



## Therapeutic Use Exemption (TUE) Checklist

*Sinusitis/Rhinosinusitis*

Prohibited Substances: Pseudoephedrine, glucocorticoids

CANADIAN CENTRE  
FOR ETHICS  
IN SPORT

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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.

<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: exact symptoms (>2 of the following: facial pain, nasal obstruction, nasal purulence/discharge, hyposmia/anosmia), intensity (including improvement or worsening) and duration of symptoms in days/weeks
<input type="checkbox"/> Findings on examination: congestion/obstruction, pressure pain, discharge, smell
<input type="checkbox"/> Diagnosis
<input type="checkbox"/> Pseudoephedrine and/or glucocorticoid dosage, frequency, administration route (both are only prohibited in competition, glucocorticoids only when applied systemically, and pseudoephedrine if exceeding therapeutic dose of 240 mg daily or if given in an extended-release format)
<input type="checkbox"/> Explain why alternative non-prohibited treatment is not used/sufficient and state expected duration of treatment
<input type="checkbox"/> <b>Diagnostic test results</b> should include copies of:
<input type="checkbox"/> Laboratory tests are not mandatory (e.g., nasal culture)
<input type="checkbox"/> Imaging findings or other investigations: only chronic conditions require confirmation by CT or endoscopy

For more information about WADA's ISTUE criteria and additional information about the documentation to be submitted, please visit [WADA's TUE Physician Guidelines – Sinusitis/Rhinosinusitis](#).