representative of their choice. If 90 mL are not immediately provided, athletes will use additional collection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



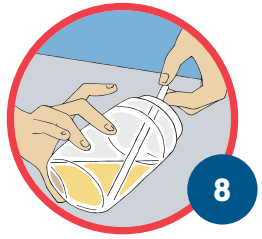
Athletes will be offered a choice of sealed sample collection equipment (which includes A sample and B sample bottles). They should check and inspect the equipment thoroughly prior to use.



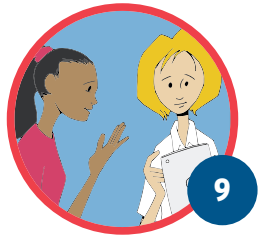
Athletes will then divide their sample between the A and B sample bottles as instructed and seal them. The DCO will not handle any of the equipment during the procedure unless it's by athlete request or if an athlete provides a partial sample, in which case the DCO will retain control of the sealed partial sample. Otherwise, athletes are to maintain direct observation and control of their sample until the sample is sealed.



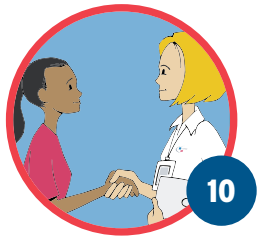
Once the sample is sealed, athletes will be asked to place the A and B sample bottles into plastic transport bags and back into the original box for secure transport to the laboratory.



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



When instructed by the DCO, athletes will declare any prescription/non-prescription medications, injections, blood transfusions, and/or dietary supplements they are taking on the Doping Control Form (DCF), along with details of any Therapeutic Use Exemptions (TUEs) they have obtained. Finally, if the athlete or representative would like to include any additional comments, these can be included on the supplementary report form.

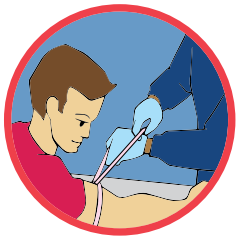


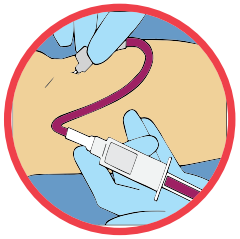
Athletes should check the entire DCF thoroughly to ensure that the information is correct before signing. Their name is not on the documentation that goes to the laboratory. The laboratory reports all results based on the unique sample code numbers to ensure the athlete's anonymity is protected. Athletes will then receive a copy of the test session documentation. At this time, the Athlete Evaluation Form will be shared with the athlete so that they can provide feedback or comments, if desired. The sample may be subject to long-term storage and further analysis at any time at USADA's discretion.

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

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

SAMPLE COLLECTION PROCESS – BLOOD





Blood samples collected by USADA may be analyzed for prohibited substances and/or methods and/or indirect biomarkers of doping that in some cases may not be detectable in urine, including, but not limited to those used in the Athlete Biological Passport (ABP).

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

- Some USADA DCOs will be qualified phlebotomists, but if they are not, a certified and/or licensed phlebotomist, called a blood collection officer (BCO), will perform the blood draw.
- To control for blood plasma volume changes, the athlete will be asked to remain seated for at least **10 minutes** prior to providing a blood sample. If the athlete has exercised within the last two hours, they will need to wait until **two hours** after completion of exercise before their blood sample can be collected.
- The BCO or DCO will select an area, typically the non-dominant arm, from which to draw the blood. The amount of blood drawn, which is up to approximately two tablespoons, is unlikely to affect performance.
- Athletes will be asked supplementary questions specific to blood collections that are important to the analysis of the sample. For example, they may be asked about their exposure to high altitudes or extreme environments, recent exercise, or blood loss.

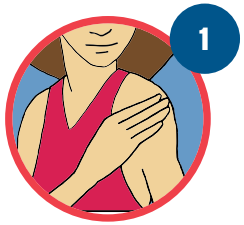
SAMPLE COLLECTION PROCESS – DRIED BLOOD SPOT (DBS)

While urine testing remains the most common testing method, blood samples are a critical component of anti-doping programs because they allow laboratories to detect prohibited substances and methods that are not otherwise detectable in urine samples. Over the years, anti-doping experts have been conducting research to make blood collection easier for both anti-doping organizations and athletes. Dried Blood Spot testing, or DBS, is one of the latest and most innovative methods for collecting blood samples.

An FDA-regulated sterile collection device is placed on an athlete's skin and allows USADA to collect a series of very small capillary blood spots in a near painless way with the push of a button. In general, the process takes about 1-5 minutes, and the device collects about 25 times LESS volume than traditional blood collection methods. Athletes report lower levels of pain with the DBS device compared to collecting blood with a finger stick or standard venipuncture procedure. After collection, DBS samples can be transported without refrigeration and can be stored for longer periods of time, leading to greater opportunities for blood collection and reanalysis of samples. More athletes should expect to experience DBS collections, in combination with traditional urine and blood collections, in the near future as USADA continues to collaborate with the World Anti-Doping Agency and global partners to incorporate DBS collections worldwide.

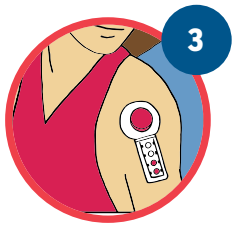
While DBS provides a complementary testing method to those already in use, urine, whole blood, and serum (collected venously via venipuncture), there are some limitations. Due to the relatively small volume of blood collected from DBS testing, it remains necessary to analyze each sample for a finite list of substances. However, as collection devices improve, it is anticipated that labs will be able to analyze each sample for a larger list of prohibited substances. Additionally, while the device is science-forward and precise, Dried Blood Spot (DBS) cannot fully replace venous blood collections, as samples for the purposes of the Athlete Biological Passport still need to be collected.

Refer to the step-by-step process below to learn more:



An outside portion of the upper arm needs to be accessible for the DBS draw. If the device cannot be placed on the arm for any reason, it will be placed on the athlete's stomach. Warming the skin by vigorously rubbing the arm can encourage skin blood flow and aid collection. Unlike a standard venous blood draw, the athlete does not need to be seated for 10 minutes prior to collection, and there are no restrictions around prior exercise. The skin will be cleaned with an alcohol swab and left to air dry.

The Tasso M20 device will be applied to the clean skin and the athlete (or DCO if preferred) will push the red button to start the collection. There is a small prick, like a rubber band snapping against the skin, which means the Tasso M20 device is working properly.



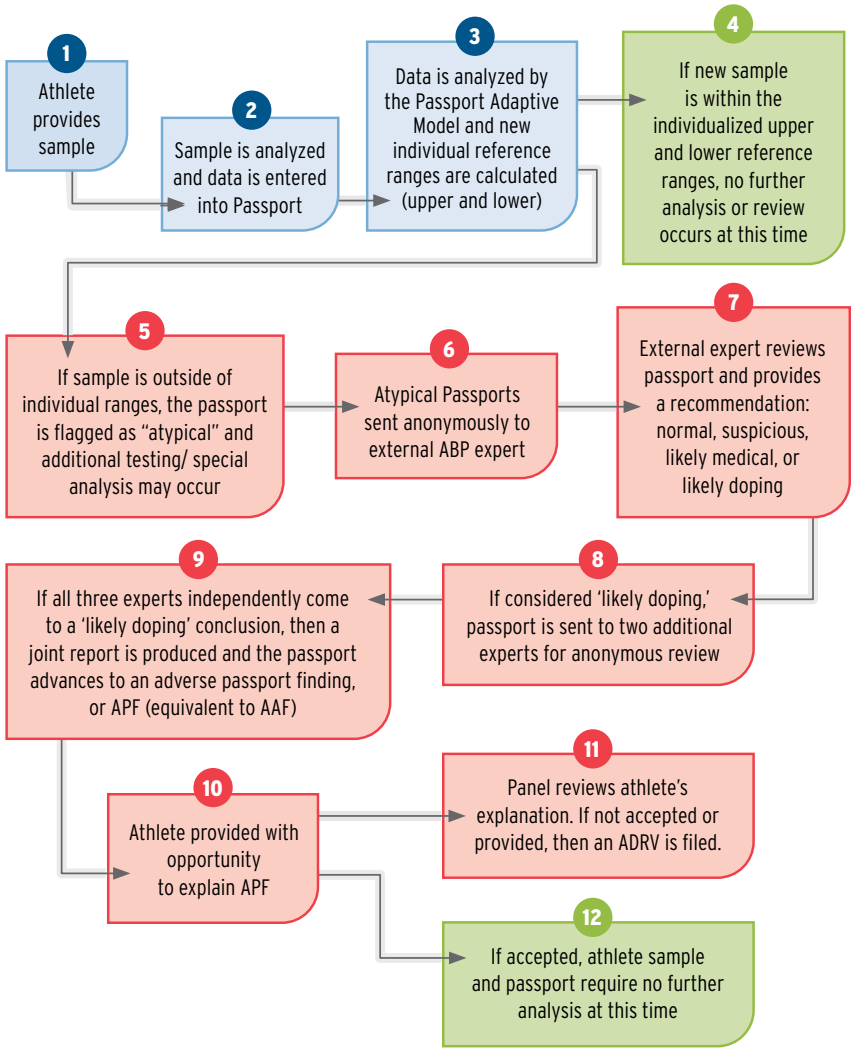
The collection is complete when all four spots are red, which may take 3-5 minutes. The device is then removed, and a small bandage is applied to the arm.

The collection cartridge is removed from the collection device by placing the tongue of the collection device into the groove of the security kit and pushing down. The cartridge is placed into the compartment of the security kit with the white tab facing to the left. Once the cartridge has been vented by removing the tape, the black foam is removed, and the security kit can be closed. A tamper evident security seal is applied.

Finally, the security kit is placed inside a light-proof bag and is ready for shipping.

ATHLETE BIOLOGICAL PASSPORT (ABP)

The Athlete Biological Passport, or ABP, monitors selected biological markers in urine and blood samples over time that may indirectly reveal effects of doping on the body. The ABP allows anti-doping organizations to track individual athlete data and utilizes a mathematical model to monitor and analyze patterns and variations that may indicate the use of performance-enhancing drugs or methods. Passports that are flagged by the model as atypical are investigated by internal and external experts to establish whether the profile can be explained by normal physiology, a possible medical condition, or a prohibited method. An athlete's ABP data can also be used to complement traditional doping control approaches, such as conducting targeted anti-doping tests on athletes with atypical, or suspicious, characteristics, providing rationale for special analyses, or establishing an anti-doping rule violation.



SPECIAL ANALYSIS

In addition to the data provided by the ABP, USADA utilizes special analysis testing, to include human growth hormone (hGH), erythropoietin (EPO), and Carbon Isotope Ratio (CIR)/Isotope Ration Mass Spectrometry (IRMS). USADA may instruct the lab to perform these analyses at the time of sample collection or may request the analysis at a later date based on other results or information.

POTENTIAL SIDE EFFECTS

Obtaining blood via venipuncture, most commonly from a superficial vein in the arm, allows blood to be collected for anti-doping testing for substances and methods not otherwise detectable in urine. BCOs use sterile blood collection equipment and follow strict infection and hygiene control procedures during blood collections to minimize risk of infection. Complications or adverse health effects from a blood draw are rare but can include fainting, dizziness, bleeding, bruising or swelling at the puncture site (hematoma), pain, nerve injury, infection, and arterial puncture or laceration. Site reactions such as bruising or swelling can be minimized by applying constant pressure to the collection site for at least five minutes, avoiding strenuous exercise for at least 30 minutes, and keeping the bandage on for at least two hours. If an athlete has ever experienced complications or adverse health effects from a past blood draw, they are advised to inform the USADA DCO before the blood draw begins.

DECLARATION OF USE DOCUMENTATION

Athletes are required to complete specific doping control documentation during every sample collection session. Part of this process is accurately declaring any and all medications, methods, or supplements that an athlete has ingested or used in the specified time frames.

Providing complete and accurate information in the declarations portion of the doping control documentation is critically important and to an athlete's advantage– it could mean the difference between a rule violation and a lengthy period of ineligibility, or no period of ineligibility.

For example, if an athlete has received an intravenous injection or infusion, they should declare the date received and the total volume of that infusion or injection in milliliters (mL). The same goes for prescription and over-the-counter medications, as well as dietary supplements. The name, dosage amount consumed or ingested, the time the substance was taken, and the frequency are important details for the documentation. Even if an athlete has been granted a Therapeutic Use Exemption, or TUE, for an illness or condition, the permitted substances and/or methods and existence of a valid TUE should be declared in the doping control documentation. It is important to note that under the World Anti-Doping Code, athletes are strictly liable, meaning they are ultimately responsible for what is in their systems.

An athlete's declaration is considered evidence of the athlete's intent to comply with the rules, especially if it leads to a finding that the athlete has not intended to cheat. On the other hand, when an athlete fails to disclose a substance on their doping control form and tests positive, the failure to disclose can cast doubt on the athlete's efforts to demonstrate that they were trying to comply with the rules, and this may result in a longer period of ineligibility. Therefore, it is always in an athletes' best interest to declare all supplements, methods, and medications – both prescription and non-prescription – during every sample collection process.

While the declaration process might seem repetitive, all athletes are required to declare substances and methods each time they are tested by USADA and other testing agencies. These anti-doping protocols are designed to protect athletes and sport so all athletes can compete clean and win. Athletes are encouraged to embrace the process and take it upon themselves to fully research and disclose every product they use because this is one of the best ways to ensure that they are competing clean.

SAMPLE SHIPMENT AND NOTIFICATION

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

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

PROVIDING FEEDBACK

Athletes have the right to provide feedback about their USADA collection session. After each session, a USADA DCO will provide the athlete with an evaluation form to provide feedback related to the collection session. If documentation is conducted digitally, USADA DCOs will inform athletes that a link to an Athlete Evaluation Form will be available at the bottom of the email they receive after testing. USADA encourages athletes to provide feedback about their experience, and every form that is submitted to USADA is reviewed.

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

Remember, athletes can always provide feedback by calling USADA directly at Athlete Connect (719) 785- 2000 or confidentially through USADA's Play Clean Tip Center 1-877-752-9253.

PAPERLESS SAMPLE COLLECTION

USADA's Doping Control Officers (DCOs) predominantly use a paperless format (from a handheld device) to document a test session and sample collection on the Doping Control Official Form (DCF). This paperless system allows for secure and fast transmission of athlete information. Not only does the DCF on the device provide excellent security, but it also allows athletes to quickly access their own testing data through their secure online USADA account.

GIVING CONSENT FOR RESEARCH

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

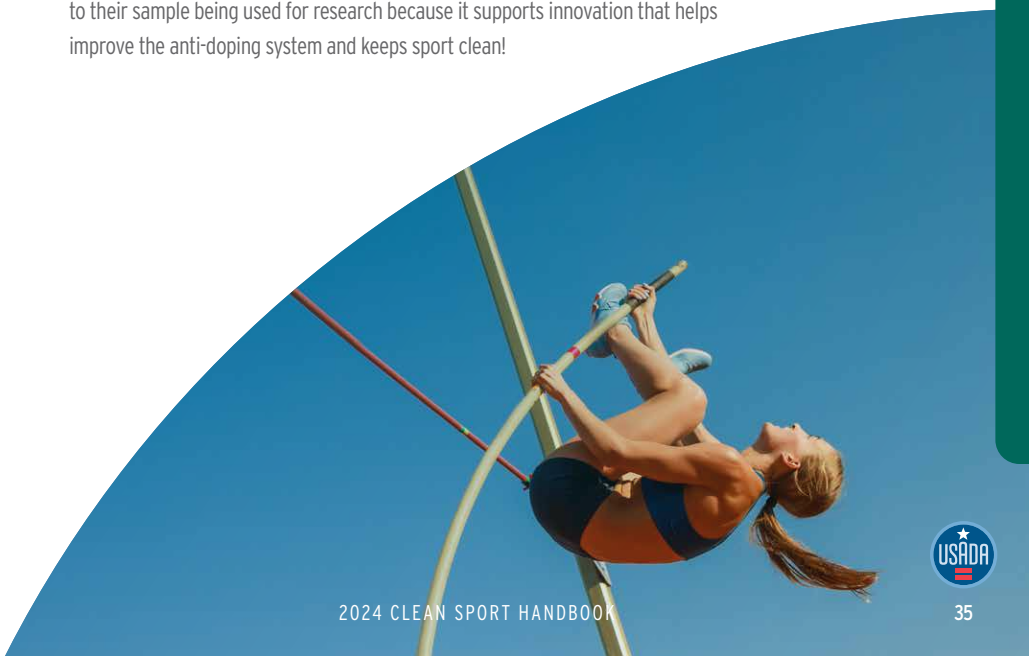
During the drug testing process, a DCO will ask about the athlete's consent for research. This will be described verbally but ultimately involves an athlete checking "I Accept" and signing the Doping Control Form under the following text:

- Consent for Research (optional): In order to combat doping in sport, athletes can choose "YES" on the Doping Control Forms to consent to research. At the time of consent, athletes will be required to sign in the space provided to agree that their sample may be used for anti-doping research purposes. When all analyses have been completed and the sample would otherwise have been discarded, the sample may then be used by any WADA-accredited laboratory for anti-doping research of any type, provided that it can no longer be identified as an athlete sample.

When an athlete voluntarily chooses to contribute their sample to anti-doping research, all identification is removed so that the sample can never be traced back to the particular athlete. This anonymous sample can then be used in various anti-doping research projects such as testing newly developed laboratory instruments, calibrating a new technique, or developing normal ranges for the athlete population. This research is crucial to keeping anti-doping science on the cutting edge, which plays a major role in our ability to protect clean sport. Without access to real samples, anti-doping science cannot progress.

Once routine anti-doping analyses have been completed, the analyzing laboratory is required by the anti-doping rules to store the sample for a minimum of three months. After this time, the sample may be discarded or USADA may request to store the sample for up to 10 years and may re-analyze it at any point if, for example, a new technique is developed to allow analysis for a substance prohibited at the time of collection. All samples must be discarded after 10 years. Regardless of how long the sample is stored, if the athlete has provided consent for research, then the anonymized sample may be used for research before it is discarded.

An athlete's consent to have their sample used for anti-doping research is entirely voluntary and does not affect the selection or frequency of future testing. USADA encourages all athletes to consent to their sample being used for research because it supports innovation that helps improve the anti-doping system and keeps sport clean!



MINOR ATHLETES (UNDER THE AGE OF 18)

Due to the sensitivity of a minor being involved in the sample collection process, extra precautions are taken. When USADA tests an athlete who is a minor (under the age of 18), USADA urges a minor athlete to appoint a representative to accompany them at all times during the sample collection process, including in the washroom area. The representative will not witness the passing of the sample but may witness the observing DCO or chaperone. Additionally, the DCO will have a second sample collection person present throughout the sample collection process.

ATHLETES WITH IMPAIRMENTS

Athletes with an impairment requiring extra assistance are strongly encouraged to have a representative present throughout the sample collection session.

As outlined in the World Anti-Doping Code, athletes with an impairment may request slight modifications to the sample collection process.

- An athlete with restricted mobility or restricted manual dexterity may ask the athlete representative or the DCO to assist when handling equipment, splitting the sample, or completing doping control forms.
- Athletes with a visual impairment may always be accompanied by an athlete representative during the sample collection, including to the washroom area; however, the representative will not witness the passing of the sample. The athlete representative or the DCO may read the doping control form (DCF) to the athlete, and they may ask the athlete representative to sign the doping control form (DCF) on the athlete's behalf.
- Athletes with an intellectual impairment may always be accompanied by an athlete representative during the sample collection procedure, including to the washroom area; however, the representative will not witness the passing of the sample.
- Athletes using condom drainage or indwelling catheter drainage should remove the existing collection bag and drain the system so that a fresh sample can be obtained as soon as possible after notification and under observation of the DCO.
- Where possible, the existing urine collection or drainage system should be replaced with a new, unused catheter or drainage system prior to the sample collection.
- Athletes who self-catheterize may use their own catheter to provide a sample and the new catheter should be produced in tamper-evident wrapping.

WHO CONDUCTS TESTING?

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

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

TESTING FAQS

Who can test an athlete?

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

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

Overall, testing jurisdiction can be granted to another organization for up to 12 months, even if an athlete is no longer included in a USADA pool.

Who is subject to testing?

USADA believes that all athletes, regardless of competition level, have the right to compete on a clean and level playing field and therefore identifies the following scenarios where athletes are subject to testing:

- Athletes included in the USADA Registered Testing Pool (RTP), the USADA Clean Athlete Program (CAP), or the USADA Education Pool (EP);
- If a U.S. athlete submits, or is required to submit, a Whereabouts Filing to USADA or an IF within the previous twelve (12) months and has not given their IF, NGB, and USADA written notice of retirement;
- Are a member or license holder of, or under contract with, an NGB or sports organization for whom USADA is authorized to conduct any aspect of doping control;
- Participate in sport including by registering or preparing for or participating in an event or competition in the United States or which is organized or sanctioned by the USOPC, an NGB or a sport organization for whom USADA is authorized to conduct any aspect of doping control; and
- Have been previously sanctioned by USADA or other Anti-Doping Organization (ADO) for an anti-doping rule violation, and are serving a period of Ineligibility on account of an anti-doping rule violation and who have not given prior written notice of retirement from all sanctioned Competition to the applicable IF, NGB, and USADA, or the applicable foreign anti-doping agency or foreign sport association.

While the information provided in this section provides some criteria, it is not a complete list of those subject to testing. For a complete list, please reference the U.S. Anti-Doping Agency Protocol for Olympic and Paralympic Movement Testing.

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

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

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

USADA's out-of-competition testing plan is designed to strategically maximize resources by allocating tests based on specific factors in accordance with the WADA International Standard for Testing and Investigations (ISTI). Tests are then conducted throughout the year when out-of-competition testing is most effective, and according to selection criteria and incoming data, including previous and current event results and/or world and national rankings.

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

How is an athlete notified for testing?

A Doping Control Officer (DCO) or a notifying chaperone will notify an athlete of their selection for doping control and will provide them with their USADA credentials. The athlete will then be asked to acknowledge in writing on the Doping Control Official Form (DCF) or Athlete Notification Form that they were notified.

A DCO or chaperone can notify athletes at any time and any location, including their home, training facility/area, work, school, etc. If an athlete refuses to provide a sample, they are subject to an anti-doping rule violation and up to a four-year period of ineligibility.

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

Can athletes eat and drink liquids after being notified for testing?

After notification, the DCO should advise the athlete that should they choose to consume food or fluids prior to providing a sample, they do so at their own risk. The DCO should also advise the athlete not to hydrate excessively, since this might delay the production of a suitable sample.

When and where does an athlete report for testing?

In-competition testing: An athlete, their representative (if applicable), and the notifying chaperone will report to the on-site doping control station immediately, unless there is a valid reason for delay and it is approved by the DCO, which may include:

1. A medal ceremony
2. Media commitments
3. Medical obligation
4. Warming up and cooling down
5. Competing in further events
6. Arranging for an athlete representative and/or language specialist

Out-of-competition testing: A safe, secure, and private location (e.g., a home or training facility) will be used as the doping control station during the sample collection session.

Sample collection documentation may be started at the initial location of notification.

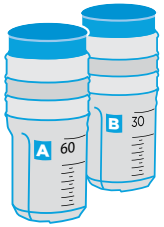
What kind of information accompanies the urine and/or blood sample to the lab?

Whether it's an in-competition or out-of-competition test, every athlete sample sent to a WADA-accredited laboratory includes an abbreviated copy of the DCF and Declaration of Use documentation, which does NOT include the athlete's name. The information on the laboratory copy of the DCF and Declaration of Use contains:

- Athlete gender
- The type of test (in-competition or out-of-competition)
- The athlete's sport and discipline
- The type of the sample (urine, blood) and required laboratory information on the sample (volume, specific gravity, time sealed)
- The sample code number that matches the numbers on the sample collection kit
- Medications and supplements taken within the previous seven days
- The name of the testing authority, sample collection authority, and results management authority

What happens to my sample?

To help ensure a level playing field globally, elite athletes participate in no-notice, in-competition and out-of-competition urine and blood testing in accordance with the World Anti-Doping Agency's (WADA) International Standards. The sample collection and analysis process are designed to ensure security of the sample during and after collection, as well as sample anonymity during the analysis process.



1 SAMPLE COLLECTION

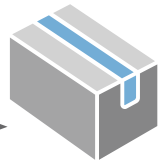
The Doping Control Officer (DCO) is responsible for managing the sample collection process to protect the integrity of the sample throughout the collection process.

The DCO first notifies the athlete and initiates the sample collection session.

The DCO is responsible for observing the athlete as they provide a sample, assisting with paperwork, and instructing the athlete on how to divide and securely seal the sample into A & B parts.

2 SAMPLE TRANSPORTATION

Following the collection process, samples are shipped to a laboratory in the global network of WADA-accredited laboratories, which all operate independently of sample collection agencies



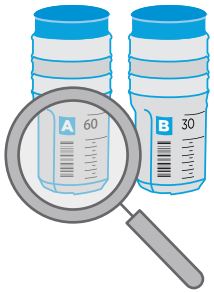
Only authorized commercial couriers are used.

Sometimes there are special sample transport requirements to ensure the stability of the sample, such as temperature control for blood samples.

3 SAMPLE INSPECTION

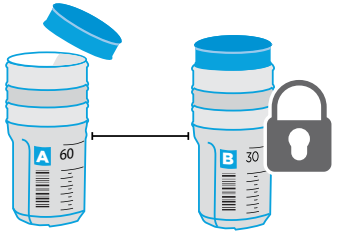
After the sample arrives at the lab, it's inspected for any evidence of tampering or leaking that may impact the integrity of the sample.

Because of the anonymous sample code number, there is no way for the lab to identify which athlete provided the sample.



4 SAMPLE ANALYSIS

The lab then securely stores the B sample and completes preparation procedures for the A sample analysis.



Then, lab technicians open the A bottle and remove small volumes of the sample for specific analysis procedures. These procedures screen for the presence of prohibited substances, their metabolites, or the markers that indicate the use of a prohibited substance or method.

Because of the large number of substances and methods on the WADA Prohibited List, analysis requires extremely sensitive instruments that can detect substances and metabolites in a sample down to parts per billion amounts. That's less than a sugar cube being added to an Olympic size swimming pool!

5 SAMPLE RESULTS

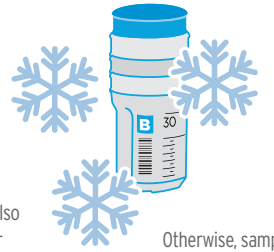
If a sample screens positive for a prohibited substance or method, the lab will always perform robust and targeted confirmation procedures using the A sample. A minimum of two scientists certify all positive tests before delivering a report.

After analysis is completed, the lab reports the results to the results management authority.

All athletes are also afforded the right to have their B sample analyzed in the event of a positive test. Athletes may attend the B sample opening and analysis in person, or appoint a representative. Alternatively, athletes can waive their right to have their B sample analyzed.

6 SAMPLE STORAGE

For deterrence purposes, anti-doping agencies may also request that the lab keep frozen samples beyond the required period of three months, and even up to 10 years. A sample can be reanalyzed at any time using new, state-of-the-art detection methods.



Samples can also be retained for anonymous research with the athlete's consent.

Otherwise, sample labels are destroyed, and the samples disposed of, after the required three-month storage period.

7 SAMPLE DISPOSAL

Samples are disposed of at the conclusion of the sample storage period.

Now that you've seen what happens to a sample, it's important to remember that the entire process is based on robust international standards that are designed to protect athletes' rights and ensure accuracy and anonymity.

ATHLETE RIGHTS AND RESPONSIBILITIES

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

When selected for testing, athletes have the *right* to:

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

During a test, athletes are *responsible* for:

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

** NOTE: As defined by the Code: Evading Sample collection; or refusing or failing to submit to Sample collection without compelling justification after notification by a duly authorized Person is an anti-doping rule violation; tampering or attempted tampering shall include, without limitation, offering or accepting a bribe to perform or fail to perform an act, preventing the collection of a Sample, affecting or making impossible the analysis of a Sample, falsifying documents submitted to an Anti-Doping Organization or TUE committee or hearing panel, procuring false testimony from witnesses, committing any other fraudulent act upon the Anti-Doping Organization or hearing body to affect Results Management or the imposition of Consequences, and any other similar intentional interference or Attempted interference with any aspect of Doping Control.*

*** If an athlete provides a partial sample, the DCO will retain control of the sealed partial sample.*

SECTION TAKEAWAYS

- Athletes are subject to testing in both in-competition and out-of-competition periods.
- Athlete testing is based on strategic planning and criteria.
- Athlete's may be required to provide a urine sample (90 mL), a blood sample (venous and/or DBS), or both urine and blood samples.
- Once the sample has been analyzed by a WADA-accredited laboratory, the athlete should expect notification from USADA stating the analysis has been completed.
- Modifications to the sample collection process may be made for athletes with impairments.
- Athletes are expected to know and understand their rights and responsibilities.

USADA WHEREABOUTS TESTING POOL

To maximize testing resources and minimize the burden on athletes, USADA has created a Registered Testing Pool (RTP) and a Clean Athlete Program (CAP). Athletes in the two pools are subject to varying compliance criteria. The following sections outline the different requirements for each pool.

At least once a year, athletes in either pool must also complete Athlete's Advantage®, an online education tutorial that provides information related to anti-doping requirements for RTP and CAP athletes. Athletes must complete the tutorial prior to providing and/or confirming personal information.

USADA REGISTERED TESTING POOL

Athletes who have been identified and notified of their inclusion in the USADA Registered Testing Pool (RTP) are responsible for maintaining current and accurate Whereabouts information at all times. This Whereabouts information is used to facilitate out-of-competition testing, which is critical to an effective anti-doping program. Maintaining thorough and accurate Whereabouts information helps USADA provide athletes with the best anti-doping program possible.

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

The RTP selection criteria is established by USADA. Athletes will receive an email notification from USADA if they are in the RTP, as well as notices about when they need to provide Whereabouts.

Why might an athlete be added to the RTP?

The requirements to include athletes in a Registered Testing Pool or other testing pool are driven by the WADA International Standard for Testing and Investigations (ISTI) available on the WADA website. Some reasons are:

- Athletes ranked highly in their sport, competing as an international-level athlete, part of a national team, receiving USOPC funding, living or competing abroad, etc...;
- Athletes in high risk sport-disciplines for doping based on a sport-specific risk assessment;
- Athletes serving a period of Ineligibility or a provisional suspension;
- Athletes who were high priority for testing before they retired from the sport and who now wish to return from retirement to active participation in the sport;
- Other individualized factors that require out-of-competition testing on an athlete, thus requiring Whereabouts information.

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

If an athlete no longer meets the requirements to be included in the RTP, or has provided written notification of their retirement to USADA, their National Governing Body (NGB), and their International Federation (IF), they will be notified via email of their pool removal and the date on which they no longer need to provide Whereabouts information.

RTP WHEREABOUTS REQUIREMENTS

Under the International Standard for Testing and Investigations (ISTI) and USADA Whereabouts Policy, athletes in the USADA RTP must submit and maintain accurate and complete, Whereabouts in order for Anti-Doping Organizations (ADOs) who have authority to test, may effectively plan out-of-competition testing.

Whereabouts compliance requires athletes to:

- File complete Whereabouts which at a minimum includes: current and accurate contact information, a daily residence, a daily overnight location, regularly scheduled activities (e.g. training, work, school, travel, competition/event schedule, etc.), and a designated 60-minute time slot between 5 a.m. and 11 p.m., during which athletes must be available and accessible for testing.
  - Please note, athletes must ensure that Sample Collection Personnel (SCP) can access their selected 60-minute location without advance notice or the use of phone calls. If your 60-minute window is designated at a location where access must be granted, you must provide instructions in your Whereabouts on how to gain access (e.g., a gate code) without the use of phone calls.
- Review any updates they have made and remove any old or conflicting information.

How to Submit Whereabouts Information

Athletes should use the following online systems to submit Whereabouts filings. USADA will provide athletes with a username and password to access the online Whereabouts system. For questions about updates, or username or password issues, call Athlete Connect at (719) 785-2000 or toll-free at (866) 601-2632, or email athleteconnect@USADA.org.

Online: Login to Athlete Connect at USADA.org

Athlete Connect App: Update Whereabouts instantly through the web-based app

Quarterly Filing Deadlines

Whereabouts filings must be submitted quarterly by the following deadlines:

YEARLY QUARTERS:		SUBMISSION DEADLINES:
Q1	January 1 - March 31	December 15
Q2	April 1 - June 30	March 15
Q3	July 1 - September 30	June 15
Q4	October 1 - December 31	September 15

Whereabouts Updates

When an RTP athlete's schedule changes, they must submit an update as soon as the change occurs. For example, if an athlete books travel for a competition, they must submit an update.

If an athlete cannot access the appropriate system for updating, they may update their Whereabouts using the following options:

Phone: Text updates to text@USADA.org

Email: Send an email with updates to update@USADA.org

If updates are made via email or text message, athletes should provide all required information. If the information provided is insufficient, it could result in a Filing Failure. Athlete updates should include the athlete's name, dates, times, locations with full addresses and 60-minute widow that are being updated. It is also important to understand that some International Federations only allow text message updates in emergency situations, so being aware of your specific federation's policies remains important for your Whereabouts compliance.

What is a Whereabouts Failure?

A Whereabouts Failure is either a Filing Failure or a Missed Test.

What is a Missed Test?

RTP athletes could receive a Missed Test if they are unavailable during the 60-minute time slot at the location specified on their Whereabouts filing or update. A Missed Test can only be issued if an attempt is made at some point during the identified 60-minute window and the athlete is unavailable.

How could an athlete receive a Filing Failure?

An RTP athlete may receive a Filing Failure if:

- A quarterly Whereabouts filing has not been submitted to USADA by the specified deadline
- Whereabouts information has not been updated in a timely manner
- Whereabouts information is inaccurate or insufficient to reasonably locate the athlete for testing

How will an RTP athlete be notified of a Whereabouts Failure?

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

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

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

When can an RTP athlete be tested?

An athlete in the Registered Testing Pool can be tested at any time during the day, even outside their 60-minute time slot.

How many Whereabouts Failures make an athlete ineligible?

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

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

For a complete copy of the Whereabouts Failure Policy, visit USADA's website at USADA.org/whereabouts.

REMEMBER

3 IN 12 — **THREE** WHEREABOUTS FAILURES IN **12 MONTHS** WILL BE A VIOLATION

USADA REGISTERED TESTING POOL (RTP) SUMMARY

Who may be included in the RTP?

- Athletes in their International Federation's Registered Testing Pool.
- Athletes identified by USADA for inclusion.
- Athletes who failed to comply with expectations while in the Clean Athlete Program.
- Sanctioned athletes.
- Athletes returning from retirement.

What are the Whereabouts requirements for RTP athletes?

- File quarterly Whereabouts by the following deadlines: March 15, June 15, September 15, and December 15.
- Required information includes: athletes' daily overnight location, training locations and times, competitions, other regularly-scheduled activities, such as school and/or work locations, AND a daily 60-minute window.
- Keep Whereabouts information updated as soon as locations and schedules change.

How are athletes located for out-of-competition testing?

- A DCO will use Whereabouts to make a reasonable attempt to locate an athlete. A DCO may, but is not required to, call an athlete to confirm their location.
- Athletes may be tested at any time, even outside of their 60-minute time slot.
- Athletes must be at their listed location during the entire 60-minute time slot.

What happens if athletes fail to comply with RTP Whereabouts requirements?

- Athletes in the RTP are subject to Whereabouts Failures. An athlete may be issued a Filing Failure for failing to file required information, failing to file by the specified deadline, providing inaccurate or insufficient information, or being unavailable for testing at a listed location. A Missed Test may be issued if an athlete is unavailable for testing during their 60-minute time slot.
- Three confirmed Whereabouts Failures (Filing Failures and/or Missed Tests) in a 12-month period will result in an anti-doping rule violation.

RTP WHEREABOUTS TIPS

- Athletes must submit updates to USADA when their schedule changes.
- Heading out of town? Update USADA immediately! Even if an athlete doesn't know the address or exact details, update USADA with the city, state, and other available location information and provide additional information as soon as it becomes available.
- When athletes report competition dates on their Whereabouts, they should update both their overnight location and 60- minute time slot.
- Athletes often receive a Whereabouts Failure when they wait to update until they are at the airport, on the plane, or after they arrive at their destination. Update before leaving!
- Make sure to add travel days when updating a schedule and delete outdated locations.
- If an athlete moves or changes their primary residence or training facility, they need to update their Whereabouts filing.
- Athletes need to provide an accurate overnight location for every day they are in the RTP.
- Whereabouts Failures often occur when DCOs attempt to test an athlete at home, but the DCO learns the athlete was actually at a training facility, work, or out of town. Athletes should remember to provide all required Whereabouts information on their Whereabouts filing and in subsequent updates!
- When updating information, make sure to delete any information that is no longer accurate.

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

USADA CLEAN ATHLETE PROGRAM

Athletes who have been identified and notified that they are part of the Clean Athlete Program (CAP) will be subject to limited Whereabouts requirements as part of USADA's strategic testing plan, which in part, is designed to make Whereabouts requirements for athletes proportional to testing.

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

The CAP selection criteria are established by USADA. Athletes will receive an email notification from USADA if they are in the CAP.

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

If an athlete no longer meets the requirements to be included in the CAP or has provided written notification of their retirement to USADA, their NGB, and their International Federation (IF), they will be notified of their removal and will no longer be subject to CAP Whereabouts requirements.

CAP WHEREABOUTS REQUIREMENTS

To ensure compliance with CAP Whereabouts requirements, athletes must:

- File quarterly Whereabouts by the following deadlines: March 15, June 15, September 15, and December 15.
- Provide the following in their CAP Whereabouts summary: a primary overnight residence, training location(s) and typical times of training, and details regarding upcoming competitions.
- Ensure basic summary information is accurate at all times.

How to Submit Whereabouts Summary Information

Athletes can use USADA's online system to submit Whereabouts summary filings. USADA will provide athletes with a username and password to access the online Whereabouts system. For questions about Whereabouts information, or username or password issues, call Athlete Connect at (719) 785-2000 or toll-free at (866) 601- 2632, or email athleteconnect@USADA.org.

Online: Login to Athlete Connect at USADA.org

Athlete Connect App: Update Whereabouts instantly through the web-based app

Whereabouts Summary Filing Deadlines

Updates to CAP athletes' Whereabouts summaries must be submitted quarterly by the following deadlines:

YEARLY QUARTERS:		SUBMISSION DEADLINES:
Q1	January 1 - March 31	December 15
Q2	April 1 - June 30	March 15
Q3	July 1 - September 30	June 15
Q4	October 1 - December 31	September 15

CAP Whereabouts Updates

CAP athletes do NOT need to notify USADA of daily schedule changes and they do NOT need to file a 60-minute time slot.

Other than filing a Whereabouts summary quarterly, CAP members will only be required to provide updates if their basic summary information becomes inaccurate and when competition schedules are confirmed. For example, if an athlete moves from their home location to college, they need to update the primary overnight residence on their Whereabouts summary.

CAP Whereabouts Compliance

Unlike RTP athletes, CAP athletes are NOT subject to Whereabouts Failures. However, CAP athletes who fail to file accurate Whereabouts summary information by the deadlines will be notified that they are being moved to the RTP for a minimum of nine months. Similarly, CAP members will be moved to the RTP for a minimum of nine months if they are unavailable for testing due to inaccurate Whereabouts summary information and subsequently fail to update their Whereabouts summary information.

See the RTP section to learn more about RTP Whereabouts requirements.

USADA CLEAN ATHLETE PROGRAM (CAP) SUMMARY

Who may be included in the CAP?

- Athletes who are selected for a national team or are representing Team USA at international competitions.
- Athletes identified by USADA for inclusion.
- Athletes with specific competition results.
- Athletes who have returned from retirement.

What are the Whereabouts requirements for CAP athletes?

- File quarterly Whereabouts by the following deadlines: March 15, June 15, September 15, and December 15.
- Required information includes: a primary overnight residence, training location(s) and typical times of training, and details regarding upcoming competitions.
- Ensure basic summary information is accurate at all times.
  - For example, if an athlete moves from their home location to college, they need to update their summary. Or if an athlete usually trains at a specific gym but stops training at that location and switches to a different training location, this requires an update.

Do CAP athletes file Whereabouts changes?

- CAP athletes do NOT notify USADA when their schedule changes and they do NOT file a 60-minute time slot. However, CAP athletes are required to submit updates to their Whereabouts if their primary overnight residence or typical training locations change for a significant amount of time, or if details relating to an upcoming competition are no longer accurate.

What happens if CAP athletes aren't compliant?

- CAP athletes who fail to file Whereabouts summary information by the deadlines will be notified that they are being moved to the RTP for a minimum of nine months.
- CAP athletes who are unavailable for testing due to inaccurate Whereabouts summary information and fail to subsequently update Whereabouts summary information will be notified that they are being moved to the RTP for a minimum of nine months.
- Unlike athletes in the RTP, CAP athletes are NOT subject to Whereabouts Failures.

USADA EDUCATION POOL

Beginning in 2024, USADA will have an additional pool for athlete inclusion, called the Education Pool (EP). Compared to the requirements of the Registered Testing Pool (RTP) and Clean Athlete Program (CAP), athletes within this pool will have minimal requirements that include completing the USADA Athlete's Advantage tutorial annually and providing basic contact information (name, date of birth, phone number, email, mailing address). These minimal requirements more closely align with the amount of out-of-competition testing and burden on athletes to file Whereabouts information. As a reminder, any athlete who is a member of an NGB is subject to testing, so athletes in the EP can be tested at any time. However, athletes in the Education Pool are not required to submit Whereabouts information and are not subject to Whereabouts Failures even though they are in a USADA pool.

Review the USADA Education Pool Summary section to learn more about this additional pool.

USADA EDUCATION POOL SUMMARY

Why was the Education Pool created?

This pool was developed to ensure the most effective and efficient testing program. USADA often utilizes feedback from athletes and in the recent Athlete Perception Survey, the results showed that Whereabouts had a significant impact on an athlete's mental health and wellness. Athlete feedback and science-driven support encouraged USADA to develop this pool, in an effort to minimize the burden on athletes and be more strategic in testing allocation.

How will athletes be notified they are included in the Education Pool?

USADA will notify athletes about their inclusion in the Education Pool and any related deadlines via email. This will be the same process for athletes included in the Registered Testing Pool and Clean Athlete Program.

What are the requirements for athletes included in the Education Pool?

There are two simple but important requirements for athletes in the Education Pool:

1. Complete USADA's Athlete's Advantage tutorial annually and by the stated deadline.
2. Provide or confirm basic contact information, including name, date of birth, phone number, email, and mailing address. Athletes in the EP are not required to submit Whereabouts information, however, they need to ensure their personal information is accurate at all times.

What happens if an athlete does not complete the required education by the deadline?

Any athlete who does not meet the above requirements will be moved to the Clean Athlete Program (CAP), which does require athletes to file Whereabouts, for a minimum of 12 months.

ATHLETE RETIREMENT

At some point in an athlete's career, they may make the decision to retire from ALL sport at the national and international level. When they are ready for retirement, there are steps that must be taken to make it official and to remove themselves from either of the testing pools. They must promptly inform USADA, their National Governing Body (NGB), and their International Federation (IF) in writing via mail or email that they are retiring. They should also check with their IF to determine if there are additional steps they need to follow to complete the retirement process.

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

If an athlete does not provide advance written notice of retirement and is notified for testing, but refuses to provide a sample for an out-of-competition test, this is a refusal to test. If the athlete refuses to provide a sample, they may be subject to an anti-doping rule violation and a four-year period of ineligibility.

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

Athletes in the RTP and CAP are required to notify USADA and their IF, in writing, of their return from retirement and be in the RTP or CAP for at least six months before participating in any national or international events. At the start of the six months, athletes must submit Whereabouts and make themselves available to be tested. If they wish to seek an exemption from the six-month written notice rule, they may apply to WADA. While athletes in USADA's EP must provide written notice, they will not be required to serve a six month period in the pool prior to competing.

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

RESULTS MANAGEMENT

Results management is the process that begins when USADA receives the results of a urine or blood test from a laboratory, or receives information about a possible anti-doping rule violation (ADRV). In total, results management encompasses the initial review and notification of potential ADRVs, the enforcement of provisional suspensions, any assertion of anti-doping rule violations and the proposed consequences, and any related hearing processes.

USADA is responsible for the results management and adjudication process for the U.S. Olympic and Paralympic movement in the United States. To facilitate that process, USADA utilizes its Protocol for Olympic and Paralympic Movement Testing (the Protocol). The objective of the Protocol is to provide a process that:

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

If athletes or athlete support personnel would like more information about the Protocol, please review the publications tab at USADA.org.

ANTI-DOPING RULE VIOLATIONS (ADRVS)

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

- Presence of a prohibited substance or its metabolites or markers in an athlete's sample, or simply put, a positive test
- Use or attempted use by an athlete of a prohibited substance or a prohibited method
- Evading, refusing, or failing to submit to sample collection without compelling justification after being notified by an authorized person
- Violation of applicable requirements regarding athlete availability for out-of-competition testing, including failure to file required Whereabouts information and Missed Tests
  - Any combination of three Missed Tests and/or Filing Failures, as defined in the International Standard for Results Management, within a 12-month period by an athlete in a Registered Testing Pool
- Tampering or attempted tampering with any part of doping control. For example, procuring false testimony from witnesses, or falsifying documents submitted to an anti-doping organization.
- Possession of a prohibited substance or a prohibited method
- Trafficking or attempted trafficking of any prohibited substance or prohibited method
- Administration or attempted administration to any athlete in-competition of any prohibited substance or prohibited method, or administration or attempted administration to any athlete out-of-competition of any prohibited substance or any prohibited method that is prohibited out-of-competition
- Complicity or attempted complicity: Assisting, encouraging, aiding, abetting, conspiring, covering up, or any other type of intentional complicity involving an anti-doping rule violation, or attempted anti-doping rule violation, or a violation of a period of ineligibility by another person
- Associating with coaches, trainers, physicians, or other athlete support personnel who are sanctioned, criminally convicted, and/or professionally disciplined in relation to doping. Some examples of assistance include obtaining training, nutrition, or medical advice, and/or allowing the individual to serve as an agent or representative.

  To establish a violation, the anti-doping organization must establish the athlete knew of the athlete support person's disqualifying status. The anti-doping organization may, but is not required to, provide notice to the athlete of a support person's disqualifying status prior to initiating a case.
- To threaten, intimidate, or discourage a person from the good faith reporting of information relating to an ADRV, non-compliance with the Code, or other doping activity, are all considered violations, as well as retaliation against a person for making such a report

Substances of Abuse

WADA has identified a category of substances called Substances of Abuse, which are substances that are both prohibited in-competition and frequently abused in society outside of sport. Substances of Abuse include:

- Cocaine (S6. Stimulants)
- Heroin (S7. Narcotics)
- MDMA (Ecstasy) (S6. Stimulants)
- THC (Tetrahydrocannabinol) (S9. Cannabinoids)

Athletes may still receive an anti-doping rule violation if they test positive for a Substance of Abuse. The designation of Substance of Abuse only affects the resolution of the case during the results management process, including the length of a resulting sanction. If an athlete tests positive for a Substance of Abuse and establishes that the use of that substance occurred out-of-competition and was unrelated to sport performance, the athlete's period of ineligibility will be reduced to three months with no need to further analyze the degree of fault. The period of ineligibility can be further reduced to one month if the athlete completes a substance of abuse treatment program that is approved by USADA.

If you or someone you know is struggling with addiction or substance abuse, please reach out to the National Helpline by visiting the website at www.samhsa.gov or calling the confidential Substance Abuse and Mental Health Services Administration (SAMHSA) national helpline at 1-800-662-HELP (4357).

Specified and Non-Specified Substances and Methods

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

On the Prohibited List, the following substances are considered Non-Specified:

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

Any remaining substances on the WADA Prohibited List are considered Specified Substances.

All prohibited methods are Non-Specified except methods of intravenous infusions and/or injections (M2.2), which are Specified Methods. Specified Substances and Methods should not in any way be considered less important or less dangerous than other doping substances or methods. Rather, they are substances and methods that are more likely to have been consumed or used by an athlete for a purpose other than the enhancement of sport performance.

What is the notification process for test results?

All laboratory results under the USADA results management authority are sent to USADA and WADA. USADA provides notification of the test result to the athlete, the athlete's National Governing Body (NGB), the athlete's International Federation (IF), the United States Olympic & Paralympic Committee (USOPC) and WADA. USADA will send the written notification via email if an email address was provided during the test session or if USADA has an email address on file for the athlete. The notice letter is also available through the athlete's online account. In general, athletes will receive their test results within six to eight weeks of sample collection.

What are the consequences if an athlete commits an ADRV?

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

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

For more information on the consequences of ADRVs, please refer to the Protocol at USADA.org/publications-policies.

When are doping violations publicly announced?

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

What is an Adverse Analytical Finding (AAF)?

An AAF is a report from a WADA-accredited laboratory that identifies the presence of a prohibited substance and/or its metabolites or markers in a sample. This is commonly referred to as a positive test.

When one or more prohibited substances are detected in an athlete's A sample, USADA receives a report from the laboratory and then issues a notice to the athlete, the athlete's NGB, the USOPC, the athlete's IF, and WADA. The athlete has the option to proceed with the B sample analysis at the lab if they choose, and they and/or their representatives have the right to attend the processing of the B sample. Once USADA receives the B sample analysis, a copy is sent to the athlete, the athlete's NGB, the USOPC, the athlete's IF, and WADA.

What is a non-analytical case?

Unlike an AAF, a non-analytical case does not stem from a positive urine or blood sample, but instead originates from, and is substantiated by, other evidence of doping or violations by an athlete or athlete support person. For example, a non-analytical case may stem from an investigation based on a confidential tip to a hotline or an athlete's refusal/failure to submit to sample collection.

Non-analytical cases and investigations have led to the discovery of large performance-enhancing drug (PED) trafficking operations, as well as the use of new designer drugs or doping methods that are harder to detect through testing. These types of cases, which are built on evidence other than a positive drug test, are called "non-analytical" cases because they do not start with laboratory analysis of a sample.

USADA TESTING AND RESULTS MANAGEMENT PROCESS

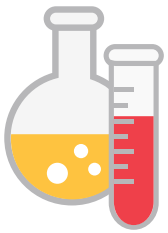
U.S. Anti-Doping Agency

RESEARCH | EDUCATION

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

TESTING

SAMPLE COLLECTION



Two types of testing:

- In-competition and out-of-competition

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

LABORATORY ANALYSIS

Samples are collected and processed, sent to WADA-accredited labs for analysis, and may be stored for up to 10 years for possible retesting as new testing detection methods are developed.

RESULTS MANAGEMENT

NO ADVERSE ANALYTICAL FINDING

- No prohibited substances detected.
- Notice is sent to the athlete, the athlete's National Governing Body (NGB) U.S. Olympic & Paralympic Committee (USOPC) , and the World Anti-Doping Agency (WADA).
- **No further action taken.**

ADVERSE ANALYTICAL FINDING

- One or more prohibited substances detected in sample; USADA receives adverse analytical finding A sample lab report.
- Notice of finding sent to athlete, NGB, USOPC, athlete's International Federation (IF), and WADA.
- Athlete has the option to proceed with the B sample analysis at the lab. Athlete and/or athlete's representative has the right to attend processing of the B sample.
- B sample finding received by USADA and copy is sent to athlete, NGB, IF, WADA, and USOPC.

NO ANTI-DOPING RULE VIOLATION

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

ANTI-DOPING RULE VIOLATION (ADRV)

Acceptance of Sanction:

- Athlete can choose to accept a sanction at any point during the results management process.

Request for Hearing:

- Athlete exercises the right to request a hearing before an independent arbitral body or, if the athlete, USADA, and WADA agree, to the Court of Arbitration for Sport (CAS).
- If the initial hearing is not heard at CAS, the athlete, USADA, IF, and WADA have the right to appeal hearing decision to CAS.
- CAS ruling is final.

Public announcements are made for athletes accepting a sanction and for hearing decisions finding a violation of the anti-doping rules.

INVESTIGATIONS

The WADA International Standard for Testing and Investigations (ISTI) is a set of mandatory policies and procedures that require USADA and other Anti-Doping Organizations (ADOs) around the world to develop and maintain the ability to gather and process intelligence from analytical and non-analytical information. This knowledge allows ADOs to rule out the possibility of anti-doping rule violations (ADRVs), or to initiate investigations if there is evidence a potential violation has been committed.

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

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

PLAY CLEAN TIP CENTER:

- **Call:** (877) 752-9253
- **Text:** 87232 ("USADA") powered by RealResponse. If reporting a tip from outside the United States, text +1 719-748-7232 (+1 719-748-USADA).
- **Email:** playclean@USADA.org
- **Web form:** USADA.org/playclean

TrueSport®

TRUESPORT

WHAT IS TRUESPORT?

Powered by the experience and values of USADA, TrueSport is an outreach education initiative that provides educational resources focused on Sportsmanship, Character Building & Life Skills, and Clean & Healthy Performance that support the whole child and help teach the life lessons that can be learned through sport. Our powerful library of value and skill-based lessons, coaching education, and onsite engagement helps equip young people with the resources for life-long success on and off the field of play. Working alongside experts in a wide range of fields, TrueSport provides evidence-informed content and engaging programs that are reflective of the Olympic spirit to elevate the athlete voice, and encourage athletes of all walks to share their stories.

- Teach what it means to be a true sport: TrueSport.org/topics
- Build your TrueSport toolkit: Store.TrueSport.org
- Become a TrueSport coach: Store.TrueSport.org/TrueSport-Coaching-Certification/
- Sign up to receive the TrueSport Newsletter: TrueSport.org/subscribe

TRUESPORT AMBASSADORS

The TrueSport Ambassador program is made up of Olympians, Paralympians, National Team Members, and Youth Sport Influencers who believe in the ideals of TrueSport. Ambassadors serve as powerful role models who inspire and advocate for millions of young athletes, as well as parents, coaches, teachers, and others, to achieve excellence through sport participation. Contact TrueSport at TrueSport@TrueSport.org to learn more about the TrueSport Ambassador program, or to nominate an athlete you believe should be considered for ambassadorship.

@truesport
@TrueSportUSA
@TrueSportUSA
@TrueSport

Need help? Contact Athlete Connect:

- **(719) 785-2000** or toll-free **(866) 601-2632**
- athleteconnect@USADA.org

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

- GlobalDRO.com
- Call the Drug Reference Line at **(719) 785-2000, follow the prompts**

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

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

- USADA.org/Supplement-Connect

SUPPLEMENT CONNECT

Help keep your sport clean:

- **Call:** (877) 752-9253
- **Anonymously Text:** 87232 ("USADA") powered by RealResponse. If reporting a tip from outside the United States, text +1 719-748-7232 (+1 719-748-USADA).
- **Email:** playclean@USADA.org
- **Web form:** USADA.org/playclean

1-877-752-9253

If athletes need to file Whereabouts:

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

Need a TUE?

- Online: USADA.org/tue
- Email: tue@USADA.org

For more education:

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

Publications and Policies:

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

NOTES

www.USADA.org

(719) 785-2000 or

Toll-Free at (866) 601-2632

athleteconnect@USADA.org