PROGRAM ANTI-DONNA ANT

General

Therapeutic Use Exemption (TUE) Checklist

CANADIAN CENTRE ETHICS SPORT



201-2723 chemin Lancaster Rd Ottawa ON Canada K1B 0B1 Tel/Tél + 1 613 521 3340 + 1 800 672 7775 Fax/Téléc + 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 ISTUE Criteria 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 include:

A duly completed TUE application form;		
A letter from your physician confirming you were seen within the current year (See Annex 1 for sample);		
Me	ledical report should include details of:	
	Medical history: symptoms, age at onset, course of disease, start of treatment; typical symptoms and complications (where applicable)	
	Findings on physical examinations	
	Interpretation of symptoms, signs and test results by physician	
	Diagnosis based on current internationally accepted criteria	
	Substance prescribed, dosage, frequency, route of administration	
	Evidence of follow-up/monitoring of athlete by physician	
Dia	gnostic test results included (copies of originals or printouts)	
	Laboratory tests (where applicable)	
	Imaging or other test results (where applicable)	

