

Therapeutic Use Exemption (TUE) Checklist

CANADIAN CENTRE ETHICS SPORT

CENTRECANADIEN

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Musculoskeletal Conditions

Prohibited Substance: Glucocorticoids by oral, rectal, or injectable routes (for narcotics or cannabis, see the Pain Management Checklist)

This checklist provides the athlete and their physician with a list of requirements for a TUE application. A TUE application must include a completed form and a medical file that confirms the diagnosis and prescription. If it is not possible to submit all mandatory items on the checklist, please have the treating physician explain why.

A complete application with a medical file will be reviewed by the CCES TUE Committee to assess whether it meets the criteria of the International Standard for Therapeutic Use Exemption (ISTUE). There are no guarantees that a TUE will be granted.

When an application is submitted without a complete medical file the CCES will advise the applicant which documents are missing and ask them to submit them.

Glucocorticoids are prohibited only in competition and when taken prior to competition, particularly during the washout period, it may result in a positive anti-doping test in competition. To determine **if and when** an athlete should apply for a TUE, refer to the Glucocorticoids and Therapeutic Use Exemptions Guidelines.

TU	E application form must include:		
	All sections completed in legible handwriting		
	All information submitted in English or French		
	\square A signature from the prescribing physician		
☐ Athlete's signature in all appropriate sections			
A letter from the athlete's prescribing physician confirming they were seen within the current year (see Annex 1 for example)			
Medical reports should include details of:			
	Medical history: symptoms; first or recurrent manifestation, including dates; course of disease, including disease activity		
	scores, if applicable		
	Findings on examination		
	Interpretation of symptoms, signs and test results by the physician		
	Diagnosis		
	Medication prescribed, including dosage, frequency, administration route (note that glucocorticoids are prohibited by		
	some routes and in competition only)		
	Response to other non-prohibited treatments, where applicable		
	Explain why a glucocorticoid was the appropriate treatment considering the functional consequences of the injury or		
	disease		
Dia	Diagnostic test results should include copies of:		
	Imaging findings (X-ray, CT, ultrasound, MRI). For simple acute injuries (e.g., bursitis), it is recognized that imaging may		
	not be necessary or readily available.		
	Laboratory tests		

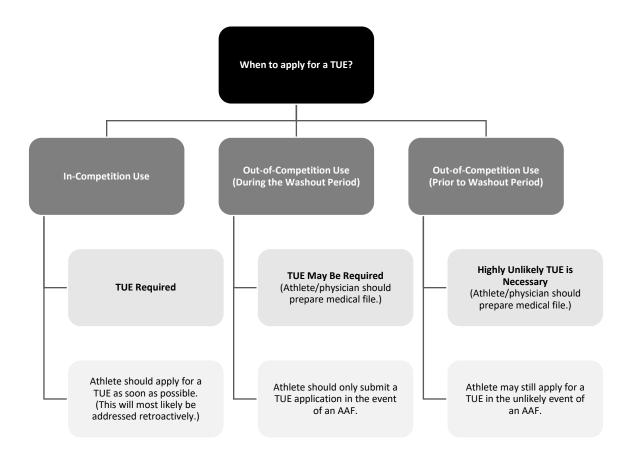
For more information about WADA's ISTUE criteria and additional information about the documentation to be submitted, please visit WADA's TUE Physician Guidelines - Musculoskeletal conditions.

Washout Periods Following Administration of Glucocorticoids

Route	Glucocorticoid	Washout Period
Oral*	All glucocorticoids;	3 days
	Except: triamcinolone; triamcinolone acetonide	10 days
Intramuscular	Betamethasone; dexamethasone; methylprednisolone	5 days
intramuscular	Prednisolone; prednisone	10 days
	Triamcinolone acetonide	60 days
Local injections (including periarticular, intra-articular, peritendinous and intratendinous)	All glucocorticoids;	3 days
	Except: prednisolone; prednisone; triamcinolone acetonide; triamcinolone hexacetonide	10 days
	All glucocorticoids	3 days
Rectal	Except: triamcinolone diacetate; triamcinolone acetonide	10 days

^{*}Oral routes also include e.g. oromucosal, buccal, gingival and sublingual.

Source: Glucocorticoids and Therapeutic Use Exemptions Guidelines, page 3. Figure 1: GC Washout Table



Source: Glucocorticoids and Therapeutic Use Exemptions Guidelines, page 4. Figure 2: When to Apply for a TUE.