



Play fair

National Anti Doping Agency



DOPING CONTROL HANDBOOK

A Publication of National Anti Doping Agency of India
Second Edition - September, 2011

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Rahul Bhatnagar

Director General

National Anti Doping Agency

Dear Stakeholders,

On the occasion of launching the 2nd Edition of the Doping Control Handbook, I take this opportunity of welcoming you and inviting you to join us in the campaign against ‘Doping in Sports’ in India. The Government of India, Ministry of Youth Affairs and Sports had established the National Anti Doping Agency (NADA) as an autonomous body with the mandate to take all measures in conjunction with sports bodies and other stakeholders to rid sports of this menace and create a clean and healthy environment for Sports in the country. The NADA has since been upto the task and over the last 2 ½ years has collected 6607 samples of sportspersons belonging to over 40 disciplines. NADA is also involved in conducting seminars/workshops/teaching sessions with athletes to educate them against the harmful side effects of dope substances and distribution of educational material related to dope related issues amongst sportspersons, coaches and support personnel.

In the revised edition, the Anti Doping Rule violations in accordance with the World Anti Doping Agency (WADA) have been included. In addition, sample collection procedures for minors and athletes with disability have also been included. Also, the latest prohibited list of WADA, current procedures required for Therapeutic Use Exemption (TUE) as well as the Results Management Process followed by NADA in case of Adverse Analytical Finding of an athlete has been incorporated.



A new chapter on Sanctions and Appeals has also been included in this revised edition.

The NADA looks forward to the support of all sports related bodies in this endeavor. I am sure that with your cooperation we will achieve the objective that we have all set for ourselves, dope free sports and a level playing field for all athletes. We also welcome your comments and suggestions on this Hand Book and these will be incorporated in the following editions. The NADA has also launched its website i.e. www.nada.nic.in which contains all relevant information for your use.

RAHUL BHATNAGAR

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CHAPTER-1
INTRODUCTION



The best part of being an athlete is rising to the challenge, doing your best under the circumstances, and enjoying the process. It is the celebration of the human spirit, body, and mind. It is what we call “the Spirit of Sport,” and is characterized by health, fair play, honesty, respect for self and others, courage, and dedication. Doping in sport is the complete antithesis of the Spirit of Sport. Doping destroys all that is good and noble about sport. Doping jeopardizes the health and well-being of athletes and erodes public confidence. In addition to risking serious health consequences, athletes who test positive for doping ruin their good name and reputation. The purpose of this handbook is to give athletes useful information on anti-doping.

1.1 NADA

The National Anti-Doping Agency (NADA) is the national organization responsible for promoting, coordinating, and monitoring the doping control programme in sports in all its forms in the country. NADA works towards a vision of ‘dope free’ sport in India.



1.2 NADA'S PRIMARY FUNCTIONS

- Adopting and implementing anti-doping rules and policies which conform with the World Anti-Doping Code,
- Cooperating with other sports related organizations and other anti-doping organizations,
- Encouraging reciprocal testing between National Anti-Doping Organizations, and
- Promoting anti-doping research & education

1.3 CODE

The World Anti-Doping Code (Code) is the document that harmonizes regulations regarding anti-doping in sport across

all sports and all countries of the world. The Code provides a framework for anti-doping policies, rules, and regulations for sport organizations and public authorities so that there may be a level playing field for all athletes worldwide.



1.4 ANTI DOPING RULE VIOLATIONS

Doping is defined by WADA as the occurrence of one or more of the following anti-doping rule violations mentioned in the WADA/NADA Code.

- Presence of a prohibited substance or its metabolites or markers in an athlete's sample.
- Use or attempted use by an athlete of a prohibited substance or a prohibited method.
- Refusing to submit to sample collection after being notified.
- Failure to provide whereabouts information or being unavailable for doping control.
- Tampering with any part of the doping control process.
- Possession of a prohibited substance or method.
- Trafficking a prohibited substance or method.
- Administering or attempting to administer a prohibited substance or method to an athlete.

1.5 PROHIBITED SUBSTANCES AND METHODS

The World Anti-Doping Agency annually updates the List of Prohibited Substances and Methods. The list is the International Standard defining what is prohibited in-competition and out-of-competition. The list also indicates whether particular substances are banned in particular sports.

1.6 ATHLETES RESPONSIBILITIES

In accordance with WADA Code the athletes are responsible whenever a prohibited substance is found in their bodily specimen. This means that a violation occurs whether or not the athlete intentionally or unintentionally, knowingly or unknowingly, used a prohibited substance or was negligent or otherwise at fault.

1.7 LATEST INFORMATION

Athletes should always check with their National Federations/ International Federations (IFs) to find out what additional substances and methods are prohibited in their sports. Also, athletes should always make their doctor aware that they are bound by the specific rules of their sport. Those who are unsure of what a product contains should not take it until they are sure it is not prohibited. Ignorance is never an excuse.

1.8 DOPING CONTROL

Doping controls or athlete testing are carried out in accordance with the Code and the International Standard for Testing. Athletes who compete at the international and national level may be tested anytime, anywhere. Specially trained and accredited doping control personnel carry out all tests.

1.9 TESTING

NADA is responsible to implement an effective number of in-competition and out-of-competition tests on the athletes in its registered testing pool. This includes international and national level athletes being tested by NADA. The NADA develops a test distribution plan and allocates the number of samples for each sport or discipline required for effective deterrence. The plan includes out-of-competition testing, in-

competition testing, and may include blood as well as urine collection.

1.9.1 IN-COMPETITION TESTING

NADA coordinates in-competition testing so that there is only one organization testing at one event. Criteria for the selection of athletes are predetermined, based on the regulations of the relevant IF or event ruling body. Athletes are notified of their selection for testing immediately following competition, and sample collection takes place in accordance with the International Standard for Testing. Samples are analyzed for “in-competition substances” as outlined in the WADA Prohibited List.

1.9.2 OUT-OF-COMPETITION TESTING

Out-of-competition testing or any testing done outside of an event ensures that all athletes can be tested at any time and at any place. An athlete identified in the registered testing pool by NADA is required to provide accurate and current whereabouts information. This information is usually required on a half-yearly basis, although NADA may have specific requirements, and updates are required if the athlete’s plans change. Whereabouts information may include details such as home address, work schedule, training venues and schedule, and competition schedule anything which will help a Doping Control Officer (DCO) find the athlete on any given day. International or national level athletes identified in a registered testing pool are responsible under the Code for providing whereabouts information to NADA. Failure to do so in accordance with anti-doping regulations may be considered an anti-doping rule violation and may result in a sanction.

CHAPTER-2
RIGHTS AND
RESPONSIBILITIES

ATHLETES' OBLIGATIONS:

- Be knowledgeable of and comply with all anti-doping policies and rules applicable to them, namely the Code, these rules, and the policies and rules of NADA and their National or International Federations;
- Take responsibility, in the context of anti-doping, for what they ingest and use; and
- Inform medical personnel of their obligation not to Use Prohibited Substances and Prohibited Methods and to take responsibility to make sure that any medical treatment received does not violate the anti-doping policies and rules applicable to them.
- All Athletes who are not regular members of a National Federation must be available for Sample collection conducted according to the Code and provide accurate and up-to-date whereabouts information on a regular basis, if required, during the year before the Olympic Games as a condition of participation in the Olympic Games as a member of the Indian Olympic Team.

ATHLETE SUPPORT PERSONNEL'S

OBLIGATIONS:

All Athlete Support Personnel must:

- Be knowledgeable of and comply with all anti-doping policies and rules applicable to them or Athletes whom they support, namely the Code, these rules and the policies and rules of NADA and their National Federations;
- Co-operate with the Athlete Testing programme; and
- Use their influence on Athlete values and behaviour to foster anti-doping attitudes.

NATIONAL FEDERATIONS' OBLIGATIONS:

Each National Federation must:

- Comply with these rules;
- Cooperate with and assist NADA fulfil its obligations under the Code;
- Adopt and implement an anti-doping policy that conforms with the Code;
- Cooperate with and assist its International Federation conduct its day-to-day anti-doping programmes;
- Require Persons who:
 - participate in sport under its authority; or
 - are registered as an athlete or competitor (however described) or as an Athlete Support Personnel with it or with a club recognized by it; to recognize and be bound by its anti-doping policy, the Code and these rules;
- Require Persons who:
 - participate as an athlete or competitor (however described) in a sport under its authority; or
 - are registered as an athlete or competitor (however described) with it or with a club recognized by it; to be available for Sample collection and provide accurate and up-to-date whereabouts information;
- Require as a condition of membership that the policies, rules and programmes of its members or clubs recognized by it are in compliance with the Code; and
- Take appropriate action to discourage non-compliance with the Code and its Anti-Doping Policy.

A NATIONAL FEDERATION WILL ALSO:

- Recognize and respect a finding of an Anti-Doping Rule Violation by its International Federation or other Signatory or other National Federation without the need for a hearing provided the finding is consistent with the Code and within the authority of the body concerned; and
- Require Athletes who are not regular members to be available for Sample collection and provide accurate and up-to-date whereabouts information on a regular basis, if required, during the year before the Olympic Games as a condition of participation in the Olympic Games as a member of the Indian Olympic Team.
- Promptly notify the IOC of the finding of any Anti-Doping Rule Violation or Doping Offence and the imposition of any sanction for an Anti-Doping Rule Violation or Doping Offence on:
 - Any Person under its anti-doping policy and rules; or
 - Any Athlete, Athlete Support Personnel or other Person under its authority or control under the anti-doping policy and rules of its International Federation.
 - Any Athlete, Athlete Support Personnel or other Person under its authority or control under the anti-doping policy and rules of its International Federation.
 - Provide assistance and information to the Indian Olympic Committee as requested by the Secretary General to enable the IOC to properly implement these Rules.

CHAPTER-3
DOPING CONTROL
PROCESS



GENERAL OVERVIEW OF DOPING CONTROL PROCEDURE

ATHLETES' SELECTION:

Athletes can be selected for doping control at any time and any place.

NOTIFICATION:

A Doping Control Officer (DCO) or chaperone will notify the athlete of selection for doping control. The DCO or chaperone will inform the athlete their rights and responsibilities, including the right to have a representative present throughout the entire process. Athlete will be asked to sign a form confirming that they have been notified for doping control. For a minor or an athlete with a disability, a third party may be notified as well.

REPORTING TO THE DOPING CONTROL STATION:

Athlete should report to the doping control station as soon as possible. The DCO may allow you to delay reporting to the station for activities such as a press conference or the completion of a training session; however athlete will be accompanied by a DCO or chaperone from the time of notification until the completion of the sample collection process.

SELECTION OF COLLECTION VESSEL:

Athletes are given a choice of individually sealed collection vessels and athlete may select one. Athlete should verify that the equipment is intact and has not been tampered with. Athlete should maintain control of the collection vessel at all times.

PROVISION OF SAMPLE:

Athlete and a DCO of the same gender are permitted in the washroom during the sample provision. Minors and

athletes with a disability may also have their representative present, however this representative is not permitted to view the sample provision. The objective is to ensure that the DCO is observing the sample provision correctly.

Volume of Sample:

The DCO shall use the relevant laboratory specifications to verify, in full view of the athlete, that the volume (>90 ml) of the urine sample satisfies requirements for analysis.

SELECTION OF DOPING CONTROL KIT:

Athlete is given a choice of individually sealed sample collection kits from which to choose one. Athlete should verify that the equipment is intact and has not been tampered with. Open the kit and confirm that the sample code numbers on the bottles, the lids, and the container all match.

SAMPLE DIVISION:

Athletes divide the sample, pouring the urine themselves, unless assistance is required due to disability. Pour the required volume of urine into the “B” bottle (>30 ml); and pour the remaining urine into the “A” bottle (>60 ml).

Athlete will be to leave a small amount in the collection vessel so that the DCO can measure the specific gravity .

SEALING OF SAMPLE:

Athlete should seal the “A” and “B” bottles. Athletes’ representative and the DCO should verify that the bottles are sealed properly.

MEASURING SPECIFIC GRAVITY :

If the sample does not meet the specific gravity requirement, athlete may be asked to provide additional samples.

DOCUMENTATION:

Athlete should provide information on the doping control form about any prescription or non-prescription medication or supplements they have taken recently. Athlete also have the right to note comments on the form regarding the conduct of the doping control session. Be sure to confirm that all of the information is correct, including the sample code number. Athlete should receive a copy of the doping control form. The laboratory copy of the form does not contain any information that could identify athlete.

ANALYSIS:

Samples are packaged for shipping to ensure that their security is tracked. Samples are sent to a WADA- accredited laboratory, which will adhere to the International Standard for Laboratories when processing samples, ensuring the chain of custody is maintained at all times. “A” sample is analyzed. “B” sample is securely stored and may be used to confirm an Adverse Analytical Finding from the “A” sample. The laboratory will report the results of sample analysis to NADA and WADA.

If you are a minor or an athlete with a specific type of disability, you may require slight modifications to the sample collection procedure.

- Minors may be accompanied by an athlete representative at all times & during the sample collection procedure, including in the washroom area; however, the representative will not witness the passing of the sample.
- If you have restricted mobility or restricted manual dexterity, you may ask the athlete representative or the DCO to assist you with mobility when handling equipment, splitting the sample, or completing paperwork.
- Athletes with cerebral palsy or significant lack of

coordination may use a larger collection vessel if available.

- Athletes with visual impairment may be accompanied by an athlete representative at all times during the sample collection procedure, including in 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 to you, and you may ask the athlete representative to sign the doping control form on your behalf.
- Athlete with an intellectual disability may be accompanied by an athlete representative at all times during the sample collection procedure, including in the washroom area however the representative will not witness the passing of the sample.
- Athlete 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.
- Athletes who self-catheterize may use their own catheter to provide a sample (this catheter should be produced in tamper-evident wrapping), or use one provided at the DCO if available.

CHAPTER-4
RESULTS MANAGEMENT
PROCESS



During the Results Management Process, the following procedure is followed by NADA

1. Upon receipt of an Analytical Findings for A sample from the laboratory (without bearing the name of athlete) the name of the athlete is decoded by NADA.
2. If the A sample proves negative i.e. no Prohibited Substance or Methods detected, the athlete and the concerned National Federation (NF), International Federation (IF) and WADA shall be so informed.
3. If an Adverse Analytical Findings is reported for A sample, NADA will conduct an Initial Review to determine whether:
 - a. An applicable Therapeutic Use Exemption (TUE) has been granted or will be granted as provided in the International Standard for TUE.
 - b. There is any apparent departure from The International Standard for Testing or International Standard for Laboratories that caused the Adverse Analytical Finding.
4. If the initial review validates the TUE and procedures for the prohibited substance(s) reported by the laboratory for A Sample, the sample is treated as negative, the athlete and the concerned NF, IF & WADA will be so informed.
5. If the Initial Review does not validate the Adverse Analytical Finding, the athlete is notified about his/her Adverse Analytical Finding of 'A' Sample. The concerned NF, IF and WADA are also notified.
6. If the Adverse Analytical Findings for A sample is for a Prohibited Substance that is not a specified substance, NADA shall provisionally suspend the athlete pending the hearing panel.
7. An athlete has the right to request for the analysis of his/her B Sample within seven (7) working days of



receiving the notice concerning Adverse Analytical Finding of his/her A Sample.

8. If the athlete requests for 'B' Sample Analysis, NADA will contact the laboratory to schedule time unit and date and notify the athlete of the 'B' Sample Analysis.
9. If there is no request by the athlete to witness his/her 'B' Sample, NADA will inform the laboratory to conduct the 'B' sample Analysis in the presence of an Independent Observer.
10. If the 'B' sample Analysis by the laboratory proves negative, the entire test will be considered negative and the athlete, NF, (IF) and WADA shall be so informed.
11. If the 'B' Sample Analysis confirms that 'A' Sample Adverse Analytical Finding, a Second Notice will be served by NADA to the athlete alongwith a copy to the concerned parties i.e. NF, IF & WADA asserting the Anti Doping Rule Violation. The Anti Doping Disciplinary Panel will be also notified alongwith all documents relevant to the assertion, for disciplinary proceedings to be conducted in the positive case as per the WADA compliant Anti Doping Rules of NADA.
12. The athlete will be advised to present his/her case before the Anti Doping Disciplinary panel on the date & time fixed by the panel for hearing.
13. During the hearing process, the athlete is given an opportunity to be represented by Counsel and interpreter (at own expense) to establish basis for elimination or reducing the sanctions.
14. The athlete will have the right to appeal against the decision of the Anti Doping Disciplinary Panel by lodging a notice of appeal with the Anti Doping Appeal Panel within 14 days of the decision of the Anti Doping Disciplinary Panel.



CHAPTER-5
PROHIBITED SUBSTANCES
AND METHODS



THE PROHIBITED LIST

THE 2011 PROHIBITED LIST INTERNATIONAL STANDARD

The official text of the Prohibited List shall be maintained by WADA and shall be published in English and French. In the event of any conflict between the English and French versions, the English version shall prevail.

This List shall come into effect on 1 January 2011

THE 2011 PROHIBITED LIST WORLD ANTI-DOPING CODE

Valid 1 January 2011

All Prohibited Substances shall be considered as “Specified Substances” except Substances in classes S1, S2.1 to S2.5, S.4.4 and S6.a, and Prohibited Methods M1, M2 and M3.

SUBSTANCES AND METHODS PROHIBITED AT ALL TIMES (IN- AND OUT-OF-COMPETITION)

S0. NON-APPROVED SUBSTANCES

Any pharmacological substance which is not addressed by any of the subsequent sections of the List and with no current approval by any governmental regulatory health authority for human therapeutic use (i.e. drugs under pre-clinical or clinical development or discontinued) is prohibited at all times.

PROHIBITED SUBSTANCES

S1. ANABOLIC AGENTS

Anabolic agents are prohibited.

1. Anabolic Androgenic Steroids (AAS)

a. Exogenous* AAS, including:

1-androstenediol (5 α -androst-1-ene-3 β ,17 β -diol); **1-androstenedione** (5 α -androst-1-ene-3,17-dione); **bolandiol** (19-norandrostenediol); **bolasterone**; **boldenone**; **boldione** (androsta-1, 4-diene-3,17-dione); **calusterone**; **clostebol**; **danazol** (17 α -ethynyl-17 β -hydroxyandrost-4-eno[2,3-d]isoxazole); dehydrochlormethyltestosterone (4-chloro-17 β -hydroxy-17 α -methylandrosta-1,4-dien-3-one); **desoxymethyltestosterone** (17 α -methyl-5 α -androst-2-en-17 β -ol); **drostanolone**; **ethylestrenol** (19-nor-17 α -pregn-4-en-17-ol); **fluoxymesterone**; **formebolone**; **furazabol** (17 β -hydroxy-17 α -methyl-5 α -androstano[2,3-c]-furazan); **gestrinone**; **4-hydroxytestosterone** (4,17 β -dihydroxyandrost-4-en-3-one); **mestanolone**; **mesterolone**; **metenolone**; **methandienone** (17 β -hydroxy-17 α -methylandrosta-1,4-dien-3-one); **methandriol**; **methasterone** (2 α , 17 α -dimethyl-5 α -androstane-3-one-17 β -ol); **methyldienolone** (17 β -hydroxy-17 α -methylestra-4,9-dien-3-one); **methyl-1-testosterone** (17 β -hydroxy-17 α -methyl-5 α -androst-1-en-3-one); **methylnortestosterone** (17 β -hydroxy-17 α -methylestr-4-en-3-one); **methyltestosterone**; **metribolone** (methyltrienolone, 17 β -hydroxy-17 α -methylestra-4,9,11-trien-3-one); **mibolerone**; **nandrolone**; **19-norandrostenedione** (estr-4-ene-3,17-dione); **norboletone**; **norclostebol**;

norethandrolone; **oxabolone**; **oxandrolone**; **oxymesterone**; **oxymetholone**; **prostanazol** (17 β -hydroxy-5 α -androstano[3,2-c]pyrazole); **quinbolone**; **stanozolol**; **stenbolone**; **1-testosterone** (17 β -hydroxy-5 α -androst-1-en-3-one); **tetrahydrogestrinone** (18 α -homo-pregna-4,9,11-trien-17 β -ol-3-one); **trenbolone**; and other substances with a similar chemical structure or similar biological effect(s).

b. Endogenous** AAS when administered exogenously:

androstenediol (androst-5-ene-3 β ,17 β -diol); **androstenedione** (androst-4-ene-3,17-dione); **dihydrotestosterone** (17 β -hydroxy-5 α -androstan-3-one); **prasterone** (dehydroepiandrosterone, DHEA); **testosterone** and the following metabolites and isomers:

5 α -androstane-3 α ,17 α -diol; 5 α -androstane-3 α ,17 β -diol; 5 α -androstane-3 β ,17 α -diol; 5 α -androstane-3 β ,17 β -diol; androst-4-ene-3 α ,17 α -diol; androst-4-ene-3 α ,17 β -diol; androst-4-ene-3 β ,17 α -diol; androst-5-ene-3 α ,17 α -diol; androst-5-ene-3 α ,17 β -diol; androst-5-ene-3 β ,17 α -diol; 4-androstenediol (androst-4-ene-3 α ,17 β -diol); 5-androstenedione (androst-5-ene-3,17-dione); epi-dihydrotestosterone; epitestosterone; 3 α -hydroxy-5 α -androstan-17-one; 3 β -hydroxy-5 α -androstan-17-one; 19-norandrosterone; 19-noretiocholanolone.

2. Other Anabolic Agents, including but not limited to:

Clenbuterol, selective androgen receptor modulators (SARMs), tibolone, zeranol, zilpaterol.

For purposes of this section:

* “exogenous” refers to a substance which is not ordinarily capable of being produced by the body naturally.

** “endogenous” refers to a substance which is capable of being produced by the body naturally.

S2. PEPTIDE HORMONES, GROWTH FACTORS AND RELATED SUBSTANCES

The following substances and their releasing factors are prohibited:

1. **Erythropoiesis-Stimulating Agents** [e.g. erythropoietin (EPO), darbepoetin (dEPO), hypoxia-inducible factor (HIF) stabilizers, methoxy polyethylene glycol-epoetin beta (CERA), peginesatide (Hematide)];
2. **Chorionic Gonadotrophin (CG) and Luteinizing Hormone (LH) in males;**
3. **Insulins;**
4. **Corticotrophins;**
5. **Growth Hormone (GH), Insulin-like Growth Factor-1 (IGF-1), Fibroblast Growth Factors (FGFs), Hepatocyte Growth Factor (HGF), Mechano Growth Factors (MGFs), Platelet-Derived Growth Factor (PDGF), Vascular-Endothelial Growth Factor (VEGF) as well as any other growth factor affecting muscle, tendon or ligament protein synthesis/degradation, vascularisation, energy utilization, regenerative capacity or fibre type switching; and other substances with similar chemical structure or similar biological effect(s).**

S3 BETA-2 AGONISTS

All beta-2 agonists (including both optical isomers where relevant) are prohibited except salbutamol (maximum 1600 micrograms over 24 hours) and salmeterol when taken by inhalation in accordance with the manufacturers' recommended therapeutic regime.

The presence of salbutamol in urine in excess of 1000 ng/mL is presumed not to be an intended therapeutic use of the substance and will be considered as an Adverse Analytical Finding unless the Athlete proves, through a controlled



pharmacokinetic study, that the abnormal result was the consequence of the use of a therapeutic dose (maximum 1600 micrograms over 24 hours) of inhaled salbutamol.

S4. HORMONE ANTAGONISTS AND MODULATORS

The following classes are prohibited:

1. **Aromatase inhibitors** including, but not limited to: **aminoglutethimide, anastrozole, androsta-1,4,6-triene-3,17-dione (androstatrienedione), 4-androstene-3,6,17-trione (6-oxo), exemestane, formestane, letrozole, testolactone.**
2. **Selective estrogen receptor modulators (SERMs)** including, but not limited to: **raloxifene, tamoxifen, toremifene.**
3. **Other anti-estrogenic substances** including, but not limited to: **clomiphene, cyclofenil, fulvestrant.**
4. **Agents modifying myostatin function(s)** including, but not limited, to: **myostatin inhibitors.**

S5. DIURETICS AND OTHER MASKING AGENTS

Masking agents are prohibited. They include: **Diuretics, desmopressin, plasma expanders** (e.g. **glycerol**; intravenous administration of **albumin, dextran, hydroxyethyl starch** and **mannitol**), **probenecid**; and other substances with similar biological effect(s).

Diuretics include:

Acetazolamide, amiloride, bumetanide, canrenone, chlorthalidone, etacrynic acid, furosemide, indapamide, metolazone, spironolactone, thiazides (e.g.

bendroflumethiazide, chlorothiazide, hydrochlorothiazide), triamterene; and other substances with a similar chemical structure or similar

biological effect(s) (except drospirinone, pamabrom and topical dorzolamide and brinzolamide, which are not prohibited).

The use In- and Out-of-Competition, as applicable, of any quantity of a substance subject to threshold limits (i.e. salbutamol, morphine, cathine, ephedrine, methylephedrine and pseudoephedrine) in conjunction with a diuretic or other masking agent requires the deliverance of a specific Therapeutic Use Exemption for that substance in addition to the one granted for the diuretic or other masking agent.

PROHIBITED METHODS

M1. ENHANCEMENT OF OXYGEN TRANSFER

The following are prohibited:

1. Blood doping, including the use of autologous, homologous or heterologous blood or red blood cell products of any origin.
2. Artificially enhancing the uptake, transport or delivery of oxygen, including, but not limited to, perfluorochemicals, efaproxiral (RSR13) and modified haemoglobin products (e.g. haemoglobin-based blood substitutes, microencapsulated haemoglobin products), excluding supplemental oxygen.

M2. CHEMICAL AND PHYSICAL MANIPULATION

The following is prohibited:

1. Tampering, or attempting to tamper, in order to alter the



integrity and validity of Samples collected during Doping Control is prohibited. These include but are not limited to catheterisation, urine substitution and/or adulteration (e.g. proteases).

2. Intravenous infusions are prohibited except for those legitimately received in the course of hospital admissions or clinical investigations.
3. Sequential withdrawal, manipulation and reinfusion of whole blood into the circulatory system is prohibited.

M3. GENE DOPING

The following, with the potential to enhance sport performance, are prohibited:

1. The transfer of nucleic acids or nucleic acid sequences;
2. The use of normal or genetically modified cells;
3. The use of agents that directly or indirectly affect functions known to influence performance by altering gene expression. For example, Peroxisome Proliferator Activated Receptor δ (PPAR δ) agonists (e.g. GW 1516) and PPAR δ -AMP-activated protein kinase (AMPK) axis agonists (e.g. AICAR) are prohibited.

SUBSTANCES AND METHODS

PROHIBITED IN-COMPETITION

In addition to the categories S0 to S5 and M1 to M3 defined above, the following categories are prohibited In-Competition:

PROHIBITED SUBSTANCES

S6. STIMULANTS

All stimulants (including both optical isomers where relevant) are prohibited, except imidazole derivatives for topical use and those stimulants included in the 2011 Monitoring Program*.

Stimulants include:

a: Non-Specified Stimulants:

Adrafinil; amfepramone; amiphenazole; amphetamine; amphetaminil; benfluorex; benzphetamine; benzylpiperazine; bromantan; clobenzorex; cocaine; cropropamide; crotetamide; dimethylamphetamine; etilamphetamine; famprofazone; fencamine; fenetylline; fenfluramine; fenproporex; furfenorex; m e f e n o r e x ; m e p h e n t e r m i n e ; m e s o c a r b ; methamphetamine(d-); p-methylamphetamine; m e t h y l e n e d i o x y a m p h e t a m i n e ; methylenedioxymethamphetamine; modafinil; norfenfluramine; phendimetrazine; phenmetrazine; phentermine; 4-phenylpiracetam (carphedon); prenylamine; prolintane.

A stimulant not expressly listed in this section is a Specified Substance.

b: Specified Stimulants (examples):

Adrenaline; cathine***; ephedrine****; etamivan; etilefrine; fenbutrazate; fencamfamin; heptaminol; isometheptene; levmetamfetamine; meclofenoxate; methylephedrine****; methylhexaneamine (dimethylpentylamine); methylphenidate; nikethamide;**

norfenefrine; octopamine; oxilofrine; parahydroxyamphetamine; pemoline; pentetrazol; phenpromethamine; propylhexedrine; pseudoephedrine**; selegiline; sibutramine; strychnine; tuaminoheptane;** and other substances with a similar chemical structure or similar biological effect(s).

* The following substances included in the 2011 Monitoring Program (bupropion, caffeine, phenylephrine, phenylpropanolamine, piperadol, synephrine) are not considered as Prohibited Substances.

** **Adrenaline** associated with local anaesthetic agents or by local administration (e.g. nasal, **ophthalmologic**) is not prohibited.

*** **Cathine** is prohibited when its concentration in urine is greater than 5 micrograms per milliliter.

**** **Each** of ephedrine and methylephedrine is prohibited when its concentration in urine is greater than 10 micrograms per milliliter.

***** **Pseudoephedrine** is prohibited when its concentration in urine is greater than 150 micrograms per milliliter.

S7. NARCOTICS

The following are prohibited:

Buprenorphine, dextromoramide, diamorphine (heroin), fentanyl and its derivatives, hydromorphone, methadone, morphine, oxycodone, oxymorphone, pentazocine, pethidine.

S8. CANNABINOIDS

Natural (e.g. cannabis, hashish, marijuana) or synthetic delta 9-tetrahydrocannabinol (THC) and cannabimimetics [e.g. “Spice”

(containing JWH018, JWH073), HU-210] are prohibited.

S9. GLUCOCORTICOSTEROIDS

All glucocorticosteroids are prohibited when administered by oral, intravenous, intramuscular or rectal routes.

SUBSTANCES PROHIBITED IN PARTICULAR SPORTS

P1. ALCOHOL

Alcohol (ethanol) is prohibited In-Competition only, in the following sports. Detection will be conducted by analysis of breath and/or blood. The doping violation threshold (haematological values) is 0.10 g/L.

- Aeronautic (FAI)
- Archery (FITA)
- Automobile (FIA)
- Karate (WKF)
- Motorcycling (FIM)
- Ninepin and Tenpin Bowling (FIQ)
- Powerboating (UIM)

P2. BETA-BLOCKERS

Unless otherwise specified, beta-blockers are prohibited In-Competition only, in the following sports.

- Aeronautic (FAI)
- Archery (FITA) (also prohibited Out-of-Competition)
- Automobile (FIA)
- Billiards and Snooker (WCBS)

- Bobsleigh and Skeleton (FIBT)
- Boules (CMSB)
- Bridge (FMB)
- Curling (WCF)
- Darts (WDF)
- Golf (IGF)
- Motorcycling (FIM)
- Modern Pentathlon (UIPM) for disciplines involving shooting
- Ninepin and Tenpin Bowling (FIQ)
- Powerboating (UIM)
- Sailing (ISAF) for match race helms only
- Shooting (ISSF, IPC) (also prohibited Out-of-Competition)
- Skiing/Snowboarding (FIS) in ski jumping, freestyle aerials/halfpipe and snowboard halfpipe/big air
- Wrestling (FILA)

Beta-blockers include, but are not limited to, the following :

Acebutolol, alprenolol, atenolol, betaxolol, bisoprolol, bunolol, carteolol, carvedilol, celiprolol, esmolol, labetalol, levobunolol, metipranolol, metoprolol, nadolol, oxprenolol, pindolol, propranolol, sotalol, timolol.



CHAPTER-6
SIDE EFFECTS OF PROHIBITED
SUBSTANCES AND METHODS







S1 ANABOLIC AGENTS Anabolic Androgenic Steroids (AAS)

These are the substances that have both anabolic and androgenic properties. 'Anabolic' means 'tissue building' and 'androgenic' means 'masculinizing'. The anabolic properties may affect accelerated growth of muscles and bones while the androgenic properties may affect development of male reproductive system and secondary male sexual characteristics such as hairiness and deep voice. The anabolic androgenic steroids can be derived both endogenously (natural) as well as exogenously (synthetic).

After administration of anabolic androgenic steroids the formation of protein is promoted in genital organ, skin, skeleton and muscles. Athletes may be tempted to use anabolic androgenic steroids to improve their physical and physiological capacity to train and compete at highest level by reducing associated fatigues and recovery duration. In an impression to increase muscular power and strength these substances are sometimes taken by athletes involved in weightlifting, throwing and other sports involving strength parameters.

Side Effects of Anabolic Androgenic Steroids:

The side effects associated with anabolic androgenic steroids are extremely serious and are divided into general, male specific and female specific.

General Side Effects:

- Greasy skin and acne
- Infertility
- Hypertension
- Liver and kidney dysfunction
- Aggressive behaviour
- Tumour

Male specific Effects:

- Breast development
- Testicular atrophy
- Diminished male hormone production
- Diminished sperm production
- Impotence
- Alopecia
- Prostate cancer

Female specific Effects:

- Male pattern hair growth and baldness
- Menstruation disturbances
- Decreased size of breast
- Deeper voice (hoarseness)

OTHER ANABOLIC AGENTS

Other anabolic agents are substances which pharmacologically are not related to anabolic androgenic steroids, but may have the similar anabolic effect. This class of substances has been added in the WADA list of prohibited substances and methods because of clenbuterol and zanolol abuse in sports.

Side Effects of other Anabolic Agents:

- Trembling
- Restlessness, aggressive behaviour
- Anxiety
- Arrhythmias
- Muscle cramps

S2 HORMONES AND RELATED SUBSTANCES

Peptide and glycoprotein hormones are natural substances that act as 'messengers' within the human body and triggers the production of other hormones endogenously like testosterone and corticosteroids. The synthetic drugs like hCG, hGH, ACTH and EPO are known as analogues having similar effects to peptide hormones. Erythropoietin (EPO) hormone increases the number of red cells in blood and is used by athletes in endurance performances. Human growth hormones (hGH) are used by athletes for muscular strength. Human chorionic gonadotrophin (hCG) hormones are used by athletes to increase endogenous production of steroids specially to in an impression to improve the muscular strength. hCG is usually taken by those athletes who takes anabolic steroids to counteract the effects of testicular damage or as a masking agent. The use of synthetic gonadotrophin hormones by athletes stimulates ovulation in women and testosterone in men. Insulin may be illegally used in conjunction with anabolic steroids in an attempt to increase muscular strength. Adrenocorticotrophin (ACTH) hormone increases the level of endogenous corticosteroids in the blood and hence is taken by athletes in misconception to improve muscular strength.

Side Effects of EPO:

- Increased viscosity of blood
- Hypertension
- Myocardial infarction
- Cerebral infarction
- Pulmonary embolism
- Convulsions

Side Effects of hGH:

- Acromegaly (overgrowth of limbs)
- Soft tissues swelling
- Abnormal growth of organs
- Arthropathies (joint disorders)
- Diabetes mellitus

Side Effects of hCG:

- Menstrual disorders
- Gynecomastia (breast development in males)

Side Effects of insulin:

- Hypoglycaemia
- Nausea
- Drowsiness
- Brain malfunctioning

Side Effects of ACTH:

- Insomnia
- Hypertension
- Diabetes mellitus
- Stomach ulcers
- Osteoporosis

S3 BETA-2-AGONISTS

Beta-2-Agonists if taken into bloodstream are having anabolic effects and hence WADA prohibited the use of all Beta-2-Agonists by athletes with the exception of inhaled formoterol, salbutamol, salmeterol and terbutaline to treat and/or prevention of asthmatic athletes. An abbreviated therapeutic use exemption certificate is required for the use of inhaled Beta-2Agonists.



S4 HORMONE ANTAGONISTS AND MODULATORS

These substances may be illegally used by athletes to counteract undesirable side effects associated with anabolic steroid use such as gynecomastia.

Side Effects of Hormone Antagonists and Modulators:

- Hot flushes
- Gastrointestinal disorders
- Fluid retention
- Venous thrombosis

S5 DIURETICS AND OTHER MASKING AGENTS

Masking agents are substances that have the potential to impair the excretion of prohibited substances to conceal their presence in urine or other doping control samples or to increase haematological parameters.

S6 STIMULANTS

Stimulants are substances, which have a direct stimulating effect on the central nervous system. The stimulant increases the excitation of brain and spinal cord, cardiac output and rate of metabolism. The stimulants that are widely used in sports are amphetamine, cocaine and ephedrine. The players use these substances to attain the same effect as adrenalin, which is secreted naturally in human body. The stimulants may produce alertness, wakefulness and increased ability of concentration. These substances may develop the faculty to exercise strenuously or produce a decreased sensitivity to pain.

WADA has forbidden the use of stimulants in sports. Many cough and cold medications contain stimulants. One group

of stimulants is the sympathomimetic amine of which ephedrine is an example. In lower doses these amines are often present in cold and hay fever medications and often these medications are easily available from pharmacies and retail outlets without the need of medical prescriptions. Thus such type of medications should be avoided by the athletes.

Side Effects of Stimulants:

If an athlete after consuming stimulants performs under severe circumstances eg long periods and or in the heat, the athlete's body heats up intensively and due to influence of stimulants it may become difficult for the human body to cool down. The cardiovascular system and other vital organs also start malfunctioning by the use of stimulants and in some cases may lead to death. Other potential harmful effects of stimulants are listed below:

- Loss of appetite
- Insomnia (loss of sleep)
- Euphoria
- Hallucinations (Psychosis)
- Trembling
- Restlessness, agitation, tenseness
- Hypertension
- Palpitation and heart rhythm disorders
- Hyperthermia (increased body temperature)

S7 NARCOTICS

The narcotics prohibited in sports are those derived from morphine and its chemical and pharmacological analogues.



These substances act on central nervous system and reduce pain feeling. The use of narcotics causes a false sense of cure in an injured athlete that leads to ignorance of a potentially serious injury and risking further damage.

Side Effects of Narcotics:

- Addiction
- Loss of balance and coordination
- Nausea and dizziness
- Insomnia & depression
- Decreased heart rate

S8 CANNABINOIDS

Cannabinoid is psychoactive chemical. Marijuana, hashish and hashish oil are derived from cannabis plant. Prolonged use of cannabinoid may result in loss of motivation, decreased concentration, impaired memory and learning disability, respiratory diseases such as lung cancer, throat cancer and chronic bronchitis.

Side Effects of Cannabinoids:

- Impaired balance and coordination
- Loss of concentration
- Increase in heart rate
- Increased appetite
- Drowsiness
- Hallucination

S9 GLUCOCORTICOSTEROIDS

Glucocorticosteroids are prohibited in-competition when administered orally, rectally, intravenously or intramuscularly.

Administration of glucocorticosteroids through these routes requires therapeutic use exemption certificate (TUE). All other routes including anal, aural, dermatological, inhalation, intra articular, nasal and ophthalmological require athletes to follow abbreviated therapeutic use exemption certificate (ATUE).

Side Effects of Glucocorticosteroids:

- Fluid retention
- Hyperglycaemia
- Systemic infections
- Musculoskeletal disorders

P1 ALCOHOL

Alcohol is a central nervous system depressant which slows down the actions of the brain and body. Combining alcohol with other drugs can magnify the effects of alcohol or of the other drugs which can be dangerous in many circumstances.

Side Effects of Alcohol:

- Impaired judgement
- Loss of reflexes and muscular co-ordination
- slurred speech
- sleepiness and poor respiration

P2 Beta Blockers

These drugs may be illegally used by athletes in precision sports requiring accuracy and steady limbs eg archery, shooting, modern pentathlon, luge, diving, bob sleigh, ski jumping and motor sports.

Side Effect

Increased heart rate



M1 ENHANCEMENT OF OXYGEN TRANSFER

Blood doping may be illegally used to increase red blood cells in an attempt to improve the oxygen carrying capacity in endurance events.

Side Effects of Blood Doping:

- Increased blood viscosity
- Clotting susceptibility
- Hypertension
- Vasoconstriction
- Kidney dysfunction
- Risk of cardiac arrest, brain stroke and pulmonary embolism

M2 CHEMICAL AND PHYSICAL MANIPULATION

Chemical and physical manipulations including catheterisation without medical justification and masking agents are prohibited methods and should not be used by athletes.

Side Effects of manipulations:

- Cystitis (bladder infection) and other dysfunctions and disorders depending upon the type of manipulation.

M3 GENE DOPING

Gene doping is banned by WADA in sports.

Side Effects of Gene Doping:

Side effects of gene doping are yet to be ascertained.

CHAPTER-7
THERAPEUTIC USE
EXEMPTIONS



The World Anti-Doping Code

**INTERNATIONAL
STANDARD FOR
THERAPEUTIC USE
EXEMPTIONS**

In force January 1st, 2005

Therapeutic Use Exemption (TUE)

An athlete, like any other person, may have illnesses or conditions that require the use of particular medications as treatment. But, Substances an athlete is required to take as a treatment may fall under the Prohibited List. In such a case, a Therapeutic Use Exemption (TUE) may, under strict conditions, provide an athlete with the authorization to take the needed medicine, all the while competing in sport, with no resulting doping offence.

TUE

TUE is an authorization to take a Prohibited Substance under well-defined and restricted conditions. An application for a TUE shall be made in accordance with the International Standard for TUE. A TUE must be obtained for the use of any Substance on the Prohibited List. All athletes who need a medical treatment including a Prohibited Substance or Method and are subject to Testing must obtain a TUE from National Anti Doping Agency. In order to obtain an approval for a TUE, athletes must have a well-documented medical condition supported by reliable and relevant medical data.

TUE Form

Applications for standard TUEs need to be submitted to NADA on the appropriate standard TUE. The forms may be obtained from NADA. (see Annexure III)



Approval procedure

TUE application will be reviewed by the Therapeutic Use Exemption Committee (TUEC) of NADA. The athlete will be notified of the decision taken by the TUEC. Decisions of the TUEC, will be completed within 30 days of receipt of all relevant documentation, and will be conveyed in writing to the Athlete by NADA.

Start of medical treatment

If the TUE is approved, the athlete can only begin treatment and-or sports practice after the reception of the authorization notice from NADA. (In rare emergency or exceptional cases, a retroactive approval may be considered). Athletes should not start using the substance before receiving the authorization notice from NADA. The athlete would then be using a prohibited method or substance without authorization and this could constitute an anti doping rule violation in the event that the TUE is denied by the TUEC.

Criteria for granting a TUE

1. “The athlete would experience a significant impairment to health if the Prohibited Substance or Prohibited Method were to be withheld in the course of treating an acute or chronic medical condition.”
2. “The therapeutic use of the Prohibited Substance or Prohibited Method would produce no additional enhancement of performance other than that which might be anticipated by a return to a state of normal health following the treatment of a





legitimate medical condition. The use of any Prohibited Substance or Prohibited Method to increase “low normal” levels of any endogenous hormone is not considered an acceptable therapeutic intervention.”

3. “There is no reasonable therapeutic alternative to the use of the otherwise Prohibited Substance or Prohibited Method.”
4. “The necessity for the use of the otherwise Prohibited Substance or Prohibited Method cannot be a consequence, wholly or in part, of prior non-therapeutic use of any substance from the Prohibited List.”

ATUE can only be granted if all four criteria are fulfilled.

Time Frame for TUE submission and retroactive approvals

ATUE for any Substances and Methods that are prohibited in competition has to be submitted by the athlete no less than 21 days before participating in an Event. In order to make sure that the Athlete has the TUE before participating in a competition all Athletes are strongly advised to send in their applications at least 30 days before participating in an event as the TUECs have 30 days to render their decision.

For substances, which are prohibited in and out of competition, the TUE application has to be submitted as soon as a pathology requesting the use of prohibited Substances and/or Methods has been diagnosed.

There are some situations when retroactive approval can be accepted. Even if a potential retroactive case is given consideration, this in no way guarantees that the TUE will be accepted. The evaluation procedure is the same as for a normal TUE request. The request will be considered by the relevant

TUEC who will then render its decision. The following two situations may lead to a retroactive approval:

- Emergency treatment or treatment of an acute medical condition.
- Exceptional circumstances. If there was not enough time or opportunity for an applicant to submit, or if a TUEC did not have sufficient time to consider an application prior to Doping Control.

TUE Application Requirements

The following Documents must be attached

- Duly filled-in application form in support of a standard TUE request
- Evidence confirming the diagnosis must be included.
- Copies of the original reports or letters.
- A comprehensive medical history and the results of all relevant examinations, laboratory investigations and imaging studies relevant to the application
- A statement by a qualified physician attesting to the necessity of the otherwise Prohibited Substance or Prohibited Method in the treatment of the Athlete and describing why an alternative permitted medication cannot, or could not, be used to treat this condition.
- In the case of non-demonstrable conditions, independent supporting medical opinion will assist the application.
- The data provided should be up-to-date and accurate in form and substance.

Renewing a TUE

TUEs cannot be renewed without a new medical consultation

and confirmation thereof. This means the athlete must fill in a new request signed by his or her Physician upon expiration. Even in the case of chronic use, a TUE can only be granted for a limited period of time. The Physician should give a recommendation to the TUEC on the duration of the validity of the TUE based on the date of the next scheduled appointment with his/her patient for follow-up on the specific medical condition.

Automatic continuation is not acceptable in any case. The Physician must see the athlete on a regular basis and evaluate if the medical condition has changed and if the treatment is still appropriate for the stated medical condition.

TUE Duration

A TUE will be granted for a limited period of time even if the use of the Substance is chronic. The use of the Substance shall be followed-up by a Physician on a regular basis. The TUE will be renewed consequently.

Where to Apply:

International-Level Athletes

Athletes included by an IF in its Registered Testing Pool and other athletes prior to their participation in any International Event must obtain a TUE from their relevant IF (regardless of whether the athlete previously has received a TUE at the national level). An IF can recognize a TUE delivered by NADA under its own authority.

Athletes who already have a TUE at the national level but are participating in an International Event and do not already have a TUE registered with their IF must request a TUE from the IF no later than 30 days before the athlete's participation at an International Event.

National-Level athletes

National-Level athletes and athletes participating in National Events shall obtain a TUE from NADA, unless the athlete has previously received a TUE from an International Federation (IF) and such TUE is still valid and its granting has been reported to the NADA.

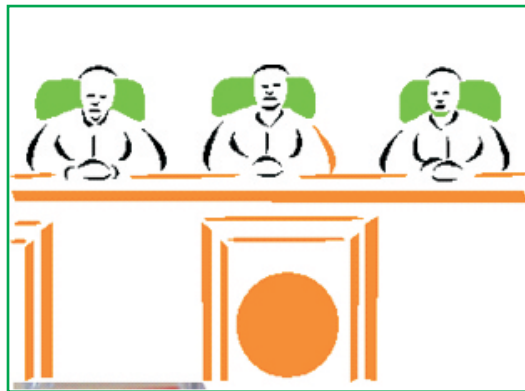
TUE Review

World Anti Doping Agency (WADA) on its own initiative may review the granting of a TUE to any International-Level athlete or National-Level athlete that is included in the NADA's Registered Testing Pool.

If WADA determines that the granting or denial of a TUE did not comply with the International Standard for TUE in force at the time, then WADA may reverse that decision and the TUE shall be cancelled. In the event of a reversal, WADA will advise all concerned parties.

An International-Level athlete or a National-Level athlete who has been denied a TUE can ask for a review of the decision to the WADA. Decisions on TUEs are also subject to further appeal and pursuant to the rules of Court of Arbitration in Sports (CAS).

CHAPTER-8
SANCTIONS AND
APPEALS



SANCTIONS AND APPEALS

- Sanctions for violating anti doping regulations may range from a reprimand to a lifetime ban. The period of ineligibility may vary depending on the type of anti doping violation, the circumstances of an individual case, the substance and the possible repetition of an anti doping rule violation.
- For in-competition testing, this will automatically include disqualification of results obtained in that competition and forfeiture of any medals, points and prizes. All results of any competition following collection of the sample may also be disqualified.
- As an athlete, you are entitled to a fair hearing before the anti Doping Disciplinary Panel and to appeal before the Anti Doping Appeal Panel with respect to any decision regarding a positive test or sanction imposed on you following an anti doping rule violation. You will be given the opportunity to establish a basis for elimination or reducing the sanction.
- As an international athlete, you have the right to appeal any decision regarding a positive test or a sanction imposed on you following an anti doping rule violation. In general, the organization to which you must file the appeal is the CAS. If CAS or an appeal tribunal rules otherwise, the initial decision remains in effect while under appeal.
- If another party such as an Anti Doping Organisation or WADA were to appeal a decision regarding your case, you would still have the right to be heard during the proceedings. In such case, the procedure remains the same and you would still have the right to be heard during the proceedings.

CHAPTER-9
FREQUENTLY ASKED QUESTIONS
ON
DOPING IN SPORTS

SOME GENERAL QUESTIONS

What is Doping?

Doping is defined by WADA as the occurrence of one or more of the following anti-doping rule violations mentioned in the WADA Code.

- 1) Presence of a Prohibited Substance or its Metabolites or Markers in an Athlete's Sample.
- 2) Use or Attempted Use by an Athlete of a Prohibited Substance or a Prohibited Method.
- 3) Refusing to submit to sample collection after being notified.
- 4) Failure to provide whereabouts information or being unavailable for doping control.
- 5) Tampering with any part of the Doping Control Process.
- 6) Possession of a Prohibited Substance or Method.
- 7) Trafficking a prohibited substance or method.

Administering or attempting to administer a prohibited substance or method to an athlete.

Why is it considered illegal?

Most athletes and sporting bodies feel that the use of dope agents undermines the whole philosophy of sport. Sport is about good health and fair competition. Doping runs counter to these ideals: it is damaging to the health of the athletes and is dishonest.

What does WADA stand for?

World Anti Doping Agency.

What is NADA?

The National Anti Doping Agency (NADA) is an autonomous body



established by the Government of India, Ministry of Youth Affairs & Sports with the mandate to take all measures in conjunction with sports bodies and other stakeholders to rid sports of this menace and create a clean and healthy environment for sports in India. NADA is responsible for promoting, coordinating, and monitoring the fight against doping in sport in all its forms in our country.

What is dope testing ?

Dope testing involves testing of urine or blood samples of athletes for the drugs/methods which are banned by WADA.

Who tests the sample?

Urine or blood samples collected by the Doping Control Officers empanelled by NADA are sent to the WADA accredited National Dope testing laboratory, New Delhi for dope analysis. The laboratory receives the sample with a code number and is not aware about the identity of the athlete.

What are the categories of prohibited substances banned by WADA?

The prohibited substances banned by WADA belong to the categories such as anabolic steroids, stimulants, narcotics, beta-blockers, diuretics, certain hormones etc. The prohibited list is reviewed/revised annually by WADA on 1st January of each year. The most current edition of the list is posted on WADA's website at www.Wada-ama.org. the information is also available on NADA's website at www.nada.nic.in.

What else should athletes know about banned substances and methods?

Athletes should know that, under the WADA/NADA Code, they are strictly liable whenever a prohibited substance is found in their bodily specimen. This means that a violation occurs



whether or not the athlete intentionally or unintentionally, knowingly or unknowingly, used a prohibited substance or was negligent or otherwise at fault. It is very important therefore for athletes to understand not only what is prohibited, but also what might potentially cause an inadvertent doping violation.

Athletes should always make themselves aware with the latest Prohibited list of WADA and also, they should always make their doctor aware in this regard before taking any medicine. Those who are unsure of what a product contains should not take it until they are sure it is not prohibited. Ignorance is never an excuse.

What precautions should be taken regarding dietary supplement use?

Extreme caution is recommended regarding supplement use. The use of dietary supplements by athletes is a concern because in many countries the manufacturing and labeling of supplements may not follow strict rules, which may lead to a supplement containing an undeclared substance that is prohibited under anti-doping regulations. A significant number of positive tests have been attributed to the misuse of supplements, and taking a poorly labeled dietary supplement is not an adequate defense in a doping hearing.

What precautions should be taken regarding use of medicines?

Athletes, like all others, may at times experience a medical condition that requires using particular medicines. The substance that an athlete may be required to take to treat a condition could fall under the Prohibited List. However, by applying and obtaining a Therapeutic Use Exemption (TUE) in advance from NADA or the International Federation (IF) an

athlete may be allowed to take the necessary medicine.

Are vitamin and mineral supplements banned?

No. However, be careful - some vitamin containing food supplements may contain banned substances. Be sure you know what you are taking before you take anything.

What is in-competition testing?

NADA coordinates in-competition testing so that there is only one organization testing at one event. Criteria for the selection of athletes is pre-determined, based on the regulations of the relevant, IF or event ruling body. In-competition, you can be chosen by random selection, finishing position or by being targeted for a particular reason. It is usually the National Anti-Doping Organization of the country in which the event takes place that collects the samples, unless the IF or event organizer has an alternative doping control program.

Which groups of banned drugs are tested during In-competition?

(i) Anabolic Agent (ii) Hormones and related substances (iii) Beta-2-Agonists (iv) Hormone Antagonists and Modulators (v) Diuretics and other Masking Agents (vi) Stimulants (vii) Narcotics (viii) Cannabinoids (ix) Glucocorticosteroids and (x) Beta-Blockers

What is out-of-competition testing?

Out-of-competition testing or any testing done outside of an event ensures that all athletes can be tested anytime, anywhere and with no advance notice.

Which group of banned drugs are tested during Out-of-Competition?

(i) Anabolic Agents (ii) Hormones and related substances (iii)

Hormone Antagonists and Modulators (iv) Diuretics and other Masking Agents.

What happens if an athlete refuses the test?

It is treated as a positive result and the athlete is punished accordingly.

How many times an athlete can be tested each year?

Unlimited times. There is no limit to the number of times an athlete can be tested each you including in-competition, out-of-competition, random and target testing.

What is target testing ?

Selection of athletes for testing where specific athletes or groups of athletes are selected on a non-random basis for testing at a specified time.

What is no advance notice ?

Doping control which takes place with no advance warning to the athlete.

What is Adverse Analytical Finding?

A report from a laboratory or other approved Testing entity that identifies in a Specimen the presence of a Prohibited Substance or its Metabolites or Markers (including elevated quantities of endogenous substances) or evidence of the use of a Prohibited Method.

What is CAS?

The Court of Arbitration for Sport.

What is a Marker?

A Compound, group of compounds or biological parameters that indicates the Use of a Prohibited Substance or Prohibited Method

What is a Metabolite?

Any substance produced by a biotransformation process in our body.

How long does it take for banned substances to get out of the body?

The elimination time for drugs will vary from individual to individual depending upon age, sex, height, amount of substance used, frequency of use, length of time used and individual metabolism of an athlete. In this regard, only a broad generalization can be made as stated below:

	Drugs	Elimination Time (appr)
1.	Stimulants	
	i. Amphetamine & derivatives	1 to 7 days
	ii. Cocaine - occasional use	6 to 12 hours
	- repeated use within 48 hours	3 to 5 days (possibly longer)
	iii. Over-the-counter cold medications containing ephedrine derivatives as decongestants	48 to 72 hours
2.	Narcotics in cough medicines	24 to 48 hours
3.	Marijuana (tetrahydrocannabinol)	3 to 5 weeks
4.	Anabolic steroids	
	i. Fat soluble injectable types	6 to 8 months
	ii. Oral or water soluble types	3 to 6 weeks
5.	Beta blockers & diuretics	24-72 Hrs

What is provisional suspension ?

Provisional suspension means the athlete is banned temporarily from participating in any competition to the final



decision at a hearing before the Anti Doping Disciplinary/Appeal Panel.

What sanction is imposed when an athlete is tested positive for any Anti Doping Rule Violation during any competition or Event ?

For in-competition testing, this will automatically include disqualification of results obtained in that competition and forfeiture of any medals, points and prizes. All results of any competition following collection of the sample may also be disqualified unless the athletes establish that they bear no fault or negligence for the violation.

What sanctions are involved for First Violation of Anti Doping Rules for specified substances, Prohibited Substances and other prohibited methods ?

S. No	Anti Doping Rule Violation	Sanctions
1.	Specified Substance	A warning and at a maximum two (2) years of ineligibility
2.	Other Prohibited Substances	Two (2) years ineligibility
3.	Refusing or failure to submit the sample collection Or Tempering with Doping Control	Two (2) years ineligibility
4.	Trafficking	A minimum of four (4) years and upto life time ineligibility
5.	Whereabouts filing failure and or missed tests	A minimum of one (1) year to a maximum of two (2) years ineligibility based on Athlete's degree of fault

THERAPEUTIC USE EXEMPTIONS:

What is TUE?

TUE stands for Therapeutic Use Exemption. Athletes, like all others, may have illness or conditions that require them to take particular medications. If the medication required happens to fall under the Prohibited List, a TUE may give that athlete the authorization to take the needed medication.

What criteria are to be followed for granting a TUE ?

A TUE is granted only in strict accordance with the following criteria:

- The absence of the prohibited substance or prohibited method would harm the athletes health.
- The therapeutic use of the prohibited substance or prohibited method would produce no additional enhancement of performance.
- There is not reasonable therapeutic alternative to the use of the otherwise prohibited substance or prohibited method.
- The necessity for the use of the otherwise prohibited substance or prohibited method cannot be a consequence, wholly or in part, of prior non therapeutic use of any substance from the prohibited list.

What is the procedure for TUE ?

- A TUE is required for all the treatments involving the use of a prohibited substance or method.
- An application for TUE needs to be submitted to NADA on the appropriate TUE form. The form may be obtained from NADA or may be downloaded from the website www.nada.nic.in.



- All athletes are strongly advised to submit their applications atleast 30 days prior to participating in an event.

What are the important documents to be attached in support of the application for TUE ?

- Evidence of the diagnosis.
- Copies of the original reports or letters.
- For conditions that cannot be demonstrated, independent medical justification must be attached to the application.

Who grants a TUE?

TUE is granted for a specific duration as decided upon by the Therapeutic Use Exemption Committee (TUEC). Decisions of the TUEC, will be completed within 30 days of receipt of all relevant documentation, and is conveyed in writing to the Athlete by NADA.

When can an athlete start his/her of medical treatment ?

Athletes should not start using the substance before receiving a valid TUE from NADA as this may constitute an Anti Doping Rule Violation in the event that the TUE is denied by the TUEC except in rare emergency or exceptional cases, a retroactive approval may be considered.

Under what circumstances a TUE is cancelled ?

The TUE will be cancelled if:

- The Athlete does not promptly comply with any requirement or conditions imposed by NADA or the TUE Committee.
- The term for which the TUE was granted has expired.
- The Athlete is advised that the TUE has been withdrawn by NADA.

athlete is advised that the TUE has been withdrawn by NADA.

- A decision granting TUE has been reversed by WADA or the Court of Arbitration for Sports (CAS)

What is the procedure for obtaining a TUE by an athlete from the International Federation?

Unless the rule of their International Federation provide otherwise, the following Athlete shall obtain a TUE from their International Federation:

- Athletes in the International Federation's Registered Testing Pool; and
- Athletes participating in an International Event for which a TUE granted pursuant to the International Federation's rules is required.

What kind of an emergency situation considered for a retroactive TUE ?

- An emergency situation occurs when the life of an athlete could be at risk if he/she is unable to use the Prohibited Substance or Method; in other words, if the medical condition justifies the treatments and warrants immediate administration.
- Circumstances are considered to be exception when, for example, a TUE cannot be granted in time through no fault of the athlete. The case of a normally healthy athlete suddenly affected by an significant medical condition some days prior to an event, and unable to request a TUE within the allotted time to enable the TUEC to grant the TUE, may be considered as an "exceptional circumstances".

What is WADA's role regarding TUEs ?

- Through its TUEC, WADA has the right to monitor and review any TUE granted by a IF or NADA. It can revise any decision.
- An athlete who submits a TUE application to IF or NADA and is denied a TUE , can appeal the decision to WADA TUEC that the denial of the TUE did not comply with the International Standard. WADA can reverse the decision.

What is the procedure for appeals from decisions granting or denying a TUE ?

- If the IF or NADA refuses to grant a TUE, the athlete can ask WADA to review the decision.
- WADA and IF's decision can be appealed to CAS.

PROHIBITED SUBSTANCES AND THEIR SIDE- EFFECTS

What are anabolic androgenic steroids?

Anabolic androgenic steroids are synthetic derivatives of the naturally occurring sex hormone, testosterone. Testosterone is present in large amounts in males and in smaller amounts in females. Anabolic androgenic steroids have both anabolic (muscle building) and androgenic (secondary male sex characteristics) properties.

Why do athletes take anabolic steroids?

Taken orally or injected, anabolic steroids increase protein synthesis which may, with training, create an increase in lean muscle mass. This is perceived by some athletes to increase strength and endurance, and, consequently, increase athletic performance.

What is the function of testosterone in our body?

Testosterone is a natural hormone present in our body. It is primarily responsible for stimulating the development of the male reproductive system and the secondary male sexual characteristics (the androgenic effect) such as hairiness and deep voice, and the accelerated growth of muscle and bone (the anabolic effect).

What are the medical uses of anabolic androgenic steroids?

Anabolic steroids have been used medically to treat patients who suffer from deficiencies of testosterone. It has been used for the treatment of delayed puberty, osteoporosis, aplastic anemia and advanced breast cancer, as well as for treating body wasting caused by HIV/AIDS or other diseases.

What are the side effects of anabolic steroid use in males and females?

In Males:

- Acne
- Shrinking of the testicles

- Reduced sperm production and infertility
- Impotency
- Enlarged prostate gland
- Premature baldness
- Kidney and liver dysfunction
- Increased aggression and mood swings
- Feminization
- Adverse effects on cholesterol
- Premature heart disease and stroke

In Females:

- Acne
- Development of male features
- Deepening of the voice
- Excessive hair growth on the face and body
- Abnormal menstrual cycles
- Increased aggression and mood swings
- Fetal damage
- Decreased breast size
- Adverse effects on cholesterol.

If testosterone is naturally found in the male, then how can it be considered a banned substance or detected in drug testing?

Excessive amounts of testosterone, above the levels normally found in the urine can be detected. The presence of a testosterone (T) to epitestosterone (E) ration greater than four (4) to one (1) in the urine of a competitor constitutes an offence unless there is evidence that this ratio is due to physiological or pathological condition, In the case of T/E greater than 4, NADA conducts an investigation before the sample is declared positive. The athlete is tested unannounced at least once per

month for three months. Failure to cooperate in the investigations will result in declaring the sample positive

Is it possible to confirm T/E ratio greater than 4 by a laboratory without conducting longitudinal studies?

Yes. Use of Isotope Ratio – Mass spectrometer (IRMS) can confirm whether the T/E ratio greater than 4 is due to endogenous or exogenous source.

What do ‘exogenous’ and endogenous substances refer to?

“Exogenous” refers to a substance which is not ordinarily capable of being produced by the body naturally.

“Endogenous” refers to a substance which is capable of being produced by the body naturally.

What are peptide hormones, mimetics and analogues?

Peptide hormones are naturally acting substances that serve as messengers from one organ to another. They stimulate various bodily functions such as growth, sex drive, behavior and sensitivity to pain.

Mimetics are substances that initiate the action of related substances.

Analogues are synthetic substances designed to have effects similar to naturally produced hormone in the body.

What are the prohibited substances included in the class belonging to the peptide hormones, mimetics and analogues?

Prohibited substances such as erythropoietin (EPO), Insulin, Corticotrophins & Growth Hormone etc belong to the above class.

Why are peptide hormones, mimetic and analogues prohibited?

Athletes may misuse these substances for various reasons depending on the particular substance and desired result. Athletes might take certain hormones to:

- Stimulate production of naturally occurring hormones;
- Increase muscle growth and strength; and
- Increase the production of red blood cells (RBCs) to improve the blood's ability to carry oxygen.

What are diuretics?

Diuretics are a class of drugs that cause the kidneys to excrete salt and water from the body.

What do diuretics do?

Diuretics help to regulate the amount of salt and water in the body.

What are the medical uses of diuretics?

Diuretics are used to treat high blood pressure, heart failure, and edema (swelling caused by abnormal fluid retention)

What are the side effects of diuretic use?

- Fainting/dizziness
- dehydration
- electrolyte imbalance, particularly low potassium levels
- decreased blood pressure
- irregular heartbeat

What types of medications contain diuretics?

Medications that are used to treat high blood pressure, kidney and liver disorders and pre-menstrual tension may include a diuretic.

Why do athletes use diuretics?

Diuretics are sometimes misused by competitors for two main reasons:-

- (a) To reduce weight quickly in sports such as Judo, Boxing

and Weightlifting where weight categories are involved.

- (b) To reduce the concentration of drugs in the urine by producing a more rapid excretion of urine to attempt to minimize detection of drug misuse.

What are stimulants?

Stimulants are substances that act on the central nervous system to stimulate the body both mentally and physically. They include various types of drugs such as amphetamines, cocaine and caffeine.

Why are stimulants banned?

Use of such drugs increase competitiveness and hostility. These substances are therefore banned in sports because they can produce both psychological and physical stimulus to athlete performance.

What are the side – effects of stimulants?

- Loss of appetite
- Loss of sleep
- Increased body temperature
- Dry mouth
- Dehydration
- Trembling
- Problems with coordination and balance
- Increased and irregular heart beat
- Anxiety and aggression

Is caffeine still fall in the category of Prohibited Substances?

No.

What are the threshold values for cathine, ephedrine, methylephedrine & pseudoephedrine?

Cathine –	5 micro grams per milliliter
Ephedrine-	10 micrograms per milliliter
Methylephedrine –	10 micrograms per milliliter
Pseudoephedrine –	150 micrograms per milliliter

What are narcotics?

Narcotics are essentially painkillers. This class of drugs include opium and its natural and synthetic derivatives including heroin, morphine and codeine.

What are the side-effects of narcotics?

- Addiction
- Loss of balance and co-ordination
- Loss of sleep & depression
- Nausea & dizziness
- Decreased heart rate

What are beta-blockers and what do they do?

Beta-blockers refer to a class of drugs that essentially block the action of adrenaline (epinephrine) in the body.

What are the medical uses of beta-blockers?

Beta-blockers are often used to manage cardiovascular disorders, such as high blood pressure, angina and abnormal heart rhythms. They are also used to treat migraines, to reduce symptoms of anxiety, and to control tremors.

What are the side effects of beta-blockers?

Numerous side effects have been associated with the use of beta – blockers. Some of these include:

- Lowered blood pressure
- Decreased heart beat
- Fatigue
- Decreased endurance
- Depression
- sleep disorders

What is a masking agent?

A masking agent is any substance or procedure used for the purpose of altering the urine or other sample of doping controls with effect of disguising prohibited substances. Masking agents are banned both in and out-of-competition.

What are Prohibited Methods?

The prohibited methods include Blood doping, Gene Doping and Chemical and Physical manipulation of sample.

What is blood doping?

Blood doping is the administration of blood or blood related products in order to increase the number of red blood cells in the body. This increases the blood's capacity to transport oxygen to the working muscles, thereby enhancing endurance. It may involve the use of blood previously withdrawn from the athlete (autologous transfusion) or from another person (homologous transfusion)

What are the medical reasons for administration of blood or blood products?

Red blood cells are administered for the treatment of severe anemia or for blood loss associated with surgery or severe trauma.

What are the side effects of blood doping?

Blood doping

- reactions

- Jaundice ; and
- Circulatory overload and heart failure

Flaws in technique increase the risk of the transmission of infectious diseases such as hepatitis and HIV/AIDS.

What does EPO stand for?

EPO stands for Erythropoietin. It is a naturally occurring hormone that is produced by the kidneys and stimulates the production of red blood cells.

What is the medical use of EPO?

In medicine, a synthetic form of EPO is used to treat patients with various forms of anemia.

How EPO is misused in sports?

Athletes have used EPO as an alternative to blood doping. Specifically, EPO has been abused by endurance athletes to enhance their body's oxygen carrying capacity by increasing their red blood cells. The increased red blood cells, in turn, enable more oxygen to be delivered to the muscles, thereby enhancing endurance.

What are the side effects of EPO?

There are serious health risks associated with abuse of EPO such as:

- Thickening of the blood with increased risk of blood clots, stroke and heart attacks, particularly if dehydrated; and
- Risk of hepatitis diseases and HIV/AIDS if non-sterile injection techniques are used or contaminated needles are shared.

What are the substances prohibited in particular sports?

Alcohol (ethanol) is prohibited In-Competition only, in certain sports such as archery, shooting, karate, powerboating etc. Detection is conducted by analysis of breath and/or blood. The doping violation threshold (haematological values) is 0.10 g/L

Beta blockers are prohibited In-Competition only, in certain sports such as Archery, Billiards & Snooker, Golf , Gymnastics, Shooting, wrestling etc.

DOPING CONTROL PROCESS

What are the steps in the Doping Control Process ?

Athlete selection

Athletes are selected by NADA/Organizing Committee during In-competition testing. In addition NADA also conducts tests during Out-of-competition, selection trials as well as target testing without no advance notice .

Notification

A Doping Control Officer (DCO) or chaperone will notify the athlete of selection for doping control. The DCO or chaperone will inform the athletes about their rights and responsibilities, including the right to have a representative present throughout the entire process. Athlete will be asked to sign the Notification Form confirming that they have been notified for doping control. For a minor or an athlete with a disability, a third party may be notified as well.

Report to the Doping Control Station

Athlete should report to the doping control station as soon as possible. The DCO may allow athlete to delay reporting to the station for activities such as press conference or the completion of a training session; however athlete will be accompanied by a DCO or chaperone from the time of notification until the

completion of the sample collection process.

Selection of Collection Vessel

Athlete will be given a choice of individually sealed collection vessels and athlete may select one. Athlete should verify that the equipment is intact and has not been tampered with. Athlete should maintain control of the collection vessel at all times.

Provision of Sample

Athlete and a DCO of the same gender are permitted in the washroom during the sample provision. Minors and athletes with a disability may also have their representative present; however this representative is not permitted to view the sample provision. The objective is to ensure that the DCO is observing the sample provision correctly.

Volume of Sample

The DCO shall ensure that a minimum 90 ml of urine sample is collected to satisfy the requirement for analysis.

Selection of the Sample Collection Kit

Athlete is given a choice of individually sealed sample collection kits from which to choose one. Athlete should verify that the equipment is intact and has not been tampered with. Open the kit and confirm that the Sample Code Numbers on the bottles, the lids, and the container all match. Athlete may additionally be asked to provide a blood sample.

Splitting the Sample

Athlete will split the sample, pouring the urine themselves, unless assistance is required due to disability. Pour the required volume of urine into the “B” bottle (>30ml) and pour the remaining urine into the “A” bottle (>60ml). Athlete will be asked to leave a small amount in the collection vessel so that the DCO can measure the specific gravity.

Sealing the Samples

Athlete should seal the “A” and “B” bottles and the DCO should verify that the bottles are sealed properly.

Measuring Specific Gravity

The DCO will measure the specific gravity of the sample to ensure it is not too diluted to analyze. If the sample does not meet the specific gravity requirement, athlete may be asked to provide additional sample.

Completion of Doping Control Form

Athletes should provide information on the Doping Control Form about any prescription or non – prescription medication or supplements they have taken recently. Athletes have the right to provide comments regarding the conduct of doping control session. Athlete should confirm that all of the information is correct, including the Sample Code Number. Athlete should receive a copy of the Doping Control Form. The laboratory copy of the form does not contain any information that could identify athlete.

The Laboratory Process

All samples are sent to the WADA accredited laboratories

RESULTS MANAGEMENT PROCESS

What is the Results Management Process of NADA ?

During the Results Management Process, the following procedure is followed by NADA

1. Upon receipt of an Analytical Findings for A sample from the laboratory (without bearing the name of athlete) the name of the athlete is decoded by NADA.
2. If the A sample proves negative i.e. no Prohibited Substance or Methods detected, the athlete and the

concerned National Federation (NF), International Federation (IF) and WADA shall be so informed.

3. If an Adverse Analytical Findings is reported for A sample, NADA will conduct an Initial Review to determine whether :-
 - a. an applicable Therapeutic Use Exemption (TUE) has been granted or will be granted as provided in the International Standard for TUE.
 - b. there is any apparent departure from The International Standard for Testing or International Standard for Laboratories that caused the Adverse Analytical Finding.
4. If the initial review validates the TUE and procedures for the prohibited substance (s) reported by the laboratory for A Sample, the sample is treated as negative, the athlete and the concerned NF, IF & WADA will be so informed.
5. If the Initial Review does not validate the Adverse Analytical Finding, the athlete is notified about his/her Adverse Analytical Finding of 'A' Sample. The concerned NF, IF and WADA are also notified.
6. If the Adverse Analytical Findings for A sample is for a Prohibited Substance that is not a specified substance, NADA shall provisionally suspend the athlete pending the hearing panel.
7. An athlete has the right to request for the analysis of his/her B Sample within seven (7) working days of receiving the notice concerning Adverse Analytical Finding of his/her A Sample.
8. If the athlete requests for 'B' Sample Analysis, NADA will contact the laboratory to schedule time and date and notify the athlete of the 'B' Sample Analysis.



9. If there is no request by the athlete to witness his/her 'B' Sample, NADA will inform the laboratory to conduct the 'B' sample Analysis in the presence of an Independent Observer.
10. If the 'B' sample Analysis by the laboratory proves negative, the entire test will be considered negative and the athlete, NF, (IF) and WADA shall be so informed.
11. If the 'B' Sample Analysis confirms that 'A' Sample Adverse Analytical Finding , a Second Notice will be served by NADA to the athlete alongwith a copy to the concerned parties i.e. NF, IF & WADA asserting the Anti Doping Rule Violation. The Anti Doping Disciplinary Panel will be also notified alongwith all documents relevant to the assertion, for disciplinary proceedings to be conducted in the positive case as per the WADA compliant Anti Doping Rules of NADA.
12. The athlete will be advised to present his/her case before the Anti Doping Disciplinary panel on the date & time fixed by the panel for hearing.
13. During the hearing process, the athlete is given an opportunity to be represented by Counsel and interpreter (at own expense) to establish basis for elimination or reducing the sanctions.
14. The athlete will have the right to appeal against the decision of the Anti Doping Disciplinary Panel by lodging a notice of appeal with the Anti Doping Appeal Panel within 14 days of the decision of the Anti Doping Disciplinary Panel.
15. In cases arising from competition in an international event or in cases involving international level athletes, the decision may be appealed exclusively to the Court of Arbitration for Sports (CAS).



Date : _____

No.

To,

The Concerned Athlete or Support Personnel

(Through the Concerned National Sports Federation to be served on the Athlete/Support Personnel in Confidential Cover)

Subject: - First Notice-Finding of an Anti Doping Rule Violation after the Initial Review.

Sir,

Subsequent to the Initial Review as required in the Results Management Process, and that there is no applicable Therapeutic Use Exemption (TUE), Anti Doping Rule Violation has been found to occur in your case. You are hereby notified of the same as detailed below:-

1. Name of the Athlete :
2. Country of the Athlete :
3. Sport of the Athlete :
4. Discipline of the Athlete :
5. Anti Doping Rule found to be Violated as per :
Anti Doping Rules of NADA& WADA Code
6. Nature of Anti Doping Rule Violated :
7. In case of violation of Article 2.1 of Anti Doping :
Rules of NADA/WADA

- i) Sample Collection-Whether In -Competition or Out –of- :
Competition
 - ii) Date of sample collection
 - iii) Sample Code Number :
 - iv) Confirmation that the A sample has returned :
an Adverse Analytical Finding and the details
of the Prohibited Substance identified in the A sample
 - v) The other parties who will be notified of the ‘A’ Sample
Adverse Analytical Finding.
8. Whether a Provisional Suspension is to be imposed. :
9. You are also hereby informed that:
- i) You have the right to respond to any assertion that an Anti
Doping Rule had been violated.
 - * ii) You have the right to request for the analysis of the B
sample within seven (7) working days of receiving this
notice of Adverse Analytical Finding of A Sample or, failing
such request, that the B sample analysis may be deemed
waived and the A sample finding used as evidence of the
Anti Doping Rule Violation. It is clarified that if your request
for B Sample analysis is not received within 7 working
days of receiving this notice, the B Sample will be analyzed
by the Laboratory in the presence of an independent
person appointed by NADA or the Laboratory on the expiry
of the above mentioned period.
 - iii) You and/or your representative has the right to attend the
B Sample Opening and Analysis, if such analysis is
requested.
 - iv) You have the right to request copies of the A and B Sample
Laboratory report which will include information as

- required by the International Standard for Laboratories.
- v) You have the right to waive your right to a hearing by acknowledging the Anti Doping Rule Violation asserted and the identified Consequences of the Anti Doping Rules Violation.
 - vi) Possible Consequences of the Anti Doping Rule Violation (As per annexure).
10. You are also required to immediately inform NADA of any previous case of Anti Doping Rule Violation/Adverse Analytical Finding in your case and the consequences /sanction imposed on you, if any, alongwith details /documents.

Your faithfully,

(Director General,
NADA/Authorized Signatory)

*The request for analysis of 'B' Sample must be made to the office of NADA.

Copy to:-

- (1) Concerned National Sports Federation with the request that this notice be served on the Athlete/Support-Personnel in Confidential Cover and the NADA be informed immediately of the date of Service. Along-with the information of service of this notice on the Athlete/Support Personnel, the NSF will also inform NADA about



any previous Case/Cases of Anti Doping Rule Violation/Adverse Analytical Finding against this Athlete/Support Personnel and the consequences/sanction if any imposed alongwith all details/documents.

- (2) Concerned International Sports Federation
- (3) World Anti Doping Agency (WADA)
Stock Exchange Tower, 800 Place Victoria (Suit 1700),
P.O. 120, Montreal (QUEBEC) H4Z1B7, CANADA

Annexure

Consequences of Anti Doping Rule Violation

As per the revised WADA Code 2009, for an Athlete or other Person's first anti-doping rule violation, the period of Ineligibility is set forth in Article 10.2 (Imposition of Ineligibility for Prohibited Substances and Prohibited Methods) and Article 10.3 (Ineligibility for Other Anti-Doping Rule Violations) unless the conditions for eliminating or reducing the period of Ineligibility, as provided in Articles 10.4 and 10.5, or the conditions for increasing the period of Ineligibility, as provided in Article 10.6, are met. For a second anti doping rule violation the period of Ineligibility shall be within the range set forth in the table (Article 10.7).

A third anti doping rule violation will always result in a lifetime period of Ineligibility (Article 10.7.3), except if the third violation fulfills the condition for elimination or reduction of the period of Ineligibility under Article 10.4 or involves a violation of Article 2.4 (Filing Failures and/or and Missed Tests). In these particular cases, the period of Ineligibility shall be from eight years to life ban.



CONFIDENTIAL

Date: - _____

No.

To,

The Concerned Athlete or Support Personnel
(Through the Concerned National Sports Federation)

Subject: Second Notice – Assertion of an Anti Doping Rule Violation.

Sir,

Please refer to the First Notice of finding of Anti Doping Rule Violation after Initial Review by which you were intimated of the Anti Doping Rule Violation found in your case (Copy enclosed).

Subsequent to the above notice, the 'B' Sample Analysis has been conducted in accordance with Rules (Article 7.3.5) and confirms the 'A' Sample Adverse Analytical Finding. (Copy of Adverse Analytical Finding of B Sample enclosed).

NADA now asserts that there has been Anti Doping Rule Violation (Article 2.1 of NADA/WADA Code). As per the Rules you are now liable for disciplinary proceedings.

The Anti Doping Disciplinary Panel constituted in compliance of the Rules is being notified, along with all documents relevant to the assertion, for disciplinary proceedings to be conducted in your case, in accordance with Article 8/any applicable guidelines.

You may forego your right to a hearing by waiving such right in writing and acknowledging the violation of this Anti Doping Rule and accepting the consequences consistent with the Rules/Code. The request for waiving such right must be made to the Anti Doping Disciplinary Panel, whereupon the Anti Doping Disciplinary Panel, on the merits of your case will take a decision with regard to the sanction/consequence to be imposed on you.



The other parties who are being notified of the assertion of Anti Doping Rule violation in your case are as below:

- (i) Concerned National Sports Federation –
- (ii) Concerned International Sports Federation –
- (iii) World Anti Doping Agency (WADA)

You are advised to present your case/defence before the Anti Doping Disciplinary Panel on the date fixed by the Panel for the hearing.

(Director General, NADA/Authorized Signatory)

Copy to:

(i) Chairman, Anti Doping Disciplinary Panel with all relevant documents and with the request to fix the date, time and place for hearings of the concerned Athlete/Support Personnel before the Anti Doping Disciplinary Panel and convey the same to the Athlete/Support Personnel. The concerned National Sports Federation and the Indian Olympic Association may also be made parties in the proceedings. The decision of the Anti Doping Disciplinary Panel shall be advised to the parties to the proceedings, WADA, the concerned International Federation (and to the Indian Olympic Association and concerned National Sports Federation if not a party to the proceedings) as soon as practicable, after conclusion of the hearing. The concerned parties may also be informed of their right to appeal the decision of the Anti Doping Disciplinary Panel by lodging a notice of appeal with the Anti Doping Appeal Panel within 14 days of the decision of the Anti Doping Disciplinary Panel.

Copy to:

II
III



APPLICATION FORM

**THERAPEUTIC USE EXEMPTIONS
TUE**

Please complete all sections in capital letters or typing

1. Athlete Information

Surname: _____ Given Names: _____
 Female Male Date of Birth (d/m/y) _____
 Address: _____
 City: _____ Country: _____ Postcode: _____
 Tel.: _____ E-mail: _____
 (with international code)
 Sport: _____ Discipline/Position: _____
 International or National Sport Organization: _____
 Please mark the appropriate box:
 I am part of an International Federation Registered Testing Pool
 I am part of a National Anti-Doping Organization Testing Pool
 I am participating in an International Federation event for which a TUE granted pursuant to the International Federation's rules is required¹-
 Name of the competition: _____
 None of the above
 If athlete with disability, indicate disability: _____

¹ Refer to your International Federation for the list of designated events



4. Medical practitioner’s declaration

I certify that the above-mentioned treatment is medically appropriate and that the use of alternative medication not on the prohibited list would be unsatisfactory for this condition.

Name: _____
Medical specialty: _____
Address: _____

Tel.: _____
Fax: _____ E-mail: _____

Signature of Medical Practitioner: _____ Date: _____

5. Athlete’s declaration

I, _____, certify that the information under 1. Is accurate and that I am requesting approval to use a Substance or Method from the WADA Prohibited List. I authorize the release of personal medical information to the National Anti Doping Agency (NADA), India as well as to WADA authorized staff, to the WADA TUEC (Therapeutic Use Exemption Committee) and to other ADO TUECs and authorized staff that may have a right to this information under the provisions of the Code.

I understand that my information will only be used for evaluating my TUE request and in the context of possible anti-doping violation investigations and procedures. I understand that if I ever wish to (1) obtain more information about the use of my information; (2) exercise my right of access and correction or (3) revoke the right of these organizations to obtain my health information, I must notify my medical practitioner and my ADO in writing of that fact. I understand and agree that it may be necessary for TUE-related information submitted prior to revoking my consent to be retained for the sole purpose of establishing a possible anti-doping rule violation, where this is required by the Code.

I understand that if I believe that my personal information is not used in conformity with this consent and the International Standard for the Protection of Privacy and Personal Information I can file a complaint to WADA or CAS.

Athlete’s signature: _____ Date: _____

Parent’s/Guardian’s signature: _____ Date: _____

(if the athlete is a minor or has a disability preventing him/her to sign this form, a parent or guardian shall sign together with or on behalf of the athlete)

6. Note:

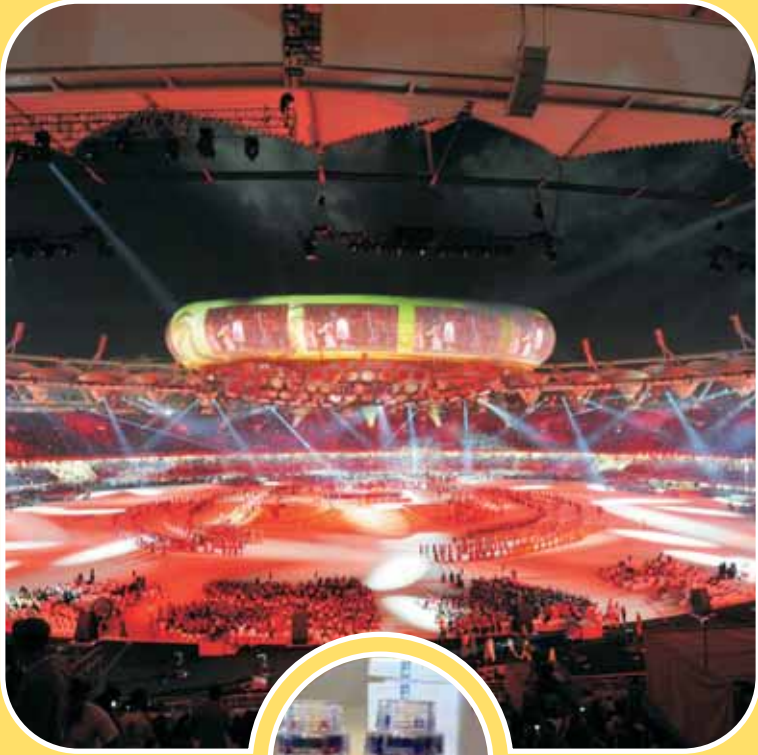
Note 1	<p>Diagnosis</p> <p>Evidence confirming the diagnosis shall be attached and forwarded with this application. The medical evidence should include a comprehensive medical history and the results of all relevant examinations, laboratory investigations and imaging studies. Copies of the original reports or letters should be included when possible. Evidence should be as objective as possible in the clinical circumstances and in the case of non-demonstrable conditions independent supporting medical opinion will assist this application</p>
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Incomplete Applications will be returned and will need to be resubmitted.

Please submit the completed form to the ADO and keep a copy for your records.

Further Queries May be Submitted To:

Director General
National Anti-Doping Agency,
'A' Block, Pragati Vihar Hostel, Lodhi Road, New Delhi
Phone:-011-24368243, 01124368274
TeleFax: 011-24368248
Email – info.nada@nic.in
Website:-www.nada.nic.in
WADA Website: www.wada-ama.org



Play fair

A Publication of National Anti Doping Agency of India