



## Therapeutic Use Exemption (TUE) Checklist

### Cardiovascular Conditions

Prohibited Substances: Beta-blockers

CANADIAN CENTRE  
FOR ETHICS IN SPORT

CENTRE CANADIEN  
DANS LE SPORT  
POUR L'ÉTHIQUE

201-2723 chemin Lancaster Rd  
Ottawa ON Canada K1B 0B1  
Tel/Tél + 1 613 521 3340  
+ 1 800 672 7775  
Fax/Télé + 1 613 521 3134  
info@cces.ca www.cces.ca

This checklist is to guide the athlete and their physician on the requirements for a TUE application that will allow the TUE Committee to assess whether the relevant criteria of the International Standard Therapeutic Use Exemption (ISTUE) are met.

Please note that the completed TUE application form alone is not sufficient; supporting documents **must** be provided. A completed application and checklist DO NOT guarantee the granting of a TUE. Conversely, in some situations a legitimate application may not include every element on the checklist.

The documents included in your medical file must confirm your diagnosis and prescription and should include:

<input type="checkbox"/> <b>TUE application form</b> must include:
<input type="checkbox"/> All sections completed in legible handwriting
<input type="checkbox"/> All information submitted in English or French
<input type="checkbox"/> A signature from the prescribing physician
<input type="checkbox"/> Athlete's signature in all appropriate sections
<input type="checkbox"/> <b>A letter from the athlete's prescribing physician</b> confirming they were seen within the current year (see Annex 1 for example)
<input type="checkbox"/> <b>Medical reports</b> should include details of:
<input type="checkbox"/> Medical history: family history of the disease, symptoms, presentation at first manifestation, course of disease, start of treatment
<input type="checkbox"/> Findings on examination: pulse quality, auscultation, any signs of heart failure
<input type="checkbox"/> Interpretation of symptoms, signs, and test results by a specialist physician, i.e., cardiologist
<input type="checkbox"/> Diagnosis (stable angina pectoris; secondary prevention after myocardial infarction; symptomatic heart failure II-IV); supraventricular and ventricular arrhythmias; Long QT syndrome; acute coronary syndrome; hypertension without other risk factors)
<input type="checkbox"/> Medication prescribed including dosage, frequency, administration route. Beta-blockers are prohibited in specific sports only
<input type="checkbox"/> Trial use of non-prohibited treatment and outcome. Show that alternatives are either not effective or not available
<input type="checkbox"/> Consequence to the athlete if beta-blocker treatment is withheld
<input type="checkbox"/> <b>Diagnostic test results</b> should include copies of:
<input type="checkbox"/> Laboratory tests: biomarkers as applicable (creatin kinase, troponin I and T, myoglobin, BNP, and NT-proBNP)
<input type="checkbox"/> Resting ECG, stress ECG, Holter monitoring blood pressure readings as applicable
<input type="checkbox"/> Imaging findings: chest radiograph, magnetic resonance imaging, repeated measures of ejection fraction and structural remodeling, radionuclide ventriculography and nuclear imaging (myocardial scintigraphy), coronary CT, echocardiography, and coronary angiography as applicable

For more information about WADA's ISTUE criteria and additional information about the documentation to be submitted, please visit [WADA's TUE Physician Guidelines - Cardiovascular Conditions: The Therapeutic Use of Beta-blockers in Athletes](#).