



# THE FOOTBALL ASSOCIATION DOPING CONTROL PROGRAMME

DOPING CONTROL REGULATIONS  
& PROCEDURAL GUIDELINES

Valid from 16th July 2011

Produced by The Football Association Football Regulation Department

## THE FOOTBALL ASSOCIATION DOPING CONTROL PROGRAMME REGULATIONS (the “DOPING REGULATIONS”)

### PREAMBLE

This Preamble is provided for guidance. If there is any inconsistency between the Preamble and the operative parts of the Doping Regulations (including the Schedules) the operative parts shall prevail. The headings contained in the Doping Regulations are provided for the purposes of convenience only and do not form part of and shall not affect the construction of the Doping Regulations.

Definitions are contained in Schedule Two to the Doping Regulations and Rule A2 of the Rules of The Football Association.

### 1. EFFECTIVE VERSION

These Regulations shall come into full force and effect on a date as approved by The FA Council. They shall not apply retrospectively to matters arising prior to that date; provided, however, that any case pending prior to that date, or brought after that date but based on a Doping Offence that occurred prior to that date, shall be governed by the Regulations in force at the time of the Doping Offence, subject to any application of the principle of *lex mitior* by the tribunal hearing the case.

Where a period of suspension imposed under a version of The FA's Anti-Doping Regulations in force prior to these Regulations has not yet expired as of the coming into force of these Regulations, any Participant who is so suspended may apply to The FA for a reduction in the period of suspension in light of any amendments made by these Regulations. To be valid, such application must be made before the period of suspension has expired.

Participants should be aware that the current version of the Doping Regulations may not be the version published in The FA Handbook. The current version will be published on The FA's website, located at [www.TheFA.com](http://www.TheFA.com).

These Regulations may be supplemented by further instructions or guidelines issued by The FA from time to time (“Supplemental Guidance”). Such Supplemental Guidance is binding on Participants and will be accessible via [www.TheFA.com](http://www.TheFA.com).

Participants should also note that the Prohibited List which sets out the banned substances may be updated from time to time independently of the Doping Regulations. Any changes made to the Prohibited List by World Anti Doping Agency (WADA) will be immediately recognised and enforced by The FA. The current version of the Prohibited List is available on WADA's website located at [www.wada-ama.org](http://www.wada-ama.org).

WADA's determination of the prohibited substances and methods that will be included in the Prohibited List is final. Neither that determination nor the determination of how such substances or methods are to be classified on the Prohibited List (eg as banned at all times or just In Competition; or as a Specified Substance) may be challenged in any way by any Participant.

In the event that WADA expands the Prohibited List by adding a new class of Prohibited Substances, WADA's Executive Committee shall determine whether any or all of the Prohibited Substances within the new class of Prohibited Substances shall be considered Specified Substances.

### 2. AIMS OF DOPING CONTROL

Doping has become a constant concern of international sports organisations and national governments.

The fundamental aims of doping control are threefold:

- to uphold and preserve the ethics of sport;
- to safeguard the physical health and mental integrity of Players; and
- to ensure that all Players have an equal chance.

The above fundamental aims are laid down by FIFA, WADA and The FA.

### 3. PARTICIPANT'S RESPONSIBILITIES

Participants accept the Doping Regulations as a condition of participation in football and shall be bound by them. It is every Participant's responsibility to ensure that they are aware of the Doping Regulations and that they comply with the Doping Regulations.

In particular, Players must –

- Be aware of and comply with all applicable Doping Control policies and Rules and Regulations adopted by The Football Association;
- Be aware in particular of what constitutes a Doping Offence under the Doping Regulations, including what substances and methods are prohibited under the Doping Regulations;
- Make themselves available for sample collection upon request;
- Take responsibility for all substances that they ingest and for all substances and methods that they Use;
- Inform medical personnel of their obligation not to Use Prohibited Substances and Prohibited Methods and to take responsibility to ensure that any medical treatment received does not contravene Doping Control policies and Rules and Regulations adopted by The Football Association.

In particular, Player Support Personnel must –

- Be aware of and comply with all applicable anti-doping policies and Rules and Regulations adopted by The Football Association;
- Co-operate with The Football Association's Doping Control Programme;
- Use their influence on Player values and behaviour to foster anti-doping attitudes.

The Doping Offences set out in the Doping Regulations may be committed by Participants and where relevant the Doping Regulations stipulate if a particular Doping Offence can only be committed by a certain category of Participants such as Players or Clubs. A Participant may be deemed to have committed a Doping Offence and/or Misconduct if it is carried out by a third party with that Participant's knowledge. For example, an external consultant (who is not a Participant for the purposes of the Doping Regulations) may have administered a Prohibited Substance to a Player but if this was done with the Club's knowledge the Club would be guilty of a Doping Offence in breach of the Regulations and/or guilty of Misconduct.

### 4. DRUG TESTING

Players are obliged to undergo drug tests as set out in these Doping Regulations. Testing may take place In Competition (i.e. on the day of a match up until the time that the testing procedures have been completed) or Out of Competition (i.e. at any other time) without any advance notice.

Participants should note that The FA conducts Out of Competition tests for:

- (i) Prohibited Substances and Prohibited Methods that are prohibited at all times (i.e. both In Competition and Out of Competition); and
- (ii) for Social Drugs. The FA is therefore also entitled to charge a Player with a Doping Offence if a Social Drug is present in an Out of Competition test (see further paragraph 6 below).

### 5. MANDATORY PENALTIES

Adverse Analytical Findings and the Use of Prohibited Substances and Prohibited Methods will be dealt with as strict liability offences. This means, for example, that a Player will be guilty of a Doping Offence if a Prohibited Substance, Metabolite or Marker is present in that Player's body. It is not relevant whether or not the Player intended to take the Prohibited Substance.

Participants should note that there are a number of mandatory penalties set out in the Doping Regulations which are based on the penalties stipulated by WADA. It is only in exceptional circumstances that these penalties may be reduced.

These Doping Regulations are intended to implement the mandatory provisions of the World Anti-Doping Code and should be interpreted in accordance with that purpose. The comments annotating the mandatory provisions of the World Anti-Doping Code may be used to assist in the understanding and interpretation of these Regulations.

## 6. SOCIAL DRUGS

Participants should note that The FA tests for substances which might be known as social drugs both In Competition and Out of Competition. Social Drugs are defined as amphetamine, cannabinoids (for example, hashish and marijuana), cocaine, diamorphine (heroin), lysergic acid diethylamide (LSD), methadone, methylamphetamine, methylenedioxymethylamphetamine (MDMA or ecstasy), and methylenedioxyethylamphetamine (MDEA).

The penalties set out in Regulation 45 apply if the Social Drugs are either present/detected, used/attempted to be used or possessed Out of Competition.

## 7. ENQUIRIES

Any enquiries should be made to:

The Doping Control Programme Manager  
The FA Doping Control Department  
The Football Association  
Wembley Stadium  
PO Box 1966  
London  
SW1P 9EQ  
Tel: 0844 980 8200 ext.4954

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## DOPING REGULATIONS

### PART ONE - DOPING OFFENCES

#### General

1. Where these Doping Regulations bring into effect the provisions of the 2009 FIFA Anti-Doping Regulations, in the event of any conflict between these Doping Regulations and the FIFA Anti-Doping Regulations, the provisions set out in the FIFA Anti-Doping Regulations shall prevail.
2. Doping Offences are set out and described in further detail in Doping Regulations 3 to 13 (inclusive). Committing a Doping Offence will be regarded as amounting to a breach of the Doping Regulations which must be complied with pursuant to Rule E 25 of the Rules of The Football Association. Conduct not covered by any of the specific Doping Offences may be regarded as Misconduct pursuant to Doping Regulation 14.

#### The presence of a Prohibited Substance or its Metabolite or Marker in a Player's Sample

3. The presence of a Prohibited Substance or its Metabolites or Markers in a Sample provided by a Player is prohibited unless the Player establishes that the presence is consistent with a Therapeutic Use Exemption that has been granted to the Player.
  - (a) Sufficient proof that a Doping Offence has been committed pursuant to Regulation 3 is established by either of the following: the presence of a Prohibited

Substance or its Metabolites or Markers in the Player's "A" Sample where the Player waives analysis of the "B" Sample and the "B" Sample is not analysed; or, where the Player's "B" Sample is analysed and the analysis confirms the presence of the Prohibited Substance or its Metabolites or Markers found in the Player's "A" Sample.

- (b) It is a Player's duty to ensure that no Prohibited Substance(s) or its Metabolites or Markers enters his body, and a Player is therefore strictly responsible for any Prohibited Substance or its Metabolites or Markers found to be present there. It is not necessary that intent, fault, negligence or knowing Use on the Player's part be demonstrated in order to establish a Doping Offence pursuant to Regulation 3. A Player's lack of intent, fault, negligence or knowledge is not a valid defence to a charge that a Doping Offence has been committed pursuant to Regulation 3.
- (c) Subject to Regulation 3(d) the detected presence of any quantity of a Prohibited Substances or its Metabolites or Markers in a sample will constitute a Doping Offence.
- (d) The Prohibited List may make special provision for substances which have a quantitative reporting threshold and/or which can be produced endogenously.
- (e) The Prohibited Substances are set out in the Prohibited List. The version of the Prohibited List in force as at the date of publication of the Doping Regulations is set out in Schedule 3. Participants should note that the Prohibited List may be updated from time to time by WADA. Participants must be aware that any change to the Prohibited List will be recognised and enforced by The FA from the date of such change. Any substance added to the Prohibited List shall immediately be deemed a Prohibited Substance for the purpose of the Doping Regulations. The current version of the Prohibited List can be accessed via the WADA website located at [www.wada-ama.org](http://www.wada-ama.org).
- (f) The FA will carry out testing:
  - (i) without giving advance notice to Participants; and
  - (ii) both In Competition and Out of Competition.
- (g) The FA may test for Social Drugs Out of Competition regardless of whether or not a particular Social Drug is classified as being prohibited In Competition only on the Prohibited List.
- (h) The penalties set out in Regulation 43 apply to this offence, unless the offence involves only a Social Drug which is present or detected in an Out of Competition test, in which case the penalties set out in Regulation 44 apply.

#### **The Use or Attempted Use of a Prohibited Substance or Prohibited Method**

- 4. The Use or Attempted Use of a Prohibited Substance or Prohibited Method by a Player is prohibited unless the Player establishes that the Use or Attempted Use is consistent with a Therapeutic Use Exemption that has been granted to the Player.
  - (a) The Prohibited Methods are set out in the Prohibited List which may be updated from time to time and recognised and enforced in the same manner described for Prohibited Substances set out in Regulation 3 above.
  - (b) It is a Player's duty to ensure that no Prohibited Substance(s) or its Metabolites or Markers enters his body and that he does not Use any Prohibited Method. It is not necessary that intent, fault, negligence or knowing Use on the Player's part be demonstrated in order to establish a Doping Offence pursuant to Regulation 4. A Player's lack of intent, fault, negligence or knowledge is not a valid defence to a charge that a Doping Offence of Use has been committed pursuant to Regulation 4. However, it is necessary to demonstrate intent on the Player's part to establish a Doping Offence of Attempted Use under Regulation 4.

- (c) The success or failure of the Use or Attempted Use of the Prohibited Substance or Prohibited Method is irrelevant.
- (d) The penalties set out in Regulation 43 apply to this offence, unless the offence involves only a Social Drug which is Used or Attempted to be Used Out of Competition, in which case the penalties set out in Regulation 44 apply. Otherwise, Out of Competition Use of a substance that is only prohibited In Competition is not a Doping Offence. If, however, an Adverse Analytical Finding is reported for such a substance or any of its Metabolites or Markers in respect of a Sample collected In Competition, that may be charged as a Doping Offence pursuant to Regulation 3.

#### **Failure or refusal to submit to testing or otherwise evading sample collection**

- 5. The failure or refusal by a Player without compelling justification to submit to drug testing after notification by a Competent Official is prohibited. Other evasion of sample collection is also prohibited.
  - (a) The offence of failing or refusing to submit to drug testing shall be deemed to be committed where a Player:
    - is requested to submit to drug testing by a Competent Official; and
    - fails or refuses to do so; and
    - lacks compelling justification for so doing.
  - (b) The expression “compelling justification” shall embrace, and shall only embrace, circumstances where it would be wholly unreasonable to expect a Player to submit to drug testing in the circumstances pertaining at the time, bearing in mind the limited commitment that this entails.
  - (c) The penalties set out in Regulation 45 apply to this offence.

#### **Missed tests (Players not in the IRTP or N RTP)**

- 6. It is prohibited for a Player to have missed three tests within any 18 month period. All Players must be present and available for drug testing in accordance with the whereabouts information provided by their Club to The Football Association. For the purposes of this regulation, all Players will be deemed to be aware of the detail of the whereabouts information provided to The Football Association by the Player’s Club.

##### *Players training with the First Team and Reserve Squad*

- (a) Any Player not present and available for drug testing at the squad time and location stated in such whereabouts information must:
  - (i) In advance of such absence, provide to The Football Association details of an alternative venue at which he will be present and available for drug testing, which must include a stipulated 60 minute time slot during which such testing may take place.  
This time slot must be on the same day as the Player’s absence, between 6am and 11pm, and must not commence for at least two hours from the time that the Player notifies The Football Association of his absence, and
  - (ii) Be present and available for drug testing for the whole of the 60 minute time slot stipulated by him.

Any Player who fails to comply with any of the requirements of either (i) or (ii) above will be deemed by The Football Association to have missed a test and will be notified of this.

*Players training with the Youth Squad, except for Players of Clubs competing in The Football League Youth Alliance*

- (b) Any Player not present and available for drug testing at the squad time and location provided in such whereabouts information who fails to either:
  - (i) Notify The Football Association of his absence in advance of that absence, or
  - (ii) Following the absence, provide to The Football Association independent corroborative evidence of the reason for that absence, will be deemed by The Football Association to have missed a test and will be notified of this.

*All Players*

- (c) It is the responsibility of each Player to comply with any and all requirements of this regulation that apply to them.
- (d) Any Player who is deemed by The Football Association to have missed a test may be targeted for testing by The Football Association.
- (e) The penalties set out in Regulation 46 apply to this offence.
- (f) This offence does not apply to Players included in the International Registered Testing Pool or National Registered Testing Pool for the period that they are so included.

**Failure to provide whereabouts information / missed tests for Players in the National Registered Testing Pool (NRTP)**

- 7. The FA, in consultation with the NADO, may create an NRTP in accordance with Part Four of Schedule One to these Doping Regulations. Players within the NRTP ("NRTP Players") shall be notified by The FA of their inclusion in it. NRTP Players only shall be subject to this Regulation. NRTP Players are not subject to Regulation 6 whilst they are NRTP Players.
  - (a) The FA may stipulate from time to time requirements for NRTP Players concerning
    - (i) their provision of whereabouts information to the NADO via ADAMS; and
    - (ii) their availability for testing in accordance with such whereabouts information ("the NRTP whereabouts requirements"). These NRTP whereabouts requirements will be as set out in section 11 of the International Standard for Testing, the current version for which can be found at [www.wada-ama.org](http://www.wada-ama.org).
  - (b) It is the responsibility of all NRTP Players to ensure that they are aware of the NRTP whereabouts requirements issued in accordance with sub-paragraph (a).
  - (c) Failure by an NRTP Player to comply with the NRTP whereabouts requirements, whether by failing to file the required information or by failing to be available where they said they would be (each "a whereabouts failure") three times in any 18 month period shall be a breach of this Regulation.
  - (d) Players included in the International Registered Testing Pool ("IRTP Players") are subject to the requirements of Appendix D of FIFA's Anti-Doping Regulations.
  - (e) A whereabouts failure (whether a filing failure or a missed test) declared by FIFA in respect of an IRTP Player who is also an NRTP Player may be treated as a whereabouts failure for the purposes of sub-paragraph (c) above.
  - (f) The penalties set out in Regulation 46 apply to this offence.

**Administration or Attempted administration of a Prohibited Substance or a Prohibited Method**

- 8. The administration or Attempted administration of a Prohibited Substance or a Prohibited Method to a Player (with or without his knowledge) is prohibited, unless it is (i) administration or Attempted administration that is consistent with a Therapeutic Use Exemption that has been granted to the Player or (ii) administration or Attempted administration Out of Competition of a substance that is not Prohibited Out of Competition

and that is not a Social Drug. Assisting, encouraging, aiding, abetting, covering up or any other type of complicity involving a Doping Offence or any Attempted Doping Offence by a Participant is also prohibited.

- (a) If this offence is committed by a Player the penalties set out in Regulation 47 apply.
- (b) If this offence is committed by a Participant (other than a Player) the penalties set out in Regulation 50 apply.

#### **Interference with the Doping Control Programme**

9. Interference with the conduct of a drug test or the Doping Control Programme by a Participant (or by a third party with a Participant's knowledge) is prohibited.
- (a) The actions set out in Regulations 9(b) - 9(e) (inclusive) shall without limitation be regarded as a breach of this Regulation 9.
  - (b) The independent private testing/screening of Players for Prohibited Substances by a Participant (or by a third party with a Participant's knowledge) for whatever reason is prohibited.
  - (c) A Participant interfering in the drug testing process where such conduct falls short of the tampering offence set out in Regulation 10, including for example but without limitation, handling samples when not permitted or authorised to do so by a Competent Official.
  - (d) A Club failing to comply with the reasonable instructions of The FA or a Competent Official with regard to the adequacy of the Doping Control Station which must contain the minimum facilities set out in the Procedural Guidelines.
  - (e) A Participant engaging in conduct intended to procure that a Player is not presented for drug testing or is delayed from being presented for drug testing is prohibited. This may include by way of example and without limitation:
    - (i) a Club either: (i) failing to allow a Competent Official access to a Player; or (ii) delaying a Competent Official from gaining access to a Player to notify such Player of a test;
    - (ii) a Club intentionally or negligently acting, or omitting to act, in such a way as to result in: (i) the Player failing to be notified of the requirement to submit to testing; or (ii) a delay in the Player being notified of the requirement to submit to testing;
    - (iii) a delay in the Player submitting himself for testing following such notification (note that a failure to submit to drug testing is a separate Doping Offence covered by Regulation 5 and a delay in the Player submitting himself for testing following notification may also amount to a Doping Offence under Regulation 5 );
    - (iv) a Club failing to present a selected Player for testing due to the Player sustaining a serious injury, where the Club fails to provide satisfactory evidence of the Player's admission to hospital and/or attendance at a medical consultation in relation to that injury, to The FA within 14 days of the intended drug test. A serious injury is one which renders a Player incapable of taking a test and/or requires immediate attendance at hospital for medical treatment.
    - (v) where The FA has attended a Club for Out of Competition testing and the Club fails to present a selected Player for testing due to a scheduled medical appointment, where the Club fails to provide satisfactory evidence of the prior arrangement of the appointment and the Player's attendance at that appointment to The FA within 14 days of the intended drug test.

- (f) If this offence is committed by a Player the penalties set out in Regulation 48 apply.
- (g) If this offence is committed by a Participant (other than a Player) the penalties set out in Regulation 51 apply.

#### **Tampering or Attempted Tampering**

- 10. Tampering or Attempted Tampering with any part of Doping Control is prohibited.
  - (a) If this offence is committed by a Player the penalties set out in Regulation 45 apply.
  - (b) If this offence is committed by a Participant (other than a Player) the penalties set out in Regulation 49 apply.

#### **Possession**

- 11. Each of the following – Possession by a Player at any time or place of a Prohibited Method or of a substance that is prohibited Out of Competition, or of a Social Drug; Possession by a Player In Competition of any Prohibited Substance that is only Prohibited In Competition; Possession by a Player Support Personnel at any time or place of a Prohibited Method, or of a substance that is prohibited Out of Competition, or of a Social Drug, in connection with a Player, a Match or a training session; and Possession by a Player Support Personnel In Competition of any substance that is only prohibited In Competition, in connection with a Player, a Match or Training Session is prohibited unless the Player or Player Support Personnel establishes that the Possession is consistent with a Therapeutic Use Exemption that has been granted to a Player.
  - (a) If this offence is committed by a Player the penalties set out in Regulation 43 apply, unless the offence involves only a Social Drug which is possessed Out of Competition in which case the penalties set out in Regulation 44 apply.
  - (b) If this offence is committed by Player Support Personnel the penalties set out in Regulation 49 apply.

#### **Trafficking or Attempted Trafficking**

- 12. Trafficking or Attempted Trafficking in a Prohibited Substance or a Prohibited Method by a Participant (or by a third party with the Participant's knowledge) is prohibited.
  - (a) If this offence is committed by a Player the penalties set out in Regulation 47 apply.
  - (b) If this offence is committed by a Participant (other than a Player) the penalties set out in Regulation 50 apply.

#### **Club Whereabouts information**

- 13. Failure of a Club to give The FA accurate whereabouts information when requested to do so is prohibited.
  - (a) This offence shall cover a situation where a Club fails to provide regular details of the times, dates and venues of club training sessions and/or the information contained in such reports is either initially inaccurate or has not been updated by the Club.
  - (b) The FA (whether through the Doping Control Department or otherwise) may issue directions from time to time about:
    - (i) the type of information to be submitted; and
    - (ii) the manner and timeframe in which such whereabouts information must be submitted by Clubs. The failure to adhere to such directions will be considered in determining whether a Doping Offence has been committed pursuant to this Regulation 13.
  - (c) The penalties set out in Regulation 51 apply to this offence.

**Misconduct**

14. The Doping Offences are set out and described in further detail in Doping Regulations 3 to 13 (inclusive above). Committing a Doping Offence will be regarded as amounting to a breach of the Doping Regulations which must be complied with pursuant to Rule E 25 of the Rules of The Football Association. Conduct not covered by any of the specific Doping Offences may be regarded as Misconduct (as defined in the Rules of The Football Association).
  - (a) If this offence is committed by a Player the penalties set out in Regulation 48 apply.
  - (b) If this offence is committed by a Participant (other than a Player) the penalties set out in Regulation 51 apply.

**PART TWO – TESTING PROCEDURES**

15. Administrative and procedural guidelines for the conduct of drug testing including the obtaining of a “sample” are set out in the Procedural Guidelines for the Conduct of Drug Testing (the “Guidelines”) contained in Schedule One
16. Procedural guidelines for sample collection are also set out in the WADA International Standard for Testing (the “International Standard”), a copy of which is available on WADA’s website [www.wada-ama.org](http://www.wada-ama.org). To the extent that the Guidelines are inconsistent with the International Standard, the International Standard shall prevail.

**PART THREE – COMMENCING DISCIPLINARY PROCEEDINGS AND STANDARD OF PROOF****Disciplinary proceedings**

17. If:
  - (a) a laboratory detects the presence of a Prohibited Substance in a sample; or
  - (b) a laboratory or The FA discovers evidence of the use or attempted use of a Prohibited Substance or a Prohibited Method; or
  - (c) evidence comes to The FA’s attention suggesting that any Doping Offence may have been committed;The FA shall consider the evidence available and shall decide whether a charge shall be brought by The FA against a Participant.
18. Once evidence of the possible commission of a Doping Offence by a Participant has been received by The FA upon which it may charge, The FA shall (where relevant) inform the Participant, and in the case of a Player a senior representative of his Club and if the Player is a member of The Professional Footballers’ Association (“The PFA”) a representative of the PFA as soon as is reasonably practicable and may require a written explanation from the Participant within a designated time. The FA may also require that the Participant attends a personal interview. The Participant will be invited to give an explanation for the evidence of the commission of a Doping Offence. The Participant is entitled to be accompanied by one representative of his Club, a legal adviser and if relevant a representative of The PFA. Such an interview may be recorded and may be used by The FA in any disciplinary proceedings brought against such Participant.
19. If no satisfactory explanation is provided The FA will generally decide to commence disciplinary proceedings against the Participant.
20. The FA must commence disciplinary proceedings within 8 years of the date on which the Doping Offence occurred. The FA shall provisionally suspend a Player from the date that The FA notification of an Adverse Analytical Finding in respect of an A Sample for a Prohibited Substance other than a Specified Substance is communicated to the Player. The FA may provisionally suspend a Participant in other cases, and/or a Participant may wish to accept

a provisional suspension, for the purposes of Regulation 35(b). In the event of a provisional suspension, the Participant shall be entitled to an expedited hearing and determination of the charge against him.

#### **Burden and standard of proof**

21. The provisions of Regulation 7.3 of Regulations for Football Association Disciplinary Action shall not apply in Doping Offence cases brought under these Regulations. Instead in such Doping Offence cases The FA shall bear the burden of proving, to the comfortable satisfaction of any Regulatory Commission or Appeal Board, or any other relevant commission or board, bearing in mind the seriousness of the allegations that are made, that a Doping Offence has taken place. This standard of proof in all cases is greater than a mere balance of probability but less than proof beyond a reasonable doubt. For the avoidance of doubt this Regulation does not apply to a charge for misconduct pursuant to Regulation 14.
22. Where these Doping Regulations place the burden of proof on a Participant to rebut a presumption or establish specific facts or circumstances the standard of proof shall be on the balance of probabilities, except as expressly provided for in Parts Eight and Nine, where the Participant must satisfy a higher standard of proof.

#### **Methods of proof for Doping Offences**

23. Facts relating to Doping Offences may be established by any reliable means, including admissions.
24. WADA accredited laboratories are presumed to have conducted sample analysis and custodial procedures in accordance with the International Standard for Laboratories. A Participant may rebut this presumption by establishing that a departure from the International Standard for Laboratories occurred that could reasonably have caused the Adverse Analytical Finding (or the factual basis for any other Doping Offence with which the Participant is charged). If the Participant does so, then The FA shall have the burden of establishing that such departure did not cause the Adverse Analytical Finding (or the factual basis for the other Doping Offence with which the Participant is charged).
25. Departures from any other International Standard, the Guidelines or any other Doping Control regulation, rule or policy which did not cause an Adverse Analytical Finding or the factual basis for any other Doping Offence with which a Participant is charged shall not invalidate such evidence. It is for the Participant to establish that such departures occurred which could have reasonably caused the Adverse Analytical Finding or the factual basis for the other Doping Offence. If the Participant does so then The FA shall have the burden of establishing that such departures did not cause the Adverse Analytical Finding or the factual basis for the other Doping Offence charged.
26. Facts established by a decision of a court or professional disciplinary tribunal which is not the subject of a pending appeal shall be irrebuttable evidence of those facts against the Player or other Participant to whom the decision pertained unless that Player or Participant establishes that the decision contravened principles of natural justice. To the extent that this Regulation differs from Regulation 6.8 of the Regulations for Football Association Disciplinary Action, this Regulation shall prevail. This Regulation applies only to Doping Offences.
27. A Regulatory Commission hearing a Doping Offence charge may draw any such adverse inference as it sees fit against a Player or other Participant based on their refusal to appear at the hearing or answer questions relating to the charge, after any request that they do so made in reasonable time.

#### **PART FOUR – THERAPEUTIC USE EXEMPTIONS**

28. A Player may request The FA to grant an exemption allowing him to take a substance for medical purposes which is normally prohibited under the Doping Regulations. The FA may delegate the question of whether a Therapeutic Use Exemption ("TUE") should be granted

to the NADO or any such other body The FA considers appropriate. The forms, procedure and criteria for the grant of a TUE are attached as Schedule Five to the Doping Regulations.

#### **PART FIVE – PENALTIES (GENERAL)**

##### **Imposition of penalties**

29. In disciplinary proceedings brought pursuant to these Regulations the Regulatory Commission shall have the power to impose a penalty in accordance with Parts Six, Seven and Eight. Unless the Participant establishes that there are grounds to eliminate or reduce such penalties in accordance with any applicable provision of Part Nine, the Regulatory Commission shall have no discretion to reduce those penalties.
30. The penalties may be increased based on a finding of aggravating circumstances as set out at Part Ten.
31. Where a Regulatory Commission also imposes a fine in respect of a Doping Offence, this shall not be considered as grounds for reducing any period of suspension applicable under these Regulations.

##### **Doping offences committed in other sporting jurisdictions**

32. When considering the imposition of a penalty in accordance with the Doping Regulations, the Regulatory Commission shall take into account doping offences committed pursuant to the regulations of FIFA, UEFA, or any other sports governing body wherever located in the world whether or not such other bodies govern football, provided that those offences are consistent with the World Anti-Doping Code and within that other body's authority. Otherwise the Regulatory Commission has the discretion to take them into account.

##### **Counselling, treatment and rehabilitation**

33. The Regulatory Commission may consider whether, in addition to imposing a penalty, a period of assessment, counselling, treatment or rehabilitation is appropriate. In deciding upon a course of assessment, counselling treatment or rehabilitation, the Regulatory Commission may make such a course subject to such conditions as it considers appropriate in the circumstances. If the Regulatory Commission imposes a period of assessment, counselling, treatment or rehabilitation and the Player refuses to undergo, or fails to complete, such a period, The FA may commence disciplinary proceedings against that Player under Rule 25 of the Rules of The Football Association, or impose a pre-existing penalty such as a deferred suspension as if no period of assessment, counselling, treatment or rehabilitation had taken place.

##### **Commencement of suspensions**

34. Subject to Regulations 35 and 36 a period of suspension shall commence from the date that such a penalty is determined by a hearing in accordance with The FA's disciplinary procedures or if the Participant waives the right to a hearing on the date that the Player is notified of the period of suspension.
35.
  - (a) Where there have been substantial delays in the hearing process or other aspects of Doping Control that are not attributable to the Participant, the period of suspension may be deemed to have started at any time from the date the Doping Offence occurred (eg the date of the sample collection) to take account of such delays.
  - (b) The period of any provisional suspension will count towards the total period of suspension imposed by the hearing body. However no period before the imposition of a provisional suspension or the acceptance in writing of a voluntary suspension by the Player shall count towards the total period of suspension imposed by the Regulatory Commission regardless of whether the Player voluntarily did not participate in football activity during this time or was suspended from doing so by his club.

36. Where the Player promptly admits the Doping Offence (which means, in all cases, before he participates in football activity again) after being notified of the Doping Offence by The FA, the period of suspension may be deemed to have started at any time from the date the Doping Offence occurred (e.g. the date of the sample collection). However, in all cases where this Regulation 36 is applied the Player must serve at least one half of the period of suspension starting from the date that the Player accepted the imposition of the suspension, the date of a hearing decision imposing a sanction or the date that the sanction is otherwise imposed.

#### Status during a suspension

37. (a) A Participant who is the subject of a suspension pursuant to these Regulations cannot during the period of suspension participate in any capacity in any Match or any other football related activity other than anti doping education or rehabilitation programmes. The FA may (in its absolute discretion) permit a Player who has been suspended for more than six months to return to training and/or other football related activity with his club (but not participate in any Match) prior to the end of his suspension, as follows (provided that no such return is permitted unless agreed in writing in advance by The FA) -

<b>Period of suspension</b>	<b>Number of months prior to end of suspension that activity may be resumed</b>
Less than six months	Zero months
Six to nine months	One month
Ten months to one year	Two months
One year or more	Three months

- (b) A Player or other Participant subject to a period of suspension longer than four (4) years may, after completing four (4) years of the period of suspension, participate in local sport events in a sport other than the sport in which the Player or other Participant committed the Doping Offence, but only so long as the local sport event is not at a level that could otherwise qualify such Player or other Participant directly or indirectly to compete in (or accumulate points toward) a national championship or International Event.
38. In addition to any period of suspension, for a Doping Offence not involving a Specified Substance, The FA will withhold some or all of any sports related payments otherwise due to the Player from The FA during the period of suspension.
39. Where any Player contravenes the terms of his suspension from participating in football and football related activity, the period of suspension originally imposed on the Player shall start again from the date of such contravention. A Player may seek a reduction in the period of such a suspension if he establishes no significant fault or negligence for the contravention of his suspension in accordance with Part Nine. A Regulatory Commission shall determine whether such a contravention has occurred and whether the Player has established no significant fault or negligence.

#### Reinstatement testing

40. A Player who is the subject of a suspension pursuant to these Regulations must make himself available for testing during any period of suspension and must at the request of The FA (or other sports governing body if the Player moves outside of The FA's jurisdiction) provide details of his whereabouts to The FA (or other sports governing body) to allow such testing to take place.
41. Any Player who is the subject of a suspension pursuant to these Regulations and retires from football must make himself available for testing if he seeks to participate in any other sports competition. Where any such Player seeks a return to football activity, he may only do so once he has notified The FA of his intention to return and has made himself available

- for Out of Competition testing for a period equal to the period of suspension he remained subject to when he retired.
42. If a Player who is not suspended retires from football, such that he is no longer subject to testing by The FA or any other relevant authority, he may not return to participate in football activity unless he notifies The Football Association in writing at least six months before he expects to resume football activity and makes himself available for Out of Competition testing and (if requested) complies with the whereabouts requirements during that six month period.

#### **PART SIX - PENALTIES FOR A DOPING OFFENCE COMMITTED BY A PLAYER**

##### **Presence, use, possession**

43. Subject to the provisions of Regulations 44 and 65 - 82 (inclusive), for an offence committed by a Player under Regulation 3 (the presence of a Prohibited Substance), Regulation 4 (the use/attempted use of a Prohibited Substance/Prohibited Method), or Regulation 11 (possession) the following penalties must be imposed;
- (a) for a first offence – 2 years suspension; and
  - (b) for repeated offences – refer to the table at Regulation 52.

##### **Presence, use or possession of a Social Drug Out of Competition**

44. Subject to the provisions of Regulations 65 – 82 (inclusive), for an offence committed by a Player which occurs Out of Competition and involves a Social Drug under Regulation 3 (the presence of a Prohibited Substance), Regulation 4 (the use/attempted use of a Prohibited Substance/Prohibited Method), or Regulation 11 (possession) a penalty within the following range must be imposed:
- (a) for a first offence – a minimum of a warning and a maximum of 6 months suspension;
  - (b) for a second offence – a minimum of 6 months and a maximum of 2 years suspension;
  - (c) for a third offence – a minimum of 2 years and a maximum of a permanent suspension; and
  - (d) for a fourth offence – a minimum of a permanent suspension.

##### **Failure to test, tampering**

45. Subject to the provisions of Regulations 68 – 82 (inclusive), for an offence committed by a Player under Regulation 5 (failure to test) or Regulation 10 (tampering) the following penalties must be imposed -
- (a) for a first offence – 2 years suspension; and
  - (b) for repeated offences – refer to the table at Regulation 52.

##### **Missed tests**

46. For an offence committed by a Player under Regulation 6 (missed tests) or Regulation 7 (failure to provide whereabouts information / missed tests for NRTP Players) the following penalties must be imposed:
- (a) for a first offence – a minimum one year suspension and a maximum of two years suspension based on the Player's degree of fault; and
  - (b) for repeated offences – refer to the table at Regulation 52.

##### **Administration or trafficking**

47. Subject to Regulations 68 – 79 for an offence committed by a Player under Regulation 8 (administration) or Regulation 12 (trafficking) the following penalties must be imposed:
- (a) for a first offence – a minimum of 4 years, up to a permanent suspension;
  - (b) for repeated offences – refer to the table at Regulation 52.

If the first offence involves a Player administering or trafficking to a person under the age of 18 the offence shall result in a minimum of permanent suspension unless the offence involves only a Specified Substance. Any significant offences that may also breach non-sporting laws and / or regulations shall be reported to the competent authority.

Subject to Regulations 68 – 79 for an offence committed by a Player under Regulation 8 (administration) which occurs Out of Competition and involves only a Social Drug, the following penalties must be imposed:

- (c) for a first offence – a minimum of 6 months and a maximum of 12 months suspension;
- (d) for a second offence – a minimum of 12 months and a maximum of 4 years suspension;
- (e) for a third offence – a minimum of 4 years and a maximum of a permanent suspension;
- (f) for a fourth offence – a minimum of a permanent suspension.

#### **Interference or misconduct**

48. For an offence committed by a Player under Regulation 9 (interference with the doping control programme) and Regulation 14 (misconduct) the Regulatory Commission shall have at its disposal all of the penalties set out in Regulation 8.1 of the Regulations for Football Association Disciplinary Action.

### **PART SEVEN - PENALTIES FOR A DOPING OFFENCE COMMITTED BY A PARTICIPANT (OTHER THAN A PLAYER)**

#### **Tampering or possession**

49. Subject to Regulations 65-82 (inclusive) in the case of possession only, and Regulations 68-82 (inclusive) in the case of tampering only, for an offence committed by a Participant (other than a Player) under Regulation 10 (tampering) or for an offence committed by Player Support Personnel under Regulation 11 (possession) the following penalties must be imposed:

- (a) for a first offence – 2 years suspension; and
- (b) for repeated offences – a minimum of permanent suspension.

Subject to Regulations 65 – 82 for an offence committed by Player Support Personnel under Regulation 11 (possession) which occurs Out of Competition and involves only a Social Drug, the following penalties must be imposed:

- (a) for a first offence – a minimum of 6 months and a maximum of 12 months suspension;
- (b) for a second offence – a minimum of 12 months and a maximum of 4 years suspension;
- (c) for a third offence – a minimum of 4 years and a maximum of a permanent suspension;
- (d) for a fourth offence – a minimum of a permanent suspension.

#### **Administration or trafficking**

50. Subject to Regulations 68 - 79 for an offence committed by a Participant (other than a Player) under Regulation 8 (administration) or Regulation 12 (trafficking) the following minimum penalties must be imposed:

- (a) for a first offence – a minimum of four years, up to a permanent suspension;
- (b) for repeated offences – a minimum of permanent suspension.

If the first offence involves Player Support Personnel administering or trafficking to a person under the age of 18 the offence shall result in a minimum of permanent suspension unless

the offence involves a Specified Substance. Any significant offences that may also breach non-sporting laws and / or regulations shall be reported to the competent authority.

#### **Interference, misconduct or whereabouts**

51. For an offence committed by a Participant (other than a Player) under Regulation 9 (interference with the doping control programme) and Regulation 14 (misconduct) or for an offence committed by a Club under Regulation 13 (whereabouts information) the Regulatory Commission shall have at its disposal all of the penalties set out in Regulation 8.1 of the Regulations for Football Association Disciplinary Action.

#### **PART EIGHT - MULTIPLE OFFENCES**

52. Penalties for a Player's first Doping Offence are set out in Regulations 43 -48 above. For a second Doping Offence, save for one involving only a Social Drug committed Out of Competition, the penalty shall be as set out below –

Second Offence \ First Offence	RS	FFMT	NSF	St	AS	TRA
RS	1-4	2-4	2-4	4-6	8-10	10-Life
FFMT	1-4	4-8	4-8	6-8	10-Life	Life
NSF	1-4	4-8	4-8	6-8	10-Life	Life
St	2-4	6-8	6-8	8-Life	Life	Life
AS	4-5	10-Life	10-Life	Life	Life	Life
TRA	8-Life	Life	Life	Life	Life	Life

*Definitions for the purpose of the second Doping Offence table:*

**RS** (reduced sanction for Specified Substance under Regulations 65-67): The Doping Offence did incur or should incur a reduced sanction under Regulations 65-67 because it involved a Specified Substance and the other conditions under Regulations 65-67 were met.

**FFMT** (missed tests): The Doping Offence was or should be sanctioned under Regulation 46.

**NSF** (reduced sanction for no significant fault or negligence): The Doping Offence did incur or should incur a reduced sanction under Regulations 71-72 because the Participant established No Significant Fault or Negligence under Regulations 71-72 was proved by the Player.

**St** (standard sanction under Regulations 43 or 45): The Doping Offence did incur or should incur the standard sanction of two years under Regulations 43 or 45.

**AS** (aggravated sanction): The Doping Offence did incur or should incur an aggravated sanction under Regulations 80 - 82 because The FA established the conditions set forth under Regulations 80-82.

**TRA** (Trafficking or Attempted Trafficking and administration or Attempted administration): The Doping Offence did incur or should incur a sanction under Regulation 47.

**Application of reductions to second Doping Offence**

53. Where a Participant who commits a second Doping Offence establishes entitlement to suspension or reduction of a portion of the period of suspension under Regulations 73 – 79 below, the Regulatory Commission shall first determine the otherwise applicable period of suspension within the range established in the table under Regulation 52 and then apply the appropriate suspension or reduction of the period of suspension. The remaining period of suspension, after applying any suspension or reduction, must be at least one quarter of the otherwise applicable period of suspension.

**Application to specific previous Doping Offences**

54. Any Doping Offence that took place prior to the enforcement of these Regulations shall be taken into account for the purposes of applying the provisions of the table at Regulation 52 above. For these purposes, a Doping Offence that occurred prior to the enforcement of these Regulations, and involved a substance that is categorised as a Specified Substance under these regulations where the period of suspension imposed was less than two years, that previous Doping Offence shall be considered as having incurred a reduced sanction (RS).

**Third Doping Offence**

55. A third Doping Offence will always result in a lifetime period of suspension, except if the third Offence fulfils the condition for elimination or reduction of the period of suspension for specified substances under specific circumstances under Regulations 65 - 67 (inclusive), or involves a Doping Offence under Regulation 6 (missed tests). In these particular cases, the period of suspension shall be from eight years to a lifetime ban.

**Additional rules for certain potential multiple Doping Offences**

56. When imposing penalties for second or subsequent Doping Offences ("Repeat Offences"), such Repeat Offences may only be considered if The FA establishes that the Participant committed the Repeat Offence after the Participant received notice or The FA made a reasonable attempt to give notice of the previous Doping Offence. If The FA is unable to establish that it has given or attempted to give notice the Doping Offences shall be considered as one single Offence and the penalty imposed shall be the more severe penalty. However, the occurrence of multiple Doping Offences may be considered as a factor in determining aggravated circumstances under Regulations 80-82.

**Additional rules for prior, but later-discovered Doping Offences**

57. If, after the establishment of a first Doping Offence, The FA discovers facts involving a Doping Offence by the Player that occurred prior to notification regarding the first Doping Offence, then The FA shall impose an additional sanction based on the sanction that could have been imposed if the two Doping Offences had been dealt with by a Regulatory Commission at the same time. To avoid the possibility of a finding of aggravating circumstances on account of the earlier but later-discovered Doping Offence, the Player must voluntarily admit the earlier Doping Offence in a timely manner after notice of the Doping Offence for which he is first charged. The same rule shall also apply when The FA discovers facts involving another prior Doping Offence after the establishment of a second Doping Offence.

**Multiple Doping Offences during an eight-year period**

58. For the purpose of Regulations 52 - 57, each Doping Offence must take place within the same eight-year period in order to be considered multiple offences.

**Target testing of the team**

59. Where more than one member of a team has been notified of a Doping Offence under Schedule One in connection with a Competition, The FA shall conduct appropriate target testing of the team during that Competition in the same playing season.

**Sanction on a Club**

60. If more than two Players of a team are found to have committed a Doping Offence (not including a Doping Offence involving only a Social Drug out of Competition, or a Doping Offence contrary to Regulation 6 (missed tests) or Regulation 9 (interference with the Doping Control Programme) as these Doping Offences are not contained in the World Anti Doping Code) during a Competition and in the same playing season, whilst registered to play for that team, a Regulatory Commission shall impose a sanction on that team or its Club, in addition to any sanction imposed on the Players who committed such Doping Offences.
61. This sanction shall automatically follow from the Doping Offences committed by the Players. The team or Club will not be entitled to challenge the findings of the Regulatory Commission or Appeal Board in relation to the Doping Offences committed by the individual Players, but shall be entitled only to address a Regulatory Commission in mitigation before any sanction is imposed on the team or Club,
62. The sanctions available to a Regulatory Commission in such circumstances shall be as follows –
- (i) A points deduction;
  - (ii) Forfeit of a match or matches;
  - (iii) Exclusion of a team from a competition;
  - (iv) A fine.

**PART NINE - REDUCTION OF PENALTIES FOR EXCEPTIONAL OR SPECIFIC CIRCUMSTANCES****General**

63. If the Participant establishes any of the applicable conditions set out in Regulations 65 - 72 the Regulatory Commission may replace the penalties set out in Regulations 43 - 50 with the penalties stipulated in Regulations 65 - 72 (inclusive).

**Principles for Exceptional or Specific Circumstances**

64. Decisions taken under these Regulations regarding exceptional or specific circumstances must be consistent. Therefore the following principles shall apply –
- (a) Exceptional or specific circumstances will exist only where the circumstances are truly exceptional and not in the vast majority of cases;
  - (b) The evidence must be decisive and specific to explain the departure from expected standards of behaviour;
  - (c) A Player's or Participant's minority is not in itself a justification of a reduction of the minimum penalty, but youth and inexperience are factors to be taken into account in determining fault under Regulations 68 - 72 below.

**Specified Substances under Specific Circumstances**

65. For these purposes, Specified Substances shall mean all Prohibited Substances classified as such in the Prohibited List. Prohibited methods shall not be Specified Substances.
66. If the offence was committed by a Player under Regulation 3 (the presence of a Prohibited Substance), by a Player under Regulation 4 (the use/attempted use of a Prohibited Substance), or by a Player/Player Support Personnel under Regulation 11 (possession) and the Player/Player Support Personnel:
- (i) establishes that the relevant Doping Offence involves a Specified Substance; and
  - (ii) establishes how that Specified Substance entered his body or came into his possession; and
  - (iii) establishes that there was no intention to enhance sporting performance or to mask the Use of a performance enhancing substance, then (subject to Regulation 67), the penalties can be reduced as follows:

- (a) for a first offence – a minimum of a warning and reprimand without any period of suspension and a maximum of 2 year's suspension;
  - (b) for repeated offences – refer to the table at paragraph 52.
67. For a reduction of the minimum penalty to be applied, the Player/Player Support Personnel must produce corroborating evidence in addition to his word that establishes to the comfortable satisfaction of the Regulatory Commission that there was no intention to enhance sporting performance or mask the use of a performance enhancing substance. The Player/s / Player Support Personnel's degree of fault shall be the criterion used in assessing any reduction in the penalty.

#### **No Fault or Negligence (Exceptional Circumstances)**

68. If the offence was committed by a Player under Regulation 3 (the presence of a Prohibited Substance) and the Player:
- (i) establishes that he bears No Fault or Negligence and;
  - (ii) proves how the Prohibited Substance entered his body then the minimum period of suspension shall be eliminated.
69. If the offence was committed by a Player under Regulation 4 (the use/attempted use of a Prohibited Substance/Prohibited Method), Regulation 5 (failure to test) or by a Player/Player Support Personnel under Regulation 8 (administration/attempted administration), Regulation 9 (tampering), Regulation 11 (possession), or Regulation 12 (trafficking) and the Player/Player Support Personnel establishes that he bears No Fault or Negligence then the minimum period of suspension shall be eliminated.
70. For the avoidance of doubt if the provisions set out in Regulations 68 or 69 are applied and the minimum period of suspension is eliminated the offence will not be considered for the purposes of determining the period of suspension if multiple Doping Offence have been committed.

#### **No Significant Fault or Negligence (Exceptional Circumstances)**

71. If the offence was committed by a Player under Regulation 3 (the presence of a Prohibited Substance) and the Player:
- (i) establishes that he bears No Significant Fault or Negligence and;
  - (ii) proves how the Prohibited Substance entered his body then the penalty may be reduced but the reduced period of suspension (if it is a first offence) may not be less than twelve months. If the minimum penalty would otherwise be a permanent suspension the reduced period under this provision would be no less than eight years.
72. If the offence was committed by a Player under Regulation 4 (the use/attempted use of a Prohibited Substance), or Regulation 5 (failure to test), or by a Player/Player Support Personnel under Regulation 8 (administration/attempted administration), Regulation 10 (tampering), Regulation 11 (possession) or Regulation 12 (trafficking) and the Player/Player Support Personnel/Participant establishes that he bears No Significant Fault or Negligence for the relevant Doping Offence then the minimum penalty may be reduced to not less than one half of the minimum penalty otherwise applicable. If the minimum penalty would otherwise be a permanent suspension the reduced period under this provision would be no less than eight years.

#### **Assistance in Discovering Doping Offences**

73. The FA or Regulatory Commission may suspend a part of any period of suspension imposed in an individual case where the Participant has provided Substantial Assistance to The FA, NADO, UEFA, FIFA or another national football association or an anti-doping organisation, criminal authority or disciplinary body, which results in The FA, NADO, UEFA, FIFA, the national association or other anti-doping organisation discovering or establishing a Doping Offence by another person or which results in a criminal or disciplinary body discovering or establishing a criminal offence or the breach of professional rules by another person. If the

decision to suspend the suspension on account of Substantial Assistance is made after a final decision following an appeal from a decision of a Regulatory Commission in respect of a Doping Offence or the expiration of time in which an appeal must be brought, then the approval of WADA or FIFA is required.

74. Subject to Regulation 75, the extent to which the otherwise applicable period of suspension may be suspended shall be based on the seriousness of the Doping Offence committed by the Participant and the significance of the Substantial Assistance provided by the Participant to the effort to eliminate doping in sport.
75. No more than three-quarters of the otherwise applicable period of suspension may be suspended. If the otherwise applicable period of suspension is a lifetime, the non-suspended period under this section must be no less than eight years.
76. If the FA or Regulatory Commission suspends any part of the otherwise applicable period of suspension under this article, it shall promptly provide a written justification for its decision to each anti-doping organisation having a right to appeal the decision.
77. If the Regulatory Commission subsequently reinstates any part of the suspended period of suspension because the Player has failed to provide the Substantial Assistance that was anticipated, the Participant may appeal the reinstatement.

#### **Admission of a doping offence in the absence of other evidence**

78. Where a Participant voluntarily admits to having committed a Doping Offence before having received notice of a sample collection that could establish a Doping Offence or, in the case of a Doping Offence other than under Regulation 3 (presence of a Prohibited Substance), before receiving first notification of the admitted offence pursuant to Regulation 18, and that admission is the only reliable evidence of the offence at the time of admission, then the period of suspension may be reduced, but not below one half of the period of suspension otherwise applicable

#### **Reduction in sanction under more than one provision**

79. Before applying any reduction or suspension under Regulations 65 – 78 (inclusive), the otherwise applicable period of suspension shall be determined. If the Player establishes entitlement to a reduction or suspension of the period of suspension under two or more of Regulations 65 - 78, then the period of suspension may be reduced or suspended, but not below one quarter of the otherwise applicable period of suspension.

### **PART TEN – INCREASE OF PENALTIES**

#### **Aggravating circumstances that may increase the period of suspension**

80. If it is established before a Regulatory Commission or Appeal Board that aggravating circumstances are present in a Doping Offence case (except for offences under Regulation 7 (administration) or Regulation 12 (trafficking)) which justify a period of suspension greater than the standard sanction, then the period of suspension shall be increased up to a maximum of four years, unless the Player or other Participant can prove to the comfortable satisfaction of the Regulatory Commission or Appeal Board that he did not knowingly commit the Doping Offence.
81. A Player or other Participant can also avoid the imposition of an increased suspension by admitting the Doping Offence promptly after being notified of it by The Association.
82. Examples of aggravating circumstances for these purposes include but are not limited to the following
  - The Doping Offence was part of a plan or scheme to commit Doping Offences, whether individually or as part of a conspiracy or group enterprise;
  - Multiple Prohibited Substances or Methods were involved in the Doping Offence or it took place on multiple occasions;

- A normal person would benefit from the performance enhancing effects of the Doping Offence for a period beyond the otherwise applicable period of suspension;
- The Player or other Participant involved in obstructive or deceptive behaviour to conceal the Doping Offence.

#### **PART ELEVEN - APPEALS**

83. Appeals from the following decisions made pursuant to these Regulations – a decision that a Doping Offence was (or was not) committed; a decision imposing (or not imposing) penalties for commission of a Doping Offence; a decision that a charge should not be made based on an Adverse Analytical Finding or other evidence (whatever the reason, including procedural reasons such as lapse of time); a decision that The FA or Regulatory Commission lacks jurisdiction to deal with a charge; a decision to suspend a period of suspension under Regulations 73 – 76; a decision to reinstate a suspended period of suspension under Regulation 77; and a decision under Regulation 39 - may be made to an Appeal Board and will be dealt with in accordance with the Regulations for Football Association Appeals, regardless of which party brings the appeal. Any such appeal which involves a Player included in FIFA's International Registered Testing Pool (IRTP) shall be made to CAS.
84. In addition to The FA and the Participant who is the subject of the decision, FIFA, the NADO and WADA shall also have the right to appeal against a decision referenced in Regulation 83. Such decisions shall be notified immediately to FIFA, the NADO and WADA. The deadline for FIFA, the NADO and / or WADA to lodge such an appeal shall be 21 days from receipt of the decision and any case file from The FA. Regulation 1.2 of the Regulations for Football Association Appeals shall not apply to FIFA, the NADO or WADA in such cases. Both the Participant who is the subject of the decision and the Association shall have the right to act as a Respondent where an appeal is brought by FIFA, the NADO or WADA.
85. FIFA and WADA shall also have the right to appeal to CAS against any decision of the Appeal Board in relation to a Doping Offence, which would otherwise be final and binding under the Regulations for Football Association Appeals. Such decisions of the Appeal Board shall be sent immediately to FIFA and WADA. The deadline for FIFA and WADA to lodge such an appeal shall be 21 days from receipt of the decision and any case file from The FA.
86. Notwithstanding any other provision of these Regulations, where WADA has a right of appeal under these Regulations against a decision, and no other party has appealed against that decision, WADA may appeal that decision directly to CAS without having first to exhaust any other remedy, including (without limitation) without having to appeal to the Appeal Board. Where The FA fails to render a decision with respect to whether a Doping Offence was committed within a reasonable deadline set by WADA, WADA may elect to appeal directly to CAS as if The FA had rendered a decision finding no Doping Offence. If CAS determines that a Doping Offence was committed and that WADA acted reasonably in electing to appeal directly to CAS, WADA's costs and legal fees shall be reimbursed by The FA.
87. A Player only may appeal against a Provisional Suspension imposed upon him by the Chairman of the Judicial Panel in accordance with Schedule One of these Regulations. Such appeal shall be in accordance with the Regulations for Football Association Appeals.

#### **PART TWELVE – MISCELLANEOUS**

88. The FA will recognise testing, TUEs and hearing results or other final adjudication of any signatory of the World Anti-Doping Code that are consistent with the Code and within the signatory's authority. The FA will recognise the same actions of bodies that are not signatories of the World Anti-Doping Code if the rules of those bodies are otherwise consistent with the World Anti-Doping Code.

89. Where doping control has been carried out in accordance with FIFA's Anti-Doping Regulations, whether by FIFA or another confederation or association, The FA shall recognise the results of such doping control.
90. The FA shall recognise and render effective decisions taken by FIFA or another national association regarding a breach of FIFA's Anti-Doping Regulations.
91. Personal information that is provided pursuant to these Regulations shall be collected, stored, processed and/or disclosed in compliance with the applicable law and the International Standard for the Protection of Privacy and Personal Information. Any Participant providing such information shall be deemed to have consented to such treatment.

## SCHEDULE ONE

### Procedural Guidelines for the Conduct of Drug Testing

#### PART ONE – GENERAL PROVISIONS

##### 1. General

- 1.1. Testing will be carried out in substantial conformity with the International Standard for Testing and these Guidelines (as amended from time to time). The FA has test jurisdiction over all Participants, Drug testing may be conducted on both male and female Players and reference in these guidelines to “a Player” includes either gender, as appropriate.
- 1.2. Drug testing refers to the collection of both blood and urine samples. The decision to collect blood and/or urine samples at a test event is at the absolute discretion of the NADO and The Football Association. Ordinarily, blood testing will be conducted only on Players who are registered with, or loaned to clubs in the FA Premier League, or who are members of an England squad on the day of a test event. If other Players are to be tested then the minimum requirements for blood testing set out in paragraph 6.1 shall not be deemed to apply.
- 1.3. Drug testing may be conducted on Players under the age of 18 years. Where a Player under 18 years is to be tested, any consent or signature that is required by these Regulations is to be given by a representative of the Player’s Club. It is the responsibility of each Club to ensure that it has obtained, from a person with parental responsibility for any minor, prior written consent to the conduct of drug testing upon such a minor. No Player under the age of 18 may participate in any football activity without such consent being obtained.
- 1.4. All Participants shall be responsible for knowing what constitutes a Doping Offence and the substances and methods that have been included in the Prohibited List.
- 1.5. Players are obliged to undergo drug testing as set out in these Regulations. In particular, every Player designated to undergo a drug test by a Doping Control Officer, or Blood Collection Official whether as a result of target testing or random selection, is obliged to provide a urine sample and, if requested, a blood sample, and to cooperate with the latter in this respect.

##### 2. CONFIDENTIALITY

- 2.1. A Player has the right to access information relevant to his test held in relation to the Doping Control Programme. The FA may however refuse such access if, for example but without limitation, the release of such information:
  - (a) would jeopardise any charges brought or to be brought by The FA or jeopardise an ongoing investigation whether or not this involved the Player who was being charged;
  - (b) would jeopardise the rights of third parties (including the source(s) of information received by The FA); or
  - (c) appears to be sought by the Player for an improper or collateral purpose.
- 2.2. Periodically The FA may publish to the NADO or the public in general, in summary and anonymised form, reports of tests undertaken on Players.
- 2.3. In the event of a Adverse Analytical Finding or the issuance of a charge The FA shall notify the NADO and Sport England of the details of such positive finding or charge.
- 2.4. The FA may notify FIFA or UEFA of the results of any sample analysis.
- 2.5. The FA shall not comment publicly on the specific facts of a pending case, except in response to public comments attributable to the Participant concerned or their representatives.
- 2.6. In the event of disciplinary proceedings, including appeal proceedings, The FA may publish, in the press or otherwise, certain matters of fact relating to such proceedings (see “Regulations on General Provisions relating to Inquiries, Commissions of Inquiry,

- Regulatory Commissions of The Association. Other Disciplinary Commissions and Appeal Boards” contained in The FA Handbook) and following the disciplinary proceedings The FA (and /or the NADO where the disciplinary proceedings concern a Doping Offence contained in the World Anti- Doping Code) may publicly disclose (at its election) the decision or the outcome of the proceedings, save where the decision is that that no Doping Offence has been committed, in which case the decision may only be disclosed publicly with the consent of the Participant.
- 2.7. Notwithstanding paragraph 2.6, the Regulatory Commission or Appeal Board may order that some or all of the text of any decision it reaches in a doping case may not be published, where there are compelling reasons not to publish. In such cases, only the outcome may be published.

## **PART TWO – DRUG TESTING**

### **3. Sample Collection Form(s)**

- 3.1. It should be noted that the Sample Collection Form and Sample Collection Form (Blood) used in the doping control programme are generic and not specific to football.
- In the event of any conflict between the terms of any form(s) and the Doping Regulations or these Guidelines, the Doping Regulations and Guidelines shall prevail.

### **4. Test Distribution Planning**

- 4.1. The NADO will draw up the test distribution plan for football in consultation with The FA Doping Control Department. Players shall be selected for sample collection using random selection methods and targeted testing, as required.
- 4.2. Target testing shall be based on an intelligent assessment of the risks of doping and the most effective use of resources to ensure optimum detection and deterrence. If more than one Player in a team has tested positive, target testing shall be performed on all Players in the team.
- 4.3. For individual Players, target testing may be performed as a consequence of:
- (a) behaviour indicating doping
  - (b) abnormal biological parameters (blood parameters, steroid profiles etc.)
  - (c) injury
  - (d) repeated, or suspicious failure to make whereabouts filings
  - (e) player test history
  - (f) the conditions of a disciplinary order,
  - (g) reinstatement following a period of suspension
  - (h) any other reason determined by The Football Association or the NADO.
- 4.4. Testing that is not target testing shall be determined by random selection. During In Competition periods, the DCO and / or The Football Association Supervising Officer (“FASO”) may select additional Players for sample collection, e.g. based on behaviour indicating doping. Target testing conducted Out of Competition shall be as determined by the NADO in consultation with The FA Doping Control Department.

## **General**

### **5. Notification of Drug Testing**

- 5.1. The sample collection will be carried out by Doping Control Officers (DCOs), and where blood testing is conducted, by Blood Collection Officials (BCOs). DCOs and BCOs may be accompanied by Chaperone(s) who will assist in the notification procedure and in chaperoning Players. During testing conducted In Competition and during testing conducted using the whereabouts information specified in Regulation 6, a FASO will also be present (i) to act as a point of liaison between the Club and Player and the DCO(s)/

- BCO(s)/ Chaperone(s), and (ii) to facilitate the conduct of drug testing and (iii) to report any matters of interest or concern to The FA.
- 5.2. Before drug testing is carried out, if requested by the Player and/or any Club official, the Competent Officials must show their identification cards. The Competent Officials are under no obligation to present their identification cards where the circumstances render this unreasonable, in particular where a Player is failing to cooperate with the conduct of the testing or is failing or refusing to provide a sample.
  - 5.3. On arriving at a venue for In Competition drug testing or for testing using the whereabouts information specified in Regulation 6, the Competent Officials will attempt to make contact with an official from the relevant Club. For an In Competition test the official would be the Secretary of the home Club or if the Secretary is not present or otherwise unavailable contact will be made with another official from the home Club.
  - 5.4. If requested by a DCO, BCO, FASO or Chaperone, any Player selected for drug testing may be required to produce photographic identification to prove their identity.

## 6. Facilities for the Collection of Samples

- 6.1. At all venues used for drug testing, clubs are obliged to provide as a minimum the following secure areas (collectively known as the "Doping Control Station") for the collection of samples:
  - (a) A clean, adequately lit private waiting area, with sufficient seating for the Players waiting to be tested, and
  - (b) A clean, private working area of sufficient size to comfortably accommodate the persons referred to in paragraph 16.3 below, which should contain clean fixed surfaces for sampling equipment and samples, and
  - (c) Private toilets.

Where Players are subject to blood testing under these regulations, a comfortable chair and/or bed for the Player to use during the provision of a blood sample, and sufficient space for the Player to lay down, should also be provided in addition to the above requirements.

- 6.2. The Doping Control Station must be allocated for the sole use of the Competent Officials for the duration of the doping control process. Where practical all areas required for the Doping Control Station must be linked or within the proximity of each other. The Doping Control Station must be clearly identified. The Doping Control Station should be made available in a usable condition and should be clean.
- 6.3. The Competent Officials will provide the equipment that is required for the drug testing including where applicable collection vessels, containers, sample bottles, and approved sealing equipment.
- 6.4. Prior to the start of testing the Competent Officials should satisfy themselves that the Doping Control Station facilities are adequate. Clubs must comply with any reasonable requests made by the Competent Officials if they do not believe that the facilities are adequate. The FA may make a written request for a Club to alter or improve its Doping Control Station or the facilities used for the same and the Club shall alter or improve its Doping Control Station to meet the request within a reasonable timeframe to be stipulated by The FA.
- 6.5. The DCO(s) will make every effort to collect samples as discreetly as possible and with maximum privacy, but it must be recognised that circumstances may impose difficulties upon a DCO that cannot easily be overcome.
- 6.6. Once the Competent Officials have confirmed their satisfaction with the facilities provided only those people listed in paragraph 16.3 of these Guidelines should be allowed into the Doping Control Station until completion of the doping control process.
- 6.7. It is recommended that the Club arranges for a security guard/steward to be positioned outside the Doping Control Station to keep unauthorised persons from entering the Station. A 'No Entry' sign should be displayed.

**7. Verification of whereabouts information**

8. On occasion, The FA may send officials to training venues in order to verify the accuracy of the squad whereabouts information submitted by a club. Such verification may be conducted separately to, or in accordance with drug testing. Clubs must provide FA staff attending for this purpose with all necessary assistance to complete this task satisfactorily.

**9. Random selection of Players**

- 9.1. The selection of Players for drug testing is at the complete discretion of The FA and the NADO. If it is decided to select Players on a random basis, the random selection by a draw of required Players will be conducted by the Lead DCO witnessed by the Competent Officials.
- 9.2. Only the Competent Officials need to be present for the draw, although official(s) from the relevant Club(s) whose Players are subject to testing will be invited to be present, however, the non presence of any such officials will not invalidate the draw.
- 9.3. Additional "reserve" Players will be drawn in case a Player is unable for good reason and/or fails without compelling justification to submit to the doping control process.  
If a Player is evaluated to have missed a test without good reason and/or fails without compelling justification to submit to the doping control process the Player may be subject to penalties for breaching the Doping Regulations.
- 9.4. The timing of the draw will be at the complete discretion of The FA and the NADO but in the case of an In Competition test will not ordinarily take place later than half-time.
- 9.5. Notwithstanding the fact that the primary purpose of a particular doping control visit is to conduct random testing, target testing of further Players may also be conducted at that time as a separate matter.

**10. Target testing**

- 10.1. In addition to random testing The FA and / or NADO may conduct target testing on Clubs or Players, including Players in the current representative England first team squads. Target testing may be requested by the Professional Footballers' Association and/or Clubs.
- 10.2. Target testing will take place at a date and time determined by The FA and/or the NADO. The Player may be required to supply whereabouts information to The FA to allow such testing to take place.

**11. Player responsibilities**

- 11.1. The Player's rights include the right to:
- (a) have the team physician or other representative and, as required, an interpreter present;
  - (b) be informed and ask for additional information about the sample collection process;
- 11.2. The Player's obligations include the requirement to:
- (a) remain within direct observation of the BCO, DCO or the Chaperone at all times from the point of notification until completion of the sample collection;
  - (b) comply with sample collection procedures (where practicable the Player shall be advised of the possible consequences of failure to comply);
  - (c) report immediately for a test, unless there are valid reasons for a delay, as determined at the absolute discretion of the DCO or BCO.

**12. Notification of Players**

- 12.1. Following the draw for a random selection of Players an appropriate Club representative will be notified of the Players selected. For In Competition testing this will be via a written notice in the form set out in Schedule 4.
- 12.2. It is the obligation of the Club and all Club officials to ensure that the Competent Officials are given clear and unobstructed access to Players selected for testing without delay. Clubs

and Club officials are under a duty to provide the Competent Officials with all reasonable assistance they may require to locate the Player and carry out the notification process and sample collection as expeditiously and as efficiently as possible. Clubs and Club officials must do all in their power to ensure that Players selected for testing make contact with the Competent Officials as soon as reasonably practicable. Any failure to do so may be treated as a breach of the Doping Regulations.

- 12.3. Once contact has been made between the selected Player and the Competent Official the Player will be notified of his selection for drug testing and must in accordance with paragraph 16.1 below immediately report to the Doping Control Station. The Player must allow himself to be chaperoned at all times following the notification. Save only where written acknowledgement is clearly impracticable at the time of notification, upon notification the Player must acknowledge that he has been selected for drug testing by signing the relevant section of the Sample Collection Form or Sample Collection Form (Blood). In those exceptional cases where written acknowledgement is impracticable at the time of notification, the Player should confirm the notification when he gets to the Doping Control Station, by signing the relevant section of the form at that point.
- 12.4. If a Player is evaluated to have avoided notification without compelling justification the Player will be deemed to have committed a Doping Offence and may be subject to penalties for breaching the Doping Regulations and/or for general misconduct.

### **13. Authorisation not to test**

14. At the absolute discretion of the FASO a Player may be excused participation in a test if the Player has sustained a serious injury which renders him incapable of taking a drug test and/or requires immediate attendance at hospital for medical treatment. The FA reserves the right for a Competent Official to accompany the injured Player to allow a test to be carried out following the required medical treatment.
15. If the injured Player is not accompanied to hospital, the Player and/or the Club must provide evidence to The FA of the Player's admission to hospital or of other medical treatment arising from that injury within 14 days of the day of the intended test. In this event a sample will be taken from another Player of the same team, either selected at random or pre-selected as a reserve. Clubs and Club officials must ensure that a Player pre-selected as a reserve does not leave the stadium, training ground or other relevant venue until the Player has checked with a DCO that he is not required for drug testing.

### **16. Collection of Samples**

- 16.1. Having been notified, a Player must immediately report to the Doping Control Station. On reporting to the Doping Control Station, the Player must (if he has not done so already) acknowledge that he has been selected for drug testing by signing the relevant section of the Sample Collection Form or Sample Collection Form (Blood). He must then remain there until the testing process is completed. He may leave the Doping Control Station only under exceptional circumstances with the prior permission of the Lead DCO and then only if chaperoned by a DCO or Chaperone at all times until his return to the Doping Control Station.
- 16.2. If a Player fails or refuses to report to provide a sample, reports and refuses to provide a sample or otherwise fails to follow the directions of the Competent Officials he will be deemed to have committed a Doping Offence and may be subject to penalties for breaching the Doping Regulations and/or for general misconduct.
- 16.3. Only the following persons should be allowed into the working room of the Doping Control Station:-
  - (a) the FASO;
  - (b) the DCO(s);
  - (c) the BCO(s);

- (d) the Chaperone(s);
- (e) the Player;
- (f) the team physician or other representative nominated by the Player (and interpreter if required); and
- (g) any other person specified by the NADO and/or The FA.

The Competent Officials may reasonably refuse access to the Doping Control Station to any person not listed in this paragraph 16.3.

- 16.4. Where a sample is to be taken from a Player under 18 years of age, the Player will be given the opportunity to have a representative, selected by and of the same gender as the Player, where practicable, present during the doping control process at all times.

## **17. Failure to comply with doping control**

- 17.1. When any Competent Official becomes aware of any matters occurring before, during or after a sample collection session that may lead to a determination of a failure to comply, he must inform the FASO and Lead Doping Control Officer immediately.

- 17.2. The Lead DCO shall then:

- (a) inform the Player or other party concerned of the consequences of a possible failure to comply if practicable;
- (b) complete the Player's sample collection session, if possible;
- (c) provide a detailed written report of any possible failure to comply to The FA and the NADO.

- 17.3. The FA shall then:

- (a) inform the Player or other party concerned of the possible failure to comply in writing and grant the Player an opportunity to respond;
- (b) instigate an investigation of the possible failure to comply based on all relevant information and documentation;
- (c) document the evaluation process.

- 17.4. If The FA determines that there has been a potential failure to comply, it shall promptly notify the Player or other party in writing of the possible consequences, i.e. that a potential failure to comply will be investigated and that appropriate follow-up action will be taken in accordance with the FA Doping Control Regulations.

- 17.5. Any additional necessary information about the potential failure to comply shall be obtained from all relevant sources, including the Player or other party, as soon as possible and recorded.

- 17.6. The FA shall investigate the potential failure to comply and take appropriate follow-up action in accordance with the Doping Regulations and the Disciplinary Regulations.

- 17.7. The FA Doping Control Department shall establish a system for ensuring that the outcomes of its investigation into the potential failure to comply are considered for the purposes of results management and, if applicable for further planning and target testing.

## **18. Urine Samples**

- 18.1. As soon as a Player feels that he is ready to provide a urine sample, he may select a sample collection vessel and a lid from a number of clean, unused vessels/lids and proceed to provide the sample. The collection of the sample should be witnessed by a DCO who is the same gender as the Player.

- 18.2. Each Player is to be requested to provide a minimum of 90ml of urine. However, any 'shortfall' in the amount of urine provided shall not invalidate the test provided there is sufficient sample for the analysis to be adequately performed.

- 18.3. If initially a Player is unable to provide the required amount of urine, the sample should be sealed and kept secure in the Doping Control Station. If a Competent Official permits him to leave the Doping Control Station (under chaperone), the Player must satisfy himself that

- the partial sample has been sealed and safely stored prior to leaving the Doping Control Station. When ready to add to the sample previously provided the Player may return to the relevant area and provide a further sample in accordance with the procedure set out in paragraph 18.1 of these Guidelines.
- 18.4. Once the DCO is satisfied that a sufficient amount of urine has been collected the Player will be asked to select a box containing two tamper-evident sample bottles and to pour his sample from the collection vessel into the bottles. One sample bottle will be used as the "A" Sample and the other as the "B" Sample.
- 18.5. If (a) further sample(s) are provided pursuant to paragraph 18.3 of these Guidelines such sample(s) will be mixed together by the Player (or in exceptional circumstances where the Player is unable to do so by a DCO) to create a single sample.
- 18.6. The DCO will carry out a test on the residue of the sample left in the collection vessel to check the specific gravity of the sample to ensure that it falls within the range required by the International Standard for Testing. If the sample does not meet the required range the Player must provide further sample(s) in accordance with the procedure set out in paragraph 18.1 of these Guidelines until a sample is provided that meets the required range. The number of additional samples to be collected is at the sole discretion of the DCO conducting the test, who may decide to abandon the test if circumstances prohibit the collection of further samples. For the avoidance of doubt a sample may still be analysed if it falls outside of the range.
- 18.7. The urine sample must be divided by the Player (or in exceptional circumstances where the Player is unable to do this by a DCO in the presence of the Player) into the two bottles. It is recommended that the Main "A" Sample consists of at least 60ml and the Reserve "B" Sample of at least 30ml of urine.
- 18.8. The two bottles must be closed and sealed by the Player (or in exceptional circumstances where the Player is unable to do this by a DCO in the presence of the Player) and inserted into the box for transit to the laboratory. The Player should ensure that the code on each bottle is the same as that entered by the DCO on the Sample Collection Form.
- 18.9. The Player, any accompanying representative and the DCO present at the Doping Control Station must sign the Sample Collection Form, confirming that the above procedures were carried out. If the Player thinks that the procedures were not carried out satisfactorily, he should declare so in writing on the Sample Collection Form and state his reasons for dissatisfaction. If the Player does not indicate any dissatisfaction with the testing procedure, this shall amount to conclusive evidence that the test was properly conducted and the Player will be deemed to have waived a claim to any irregularity in the collection of the sample.
- 19. Blood Samples**
- 19.1. Upon arrival at the Doping Control Station, the Player will be provided with an opportunity to hydrate. The Player will be required to sit, and to remain seated and relaxed for a time specified by the DCO before providing the blood sample. Should the Player not comply with this request then this will be recorded by the DCO.
- 19.2. The DCO or BCO will ask the Player to provide information in relation to each of the following:
- (i) the Player's use of medication that may affect the sample collection, particularly any medication that may affect blood clotting; and
  - (ii) any disorder suffered by the Player that may affect bleeding.
- 19.3. If the Player provides any information in relation to either of the above, this should be recorded on the Sample Collection Form (Blood), and the BCO (after consultation with the DCO) may determine in his or her sole discretion not to proceed with the collection procedure, in which case the DCO shall complete the Sample Collection Form (Blood) stating the reason why the BCO did not proceed with the collection.

- 19.4. After the required rest period, the DCO shall direct the Player to choose three sealed packs of blood collection kit from a selection of at least six. The DCO/BCO will then direct the Player to choose one blood sample storage kit (containing an A and B sample bottle) from a selection of at least three.
- 19.5. If, in assessing the Player's veins, the BCO considers that a butterfly needle is required for sample collection, the Player shall be asked to select a butterfly needle from a selection of sealed needles.
- 19.6. The BCO will then insert the needle into the Player's vein and attach the first container to the needle to collect the blood from the arm. Once the first amount of blood is collected, the first container will be removed and the second container will be attached onto the needle and the second amount of blood collected. The second container will then be removed with the needle still in the vein. If a tourniquet has been used, this will be released, and the needle will be removed from the vein.
- 19.7. In the event that the BCO is unable to withdraw sufficient blood from the first attempt, the BCO will undertake a second attempt to collect the blood sample from a different puncture site and using a new collection kit. No more than three attempts in total to insert a needle into the Player's body will be made on a Player at any one blood collection session. Should all three attempts fail, the blood collection session will be terminated and the DCO or BCO will record the reasons for terminating the collection session. The entire blood sample collection session will be carried out (to the extent reasonably practicable) in full view of the Player.
- 19.8. Once the BCO has collected the blood from the Player, the blood sample containers will be inverted gently to mix the blood with the anti-coagulant (if required) and then placed on a table in full view of the Player and the BCO.
- 19.9. The DCO/BCO or Player will then place one blood sample container into each of the A and B sample bottles and seal the bottles. The DCO/BCO will then record the blood sample bottle codes onto the Sample Collection Form (Blood) and record the time of sealing.
- 19.10. The Player shall be provided with an opportunity to document on the Sample Collection Form (Blood) any blood transfusions that he/she may have undergone over the last six months and/or to indicate any medications taken by him or her over the past seven days. The Player will also be required to complete the 'Consent for Research' section of the Sample Collection Form (Blood) to document whether the Player consents for their sample to be used for research.
- 19.11. The Player, any accompanying representative and the DCO/BCO present at the Doping Control Station must sign the Sample Collection Form (Blood), confirming that the above procedures were carried out. If the Player considers that the procedures were not carried out satisfactorily, he should declare so in writing on the Sample Collection Form (Blood) and state his reasons for dissatisfaction. If the Player does not indicate any dissatisfaction with the testing procedure, this shall amount to conclusive evidence that the test was properly conducted and the Player will be deemed to have waived a claim to any irregularity in the collection of the sample.

### **PART THREE – PROCEDURES SPECIFIC TO IN COMPETITION TESTING**

#### **20. Selection of Matches**

- 20.1. Drug testing may be conducted at any match involving Participants and no prior notice needs to be given either to the Clubs concerned or to the Players.
- 20.2. The matches at which the drug tests are to be conducted will be decided by The FA in consultation with the NADO. All matches are open to testing.

**21. Procedures following the selection of Players**

- 21.1. Following the draw for In Competition testing the Club must allow the Competent Officials access to observe the Players from the tunnel area and or from an adjacent or nearby area of the pitch or stand where the Competent Officials can easily accompany the selected Players from the field of play in the event of substitution, injury or other reason for leaving the field of play.

**PART FOUR – PROCEDURES SPECIFIC TO OUT OF COMPETITION TESTING****22. General**

In association with the NADO or any other body so designated by The FA, The FA may conduct unannounced Out Of Competition testing on any Player. Such testing may be conducted at any venues set out in the Club's whereabouts information, or provided to The FA by a Player pursuant to Regulation 6(a)(i), or in the NRTP Player's whereabouts filings, or at other venues decided by The FA and/or the NADO.

**23. Provision of whereabouts information**

*All Players save for those included in the IRTP or NRTP*

- 23.1. At the request of The FA all Clubs must furnish The FA with any whereabouts information The FA requires from time to time which shall include as a minimum:
- (a) training dates
  - (b) start and finish times of training; and
  - (c) the address at which such training will take place

*Players included in the National Registered Testing Pool (NRTP)*

- 23.2. Players may be included in a National Registered Testing Pool (NRTP) according to criteria stipulated by the NADO in consultation with The FA from time to time. Such Players shall be known as "NRTP Players".
- 23.3. A Player shall not be entitled to an explanation for his inclusion in the NRTP.
- 23.4. NRTP Players shall be notified by The FA of their inclusion in the NRTP, the requirement to comply with Regulation 7 of these Doping Regulations, and the consequences of any failure to comply with that requirement, all in accordance with the requirements of section 11 of the International Standard for Testing, which shall apply in full (and exclusively) to the NRTP Players and all Out of Competition testing conducted on the NRTP Players.
- 23.5. NRTP Players remain subject to all provisions of these Doping Regulations, save for Regulation 6 (missed tests).

*Players included in the International Registered Testing Pool (IRTP)*

- 23.6. Players included in FIFA's IRTP remain subject to the requirements of the Doping Regulations, save for Regulation 6 (missed tests), in addition to being subject to the requirements of Appendix D of FIFA's Anti-Doping Regulations, which can be found at [www.fifa.com](http://www.fifa.com).
- 23.7. Players included in FIFA's IRTP will be notified in writing by The FA of their inclusion in it, the consequent requirement to file whereabouts information, and the consequences of any failure to comply with that requirement.
- 23.8. It is the responsibility of all Players included in the IRTP and their Clubs to ensure that they are aware of the requirements of Appendix D of FIFA's Anti-Doping Regulations. Your attention is drawn in particular to –
- (i) The whereabouts requirements set out in Article 3, and
  - (ii) The availability for testing requirements set out in Article 4,
  - (iii) The potential liability and anti-doping rule violation set out at Articles 5 and 6.

- 23.9 Players included in the IRTP must file their whereabouts information with The FA, In accordance with Article 3 of FIFA's Anti-Doping Regulations, and The FA will submit that information to the FIFA Anti-Doping Unit.
- 24. Procedures following the selection of Players**
- 24.1. Following the draw for Out of Competition testing the Competent Officials must give Players a reasonable time to complete training or any other activity in which they are engaged before giving the verbal notification in accordance with paragraph 12.3 above.
- 24.2. The Club must allow the Competent Officials access to observe the Players complete training or any other activity in which they are engaged. Testing should commence, where reasonably practicable, within one hour of first contact with the Club officials.

#### **PART FIVE – STORAGE, DESPATCH AND ANALYSIS OF SAMPLES**

**25. Storage and Despatch of Samples**

- 25.1. All samples should be stored in a secure place pending despatch to the laboratory.
- 25.2. Where blood samples are collected, the A and B sample bottles may (depending on the transportation system being used) be placed into a plastic sleeve under the observation of the Player. The bottles will be placed into a temperature controlled container for transportation, whatever the transportation system used.
- 25.3. Samples should be sent to the laboratory as soon as is reasonably practicable.

**26. Use of accredited laboratories**

- 26.1. Analysis of the samples (including screening of blood samples to determine if the corresponding urine samples should be analysed) shall be carried out in WADA accredited laboratories or as otherwise approved by WADA. The choice of WADA accredited laboratory (or other laboratory or method) used for the sample analysis shall be determined exclusively by the NADO and The FA.

**27. The purpose of sample analysis**

- 27.1. Samples shall be analysed to detect prohibited substances and prohibited methods identified in the Prohibited List and other substances as may be directed by WADA pursuant to its monitoring programme, and/or to assist the NADO in profiling relevant parameters, including DNA or genomic profiling, for anti-doping purposes.

**28. Research on samples**

- 28.1. No sample may be used for any purpose other than that described in these Regulations without the Player's written consent.

**29. Analysis of Samples**

- 29.1. Laboratories shall analyse samples and report results in conformity with the International Standard for Laboratories. The head of the laboratory shall send the test results to the NADO.
- 29.2. A sample may be re-analysed at any time exclusively at the direction of The FA, WADA or the NADO. The circumstances and conditions for re-testing samples shall conform with the requirements of the International Standard for Laboratories.
- 29.3. All Samples provided by Players in doping control under the responsibility of The FA are the property of the NADO. The NADO shall immediately following sample provision by the Player concerned transfer ownership of that sample to The FA. Following consultation with The FA UK Anti-Doping may make reasonable directions in relation to the re-analysis of Samples based on knowledge and information arising after the initial analysis. The FA shall comply with such reasonable directions.

- 29.4. The FA will endeavour to ensure that the analysis of the Main "A" Sample is carried out as soon as possible after arrival at the designated laboratory.
- 29.5. Access to the laboratory during analysis should be restricted to authorised members of the laboratory and to authorised observers.
- 29.6. If at any stage any question, issue or problem arises in relation to the sample, the laboratory may conduct any further or other tests necessary to clarify or resolve the matter at issue. Such tests may be relied upon by The FA in any disciplinary proceedings.

## **PART SIX – RESULTS MANAGEMENT**

### **30. Communication of Results**

- 30.1. Following notification of an adverse analytical finding or other Doping Offence under the Doping Regulations, the matter shall be subject to the results management process set out below.
- 30.2. The results management process shall be conducted by the NADO and/or and The FA Doping Control Department as agreed between them. For the avoidance of doubt, the FA shall be the body that conducts the results management process unless The FA agrees otherwise.
- 30.3. For the purpose of this chapter, references hereafter to the NADO and the FA Doping Control Department shall, where appropriate, be understood as meaning the relevant person or body of the association and references to the Participant shall, where appropriate, be understood as meaning any Player support personnel or other person.
- 30.4. If the Player is under 18 years of age at the time of the above notification, the Player will be asked to provide consent for The FA to notify their parent(s)/guardian(s).

### **31. Initial review regarding Atypical Findings and notification**

- 31.1. Upon receipt of an Atypical Finding, the NADO shall conduct a review to determine whether
  - (a) The finding is consistent with a valid and applicable TUE that has been granted or will be granted to the Player ;
  - (b) There has been any apparent departure from the International Standard for Laboratories or the International Standard for Testing that caused the finding
- 31.2. If the initial review does not reveal an applicable TUE or entitlement to a TUE or an apparent departure that caused the Atypical Finding, the NADO shall conduct the required investigation. After the investigation has been completed, the Player and his club, and WADA shall be notified whether or not the Atypical Finding will be brought forward as an Adverse Analytical Finding. Notice of an Atypical finding will not be provided before completion of the investigation unless it is determined that the B Sample should be analysed, in which case the Player will be notified.

### **32. Initial review regarding Adverse Analytical Findings and notification**

- 32.1. Upon receipt of an Adverse Analytical Finding the NADO shall conduct a review to determine whether:
  - (a) the finding is consistent with a valid and applicable TUE that has been granted or will be granted;
  - (b) there is any apparent departure from the International Standard for Laboratories or the International Standard for Testing that caused the Adverse Analytical Finding.
- 32.2. If the initial review does not reveal an applicable TUE or entitlement to a TUE or departure that caused the Adverse Analytical Finding, the NADO shall at once confidentially notify The FA's Doping Control Programme Manager, who shall notify the Player's Club. The Player shall be notified simultaneously and this notification will include details of the following:

- (a) the Adverse Analytical Finding;
  - (b) the relevant Doping Offence(s);
  - (c) his right to promptly request the analysis of the "B" sample and, failing such request within the time limit set by The FA Doping Control Department of the fact that the "B" sample analysis may be deemed waived;
  - (d) the fact that analysis of the "B" sample analysis may be conducted at the request of The FA regardless of the Player's decision in this respect;
  - (e) the scheduled date, time and place for the "B" sample analysis;
  - (f) the opportunity for the Player and/or the Player's representative to attend the "B" sample opening and analysis;
  - (g) the Player's right to request copies of the "A" and "B" sample laboratory documentation package, which includes information as required by the International Standard for Laboratories;
- 32.3. In accordance with Regulation 18, the Player shall be afforded an opportunity, within a time limit set by The FA Doping Control Department, to provide an explanation in response to the Doping Offence asserted.
- 33. Analysis of the "B" sample in Adverse Analytical Findings**
- 33.1. The Player has the right to request the analysis of the "B" sample within 5 calendar days of being notified of an Adverse Analytical Finding. The request for analysis of the "B" sample has no impact on a provisional suspension of the Player.
- 33.2. A Player may accept an "A" sample analytical result by waiving his right to the "B" sample analysis. The FA may however request the analysis of the "B" sample at any time if it believes that such analysis will be relevant to consideration of the Player's case.
- 33.3. The FA shall, via the NADO, communicate the request for analysis of the "B" sample immediately to the head of the laboratory where the "B" sample is stored. The analysis of the "B" sample shall be carried out as soon as possible. Any delay in processing of the 'B' sample shall not be considered as a deviation from the International Standard for Laboratories susceptible to invalidate the analytical procedure and analytical results. No other reason shall be accepted for changing the date of the "B" sample analysis.
- 33.4. The Player and/or his representative shall be allowed to be present at the opening of the "B" sample analysis and to attend the analysis throughout. A representative of the Player's association or club may also be present and attend throughout, as may a representative of The FA and/or the NADO.
- 34. Results management**
- 34.1. The results of the "B" sample analysis shall be sent immediately to the NADO to determine whether they confirm the Adverse Analytical Finding made in respect of the "A" Sample.
- 35. Results management for NRTP Players**
- 35.1. Unless the NADO agrees or WADA provides that FIFA shall take such responsibility, results management in respect of an apparent filing failure shall be conducted by the NADO in accordance with the International Standard for Testing Article 11.6.2.
- 35.2. Results management in respect of an unsuccessful attempt by or on behalf of the NADO to test an NRTP Player shall be conducted by the NADO in accordance with International Standard for Testing Article 11.6.3.
- 35.3. Results management in respect of an unsuccessful attempt by or on behalf of any other Anti-Doping Organisation to test an NRTP Player shall be conducted by that Anti-Doping Organisation in accordance with International Standard for Testing Article 11.6.3.
- 35.4. Where, in any eighteen-month period, an NRTP Player is declared to have three whereabouts failures, whether under these Regulations or (in accordance with International Standard for Testing Article 11.1.5) under the rules of any other relevant Anti-Doping Organisation, then (save only where International Standard for Testing Article 11.6.5(a) provides otherwise)

- the NADO shall be responsible for reviewing the matter to determine, in accordance with International Standard for Testing Article 11.6.5, whether the NRTP Player has a case to answer under Regulation 7.
- 35.5 NRTP Players shall continue to be subject to the requirements of International Standard for Testing Article 11 unless and until the NADO has informed him/her in writing that he/she no longer satisfies the criteria for inclusion in the National Registered Testing Pool.
- 36. Review of other Doping Offences**
- 36.1. In the case of any possible Doping Offence where there is no Adverse Analytical Finding and no Atypical Finding, The FA shall conduct any investigation based on the facts of the case that it deems to be necessary.
- 36.2. At such time as The FA has reason to believe that a Doping Offence might have occurred, it shall promptly notify the Player and the Player's club of alleged Doping Offence, and the basis for it.
- 36.3. The Player shall be afforded an opportunity, within a time limit set by The FA, to provide an explanation in response to the Doping Offence asserted.
- 37. Retirement from sport**
- 37.1. If a Player retires while a results management process is under way, The FA retains jurisdiction to complete its results management process.
- 37.2. If a Player retires before any results management process has begun, The FA has jurisdiction to conduct results management in respect of any matter occurring prior to such retirement.
- 38. Information concerning potential Doping Offences**
- 38.1 The FA shall notify the NADO, FIFA and WADA of any alleged Doping Offence by a Participant by no later than by completion of the process described above.
- 38.2 Notification shall include: the Player's name, country, sport, club, the Player's competitive level, whether the test was in competition or out of competition, the date of sample collection, and the analytical result reported by the laboratory.
- 38.3 The same organisations shall be regularly updated on the status and findings of any review or proceedings conducted pursuant to these Regulations with a prompt written reasoned explanation or decision explaining the resolution of the matter.
- 38.4 FIFA shall be notified of the decision of any FA Regulatory Commission by The FA.
- 38.5 The recipient organisations shall not disclose this information beyond those persons with a need to know (which would include the appropriate personnel at the applicable National Olympic Committee, association and club) until The FA has made public disclosure or has failed to make public disclosure.
- 38.6 Any information relating to a whereabouts related failure in respect of a Player shall not be disclosed beyond those persons with a need to know unless and until that Player is found to have committed a Doping Offence based on such whereabouts-related failure. Such persons who need to know shall also maintain the confidentiality of such information until the same point.

## SCHEDULE TWO

### DEFINITIONS

**“Adverse Analytical Finding”** means a report from a laboratory or other WADA-approved entity that identifies in a sample 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, consistently with the International Standard for Laboratories and related technical documents;

**“Anti-Doping Organisation”** means a signatory that is responsible for adopting rules for initiating, implementing or enforcing any part of the doping control process. Examples of anti-doping organisations include the International Olympic Committee or other major event organisations that conduct testing at their events, WADA, international federations and national anti – doping organisations such as the NADO;

**“Attempt”** means purposely engaging in conduct that constitutes a substantial step in a course of conduct planned to culminate in the commission of a Doping Offence. However, there shall be no Doping Offence based solely on an attempt to commit an Offence if the person renounces the attempt prior to it being discovered by a third party not involved in the attempt;

**“Atypical Finding”** means a report from a laboratory or other WADA-approved entity that requires further investigation as provided by the International Standard for Laboratories or related technical documents prior to the determination of an Adverse Analytical Finding;

**“Blood Collection Officer(s) or BCO(s)”** means the person(s) appointed by the NADO or any other body so designated by The FA to carry out the doping control process including for example but without limitation the collection of blood samples;

**“CAS”** means the Court of Arbitration for Sport, Lausanne, Switzerland

**“Chain of custody”** means the sequence of individuals or organisations who have the responsibility for a sample from the provision of the sample until the sample has been received for analysis;

**“Chaperone”** means the person(s) appointed by the NADO or any other body so designated by The FA to assist in the Doping Control Process.

**“Competent Official”** means a BCO, DCO, a Chaperone or the FASO;

**“Competition”** has the same meaning as in Rule A2 of the Rules of the Football Association;

**“Doping Offences”** means the offences set out and described in further detail in Regulations 3 - 13.

**“Doping Control”** means all steps and processes from test distribution planning through to ultimate disposition of any appeal including all steps and processes in between such as provision of whereabouts information, sample collection and handling, laboratory analysis, therapeutic use exemptions, results management, hearings and appeals;

**“Doping Control Officer(s) or DCO(s)”** means the person(s) appointed by the NADO or any other body so designated by The FA to carry out the doping control process including for example but without limitation the collection of samples. If there is more than one DCO present during the doping control process the Lead DCO shall have overall authority for that process;

**“Doping Control Station”** means the area reserved to carry out the doping control process as described in the Procedural Guidelines;

**“FA”** or **“Football Association”** or **“Association”** shall mean The Football Association or its designee. The FA may in its absolute discretion designate any of its functions under the Regulations to the NADO.

**“FIFA regulations”** means the Statutes, regulations, directives and circulars of FIFA as well as the Laws of the Game issued by the International Football Association Board;

**“Football Association Supervising Officer or FASO”** means the person appointed by The FA to facilitate the doping control process;

**“In Competition”** means the time period starting at midnight on the day of a match until the time on that match day that the sample collection procedures have been completed by the Competent

Officials (note that this time period will be different for Players depending on the time at which sample collection procedures are completed for individual Players);

**“International Standard”** means a standard (e.g. the International Standard for Testing) adopted by WADA in support of the World Anti-Doping Code. Compliance with an International Standard (as opposed to another alternative standard, practice or procedure) shall be sufficient to conclude that the procedures addressed by the international standard were performed properly. International Standards shall include any technical documents issued pursuant to the International Standard;

**“Legitimate medical treatment”** – the only way in which it may be established that the use of a Prohibited Method constituted a legitimate medical treatment is through the grant of a TUE in respect of any such Prohibited Method;

**“Marker”** means a compound, group of compounds or biological parameters that indicates the use of a Prohibited Substance or Prohibited Method;

**“Match”** means a single football match.

**“Metabolite”** means any substance produced by a biotransformation process;

**“Minor”** means a natural person who has not reached the age of 18.

**“National Anti-Doping Organisation (NADO)”** means the entity(ies) designated by each country as possessing the primary authority and responsibility to adopt and implement anti-doping rules, direct the collection of samples, the management of test results, and the conduct of hearings, all at the national level. This includes an entity that may be designated by multiple countries to serve as the regional anti-doping organisation for such countries. If this designation has not been made by the competent public authority(ies), the entity shall be the country's National Olympic Committee or its designee such as the association. In respect of the United Kingdom (UK), “NADO” means the Drug-Free Sport Directorate of the NADO or any other entity designated by the UK Government as successor to the Drug-Free Sport Directorate as the NADO for the UK;

**“No Fault or Negligence”** means that the Participant is able to establish that he did not know or suspect, and could not reasonably have known or suspected even with the exercise of utmost caution, that he or she had Used or been administered the Prohibited Substance or Prohibited Method;

**“No Significant Fault or Negligence”** means the Participant is able to establish that his fault or negligence, when viewed in the totality of the circumstances and taking into account the criteria for No Fault or Negligence, was not significant in relation to the Doping Offence;

**“Out of Competition”** means any time which is not In Competition;

**“Participant”** has the same meaning as in Rule A2 of the Rules of the Football Association;

**“Player”** has the same meaning as the defined term in Rule A2 of the Rules of The Football Association in addition to any other football Player who is not eligible to play for a Club by reason of a period of suspension that has been imposed by The FA, FIFA or UEFA;

**“Player Support Personnel”** means any personnel working with, treating or assisting a Player participating in or preparing for football matches or training sessions, including but not limited to a coach, trainer, manager, agent, club staff, official, nutritionist, medical or paramedical personnel, or parent;

**“Possession”** means the actual physical possession, or the constructive possession (which shall be found only if the person has exclusive control over the prohibited substance or prohibited method or the premises in which a prohibited substance or prohibited method exists); provided, however, that if the person does not have exclusive control over the prohibited substance or prohibited method or the premises in which a prohibited substance or prohibited method exists, constructive possession shall only be found if the person knew about the presence of the prohibited substance or prohibited method and intended to exercise control over it. Provided, however, there shall be no Doping Offence based solely on possession if, prior to receiving notification of any kind that the person has committed a Doping Offence, the person has taken positive action demonstrating that

he never intended to have possession and has renounced possession by expressly declaring it to an anti-doping organisation. Notwithstanding anything to the contrary in this definition, the purchase (including by any electronic or other means) of a prohibited substance or prohibited method constitutes Possession by the person who makes the purchase;

**“Prohibited List”** means the list of Prohibited Substances and Prohibited Methods that is produced by WADA as updated from time to time and recognised by The FA in accordance with Regulation 3(e);

**“Prohibited Method”** means any method defined as such in the Prohibited List;

**“Prohibited Substance”** means any substance defined as such in the Prohibited List;

**“Provisional suspension”** means a Player or other person is barred temporarily from participating in any football or football activity prior to the final decision at a Regulatory Commission hearing;

**“Sample”** means any biological material collected for the purpose of Doping Control;

**“Social Drugs”** means amphetamine, cannabinoids (for example, hashish and marijuana), cocaine, diamorphine (heroin), lysergic acid diethylamide (LSD), methadone, methylamphetamine, methylenedioxymethylamphetamine (MDMA or ecstasy), and methylenedioxyethylamphetamine (MDEA) and such other substances which The FA deems to be a Social Drug from time to time. The current list of Social Drugs shall be published on The FA's website [www.TheFA.com](http://www.TheFA.com);

**“Specified Substance”** means any substance defined as such in the Regulations;

**“Substantial Assistance”** means a person providing substantial assistance must: (1) fully disclose in a signed written statement all information he possesses in relation to Doping Offences, and (2) fully cooperate with the investigation and adjudication of any case related to that information, including, for example, presenting testimony at a hearing if requested to do so by an anti-doping organisation or hearing panel. Moreover, the information provided must be credible and must comprise an important part of any case that is initiated or, if no case is initiated, must have provided a sufficient basis on which a case could have been brought;

**“Suitable specific gravity for analysis”** means specific gravity measured at 1.005 or higher with a refractometer, or 1.010 or higher with lab sticks;

**“Tampering”** means altering for an improper purpose or in an improper way; bringing improper influence to bear; interfering improperly; obstructing, misleading or engaging in any fraudulent conduct to alter test results or prevent normal procedures from occurring; or providing fraudulent information to an anti-doping organisation;

**“Target testing”** means selection of Players for testing where specific Players or groups of Players are selected on a non-random basis for testing as a specified time;

**“Testing”** means the parts of the doping control process involving test distribution planning, sample collection, sample handling, and sample transport to the laboratory;

**“Therapeutic Use Exemption”** means an exemption to take a substance for medical purposes which is normally prohibited under the Doping Regulations. The procedure for the grant of a Therapeutic Use Exemption being set out in Regulation 28 and Schedule Five; and

**“Trafficking”** means selling, giving, transporting, sending, delivering or distributing a Prohibited Substance or Prohibited Method (either physically or by any electronic or other means) by a Participant to any third party; provided, however, this definition shall not include the actions of a “bona fide” medical personnel involving a Prohibited Substance used for genuine and legal therapeutic purposes or other acceptable justification, and shall not include actions involving Prohibited Substances that are not prohibited in Out-of-Competition testing unless the circumstances as a whole demonstrate such Prohibited Substances were not intended for genuine and legal therapeutic purposes; and

**“Use”** means the utilisation, application, ingestion, injection or consumption by any means whatsoever of any Prohibited Substance or Prohibited Method;

**“WADA”** means the World Anti-Doping Agency.

## SCHEDULE THREE

## The Prohibited List

THE 2011 PROHIBITED LIST  
THE 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-androstendiol** (5 $\alpha$ -androst-1-ene-3 $\beta$ ,17 $\beta$ -diol); **1-androstendione** (5 $\alpha$ -androst-1-ene-3,17-dione); **bolandioli** (19-norandrostenediol); **bolasterone**; **boldenone**; **boldione** (androsta-1,4-diene-3,17-dione); **calusterone**; **clostebol**; **danazol** (17 $\alpha$ -ethynyl-17 $\beta$ -hydroxyandrost-4-eno[2,3-d]isoxazole); **dehydrochlormethyltestosterone** (4-chloro-17 $\beta$ -hydroxy-17 $\alpha$ -methylandrosta-1,4-dien-3-one); **desoxymethyltestosterone** (17 $\alpha$ -methyl-5 $\alpha$ -androst-2-en-17 $\beta$ -ol); **drostanolone**; **ethylestrenol** (19-nor-17 $\alpha$ -pregn-4-en-17-ol); **fluoxymesterone**; **formebolone**; **furazabol** (17 $\beta$ -hydroxy-17 $\alpha$ -methyl-5 $\alpha$ -androstanol[2,3-c]-furazan); **gestrinone**; **4-hydroxytestosterone** (4,17 $\beta$ -dihydroxyandrost-4-en-3-one); **mestanolone**; **mesterolone**; **metenolone**; **methandienone** (17 $\beta$ -hydroxy-17 $\alpha$ -methylandrosta-1,4-dien-3-one); **methandriol**; **methasterone** (2 $\alpha$ , 17 $\alpha$ -dimethyl-5 $\alpha$ -androstane-3-one-17 $\beta$ -ol); **methylidienolone** (17 $\beta$ -hydroxy-17 $\alpha$ -methylestra-4,9-dien-3-one); **methyl-1-testosterone** (17 $\beta$ -hydroxy-17 $\alpha$ -methyl-5 $\alpha$ -androst-1-en-3-one); **methylnortestosterone** (17 $\beta$ -hydroxy-17 $\alpha$ -methylestr-4-en-3-one); **methyltestosterone**; **metribolone** (methyltrienolone, 17 $\beta$ -hydroxy-17 $\alpha$ -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 $\beta$ -hydroxy-5 $\alpha$ -androstanol[3,2-c] pyrazole); **quinbolone**; **stanozolol**; **stenbolone**; **1-testosterone** (17 $\beta$ -hydroxy-5 $\alpha$ -androst-1-en-3-one); **tetrahydrogestrinone** (18 $\alpha$ -homo-pregna-4,9,11-trien-17 $\beta$ -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 $\beta$ ,17 $\beta$ -diol); **androstenedione** (androst-4-ene-3,17-dione); **dihydrotestosterone** (17 $\beta$ -hydroxy-5 $\alpha$ -androstan-3-one); **prasterone** (dehydroepiandrosterone, DHEA); **testosterone** and the following metabolites and isomers:

**5 $\alpha$ -androstane-3 $\alpha$ ,17 $\alpha$ -diol**; **5 $\alpha$ -androstane-3 $\alpha$ ,17 $\beta$ -diol**; **5 $\alpha$ -androstane-3 $\beta$ ,17 $\alpha$ -diol**; **5 $\alpha$ -androstane-3 $\beta$ ,17 $\beta$ -diol**; **androst-4-ene-3 $\alpha$ ,17 $\alpha$ -diol**; **androst-4-ene-3 $\alpha$ ,17 $\beta$ -diol**; **androst-4-ene-3 $\beta$ ,17 $\alpha$ -diol**; **androst-5-ene-3 $\alpha$ ,17 $\alpha$ -diol**; **androst-5-ene-3 $\alpha$ ,17 $\beta$ -diol**; **androst-5-ene-3 $\beta$ ,17 $\alpha$ -diol**; **4-androstenediol** (androst-4-ene-3 $\beta$ ,17 $\beta$ -diol); **5-androstenedione** (androst-5-ene-3,17-dione); **epi-dihydrotestosterone**; **epitestosterone**; **3 $\alpha$ -hydroxy-5 $\alpha$ -androstan-17-one**; **3 $\beta$ -hydroxy-5 $\alpha$ -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 drospironone, 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**

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 athletic 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  $\delta$  (PPAR $\delta$ ) agonists (e.g. GW 1516) and PPAR $\delta$ -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; mefenorex; mephentermine;  
mesocarb; methamphetamine(d-); p-methylamphetamine;  
methylenedioxymphetamine; 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; levmetamphetamine;  
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, pipradol, 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 narcotics 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)
- Modern Pentathlon (UIPM) for disciplines involving shooting
- Nine-pin and Tenpin bowling (FIQ)
- Powerboating (UIM)
- Sailing (ISAF) for match race helms only
- Shooting (ISSF, IPC) (also prohibited *Out-of-Competition*)

- Bridge (FMB)
- Curling (WCF)
- Darts (WDF)
- Golf (IGF)
- Motorcycling (FIM)
- 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.**

## SCHEDULE FOUR

THE FOOTBALL ASSOCIATION DOPING CONTROL PROGRAMME  
IN-COMPETITION RANDOM DRUG TESTING

Representative of ..... FC

Today's match has been chosen for random drug testing. Two of your players have been chosen for testing and are required to report to the Doping Control Station immediately at the end of the match and before going to the dressing room.

The names and numbers of your players chosen to complete a drug test are:

SHIRT/SQUAD No ..... Name ..... DRAW No .....

SHIRT/SQUAD No ..... Name ..... DRAW No .....

The names and numbers of your players chosen as drug testing reserves are:

R1: SHIRT/SQUAD No ..... Name ..... DRAW No .....

R2: SHIRT/SQUAD No ..... Name ..... DRAW No .....

**Note:** Players chosen as drug testing reserves in the selection draw should be made aware that they may be required to submit to a drug test if one of the selected players from their team receives a serious injury during the course of the match. These players should not leave the venue until they have confirmed with Doping Control Officials that they are not required for testing.

You are advised to discreetly notify your team manager that drug testing is taking place, however The FA does not recommend that clubs make players aware of their selection for testing until their participation in the match has ended.

The FA request that you assist the Doping Control Officials in identifying the selected players on competition of the match. Your assistance with this matter will significantly reduce the chances of your players unnecessarily breaching FA Doping Control Regulations.

Signed ..... Printed ..... Date .....

## SCHEDULE FIVE

## GUIDE TO THERAPEUTIC USE EXEMPTIONS

**1. INTRODUCTION**

- 1.1. The Doping Regulations permit Players to apply for permission to use, for therapeutic purposes, substances or methods on the Prohibited List whose use is otherwise prohibited. The process whereby Players apply for permission to use therapeutic purposes, substances or methods on the Prohibited List whose use is otherwise prohibited, will be managed by the NADO on behalf of The FA.
- 1.2. Any Player who consults a doctor and is prescribed treatment or medication shall enquire whether the prescription contains any Prohibited Substances or involves the Use of any Prohibited Methods. If so, the Player shall request alternative treatment. If alternative treatment is not available, an application for a TUE should be made in accordance with this Schedule 5.
- 1.3. The World Anti-Doping Agency International Standard for TUEs (the “International Standard”) sets out the circumstances in which Players may claim such a therapeutic use exemption (or “TUE”). This Guide adopts and incorporates the International Standard, as amended from time to time. All persons shall be deemed to accept the International Standard and any such amendments thereto as binding upon them without further formality.
- 1.4. In order to excuse the presence or use or possession of a Prohibited Substance or Prohibited Method that would otherwise amount to a Doping Offence under the Doping Regulations, a TUE must be obtained that covers such presence or use or possession, in accordance with this Guide. This Guide may be updated at any time by The FA to take account of changes in the International Standards or any other procedural changes. The current version of this Guide shall be published on The FA’s website, at [www.TheFA.com](http://www.TheFA.com).
- 1.5. Subject only to paragraph 1B2 (which identifies limited circumstances in which a TUE may be granted retrospectively), the following Players must follow the process for TUE applications detailed in Sections 1A and 1B of this Guide prior to using or possessing the Prohibited Substance or Prohibited Method in question:

For clubs in the Premiership, Championship, League 1 or League 2:

Registered professional Players

Registered scholars and Apprentices

Any other Player who trains or competes with either of the above two groups of Players

Players who have been included in the FIFA IRTP may only obtain TUEs in accordance with the rules stipulated by FIFA. FIFA publishes a list of those international competitions for which a TUE from FIFA is required.

Players who have been identified or included in a national registered testing pool must obtain a TUE from their NADO, or from such other body as may be designated by their association to grant TUEs, or that otherwise has competent authority to grant TUEs in the territory of the association concerned. Associations shall in all cases be responsible for promptly reporting the granting of any TUEs under these rules to FIFA and WADA.

Any Player not in any of the categories identified above does not need a TUE in advance but instead may apply for it after a test, in accordance with paragraph 1B3, provided that use of a Prohibited Substance or a Prohibited Method prior to that time shall be at the Player’s own risk.

- 1.6. A Player may not apply to more than one Anti-Doping Organisation for a TUE. A Player subject to the Doping Regulations who applies for a TUE pursuant to the rules of FIFA, UEFA or another Anti-Doping Organisation shall report the grant or denial of the application immediately to both The FA and the NADO by sending them copies of the application and the decision.
- 1.7. In accordance with Article 15.4 (Mutual Recognition) of the World Anti-Doping Code (the "Code"), The FA will recognise and respect any TUE granted to a Player by or on behalf of a Signatory to the World Anti-Doping Code, provided that the grant is consistent with the Code and is within that Signatory's authority. Otherwise, however, a Player subject to the Doping Regulations who requires a TUE must obtain one from the NADO in accordance with paragraph 1.5.
- 1.8. A Player who seeks a TUE from the NADO consents to the processing of the TUE application as set out in this Guide, including
  - (a) the disclosure by the Player's physician(s) of any further information required by the NADO or the UK TUE Committee to process his/her TUE application;
  - (b) the communication by the NADO of the information in the application and/or supplemental information from the Player's physician(s) to members of the UK TUE Committee and (as required) on an anonymised basis to other independent medical or scientific experts consulted by the UK TUE Committee; and
  - (c) the communication of the grant or denial of a TUE, including the details of any conditions or restrictions on such grant, and any supporting documentation or information, to The FA, FIFA, WADA and other Anti-Doping Organisations.
- 1.9. Should the Player wish to revoke the consent set out in the preceding paragraph, he she must notify the NADO and his/her physician(s) in writing of the fact; provided that upon such revocation of consent the application for a TUE (or for renewal of an existing TUE) will be deemed denied.

### Section 1A: Process for applying for a Therapeutic Use Exemption (TUE)

- 1A1 An application for a TUE:
- must not be made simultaneously to both the NADO and another Anti-Doping Organisation;
  - should be made on forms provided by The FA, UEFA or FIFA, provided that they are in English and comply with the International Standard for TUEs;
  - must be completed legibly, fully and accurately, in English, and must be signed by the Player and by any physician(s) supporting the application;
  - must specify the dose, frequency, route and duration of proposed administration of the otherwise Prohibited Substance or Prohibited Method;
  - must include a statement by an appropriately qualified physician: (a) identifying the Player's condition requiring treatment; (b) attesting to the necessity of the otherwise Prohibited Substance or Prohibited Method for treatment of that condition; and (c) explaining why an alternative, permitted medication cannot, or could not, be used in the treatment of the condition;
  - must also include a comprehensive medical history of the Player and the results of all clinical examinations, laboratory investigations and imaging studies relevant to the application. For TUE applications involving imaging studies and respiratory function tests, copies of images or physiological data should be submitted, as well as any interpretative reports that may have been produced;
  - must also enclose copies of any prior application(s) that the Player has made for the TUE, to whomever made, and the decision made on such application(s), or else must confirm that the Player has not made any prior application for the TUE;

- must provide completely accurate and up-to-date contact details for the Player and for each physician supporting the application, including in each case a current mailing address and phone number; and
  - must be sent to the NADO either by post, e-mail or fax to the following address, in an envelope marked "Private and confidential TUE Application":
    - TUE**
    - UK Anti-Doping**
    - Oceanic House**
    - 1a Cockspur Street**
    - London SW1Y 5BG**
    - or by e-mail to [ukad.org.uk](mailto:ukad.org.uk)
    - or by fax to 0800 298 3362
- 1A2 Players should retain a copy of the application and enclosures sent to the NADO, along with proof of the date of mailing/emailing/faxing.
- 1A3 The NADO will carry out an administrative review of the application within three (3) working days of receipt to confirm that the application:
- falls within the NADO's jurisdiction. If the applicant competes in European or International Competition, then the NADO will forward the application to UEFA or FIFA for review. Any delay shall be at the risk of the Player, whose responsibility it is to make the application to the correct authority in the first place;
  - has been completed fully and accurately in accordance with paragraph 1A1 above; and
  - is accompanied by sufficient medical information to process the application.
- 1A4 If the application is incomplete and/or otherwise does not meet the necessary requirements, it will be returned to the Player with an explanation to that effect, and he/she shall be invited to reapply in compliance with the necessary requirements. Any delay shall be at the risk of the Player, whose responsibility it is to submit a proper and complete application.
- 1A5 If the application passes the administrative review, the NADO will forward it to three members of the UK TUE Committee, one of whom will be designated as the Chair. The Chair will coordinate the responses of the UK TUE Committee and provide a final decision to the NADO with respect to the application. The Chair shall also be responsible for requesting, where necessary, further specialist input to support the UK TUEC in making a final decision. Timeframes for the review of TUE applications are set out in Section 1D.
- 1A6 The members of the UK TUE Committee shall meet the following criteria:
- each of them shall be a physician with experience in the care and treatment of Players and a sound knowledge of clinical, sports and exercise medicine;
  - if the Player has a disability, at least one UK TUE Committee member must possess specific expertise in relation to the care and treatment of Players with a disability; and
  - a majority of the UK TUE Committee members must not have any official responsibility within football. At the discretion of the Chair, however, one of the three physicians may be a Football Association medical officer, in order to provide sport-specific expertise, provided that such person must otherwise satisfy these criteria; and
  - each UK TUE Committee member must provide the NADO with evidence that he/she satisfies the foregoing criteria, and in addition must confirm that (a) (save in the case of a Football Association medical officer or other representative) they are not aware of any conflict of interest in their consideration of the application, and (b) they will observe confidentiality with respect to the entire TUE process.

- 1A7 The UK TUE Committee will review the application, including the medical information provided, and make a decision as soon as reasonably practicable, in accordance with the criteria set out in the International Standard for TUEs. Specifically, the UK TUE Committee will only grant the TUE in strict accordance with the following criteria, which the Player must demonstrate to the satisfaction of the Committee:
- (a) The Player would experience a significant impairment to health if the Prohibited Substance or Prohibited Method in question were to be withheld in the course of treating an acute or chronic medical condition.
  - (b) The Therapeutic use of the Prohibited Substance or Prohibited Method in question would produce no additional enhancement to 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.
  - (c) There is no reasonable Therapeutic alternative to the use of the otherwise Prohibited Substance or Prohibited Method.
  - (d) The necessity for the use of the otherwise Prohibited Substance or Prohibited Method cannot be a consequence, wholly or in part, of the Player’s prior non-Therapeutic use of any substance from the Prohibited List.
- 1A8 Where it does not need any further information to process the application, the target will be for the UK TUE Committee to make a decision within seven (7) days of its receipt of the application. Where it considers it appropriate to seek further medical or scientific opinion or information in relation to the application, whether from the Player or his physician or from a third party, the UK TUE Committee shall do so as quickly as is practicable, provided that the identity of the applicant shall not be disclosed to any third party. The UK TUE Committee shall make its decision as soon as reasonably practicable after receipt of the further information or opinion.
- 1A9 The UK TUE Committee shall make its decisions unanimously.
- 1A10 If the UK TUE Committee grants the TUE, it shall detail in its decision (a) the duration of the exemption granted; and (b) any conditions or requirements that the Player must satisfy.
- 1A11 If the UK TUE Committee denies the TUE or imposes any conditions or requirements on this grant, it shall state its reasons for doing so in the decision itself.
- 1A12 The NADO will send copies of the UK TUE Committee’s decision, on a confidential basis, to the Player and The FA as soon as possible, and The FA may send a copy on to UEFA/FIFA. If the application is granted, then the NADO will also send a copy of the decision on a confidential basis to WADA.
- 1A13 If the UK TUE Committee denies the TUE application or imposes any conditions or requirements on its grant beyond simply confirming the dose, frequency and route of administration requested in the application, then at the same time as the NADO sends a copy of the decision to the Player, it shall also advise him/her of the right to appeal the decision.
- 1A14 The submission of false or misleadingly incomplete information in support of a TUE application (including but not limited to the failure to advise of the unsuccessful outcome of a prior application to another Anti-Doping Organisation for such a TUE) may result in the bringing of disciplinary charges for Misconduct (as defined in the Rules of The Association) against those involved pursuant to the Rules of The Football Association.

#### **Section 1B: Timing of Applications for TUEs and Effective Dates for TUE Grants**

- 1B1 In accordance with the International Standard for TUEs, subject only to the possibility of an emergency grant of a TUE in line with paragraph 1B2 below, a Player is required to obtain a TUE as soon as the requirement for the TUE arises and no less than 21 days before participating in an event or competition.

#### **Emergency TUE applications**

- 1B2 Emergency approval of an application for a TUE may be granted only where:
- (a) (i) emergency treatment or treatment of an acute medical condition was necessary; or
  - (ii) due to exceptional circumstances, there was insufficient time or opportunity for the Player to submit, or for the UK TUE Committee to consider, an application prior to Doping Control; and
  - (b) the application for an emergency TUE is made within five working days of the commencement of the administration of the relevant Prohibited Substance or Use of the relevant Prohibited Method, as appropriate. The NADO may extend this deadline if the Player provides compelling reasons why it should do so; and
  - (c) the conditions set out in Section 1A of this Schedule are met.

#### **Retroactive TUE applications**

- 1B3 If a Player is tested who is not in one of the categories listed at paragraph 1.5, the Player must submit an application in accordance with Section 1A of this Guide either at the time of the test, for inclusion with the Sample collection documentation, or alternatively so that it is received by the NADO no later than ten (10) working days after the test is completed. The NADO may extend this deadline if the Player provides compelling reasons why it should do so.
- 1B4 Where a Player tested does not play for a Club in the Premier League or Football League Championship, an application for a Retroactive TUE for the inhaled beta-2 agonist treatments formoterol and terbutaline need only be submitted if an Adverse Analytical Finding is returned. This application must be made within five (5) working days of the Adverse Analytical Finding being returned. Players are still expected to notify the NADO within ten (10) working days of Sample Collection, but no TUE application need be submitted unless an Adverse Analytical Finding is returned.

#### **Effective dates for TUE grants**

- 1B5 A Player may not assume that his/her application for a TUE (or for renewal of a TUE) will be granted. Any use or possession of a Prohibited Substance or Prohibited Method before an application has been granted shall be entirely at the Player's own risk.
- 1B6 A TUE granted by a UK TUE Committee (as applicable) may be cancelled if the Player does not promptly comply with any requirements or conditions imposed by the UK TUE Committee (as applicable) upon grant of the TUE.
- 1B7 On expiry of the term of a TUE granted by the UK TUE Committee (as applicable), a Player who wishes to continue to use the Prohibited Substance or Prohibited Method in question must again apply for a TUE in accordance with Section 1A of this Guide.
- 1B8 If there is a change to the dose, frequency, route or duration of the administration of the Prohibited Substance or Prohibited Method where a TUE has been granted, the TUE will no longer be valid and the Player must apply for a new TUE immediately.

#### **TUE applications relating to the beta-2 agonist treatments formoterol and terbutaline**

- 1B9 All TUE applications for the use of the inhaled beta-2 agonists formoterol or terbutaline in the treatment of asthma (or its clinical variants) must be accompanied by a medical file containing the following:
- i. a complete medical history;

- ii. a comprehensive report of the clinical examination with specific focus on the respiratory system;
- iii. a report of spirometry with the measure of the Forced Expiratory Volume in 1 second (FEV1);
- iv. if airway obstruction is present, the spirometry will be repeated after the inhalation of a short acting beta-2 agonist to demonstrate the reversibility of bronchoconstriction;
- v. in the absence of a reversible airway obstruction, a bronchial provocation test is required to establish the presence of airway hyper-responsiveness; and
- vi. the exact name, speciality, and address (including telephone, e-mail, fax) of the examining physician.

This medical file should be submitted via the FA 'Beta-2 agonist Application Form', enclosed in the schedules to this document. The requirement to provide this medical file is specifically limited to formoterol and terbutaline.

### Section 1C: Expiration or Cancellation of a TUE

1C1 A TUE granted pursuant to this Guide:

- (a) shall expire in accordance with paragraph 1A10 at the end of any term for which the TUE was granted;
- (b) may be cancelled by the NADO if the Player does not promptly comply with any requirements or conditions imposed by the UK TUE Committee upon grant of the TUE; or
- (c) may be withdrawn by the the UK TUE Committee (as applicable) if it is subsequently determined that the criteria for grant of a TUE are not in fact met.

1C2 Expiration of a TUE pursuant to paragraph 1C1(a) shall take effect automatically at the end of the term for which the TUE was granted without the need for any further notice or other formality.

1C3 Cancellation of a TUE pursuant to paragraph 1C1(b) or withdrawal of a TUE pursuant to paragraph 1C1(c) shall be notified by the NADO to the Player, with a copy to The FA and all other relevant Anti-Doping Organisations. Such notice shall take effect upon receipt. The FA may notify FIFA and/or UEFA.

1C4 In the event of an expiration, cancellation or withdrawal of the TUE pursuant to paragraph 1C1, the Player shall not be subject to any consequences based upon his/her use or possession of the Prohibited Substance or Prohibited Method in question in accordance with the TUE at any time prior to the effective date of expiry, cancellation or withdrawal of the TUE. If the analysis of the Main "A" Sample indicates the presence of a Prohibited Substance or the use of a Prohibited Method, The FA shall consider whether such finding is consistent with use of the Prohibited Substance or Prohibited Method prior to that date, in which case there shall be no case to answer.

### Section 1D: Process for Appealing a Denial or Conditional Grant of a Therapeutic Use Exemption

1D1 A Player who wishes to appeal a decision of the UK TUE Committee must lodge written notice of the appeal with the NADO, specifying the grounds of the appeal, within ten (10) working days of the date of receipt of the decision in question.

1D2 The notice should be sent to the NADO at the following address, in an envelope marked "Private and confidential TUE Appeal":

TUE

**UK Anti-Doping**  
**Oceanic House**  
**1a Cockspur Street**  
**London SW1Y 5BG**  
or by e-mail to ukad.org.uk  
or by fax to 0800 298 3362

- 1D3 The NADO will pass the notice of appeal, along with the complete file of the original TUE application, to the UK TUE Appeal Panel. The UK TUE Appeal Panel will be made up of three (3) members meeting the criteria set out at clause 1A7, but who were not involved in the decision being appealed.
- 1D4 The UK TUE Appeal Panel will review the application, including the medical information provided, and make a decision as soon as reasonably practicable, in accordance with the criteria set out in the International Standard for TUEs and without being bound in any way by the decision being appealed. In normal circumstances this will be within thirty (30) days of receipt of all relevant documentation. Where the Player requests an urgent review, the UK TUE Appeal Panel will make its decision within ten (10) working days of receipt of all relevant documentation.
- 1D5 The UK TUE Appeal Panel must make its decisions unanimously for aTUE to be granted. Where it considers it appropriate to seek further medical or scientific opinion or information in relation to the appeal, whether from the Player or his physician or from a third party, the UK TUE Appeal Panel shall do so as quickly as is practicable, provided that the identity of the applicant shall not be disclosed to any third party. The UK TUE Appeal Panel shall make its decision as soon as reasonably practicable after receipt of the further information or opinion. The Chair of the UK TUE Appeal Panel will provide a copy of the written decision to the NADO as soon as practicable, the target being within two (2) working days of the decision being made.
- 1D6 If the UK TUE Appeal Panel grants the TUE, it shall detail in its decision (a) the duration of the exemption; and (b) any conditions or requirements that the Player must satisfy.
- 1D7 If the UK TUE Appeal Panel denies the TUE or imposes any conditions or requirements on its grant, it shall state its reasons for doing so in the decision itself.
- 1D8 The NADO will send copies of the UK TUE Appeal Panel's decision, on a confidential basis, to the Player and The FA as soon as possible. The FA will then notify FIFA and UEFA as soon as possible. If the application is granted, then the NADO will also send a copy on a confidential basis to WADA.
- 1D9 The foregoing provisions of this Section 1D shall be without prejudice to:
- (a) the right of a Player to appeal to the UK TUE Appeal Panel against any decision of the UK TUE Committee denying a TUE, which was not reversed by WADA;
  - (b) the right of a Player in the NRTP to request that WADA intervene and overturn any decision of the UK TUE Committee or the UK TUE Appeal Panel on the grounds that such decision did not comply with the International Standard for TUEs;
  - (c) the right of WADA, on its own initiative, to reverse the grant of a TUE to a Player in the NRTP if it determines that such grant did not comply with the International Standard for TUEs;
  - (d) the right of WADA to appeal to CAS against any decision of the UK TUE Appeal Panel which reverses a decision of the UK TUE Committee to deny a TUE;
  - (e) the right of The FA or the NADO to appeal to CAS against any decision made the UK TUE Appeal Panel with respect to a TUE application originally submitted to the UK TUE Committee; and
  - (f) the right of the Player or the NADO (or FIFA or UEFA in accordance with their rules)

to appeal to CAS against any decision made by WADA reversing the grant or denial of a TUE pursuant to this Guide.

- 1D10 Until such time as the grant of a TUE application made pursuant to this Guide has been reversed by WADA, or the denial of a TUE application made pursuant to this Guide has been reversed by WADA, or overturned on appeal, such grant or denial shall remain in full force and effect. Where the NADO fails to take action on a properly submitted application for a TUE within a reasonable time, this failure to decide may be considered a denial for the purpose of the appeal rights provided in this schedule.

FIG 1: Clarification of Player responsibilities

Player registered with club participating in:	Procedure for Standard TUE applications	Procedure for beta-2 agonist treatment applications	Procedure for Emergency TUE applications
Premier League	Application must be approved prior to treatment.	Lung function test results and Beta-2 Agonist Application Form must be submitted in advance. TUE must be approved prior to treatment	Application can be submitted retrospectively, within 5 working days of treatment.
Championship			
League 1*	Application must be approved prior to treatment. (with the exception of beta-2 agonists)	Application can be made, and test(s) conducted retrospectively if Player is drug tested. If applying retrospectively, the NADO must be notified of use within 10 days of the test date, and if an Adverse Analytical Finding (AAF) is returned from the drug test, the Beta-2 Agonist Application must be made within 5 working days of receipt of the AAF.	Application can be submitted retrospectively, within 5 working days of treatment.
League 2*			
All other Players*	Application can be submitted retrospectively, within 10 (ten) days of test date. (with the exception of beta-2 agonists)	Application can be made, and test(s) conducted retrospectively if Player is drug tested. If applying retrospectively, the NADO must be notified of use within 10 days of the test date, and if an AAF is returned from the drug test, the Beta-2 Agonist Application must be made within 5 working days of receipt of the AAF.	n/a

- \* England International Players registered with clubs not participating in the Premier League and Championship should adhere to requirements for Players registered with Premier League and Championship clubs, unless advised otherwise by Football Association medical staff. Applications should clearly state that the applicant is an international Player.



## Therapeutic Use Exemption (TUE) Application Form



TUE applications will not be reviewed unless additional medical evidence is submitted with this application to justify the need for Therapeutic Use Exemption. Medical evidence to confirm the diagnosis should include:

- Comprehensive medical history and the results of all relevant examinations, laboratory investigations and imaging studies
- Copies of original reports, letters, and specialist reviews
- Clinical justification of the use of a Prohibited Substance or Prohibited Method when there are reasonable alternative medications available

Please note that applications for the beta-2 agonists formoterol and terbutaline will not be accepted on this form and instead must be submitted on the beta-2 agonist TUE form.

Please complete **all sections** in **BLOCK CAPITALS**. **Incomplete** or **illegible** forms will be returned.

### 1. Player Information

Surname: \_\_\_\_\_ First names: \_\_\_\_\_

Date of Birth (dd/mm/yy):   /   /   Gender: Male  Female  (please tick)

Address: \_\_\_\_\_

\_\_\_\_\_ Postcode     -

Contact Tel. (including dialling code)

E-mail: \_\_\_\_\_

Sport: Football Club: \_\_\_\_\_

(indicate the discipline if appropriate)

National Governing Body: The Football Association

Level of competition: (please tick one box as appropriate)

I am part of my International Federation's Registered Testing Pool

I am part of the UKAD National Registered Testing Pool

I play for a Premier League or Championship club

I play for a League One or Two club

Other (Women's, Non-league, Futsal)

(For other please state) \_\_\_\_\_

(a) Have you submitted a previous TUE application? Yes  No

(b) The Anti-Doping Organisation applied to? UK Anti-Doping  Other  \_\_\_\_\_ (please state)

(c) Decision: Approved  Declined

## 2. Medical Information

Diagnosis (please attach medical evidence to support this diagnosis):

-----

-----

Medical examination(s)/test(s) performed (please attach the results of medical investigations completed):

-----

-----

Prohibited Substance(s) (Generic Name)	Dose and units of administration	Route of administration	Frequency of administration
1.			
2.			
3.			
4.			

Intended duration of treatment(s): Once only  Emergency  Weeks/Months

Please specify duration: -----

If a permitted medication can be used to treat the medical condition, provide clinical justification for the requested use of the prohibited medication prescribed:

-----

-----

-----

## 3. Notifying Medical Practitioner Details and Declaration

Name: -----

Qualifications: -----

Medical speciality: -----

Contact Tel.

E-mail: -----

Practice stamp/address

I certify the above-mentioned substance(s) for the above named player has been/are to be administered as the correct treatment for the above named medical condition. I further certify that the use of alternative medications not on the Prohibited List would be unsatisfactory for the treatment of the above named medical condition.

If the player is under 18 and I have not notified the player's parent/guardian, this is because I consider the player to be competent to give consent to treatment.

I understand that my details will be held on an anti-doping database and will be accessible by the Player, their National Governing Body, their International Federation, UK Anti-Doping, and the World Anti-Doping Agency in order to allow them to administer the anti-doping programme.

**Signature of medical practitioner:** \_\_\_\_\_ **Date:**

If the player is under 18 does the player's parent/guardian know about this treatment? Yes  No

Are the relevant medical reports and examination/test results attached to this application? Yes  No



## Therapeutic Use Exemption (TUE) Beta-2 Agonist Application Form



TUE applications for the use of formoterol and terbutaline require a medical file to confirm the diagnosis of asthma and/or its clinical variants. The medical file should include:

- A detailed medical history and clinical review
- Bronchodilator or Bronchoprovocation test results

For further information on how to submit a complete medical file use the diagnostic flow chart on page 2 of this application form.

Please complete **all** sections in **BLOCK CAPITALS**. **Incomplete** or **illegible** forms will be returned.

### Player Information

Surname: \_\_\_\_\_ First names: \_\_\_\_\_

Date of Birth (dd/mm/yy): / /  Gender: Male  Female  (please tick)

Address: \_\_\_\_\_

Postcode     -

Contact Tel. (including dialling code)

E-mail: \_\_\_\_\_

Sport: Football Club: \_\_\_\_\_

(indicate the discipline if appropriate)

National Governing Body: The Football Association

Level of competition: (please tick one box as appropriate)

- I am part of my International Federation's Registered Testing Pool
- I am part of the UKAD National Registered Testing Pool
- I play for a Premier League or Championship club
- I play for a League One or Two club
- Other (Women's, Non-league, Futsal)

(For other please state) \_\_\_\_\_

(a) Have you submitted a previous TUE application? Yes  No

(b) The Anti-Doping Organisation applied to? UK Anti-Doping  Other  \_\_\_\_\_ (please state)

(c) Decision: Approved  Declined



## Therapeutic Use Exemption (TUE) Beta-2 Agonist Application Form



TUE applications for the use of formoterol and terbutaline require a medical file to confirm the diagnosis of asthma and/or its clinical variants. The medical file should include:

- A detailed medical history and clinical review
- Bronchodilator or Bronchoprovocation test results

For further information on how to submit a complete medical file use the diagnostic flow chart on page 2 of this application form.

Please complete **all sections** in **BLOCK CAPITALS**. **Incomplete** or **illegible** forms will be returned.

### Player Information

Surname: \_\_\_\_\_ First names: \_\_\_\_\_

Date of Birth (dd/mm/yy):   /   /   Gender: Male  Female  (please tick)

Address: \_\_\_\_\_

\_\_\_\_\_ Postcode     -

Contact Tel. (including dialling code)

E-mail: \_\_\_\_\_

Sport: Football Club: \_\_\_\_\_

(indicate the discipline if appropriate)

National Governing Body: The Football Association

Level of competition: (please tick one box as appropriate)

- I am part of my International Federation's Registered Testing Pool
- I am part of the UKAD National Registered Testing Pool
- I play for a Premier League or Championship club
- I play for a League One or Two club
- Other (Women's, Non-league, Futsal)

(For other please state) \_\_\_\_\_

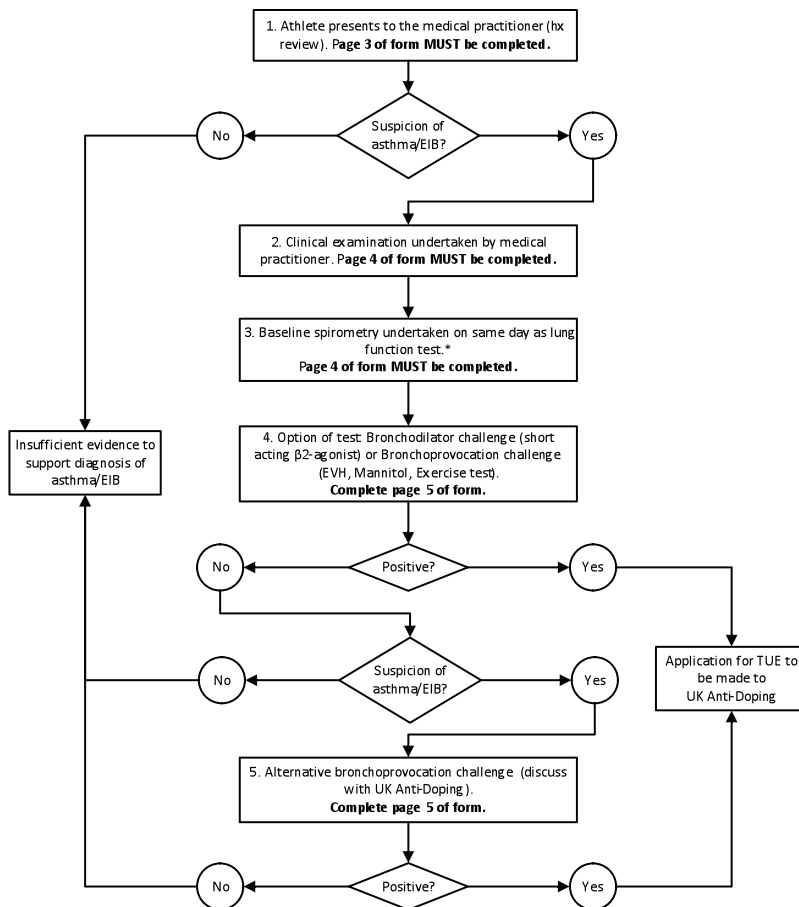
(a) Have you submitted a previous TUE application? Yes  No

(b) The Anti-Doping Organisation applied to? UK Anti-Doping  Other  \_\_\_\_\_ (please state)

(c) Decision: Approved  Declined

### Medical File Requirements

The diagnostic flow chart below provides an outline of how to submit a complete medical file to UK Anti-Doping to confirm the diagnosis of asthma and/or its clinical variants.



**\*NB.** It is recommended that a bronchodilator challenge is the investigation of preference in Players with abnormal resting lung function ( $FEV_1 < 70\%$  predicted at baseline,  $FEV_1/FVC < 0.7$ ); a bronchodilator challenge should be considered if  $FEV_1$  is 70-80% predicted at baseline; a bronchodilator challenge is still an option but a bronchoprovocation challenge might be more suitable when  $FEV_1 > 80\%$  predicted at baseline.

**Medical History Report and Medication Details**

(a) Diagnosis (i.e. asthma, exercise induced asthma, exercise induced bronchoconstriction):

(b) Age of onset:

-----

(c) Symptoms experienced: (Please tick as appropriate)

Recurrent breathlessness  Coughing  Wheezing   
 Difficulty in breathing (Dyspnoea)  Excess mucus production  Chest tightness

Please specify: -----

(d) When are these symptoms experienced?

(e) What environmental conditions trigger the above symptoms? (Please tick as appropriate)

Cold climate  Dry air  High pollen count   
 Air pollution  Altitude training  Other

If other, please state -----

(f) List all asthma medication used in the last 3 months (e.g. beclomethasone, mometasone, salbutamol):

(g) Has the Player any history of atopic disorders and/or childhood asthma?

(h) Provide details of any acute exacerbations of asthma including hospital emergency department attendance/admission reports and/or previous treatment with oral corticosteroids (please attach documents to confirm these details):

(i) Asthma medication details:

Generic name of Prohibited Substance(s)	Dose of administration	Route of administration	Frequency of administration	Maximum dosage permitted within 24 hrs
1.	µg	Inhaled		µg
2.	µg	Inhaled		µg
3.	µg	Inhaled		µg
4.	µg	Inhaled		µg

Intended duration of treatment(s): Emergency  Weeks/Months  Please specify:

### Notifying Medical Practitioner Details and Declaration

Name: \_\_\_\_\_ Practice stamp/address

Qualifications: \_\_\_\_\_

Medical speciality: \_\_\_\_\_

Contact Tel.

E-mail: \_\_\_\_\_

I certify the above-mentioned substance(s) for the above named Player has been/are to be administered as the correct treatment for the above named medical condition. I further certify that the use of alternative medications not on the Prohibited List would be unsatisfactory for the treatment of the above named medical condition.

If the Player is under 18 and I have not notified the Player's parent/guardian, this is because I consider the Player to be competent to give consent to treatment.

I understand that my details will be held on an anti-doping database and will be accessible by the Player, their National Governing Body, their International Federation, UK Anti-Doping, and the World Anti-Doping Agency in order to allow them to administer the anti-doping programme.

**Signature of medical practitioner:** \_\_\_\_\_ **Date:**   /   /

If the Player is under 18 does the Player's parent/guardian know about this treatment? Yes  No

### Clinical Examination

Clinical examination findings with specific focus on the respiratory system were: Normal  Abnormal

**Specify any abnormal examination findings in this box:**

### Baseline Spirometry

Date:   /   /   Best Baseline FEV<sub>1</sub>: \_\_\_\_\_ L (*must be within 5% of second best FEV<sub>1</sub>*)

**NB.** The application will not be reviewed unless the data for at least two flow loops are presented in the table below and that the best baseline FEV<sub>1</sub> is within 5% of the second best FEV<sub>1</sub>. Further flow loops are required if the best baseline FEV<sub>1</sub> value is not within 5% of second best FEV<sub>1</sub> value at baseline.

	FEV <sub>1</sub> (L)	FVC (L)	FEV <sub>1</sub> /FVC (%)	FEF <sub>25-75</sub> (L·s <sup>-1</sup> )
1 <sup>st</sup> Flow Loop				
% Predicted				
2 <sup>nd</sup> Flow Loop				
% Predicted				
3 <sup>rd</sup> Flow Loop				

**Abbreviations:** **FEV<sub>1</sub>**, Forced Expiratory Volume in one second; **FVC**, Forced Vital Capacity; **FEF<sub>25-75</sub>**, Forced Expiratory Flow between 25-75% of vital capacity; **L**, Litres; **L·s<sup>-1</sup>**, Litres per second.

**Bronchodilator Challenge**

If chosen as the test to confirm asthma, please complete this section and attach an electronic printout of test results if available.

**NB.** The application will not be reviewed unless duplicate FEV<sub>1</sub> measurements are presented in the table below. Duplicate FEV<sub>1</sub> values must also agree within 5% & 150ml of each other to confirm reproducibility of the best FEV<sub>1</sub> value measured.

Date of challenge: / /  / /   Bronchodilator & dose used: \_\_\_\_\_

Time post-test	FEV <sub>1</sub> Post BD dose (L)		% difference from baseline FEV <sub>1</sub> (using best of duplicate)	FVC Post BD dose (L)		% difference from baseline FVC (using best of duplicate)
	Duplicate 1	Duplicate 2		Duplicate 1	Duplicate 2	
min						
min						

Technician Name & Contact details: \_\_\_\_\_

Comments (optional): \_\_\_\_\_

**Bronchoprovocation Challenge**

If chosen as the test to confirm asthma, please provide a summary of the test results below & attach either:

- Electronic printout of spirometry results and flow volume loop tracing; or
- A bronchoprovocation data collection worksheet (**NB.** Worksheets can be found on the UK Anti-Doping website if the centre completing the bronchoprovocation challenge does not have their own).

**NB.** The application will not be reviewed unless duplicate FEV<sub>1</sub> measurements are taken at each time point.

EVH – Fall in FEV<sub>1</sub> at two consecutive time points:

Time point 1: \_\_\_\_\_min Best FEV<sub>1</sub> value at time point: \_\_\_\_\_L FEV<sub>1</sub> fall from baseline: \_\_\_\_\_%

Time point 2: \_\_\_\_\_min Best FEV<sub>1</sub> value at time point: \_\_\_\_\_L FEV<sub>1</sub> fall from baseline: \_\_\_\_\_%

Exercise – Fall in FEV<sub>1</sub> at two consecutive time points:

Time point 1: \_\_\_\_\_min Best FEV<sub>1</sub> value at time point: \_\_\_\_\_L FEV<sub>1</sub> fall from baseline: \_\_\_\_\_%

Time point 2: \_\_\_\_\_min Best FEV<sub>1</sub> value at time point: \_\_\_\_\_L FEV<sub>1</sub> fall from baseline: \_\_\_\_\_%

Mannitol – True baseline FEV<sub>1</sub> following 0mg mannitol dose: \_\_\_\_\_L

PD15: \_\_\_\_\_mg FEV<sub>1</sub> value at dose that induced a > or = 15% fall: \_\_\_\_\_L FEV<sub>1</sub> fall from true baseline: \_\_\_\_\_%

FEV<sub>1</sub> value at dose prior to 15% fall: \_\_\_\_\_L Dose: \_\_\_\_\_mg FEV<sub>1</sub> fall from true baseline: \_\_\_\_\_%

A 10% incremental fall in FEV<sub>1</sub> between doses: \_\_\_\_\_mg (dose 1) and \_\_\_\_\_mg (dose 2)

FEV<sub>1</sub> fall from true baseline at dose 1 \_\_\_\_\_L \_\_\_\_\_% and FEV<sub>1</sub> fall from true baseline at dose 2 \_\_\_\_\_L \_\_\_\_\_%

Date of challenge: / /  / /   Comments (optional): \_\_\_\_\_

Technician Name & Contact details: \_\_\_\_\_

### Player's Declaration

I certify that the information under Section 1 of this TUE application form is accurate and that I am requesting approval to use a substance or method on the World Anti-Doping Code (WADC) Prohibited List.

I authorise the release of personal medical information related to this application to the National Anti-Doping Organisation (NADO, namely UK Anti-Doping) as well as to World Anti-Doping Agency (WADA) staff, to the NADO's Therapeutic Use Exemption Committee (TUEC) and to other Anti-Doping Organisations (ADO) under the provisions of the WADC and the anti-doping rules of my sport.

I understand and agree that:

- My TUE data will only be used to allow the above organisations to administer the anti-doping programme in accordance with the WADC International Standard for TUEs;
- My TUE data will be collected by the NADO who shall be principally responsible for ensuring the protection of this data. The NADO will use the Anti-Doping Administration and Management System (ADAMS) to store, process and manage my data, including its disclosure to authorised recipients;
- My TUE data, or part of it, will be made accessible to authorised ADOs (for instance, designated NADOs, the International or National Federation of my Sport, and WADA);
- My TUE data may have to be shared with other independent medical and/or scientific experts, and all necessary staff involved in the management, review or appeals of TUEs if applicable;
- Persons or parties receiving my information may be located outside the country where I reside. In some other countries data protection and privacy laws may not be equivalent to those in my own country;
- I may have certain rights under applicable laws in relation to my TUE data, including rights to access and/or correct any inaccurate data; and
- To the extent that I have any concerns about the processing of my TUE data I may consult with the NADO and/or WADA as appropriate.

#### Withdrawal of Consent

I understand that if I ever wish to revoke the right of the NADO & authorised ADOs (designated NADOs, the International or National Federation of my Sport, and WADA) to access my TUE information, I must notify my medical practitioner and the NADO in writing of that fact.

#### Authorisation and Consent

By signing this form I expressly consent to the use of my TUE data as set out above.

**Player's signature:** \_\_\_\_\_ **Date:** / /

**Parent/guardian signature** \_\_\_\_\_ **Date:** / /

*(If the Player is under 18 and is not deemed to be competent to give their consent to the treatment or has a disability preventing him/her to sign this form, a parent or guardian shall sign together with or on behalf of the Player).*

I would like the decision to be sent to: (please tick one box as appropriate)

My postal address       My e-mail address       The notifying medical practitioner

MARK AS CONFIDENTIAL AND PLEASE SUBMIT THE COMPLETED FORM TO UK ANTI-DOPING AND KEEP A COPY FOR YOUR RECORDS:

**TUE**  
**UK Anti-Doping**  
**Oceanic House, 1a Cockspur Street, London, SW1Y 5BG**  
Confidential fax: **0800 298 3362** / e-mail: **tue@ukad.org.uk**