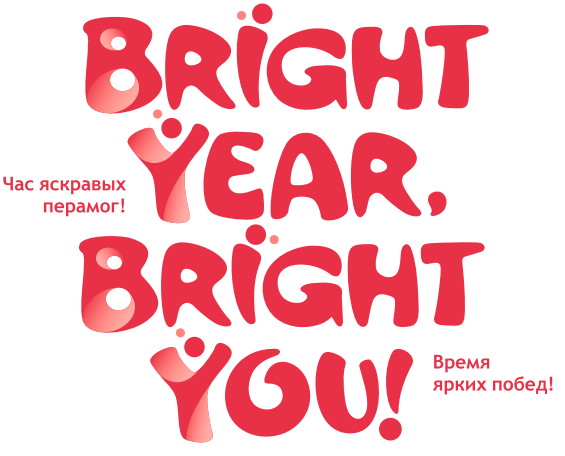
MINSK 2019
DOPING CONTROL GUIDE

MINSK 2019 2nd EUROPEAN GAMES


Час яскравых
перамог!
BRIGHT
YEAR,
BRIGHT
YOU!
Время
ярких побед!

ABOUT THE DOPING CONTROL GUIDE

All information contained in this Doping Control Guide was correct at the time of publication in February 2019. However, please, note that these details may change between now and the 2nd European Games MINSK 2019. All updates to this guide will be posted on the MINSK 2019 NOC EXTRANET (**https:/www.extranet.minsk2019.by**), where they may be downloaded by NOCs.

Along with the MINSK 2019 Medical Guide and MINSK 2019 Pharmacy Guide, this edition of the MINSK 2019 Doping Control Guide is initially being published in electronic form only. Printed versions of all the guides will be distributed to NOC medical teams upon arrival at the Athletes' Village at MINSK 2019 Games time.

CONTENTS

1. MEGOC
ANTI-DOPING TEAM

1. MEGOC Anti-Doping Team

The MINSK 2019 Anti-Doping team is dedicated to protecting every Athlete's right to participate in doping-free sport and thus promote health, fairness and equality for Athletes worldwide.

Katsiaryna Kurylenkava
Head of Anti-Doping

Darya Prastakova
Senior Anti-Doping Expert

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Anti-Doping Expert

2. EUROPEAN OLYMPIC COMMITTEES OVERVIEW

2. European Olympic Committees Overview

2.1. Governance of the 2nd European Games MINSK 2019 Anti-Doping Programme

The European Olympic Committees (EOC) is responsible for the 2nd European Games MINSK 2019 (the Games) Anti-Doping Programme, including In-Competition and Out-of-Competition testing from the opening of the Athletes' Village (AVL) on 18 June 2019 to, and including, the day of the Closing Ceremony on 30 June 2019 (the Games Period).

The EOC is a Signatory to the World Anti-Doping Code (the Code). The EOC has established the EOC Anti-Doping Rules (the EOC Rules) in compliance with the general principles of the Code. The EOC Rules are complemented by the WADA International Standards and outline the various Anti-Doping Rule Violations (ADRVs) and the detailed results management process following a possible ADRV. The EOC Rules shall apply to the Games, from the date of the opening of AVL on 18 June 2019 to the Closing Ceremony of the Games on 30 June 2019. Athletes entered at the Games may be tested by the EOC during the entire period, as described above, regardless of their location. All Participants (Athletes and Athlete Support Personnel) accept the EOC Rules as a condition of participation and are presumed to have agreed to comply with the EOC Rules, which agreement is also confirmed when signing the Eligibility Conditions Form. All National Olympic Committees (NOCs) and European and International Federations (EFs/IFs) shall have formally declared their acceptance of the EOC Rules through the submission of a signed declaration form to the EOC. Any NOC or EF/IF that has not accepted the EOC Rules shall be deemed ineligible to participate in the Games.

The EOC Medical and Anti-Doping Commission is responsible for all anti-doping regulations applicable to the Games, including the EOC Rules. The EOC Medical and Anti-Doping Commission is responsible for the regulations related to Therapeutic Use Exemptions (TUE) as outlined in the EOC Rules. Unless specifically directed in the EOC Rules, the person responsible for the administration of the provisions thereof is the Chairman of the EOC Medical and Anti-Doping Commission.

The Minsk European Games Organising Committee (MEGOC) is responsible for the implementation of the Games Doping Control Programme, which includes the infrastructure and operational provisions to enable Doping Control testing as well as analysis of the Doping Control Samples to be conducted in accordance with the EOC Rules. To assist with the planning, management and implementation of the Doping Control Programme, MEGOC has contracted the National Anti-Doping Agency of Belarus (NADA Belarus) as the Doping Control Supplier.

MEGOC recognises the need to ensure that anti-doping operations are carried out in conformity with the International Standard for Testing and Investigations (ISTI) and confirms its support in assisting the EOC to fulfil its role and responsibilities under the Code. In particular, it is the primary objective of the MEGOC Anti-Doping department to ensure the safety and security of both the Athletes and the Doping Control Samples through the entire Doping Control process.

All Samples collected will be analysed at a WADA-accredited Laboratory and will include both urine and blood tests. The results of the tests will be provided to the EOC Medical and Anti-Doping Commission Chairperson and WADA directly from the Laboratory. Generally, negative results will be provided within 24 hours of the Samples arriving at the Laboratory and it is expected that results from Adverse Analytical Findings will be provided within 48 hours, with the exception of the Erythropoietin (EPO) test results, which will be provided within 72 hours.

In compliance with the Code and the WADA International Standards, Samples may be subject to further analysis subsequent to the Closing Ceremony. Any ADRV discovered as a result thereof shall be dealt with in accordance with the EOC Rules.

PROHIBITED LIST 2019

3. Prohibited Substances

The WADA 2019 Prohibited List (found below) lists the substances and methods prohibited for the Games. If, at the time of the Games, the 2019 Prohibited List is amended, the valid version that can be retrieved from the WADA website (**www.wada-ama.org**) is the applicable one.

All Athletes and Athlete support personnel need to familiarise themselves with the 2019 Prohibited List.

SUBSTANCES AND METHODS PROHIBITED AT ALL TIMES (IN- AND OUT-OF-COMPETITION)

PROHIBITED SUBSTANCES

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 (e.g. drugs under pre-clinical or clinical development or discontinued, designer drugs, substances approved only for veterinary use) is prohibited at all times.

ANABOLIC AGENTS

Anabolic agents are prohibited.

1. ANABOLIC ANDROGENIC STEROIDS (AAS)

A. EXOGENOUS * AAS, INCLUDING:

1-androstenediol (5α-androst-1-ene -3β,17β-diol)
1-androstenedione (5α-androst-1-ene-3,17-dione)
1-androsterone (3α-hydroxy-5α-androst-1-ene-17-one)
1-testosterone (17β-hydroxy-5α-androst-1-en-3-one)
Bolasterone
Calusterone
Clostebol
Danazol ([1,2]oxazolo[4',5':2,3]pregna-4-en-20-yn-17α-ol)
Dehydrochlormethyltestosterone (4-chloro-17β-hydroxy-17α-methylandrosta-1,4-dien-3-one)
Desoxymethyltestosterone (17α-methyl-5α-androst-2-en-17β-ol and 17α-methyl-5α-androst-3-en-17β-ol)
Drostanolone
Ethylestrenol (19-norpregna-4-en-17α-ol)

Fluoxymesterone
Formebolone
Furazabol (17α-methyl [1,2,5] oxadiazolo[3',4':2,3]-5α-and rostan-17β-ol)
Gestrinone
Mestanolone
Mesterolone
Metandienone (17β-hydroxy-17α-methylandrosta-1,4-dien-3-one)
Metenolone
Methandriol
Methasterone (17β-hydroxy-2α,17α-dimethyl-5α-androstan-3-one)
Methyldienolone (17β-hydroxy-17α-methylestra-4,9-dien-3-one)
Methyl-1-testosterone (17β-hydroxy-17α-methyl-5α-androst-1-en-3-one)
Methylnortestosterone (17β-hydroxy-17α-methylestr-4-en-3-one)
Methyltestosterone
Metribolone (methyltrienolone, 17β-hydroxy-17α-methylestra-4, 9,11-trien-3-one)
Mibolerone
Norboletone
Norclostebol
Norethandrolone
Oxabolone
Oxandrolone
Oxymesterone
Oxymetholone
Prostanozol (17β-[(tetrahydropyran-2-yl) oxy]-1'H-pyrazolo [3,4:2,3]-5α-androstane)
Quinbolone
Stanozolol
Stanozolol
Stenbolone
Stenbolone
Tetrahydrogestrinone (17-hydroxy-18a-homo-19-nor-17α-pregna-4,9,11-trien-3-one)
Trenbolone (17β-hydroxyestr-4,9,11-trien-3-one)
and other substances with a similar chemical structure or similar biological effect(s).

B. ENDOGENOUS AAS AND THEIR METABOLITES AND ISOMERS, WHEN ADMINISTERED EXOGENOUSLY, INCLUDING BUT NOT LIMITED TO:**

4-androstenediol (androst-4-ene-3β, 17β-diol)
4-hydroxytestosterone (4,17β-dihydroxyandrost-4-en-3-one)
5-androstenedione (androst-5-ene-3, 17-dione)
7α-hydroxy-DHEA
7β-hydroxy-DHEA

7-keto-DHEA
19-norandrostenediol (estr-4-ene-3, 17-diol)
19-norandrostenedione (estr-4-ene-3, 17-dione)
Androstanolone (5α-dihydrotestosterone, 17β-hydroxy-5α-androstan-3-one)
Androstenediol (androst-5-ene-3β,17β-diol)
Androstenedione (androst-4-ene-3,17-dione)
Boldenone
Boldione (androsta-1,4-diene-3,17-dione)
Epiandrosterone (3β-hydroxy-5α-androstan-17-one)
Epi-dihydrotestosterone (17β-hydroxy-5β-androstan-3-one)
Epitestosterone
Nandrolone (19-nortestosterone)
Prasterone (dehydroepiandrosterone, DHEA, 3β-hydroxyandrost-5-en-17-one)
Testosterone

2. OTHER ANABOLIC AGENTS

Including, but not limited to:

Clenbuterol
Selective androgen receptor modulators (SARMs), e.g. andarine, LGD-4033, enobosarm (ostarine) and RAD140;
Tibolone
Zeranol
Zilpaterol

For purposes of this section:

* " exogenous" refers to a substance which is not ordinarily produced by the body naturally.

** " endogenous" refers to a substance which is ordinarily produced by the body naturally.

PEPTIDE HORMONES, GROWTH FACTORS, RELATED SUBSTANCES AND MIMETICS

The following substances, and other substances with similar chemical structure or similar biological effect(s), are prohibited:

1. ERYTHROPOIETINS (EPO) AND AGENTS AFFECTING ERYTHROPOIESIS, INCLUDING, BUT NOT LIMITED TO:

1.1 ERYTHROPOIETIN-RECEPTOR AGONISTS, E.G.

Darbepoetins (dEPO)
Erythropoietins (EPO)

EPO based constructs (EPO-Fc, methoxy polyethylene glycol-epoetin beta (CERA))

EPO-mimetic agents and their constructs , e.g. CNTO-530, peginesatide;

1.2. HYPOXIA-INDUCIBLE FACTOR (HIF) ACTIVATING AGENTS, E.G.

Argon
Cobalt
Daprodustat (GSK1278863)
Molidustat
Roxadustat (FG-4592)
Vadadustat (AKB-6548)
Xenon

1.3. GATA INHIBITORS, E.G.

K-11706

1.4. TGF-BETA (TGF-B) INHIBITORS, E.G.

Luspatercept
Sotatercept

1.5 INNATE REPAIR RECEPTOR AGONISTS, E.G.

Asialo EPO
Carbamylated EPO (CEPO)

PEPTIDE HORMONES AND THEIR RELEASING FACTORS

2.1. CHORIONIC GONADOTROPHIN (CG) AND LUTEINIZING HORMONE (LH) AND THEIR RELEASING FACTORS, IN MALES, E.G.

Buserelin
Deslorelin
Gonadorelin
Goserelin
Leuprorelin
Nafarelin
Triptorelin

2.2. CORTICOTROPHINS AND THEIR RELEASING FACTORS, E.G.

Corticorelin

2.3. GROWTH HORMONE (GH), ITS FRAGMENTS AND RELEASING FACTORS, INCLUDING, BUT NOT LIMITED TO:

Growth Hormone fragments , e.g. AOD-9604 and hGH 176-191;

Growth Hormone Releasing Hormone (GHRH), e.g. CJC-1293, CJC-1295, sermorelin and tesamorelin;

Growth Hormone Secretagogues (GHS), e.g. lenomorelin (ghrelin) and its mimetics, e.g. anamorelin, ipamorelin, macimorelin and tabimorelin;

GH-Releasing Peptides (GHRPs), e.g. alexamorelin, GHRP-1, GHRP-2 (pralmorelin), GHRP-3, GHRP-4, GHRP-5, GHRP-6, and examorelin (hexarelin);

3. GROWTH FACTORS AND GROWTH FACTOR MODULATORS, INCLUDING, BUT NOT LIMITED TO:

Fibroblast Growth Factors (FGFs)

Hepatocyte Growth Factor (HGF)

Insulin-like Growth Factor-1 (IGF-1), and its analogues;

Mechano Growth Factors (MGFs)

Platelet-Derived Growth Factor (PDGF)

Vascular-Endothelial Growth Factor (VEGF)

Thymosin-β4 , and its derivatives e.g. TB-500;

and other growth factors or growth factor modulators affecting muscle, tendon or ligament protein synthesis/degradation, vascularisation, energy utilization, regenerative capacity or fibre type switching.

BETA-2 AGONISTS

All selective and non-selective beta-2 agonists, including all optical isomers, are prohibited;

Including, but not limited to:

Fenoterol
Formoterol
Higenamine
Indacaterol
Olodaterol
Procaterol
Reproterol
Salbutamol
Salmeterol
Terbutaline
Tretoquinol (trimetoquinol)
Tulobuterol
Vilanterol

Except:

Inhaled salbutamol: maximum 1600 micrograms over 24 hours;

in divided doses not to exceed 800 micrograms over 12 hours starting from any dose;

Inhaled formoterol: maximum delivered dose of 54 micrograms over 24 hours;

Inhaled salmeterol: maximum 200 micrograms over 24 hours.

The presence in urine of salbutamol in excess of 1000 ng/mL or formoterol in excess of 40 ng/mL is not consistent with therapeutic use of the substance and will be considered as an Adverse Analytical Finding (AAF) unless the Athlete proves, through a controlled pharmacokinetic study, that the abnormal result was the consequence of a therapeutic dose (by inhalation) up to the maximum dose indicated above.

HORMONE AND METABOLIC MODULATORS

The following hormone and metabolic modulators are prohibited:

1. Aromatase inhibitors including, but not limited to:

2-Androstenol (5α-androst-2-en-17-ol)
2-Androstenone (5α-androst-2-en-17-one)
3-Androstenol (5α-androst-3-en-17-ol)
3-Androstenone (5α-androst-3-en-17-one)
4-androstene-3,6,17 trione (6-oxo)
Aminoglutethimide
Anastrozole
Androsta-1,4,6-triene-3,17-dione (androstatrienedione)
Androsta-3,5-diene-7,17-dione (arimistane)
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:

Clomifene
Cyclofenil
Fulvestrant

4. Agents preventing activin receptor IIB activation including, but not limited, to:

Activin A-neutralizing antibodies
Activin receptor IIB competitors (e.g. decoy activin receptors
(e.g. ACE-031))
Anti-activin receptor IIB antibodies (bimagrumab)

Myostatin inhibitors (myostatin-neutralizing antibodies (e.g. domagrozumab, landogrozumab, stamulumab), myostatin-binding proteins (e.g. follistatin, myostatin propeptide); agents reducing or ablating myostatin expression)

5. Metabolic modulators:

Activators of the AMP-activated protein kinase (AMPK), eg. AICAR, SR9009;

Peroxisome Proliferator Activated Receptor δ (PPARδ) agonists , e.g. 2-(2-methyl-4-((4-methyl-2-(4-(trifluoromethyl)phenyl)thiazol-5-yl)methylthio)phenoxy) acetic acid (GW1516, GW501516);

Insulins , and insulin-mimetics;

Meldonium

Trimetazidine

DIURETICS AND MASKING AGENTS

The following diuretics and masking agents are prohibited, as are other substances with a similar chemical structure or similar biological effect(s).

Including, but not limited to:

Desmopressin; probenecid; plasma expanders, e.g. intravenous administration of albumin, dextran, hydroxyethyl starch and mannitol.

Acetazolamide; amiloride; bumetanide; canrenone; chlortalidone; etacrynic acid; furosemide; indapamide; metolazone; spironolactone; thiazides, e.g. bendroflumethiazide, chlorothiazide and hydrochlorothiazide; triamterene and vaptans, e.g. tolvaptan.

Except:

Drospirenone; pamabrom; and ophthalmic use of carbonic anhydrase inhibitors (e.g. dorzolamide, brinzolamide).

Local administration of felypressin in dental anaesthesia.

The detection in an Athlete's Sample at all times or In-Competition, as applicable, of any quantity of the following substances subject to threshold limits: formoterol, salbutamol, cathine, ephedrine, methylephedrine and pseudoephedrine, in conjunction with a diuretic or masking agent, will be considered as an Adverse Analytical Finding (AAF) unless the Athlete has an approved Therapeutic Use Exemption (TUE) for that substance in addition to the one granted for the diuretic or masking agent.

PROHIBITED METHODS
MANIPULATION OF BLOOD AND BLOOD COMPONENTS

The following are prohibited:

1. The Administration or reintroduction of any quantity of autologous, allogenic (homologous) or heterologous blood, or red blood cell products of any origin into the circulatory system.

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 and microencapsulated haemoglobin products, excluding supplemental oxygen by inhalation.

3. Any form of intravascular manipulation of the blood or blood components by physical or chemical means.

CHEMICAL AND PHYSICAL MANIPULATION

The following are prohibited:

1. Tampering, or Attempting to Tamper, to alter the integrity and validity of Samples collected during Doping Control.

Including, but not limited to:

Urine substitution and/or adulteration, e.g. proteases.

2. Intravenous infusions and/or injections of more than a total of 100 mL per 12 hour period except for those legitimately received in the course of hospital treatments, surgical procedures or clinical diagnostic investigations.

GENE AND CELL DOPING

The following, with the potential to enhance sport performance, are prohibited:

1. The use of polymers of nucleic acids or nucleic acid analogues.

2. The use of gene editing agents designed to alter genome sequences and/or the transcriptional, post-transcriptional or epigenetic regulation of gene expression.

3. The use of normal or genetically modified cells.

PROHIBITED IN-COMPETITION SUBSTANCES
STIMULANTS

All stimulants, including all optical isomers, e.g. d- and l- where relevant, are prohibited.

Stimulants include:

NON-SPECIFIED STIMULANTS:

Adrafinil
Amfepramone
Amfetamine
Amfetaminil
Amiphenazole
Benfluorex
Benzylpiperazine
Bromantan
Clobenzorex
Cocaine
Cropropamide
Crotetamide
Fencamine
Fenetylline
Fenfluramine
Fenproporex
Fonturacetam, [4-phenylpiracetam (carphedon)];
Furfenorex
Lisdexamfetamine
Mefenorex
Mephentermine
Mesocarb
Metamfetamine(d-)
P-methylamfetamine
Modafinil
Norfenfluramine
Phendimetrazine
Phentermine
Prenylamine
Prolintane

A stimulant not expressly listed in this section is a Specified Substance.

SPECIFIED STIMULANTS

Including, but not limited to:

3-methylhexan-2-amine (1,2-dimethylpentylamine)
4-methylhexan-2-amine (methylhexaneamine)
4-methylpentan-2-amine (1,3-dimethylbutylamine)
5-methylhexan-2-amine (1,4-dimethylpentylamine)
Benzfetamine
Cathine**
Cathinone, and its analogues, e.g. mephedrone, methedrone, and α-pyrrolidinovalerophenone;

Dimetamfetamine
(dimethylamphetamine)
Ephedrine***
Epinephrine**** (adrenaline)
Etamivan
Etilamfetamine
Etilefrine
Famprofazone
Fenbutrazate
Fencamfamin
Heptaminol
Hydroxyamfetamine
(parahydroxyamphetamine)
Isometheptene
Levmetamfetamine
Meclofenoxate
Methylenedioxymethamphetamine
Methylephedrine***
Methylphenidate
Nikethamide
Norfenefrine
Octopamine
Oxilofrine (methylsynephrine)
Pemoline
Pentetrazol
Phenethylamine , and its derivatives;
Phenmetrazine
Phenpromethamine
Propylhexedrine
Pseudoephedrine*****
Selegiline
Sibutramine
Strychnine
Tenamfetamine
(methylenedioxyamphetamine)
Tuaminoheptane
and other substances with a similar chemical structure or similar biological effect(s).

Except:

Clonidine

Imidazole derivatives for topical/ophthalmic use and those stimulants included in the 2019 Monitoring Program*.

* Bupropion, caffeine, nicotine, phenylephrine, phenylpropanolamine, pipradrol, and synephrine: These substances are included in the 2019 Monitoring Program, and are not considered Prohibited Substances.

** Cathine: Prohibited when its concentration in urine is greater than 5 micrograms per milliliter.

*** Ephedrine and methylephedrine: Prohibited when the concentration of either in urine is greater than 10 micrograms per milliliter.

**** Epinephrine (adrenaline): Not prohibited in local administration, e.g. nasal, ophthalmologic, or co-

administration with local anaesthetic agents.

***** Pseudoephedrine: Prohibited when its concentration in urine is greater than 150 micrograms per milliliter.

NARCOTICS

The following narcotics are prohibited:

Buprenorphine
Dextromoramide
Diamorphine (heroin)
Fentanyl, and its derivatives;
Hydromorphone
Methadone
Morphine
Nicomorphine
Oxycodone
Oxymorphone
Pentazocine
Pethidine

CANNABINOIDS

The following cannabinoids are prohibited:

Natural cannabinoids, e.g. cannabis, hashish and marijuana,

Synthetic cannabinoids e.g. D9-tetrahydrocannabinol (THC) and other cannabimimetics.

Except:

Cannabidiol.

GLUCOCORTICOIDS

All glucocorticoids are prohibited when administered by oral, intravenous, intramuscular or rectal routes.
Including but not limited to:

Betamethasone
Budesonide
Cortisone
Deflazacort
Dexamethasone
Fluticasone
Hydrocortisone
Methylprednisolone
Methylprednisolone
Prednisolone
Prednisone
Triamcinolone

PROHIBITED IN PARTICULAR SPORTS
SUBSTANCES
BETA-BLOCKERS

Beta-blockers are prohibited In-Competition only, in the following sports, and also prohibited Out-of-Competition where indicated.

Archery (WA)*

Automobile (FIA)

Billiards (all disciplines) (WCBS)

Darts (WDF)

Golf (IGF)

Shooting (ISSF, IPC)*

Skiing/Snowboarding (FIS) in ski jumping, freestyle aerials/halfpipe and snowboard halfpipe/big air

Underwater sports (CMAS) in constant-weight apnoea with or without fins, dynamic apnoea with and without fins, free immersion apnoea, Jump Blue apnoea, spearfishing, static apnoea, target shooting and variable weight apnoea.

*Also prohibited Out-of-Competition

Including, but not limited to:

Alprenolol

Atenolol

Betaxolol

Bisoprolol

Bunolol

Carteolol

Carvedilol

Celiprolol

Esmolol

Labetalol

Metipranolol

Metoprolol

Nadolol

Oxprenolol

Pindolol

Propranolol

Sotalol

Timol

4. MEDICATION USE AND THERAPEUTIC USE EXEMPTIONS (TUE)

4. Medication Use and Therapeutic Use Exemptions (TUE)

It is the responsibility of the Athlete to determine whether a substance he/ she is using or considering using is prohibited. NOCs are encouraged to be proactive in assisting their Athletes to identify what substances they may wish to use, to identify what the therapeutic use alternatives are, if appropriate, and to submit forms in a timely and legible manner to the relevant Anti-Doping Organisation (ADO) in case of the use of an otherwise prohibited substance. All Participants, NOCs, IFs and EFs are strongly advised to refer to Article 4.4 of the EOC Rules, which sets out the provisions regarding TUEs.

At all times, Athletes are strongly advised to check the status of the medications they are using or considering using with their team doctors. If, during the Games, further clarification is required, the Athlete should check with the NOC Medical Officer(s) or a member of the EOC Medical and Anti-Doping Commission.

All Athletes competing at the Games who seek a TUE are expected to have applied to the relevant EF/IF in accordance with the applicable rules of the EF/ IF so that the TUE is granted no later 17 June 2019, the day before the opening of the AVL. The notification requirements in Article 4.4.3 of the EOC Rules should then be complied with. The EOC will recognise TUEs issued in compliance with the Code by other EFs, IFs and ADOs.

Athletes who do not have a TUE may apply to obtain a TUE from the EOC Medical and Anti-Doping Commission at least 30 days before the Games. TUE applications can be emailed to **tue@minsk2019.by**. In cases of emergency or exceptional circumstances, a TUE can be applied for during the course of the Games.

The In-Competition period for the Games in Minsk will be the period commencing twelve hours before a Competition in which the Athlete is scheduled to participate through the end of such Competition and the Sample collection process related to such Competition.

For all Athletes competing in the Games, the EOC will require the respective NOC to have a copy of the TUE Certificate available for the duration of the Games. All TUEs should be submitted through the ADAMS system prior to the Games. If the TUE authorisation is not available on ADAMS, copies of the TUE Certificates should be submitted to the EOC Medical and Anti-Doping Commission by 17 June 2019 via **tue@minsk2019.by** or be handed in upon arrival of the delegation at the AVL Polyclinic Pharmacy, where there will be a secure box.

TUEs granted after 17 June 2019 must still be submitted to **tue@minsk2019.by** or be given to the EOC Medical and Anti-Doping Commission on arrival in AVL. TUE Certificates or new applications can be submitted to the EOC Medical and Anti-Doping Commission via the Pharmacy in the AVL Polyclinic.

The details of the TUE process, including the TUE application process, the medical documentation in support of the application needed, and the criteria for granting a TUE are outlined in the EOC Rules and the International Standard for TUEs. The decisions of the EOC Medical and Anti-Doping Commission will be conveyed to the Athlete's NOC and the EF/IF and reported to WADA.

The EOC Medical and Anti-Doping Commission will consider a retroactive TUE application for a prohibited substance and/or method used during the Games if the prohibited substance and/or method was used in an emergency situation, or treatment of an acute medical condition was necessary.

4.1. TUE Application during the Games

For TUE applications during the Games, the completed TUE forms must be given to the EOC Medical and Anti-Doping Commission Therapeutic Use Exemption Committee (TUEC). They can be emailed to **tue@minsk2019.by** or deposited in the TUE submission box at the Pharmacy in the AVL Polyclinic.

A TUE application should normally be submitted to the TUEC before treatment, but this may be expedited by directly contacting the Chair of the TUEC to obtain a verbal notification and a TUE. A written TUE application will subsequently need to be submitted.
TUE forms are available in the Pharmacy in the AVL Polyclinic.

5. WHEREABOUTS INFORMATION

5. Whereabouts Information

The EOC, as a Signatory to the Code, and MEGOC recognise that an effective Out-of-Competition testing programme is essential to the fight against doping in sport. They also recognise that effective Out-of-Competition testing depends upon accurate and complete Athlete Whereabouts information.

The ultimate responsibility for providing Whereabouts information rests with each athlete; however, it will be the responsibility of each NOC to obtain whereabouts of athletes staying in Belarus (from the date of arrival to the date of departure).

The EOC therefore requests that all NOCs:

- ensure that Athletes who are included in an International Federation (IF) or National Anti-Doping Organisation (NADO) Registered Testing Pool (RTP) comply with their obligations and make their Whereabouts information for the Games period available to the EOC; and

- for Athletes not included in an IF or NADO RTP, provide information to the EOC regarding accommodation arrangements (AVL rooming lists or alternative address for Athletes not residing in AVL), no later than 24 hours after the Delegation Registration Process (DRP) is complete. This information should be submitted using a template provided by the EOC, and sent to an email address that will be communicated to the NOC prior to the Games; and

- ensure that arrival and departure information is submitted to the MEGOC Arrivals and Departures system (ADS) in a timely manner and is accurate and up-to-date for all Athletes participating at the Games.

The EOC will refer to the MEGOC ADS system for arrival and departure information and to the MEGOC Sport Information Centre at the AVL for Athlete training information.

These components are of paramount importance to enable locating Athletes for testing in the lead-up to the Competition period. In the event that the information received from the NOCs is incomplete, or when NOCs refrain from updating or sharing the information with the EOC and MEGOC, the EOC has the right to ask the NOC for more detailed Whereabouts information.

6. WADA OUTREACH PROGRAMME

6. WADA Outreach Programme

Athletes are encouraged to visit the WADA Outreach Centre when, and as often, it is most convenient for them so that they feel comfortable asking questions about anti-doping issues. Staffed by anti-doping experts and retired Athletes recruited from around the world, the Athlete Outreach Programme format allows Athletes to ask their anti-doping questions of peers and experts, enforcing the quality and credibility of the anti-doping message. WADA's print material, such as the Athlete Guide and the Prohibited List, (available in multiple languages), also provides important information about the Athlete's responsibilities under the World Anti-Doping Code and the consequences of doping.

7. WADA INDEPENDENT OBSERVER PROGRAMME

7. WADA Independent Observer Programme

The intent of the WADA Independent Observer (IO) Programme is to assist the EOC and MEGOC in achieving a higher standard in the way their Code-compliant rules are implemented and their anti-doping programmes are conducted.

A WADA IO team will observe the Doping Control processes during the Games, will liaise with the EOC and MEGOC on a regular basis to provide feedback on the observations to amend operations and procedures wherever needed and, following the Games, will provide a summary of observations and recommendations for future programmes relating to the conduct of the doping-control procedures.

8. EOC TECHNICAL PROCEDURES FOR DOPING-CONTROL BY MEGOC FOR THE GAMES

8. EOC Technical Procedures for Doping-Control by MEGOC for the Games

1. Introduction

The EOC Anti-Doping Programme for the Games complies with the Code and the mandatory International Standards that comprise the World Anti-Doping Programme.

The EOC is solely responsible for the initiation and direction of testing during the Games. MEGOC is responsible for all Doping Control Requirements and Financial Costs. Doping Control procedures will be undertaken in conformance with the EOC, IOC and WADA rules.

MEGOC has therefore prepared this Doping Control Guide in conformity with the following sections of the Code's mandatory International Standard for Testing and Investigations (ISTI):

- Notification of Athletes;
- Preparing for the Sample Collection Session;
- Conducting the Sample Collection Session;
- Security/Post-Test Administration;
- Transport of Samples and Documentation;
- Ownership of Samples;
- Annex A: Investigating a Possible Failure to Comply;
- Annex B: Modifications for Athletes with Impairments;
- Annex C: Modifications for Athletes who are Minors;
- Annex D: Collection of Urine Samples;
- Annex E: Collection of Blood Samples;
- Annex F: Urine Samples – Insufficient Volume;

- Annex G: Urine Samples that do not meet the Requirement for Suitable Specific Gravity for Analysis;
- Annex H: Sample Collection Personnel Requirements.

These Technical Procedures for Doping Control outline MEGOC's implementation of the aforementioned areas of the WADA ISTI.

MEGOC shall carry out Doping Control in accordance with these Technical Procedures for Doping Control on behalf of the EOC at the Games venues only.

In implementing these Technical Procedures for Doping Control, MEGOC complies with the WADA International Standard on the Protection of Privacy and Personal Information.

As part of the EOC Anti-Doping Programme, the purpose of these Technical Procedures for Doping Control is to plan for effective Testing and to maintain the integrity and identity of the Samples collected, from the point the Athlete is notified of the test to the point the Samples are transported to the laboratory for analysis.

2. Definitions

Unless defined in the EOC Rules, the definitions of the Code and the International Standards apply, mutatis mutandis, to the capitalised terms appearing throughout these Technical Procedures.

3. Notification of Athletes

3.1. Objective

To ensure that an Athlete who has been selected for Testing is properly notified of Sample collection as outlined in Procedure 4.1, that the rights of the Athlete are maintained, that there are no opportunities to manipulate the Sample to be provided, and the notification is documented.

3.2. General

Notification of Athletes starts when MEGOC initiates the notification of the selected Athlete and ends when the Athlete arrives at the Doping Control Station or when the Athlete's possible Failure to Comply is brought to the attention of the EOC. The main activities are:

a) Appointing Lead Doping Control Officers (Lead DCOs), Doping Control Officers (DCOs), Chaperones and other Sample Collection Personnel;

b) Locating the Athlete and confirming his/her identity;

c) Informing the Athlete that he/she has been selected to provide a Sample and of his/her rights and responsibilities;

d) For No Advance Notice Sample collection, continuously chaperoning the Athlete from the time of notification to the arrival at the designated Doping Control Station; and

e) Documenting the notification, or notification attempts.

3.3. Requirements prior to Notification of Athletes

Save in exceptional and justifiable circumstances, No Advance notice Testing shall be the method for Sample collection.

To conduct or assist with Sample Collection Sessions, MEGOC shall appoint and authorise Sample Collection Personnel who have been trained for their assigned responsibilities, who do not have a conflict of interest in the outcome of the Sample collection, and who are not Minors.

A DCO's/Chaperone's Games-time accreditation shall be the official identification that is provided and controlled by MEGOC.

MEGOC has established criteria to validate the identity of an Athlete selected to provide a Sample. This ensures the selected Athlete is the Athlete who is notified. Identification will typically be done through the European Games Identity and Accreditation Card (EGIAC) or through an alternative reliable piece of photo identification. The method of identification of the Athlete shall be

documented on the Doping Control documentation.

The DCO/Chaperone, as applicable, shall establish the location of the selected Athlete and plan the approach and timing of notification, respectfully taking into consideration the specific circumstances of the sport/competition/training session and the situation in question.

The DCO/Chaperone shall ensure that reasonable attempts are made to notify Athletes of their selection for Sample collection. The DCO/Chaperone shall record in detail Athlete notification attempt(s) and outcome(s).

The Athlete shall be the first one notified that he/she has been selected for Sample collection except where prior contact with a third party is required as specified in Procedure.

The Lead DCO/DCO/Chaperone, as applicable, shall consider whether a third party is required to be notified prior to notification of the Athlete. This may include situations where the Athlete is a Minor as provided for in Annex C: Modifications for Athletes who are Minors, where required by an Athlete's impairment as provided for in Annex B: Modifications for Athletes with Impairments, or in situations where an interpreter is required and available for the notification.

4. Requirements for Notification of Athletes

4.1. When initial contact is made, Lead DCO, DCO or Chaperone, as applicable, shall ensure that the Athlete and/or a third party, if required, is informed:

a) That the Athlete is required to undergo a Sample collection;

b) That the Sample collection is being conducted under the authority of the EOC;

c) Of the type of Sample collection and any conditions that need to be adhered to prior to the Sample collection;

d) Of the Athlete's rights, including the right to:

i. Have a representative and, if available, an interpreter accompany him/her;

ii. Ask for additional information about the Sample collection process;

iii. Request a delay in reporting to the Doping Control Station for valid reasons; and

iv. Request modifications as provided for in Annex B: Modifications for Athletes with Impairments.

e) Of the Athlete's responsibilities, including the requirement to:

i. Remain within direct observation of the DCO/Chaperone at all times from the point initial contact is made by the DCO/ Chaperone until the completion of the Sample collection procedure;

ii. Produce identification;

iii. Comply with Sample collection procedures (and advised of the possible consequences of Failure to Comply); and

iv. Report immediately for Sample collection, unless there are valid reasons for delay.

f) Of the location of the Doping Control Station;

g) That should the Athlete choose to consume food or fluids prior to providing a Sample, he/she does so at his/her own risk;

h) That the Athlete should avoid excessive rehydration, having in mind the requirement to produce a Sample with a Suitable Specific Gravity for Analysis; and

I) That the urine Sample provided by the Athlete to the DCO should be the first urine passed by the Athlete subsequent to notification, i.e. he/she should not pass urine in the shower or otherwise prior to providing a Sample to the DCO.

4.2. When in-person contact is made, the DCO/Chaperone shall:

a) From the time of such contact until the Athlete leaves the Doping Control Station at the end of his/her Sample Collection Session, keep the Athlete under observation at all times;

b) Identify themselves to the Athlete using their official MEGOC identification;

c) Confirm the Athlete's identity. Any inability to confirm the identity of the Athlete shall be documented and reported to the EOC. In such cases, the DCO responsible for conducting the Sample Collection Session shall decide whether it is appropriate to report the situation in accordance with Annex A: Investigating a Possible Failure to Comply.

4.3. The DCO/Chaperone shall have the Athlete sign Doping Control documentation to acknowledge and accept the notification. If the Athlete refuses to sign that he/she has been notified or evades the notification, the DCO/Chaperone shall, if possible, inform the Athlete of the consequences of a Failure to Comply if possible, and the Chaperone (if not the DCO) shall immediately report all relevant facts to the DCO. When possible the DCO shall continue to collect a Sample. The DCO shall document the facts and report the circumstances to MEGOC and the EOC as soon as possible. The EOC shall follow the steps prescribed in Annex A: Investigating a Possible Failure to Comply.

4.4. The Lead DCO/DCO/Chaperone may at their discretion consider any valid third party requirement or any valid request by the Athlete for permission to delay reporting to the Doping Control Station following acknowledgement and acceptance of notification, and/or to leave the Doping Control Station temporarily after arrival, and may grant such permission if the Athlete can be continuously chaperoned and kept under direct observation during the delay and if the request relates to the following activities:

a) For In-Competition Testing:

i. Participation in a Medal Ceremony;

ii. Fulfilment of media commitments;

iii. Competing in further Competitions;

iv. Performing a warm down;

v. Obtaining necessary medical treatment;

vi. Locating a representative and/or interpreter;

vii. Obtaining photo identification; or

viii. Any other reasonable circumstances, as determined by the DCO, taking into account any instructions of the EOC.

a) For Out-of-Competition Testing:

i. locating a representative and/or an interpreter;

ii. completing a training session;

iii. receiving necessary medical treatment;

iv. obtaining photo identification; or

v. Any other reasonable circumstances, as determined by the DCO, taking into account any instructions of the EOC.

4.5. The DCO or other authorised Sample Collection Personnel shall document the reasons for a delay in reporting to the Doping Control Station and/or reasons for leaving the Doping Control Station that may require further investigation by the EOC. Any failure by the Athlete to remain under constant observation should be recorded.

4.6. A Lead DCO/DCO/Chaperone shall reject a request for delay from an Athlete if it will not be possible for the Athlete to be continuously observed during such a delay.

4.7. If the Athlete delays reporting to the Doping Control Station other than in accordance with Procedure 4.4 but arrives prior to the Lead DCO/DCOs departure, the Lead DCO/DCO shall decide whether to process a possible Failure to Comply. If at all possible the Lead DCO/DCO shall proceed with collecting a Sample and shall document the details of the Athlete's delay in reporting to the Doping Control Station.

4.8. If, while keeping the Athlete under observation, Sample Collection Personnel observe any matter with potential to compromise the test, the circumstances shall be reported to and documented by the Lead DCO/DCO. If deemed appropriate by the Lead DCO/DCO, the Lead DCO/DCO shall follow the requirements of Annex A: Investigating a possible Failure to Comply and/ or consider if it is appropriate to collect an additional Sample from the Athlete.

5. Preparing for the Sample Collection Session

5.1. Objective

To prepare for the Sample Collection Session in a manner that ensures that the session can be conducted efficiently and effectively.

5.2. General

Preparing for the Sample Collection Session starts with the establishment of a system for obtaining relevant information for effective conduct of the session and ends when it is confirmed that the Sample Collection Equipment conforms to the specified criteria.

The main activities are:

a) Establishing a system for collecting details regarding the Sample Collection Session;

b) Establishing criteria for who may be present during a Sample Collection Session;

c) Ensuring that the Doping Control Station meets the minimum criteria prescribed in Procedure 5.3.2; and

d) Ensuring that Sample Collection Equipment used by MEGOC meets the minimum criteria prescribed in Procedure 5.3.5.

5.3. Requirements for preparing for the Sample Collection Session

5.3.1. MEGOC shall obtain all the information necessary to ensure that the Sample Collection Session can be conducted effectively and efficiently, including special requirements to meet the needs of Athletes with Impairments as provided in Annex B: Modifications for Athletes with Impairments as well as the needs of Athletes who are Minors as provided in Annex C: Modifications for Athletes who are Minors.

5.3.2. The Lead DCO/DCO shall use a Doping Control Station which at a minimum, ensures the Athlete's privacy and where possible is used solely as a Doping Control Station for the duration of the Sample Collection Session. The Lead DCO shall record any significant deviations from these criteria.

5.3.3. Doping Control Stations will be located at all Competition venues and in AVL. The Lead DCO is responsible for managing the Doping Control operations and the Doping Control workforce at a venue and in the Doping Control Station.

5.3.4. The following procedures establish the criteria for who may be present during the Sample Collection Session in addition to the Sample Collection Personnel and members of the MEGOC Anti-Doping department including:

a) An Athlete's entitlement to be accompanied by a representative and/or interpreter during the Sample Collection Session except when the Athlete is passing a urine Sample;

b) A Minor Athlete's entitlement (as provided in Annex C – Modifications for Athletes who are Minors), and the witnessing DCO's entitlement to have a representative observe the witnessing DCO when the Minor Athlete is passing a urine Sample, but without the representative directly observing the passing of the Sample unless requested to do so by the Minor Athlete;

c) An Athlete with an impairment's entitlement to be accompanied by a representative as provided in Annex B: Modifications for Athletes with Impairments;

d) An EOC Medical and Anti-Doping Commission representative. The EOC Medical and Anti-Doping Commission representative shall not directly observe the passing of a urine Sample;

e) The relevant EF/IF representative. The EF/IF representative shall not directly observe the passing of a urine Sample; and

f) A WADA Observer where applicable under the Independent Observer Programme. The WADA Observer shall not directly observe the passing of a urine Sample.

g) An International Testing Agency (ITA) Observer where applicable. The ITA Observer shall not directly observe the passing of a urine Sample.

5.3.5. The DCO shall only use Sample Collection Equipment systems that are authorised by MEGOC, which at a minimum, shall:

a) Have a unique numbering system incorporated into all bottles, containers, tubes or any other item used to seal the Sample;

b) Have a sealing system that is tamper evident;

c) Ensure the identity of the Athlete is not evident from the equipment itself; and

d) Be clean and sealed prior to use by the Athlete.

5.3.6. MEGOC will use Berlinger Sample Collection Equipment.

5.3.7. Photographs, video or tape recordings may only be taken inside the Doping Control Station with the permission of the Lead DCO and only when the Doping Control Station is not in operation. No photographs, video or tape recordings may be taken once the Doping Control Station is in operation. Mobile phones may be used as phones but not cameras. However, all mobile phones must be turned off during the processing of the Sample.

5.3.8. MEGOC shall have in place a system for recording the Chain of Custody of the Samples and Sample collection documentation which includes confirmation that both the Samples and Sample collection documentation have arrived at their intended destinations.

6. Conducting the Sample Collection Session

6.1. Objective

To conduct the Sample Collection Session in a manner that ensures the integrity, security and identity of the Sample and respects the privacy and dignity of the Athlete.

6.2. General

The Sample Collection Session starts with defining overall responsibility for the conduct of the Sample Collection Session and ends once the Sample has been collected and secured and the Sample collection documentation is complete. The main activities are:

a) Preparing for collecting the Sample;

b) Collecting and securing the Sample; and

c) Documenting the Sample collection.

6.3. Requirements prior to Sample collection

6.3.1. MEGOC and the Lead DCO shall be responsible for the overall conduct of the Sample Collection Session with specific responsibilities delegated to the DCO.

6.3.2. The DCO shall ensure that the Athlete is informed of his/her rights and responsibilities as specified in Procedure 4.1.

6.3.3. The DCO shall provide the Athlete with the opportunity to hydrate. The Athlete should avoid excessive hydration, having in mind the requirement to provide a Sample with a Suitable Specific Gravity for Analysis.

6.3.4. The Athlete shall only leave the Doping Control Station under continuous observation by the DCO or Chaperone and with the approval of the Lead DCO. The Lead DCO shall consider any reasonable request, as specified in Procedures 4.4, 4.5 and 4.6, by the Athlete to leave the Doping Control Station, until the Athlete is able to provide a Sample.

6.3.5. If the Lead DCO gives approval for the Athlete to leave the Doping Control Station, the Lead DCO shall agree with the Athlete on the following conditions of leave:

a) The purpose of the Athlete leaving the Doping Control Station;

b) The time of return (or return upon completion of an agreed activity);

c) That the Athlete must remain under continuous observation at all times;

d) That the Athlete shall not pass urine until he/she gets back to the Doping Control Station.

e) The DCO shall document the time of the Athlete's departure and return.

6.3.6. The Lead DCO/DCO shall document this information agreed to and the actual time of the Athlete's departure and subsequent return.

7. Requirements for Sample collection

7.1. The DCO shall collect the Sample from the Athlete according to the following procedures for the specific type of Sample collection:

a) Annex D: Collection of Urine Samples; and

b) Annex E: Collection of Blood Samples.

7.2. Any behaviour by the Athlete and/or Persons associated with the Athlete or anomalies with potential to compromise the Sample collection shall be recorded by the DCO. If appropriate, MEGOC and/or the Lead DCO/DCO shall apply Annex A: Investigating a possible Failure to Comply.

7.3. If there are doubts as to the origin or authenticity of the Sample, the Athlete shall be asked to provide an additional Sample. If the Athlete refuses to provide an additional Sample, the DCO shall document in detail the circumstances around the refusal and MEGOC/EOC shall apply Annex A: Investigating a possible Failure to Comply.

7.4. The DCO shall provide the Athlete with the opportunity to document any concerns he/she may have about how the Sample Collection Session was conducted.

7.5. In conducting the Sample Collection Session the following information shall be recorded as a minimum:

a) Date, time and type of notification (no advance notice or advance notice);

b) Arrival time at Doping Control Station;

c) Date and time of completion of Sample collection process (i.e., the time when the Athlete signs the declaration at the bottom of the Doping Control form);

d) The name of the Athlete;

e) The date of birth of the Athlete;

f) The gender of the Athlete;

g) The Athlete's home address, email address and telephone number;

h) The Athlete's sport and discipline;

i) The name of the Athlete's coach and doctor;

j) The Sample code number;

k) The type of the Sample (urine, blood, etc);

l) The type of test (In-Competition or Out-of-Competition);

m) The name and signature of the witnessing DCO/Chaperone;

n) The name and signature of the Blood Collection Officer (where applicable);

o) Partial Sample information, as per Article F.4.4;

p) Required laboratory information on the Sample (i.e., for a urine Sample, its volume and specific gravity);

q) Medications and supplements taken within the previous seven days and (where the Sample collected is a blood Sample) blood transfusions within the previous three months, as declared by the Athlete;

r) Any irregularities in procedures;

s) Athlete comments or concerns regarding the conduct of the Sample Collection Session, as declared by the Athlete;

t) Athlete consent for the processing of Sample collection data;

u) Athlete consent or otherwise for the use of the Sample(s) for research purposes;

v) The name and signature of the Athlete's representative (if applicable), as per Procedure 7.4;

w) The name and signature of the Athlete;

x) The name and signature of the DCO;

y) The name of the Testing Authority;

z) The name of the Sample Collection Authority; and

aa) The name of the Results Management Authority.

7.6. At the conclusion of the Sample Collection Session the Athlete and DCO shall sign appropriate documentation to indicate their satisfaction that the documentation accurately reflects the details of the Athlete's Sample Collection Session, including any concerns recorded by the Athlete. The Athlete's representative (if any) and the Athlete shall both sign the documentation if the Athlete is a Minor. Other Persons present who had a formal role during the Athlete's Sample Collection Session may sign the documentation as a witness of the proceedings.

7.7. The DCO shall provide the Athlete with a copy of the records of the Sample Collection Session that have been signed by the Athlete.

8. Security/Post-Test Administration

8.1. Objective

To ensure that all Samples collected at the Doping Control Station and Sample collection documentation are securely stored prior to their departure from the Doping Control Station.

8.2. General

Post-test administration begins when the Athlete leaves the Doping Control Station after providing a Sample(s) and ends with preparation of all of the collected Samples and Sample collection documentation for transport.

8.3. Requirements for security/post-test administration

8.3.1. MEGOC has established criteria to ensure that any Sample will be stored in a manner that protects its integrity, identity and security prior to transport from the Doping Control Station. Lead DCO shall ensure that any Sample is stored in accordance with these criteria.

8.3.2. Without exception, all Samples collected shall be sent for analysis to a WADA-accredited laboratory or as otherwise approved by WADA.

8.3.3. The Lead DCO shall ensure that the documentation for each Sample is completed and securely handled.

8.3.4. MEGOC shall ensure that, where required, instructions for the type of analysis to be conducted are provided to the WADA-accredited laboratory. In addition, the EOC/MEGOC shall provide the laboratory with information as required under Procedure 7.5 c), f), h), j), k), l), o), p), q), y), z) and aa) for result reporting and statistical purposes .

9. Transport of Samples and Documentation

9.1. Objective

a) To ensure that Samples and related documentation arrive at the WADA-accredited laboratory in proper condition to do the necessary analysis; and

b) To ensure the Sample Collection Session documentation is sent by the Lead DCO/DCO to the EOC in a secure and timely manner.

9.2. General

9.2.1. Transport starts when the Samples and related documentation leave the Doping Control Station and ends with the confirmed receipt of the Samples and Sample Collection Session documentation at their intended destinations.

9.2.2. The main activities are arranging for the secure transport of Samples and related documentation to the WADA-accredited laboratory, and arranging for the secure transport of Sample Collection Session documentation to the EOC.

10. Requirements for Transport and Storage of Samples and Documentation

10.1. MEGOC has authorised a transport system that ensures Samples and documentation will be transported in a manner that protects their integrity, identity and security.

10.2. Samples shall always be transported to the WADA-accredited laboratory using a MEGOC authorised transport method as soon as practicable after the completion of the Sample Collection Session. Samples shall be transported in a manner which minimises the potential for Sample degradation due to factors such as time delays and extreme temperature variations.

10.3. Documentation identifying the Athlete shall not be included with the Samples or documentation sent to the WADA-accredited laboratory or as otherwise approved by WADA.

10.4. MEGOC shall send all relevant Sample Collection Session documentation to the EOC using a MEGOC authorised transport method as soon as practicable after the completion of the Sample Collection Session. When required, the Lead DCO shall complete all necessary documentation for customs purposes.

10.5. Chain of Custody shall be checked by MEGOC if receipt of either the Samples with accompanying documentation or Sample collection documentation is not confirmed at their intended destination or a Sample's integrity or identity may have been compromised during transport. In this instance, MEGOC shall inform the EOC and the EOC shall consider whether the Sample should be voided. The opening of the transport bag by customs, border authorities or MEGOC security staff will not, in itself, invalidate laboratory results.

10.6. Documentation related to a Sample Collection Session and/or an anti-doping rule violation shall be stored by the EOC for the periods specified in Annex A to the International Standard on Protection of Privacy and Personal Information.

11. Ownership of Samples

The EOC owns the Samples collected from the Athlete. The EOC may transfer ownership of the Samples to an Anti-Doping Organization with Results Management or to another Anti-Doping Organization upon request.

ANNNEXES

ANNEX A. Investigating a Possible Failure to Comply

A.1. Objective

To ensure that any matters occurring before, during or after a Sample Collection Session that may lead to a determination of a Failure to Comply are properly assessed, documented and acted upon.

A.2. Scope

Investigating a possible Failure to Comply begins when the EOC, MEGOC or a DCO becomes aware of a possible Failure to Comply and ends when the EOC takes appropriate follow-up action based on the outcome of its investigation.

A.3. Responsibility

A.3.1. The EOC is responsible for ensuring that:

a) when the possible Failure to Comply comes to its attention, it notifies WADA, and instigates an investigation of the possible Failure to Comply based on all relevant information and documentation;

b) the Athlete or other party is informed of the possible Failure to Comply in writing and has the opportunity to respond;

c) the investigation is conducted without unnecessary delay and the evaluation process is documented; and

d) the final determination (i.e., whether or not to assert the commission of an anti-doping rule violation), with reasons, is made available without delay to WADA and other Anti-Doping Organizations in accordance with Code Articles 7.10 and 14.1.4.

A.3.2. The DCO is responsible for:

a) informing the Athlete or other party of the Consequences of a possible Failure to Comply;

b) completing the Athlete's Sample Collection Session where possible; and

c) providing a detailed written report of any possible Failure to Comply.

A.3.3. Sample Collection Personnel are responsible for:

a) informing the Athlete or other party of the Consequences of a possible Failure to Comply; and

b) reporting to the DCO any possible Failure to Comply.

A.4. Requirements

A.4.1. Any potential Failure to Comply shall be reported by the DCO and/or followed up by the EOC as soon as practicable.

A.4.2. If the EOC determines that there has been a potential Failure to Comply, the Athlete or other party shall be promptly notified in writing:

a) of the possible Consequences; and

b) that the potential Failure to Comply will be investigated by the EOC and appropriate follow-up action will be taken.

A.4.3. Any additional necessary information about the potential Failure to Comply shall be obtained from all relevant sources (including the Athlete or other party) as soon as possible and recorded.

A.4.4. The EOC shall establish a system for ensuring that the outcomes of its investigation into the potential Failure to Comply are considered for results management action and, if applicable, for further planning and Target Testing.

ANNEX B. Modifications for Athletes with Impairments

B.1. Objective

To ensure that the particular needs of Athletes with Impairments are considered in relation to the provision of a Sample, where possible, without compromising the integrity of the Sample Collection Session.

B.2. Scope

Determining whether modifications are necessary starts with identification of situations where Sample collection involves Athletes with Impairments and ends with modifications to Sample collection procedures and equipment where necessary and where possible.

B.3. Responsibility

B.3.1. MEGOC has responsibility for ensuring, when possible, that the DCO has any information and Sample Collection Equipment necessary to conduct a Sample Collection Session with an Athlete with an impairment.

B.3.2. The DCO has responsibility for Sample collection.

B.4. Requirements

B.4.1. All aspects of notification and Sample collection for Athletes with Impairments shall be carried out in accordance with the standard notification and Sample collection procedures unless modifications are necessary due to the Athlete's impairment. [Comment to B.4.1: For example, it may be appropriate, in the case of an Athlete with an intellectual impairment, to obtain consent to Testing from his/her representative.]

B.4.2. In planning or arranging Sample collection, MEGOC and DCO shall consider whether there will be any Sample collection for Athletes with Impairments that may require modifications to the standard procedures for notification or Sample collection, including Sample Collection Equipment and facilities.

B.4.3. The Sample Collection Authority and DCO shall have the authority to make modifications as the situation requires when possible and as long as such modifications will not compromise the identity, security or integrity of the Sample. All such modifications must be documented.

B.4.4. An Athlete with an intellectual, physical or sensorial impairment may be assisted by the Athlete's representative or Sample Collection Personnel during the Sample Collection Session where authorized by the Athlete and agreed to by the DCO.

B.4.5. The DCO may decide that alternative Sample Collection Equipment or facilities will be used when required to enable the Athlete to provide the Sample, as long as the Sample's identity, security and integrity will not be affected.

B.4.6. Athletes who are using urine collection or drainage systems are required to eliminate existing urine from such systems before providing a urine Sample for analysis. Where possible, the existing urine collection or drainage system should be replaced with a new, unused catheter or drainage system prior to collection of the Sample. The catheter or drainage system is not a required part of Sample Collection Equipment to be provided by the Sample Collection Authority; instead it is the responsibility of the Athlete to have the necessary equipment available for this purpose.

B.4.7. The DCO will record modifications made to the standard Sample collection procedures for Athletes with Impairments, including any applicable modifications specified in the above actions.

ANNEX C. Modifications for Athletes who are Minors

C.1. Objective

To ensure that the particular needs of Athletes who are Minors are met in relation to the provision of a Sample, where possible, without compromising the integrity of the Sample Collection Session.

C.2. Scope

Determining whether modifications are necessary starts with identification of situations where Sample collection involves Athletes who are Minors and ends with modifications to Sample collection procedures where necessary and where possible.

C.3. Responsibility

The EOC has responsibility for ensuring, when possible, that the DCO has any information necessary to conduct a Sample Collection Session with an Athlete who is a Minor. This includes confirming wherever necessary that the organiser of the Event obtains the necessary parental consent for Testing any participating Athlete who is a Minor.

C.4. Requirements

C.4.1. All aspects of notification and Sample collection for Athletes who are Minors shall be carried out in accordance with the standard notification and Sample collection procedures unless modifications are necessary due to the Athlete being a Minor.

C.4.2. In planning or arranging Sample collection, MEGOC and the DCO shall consider whether there will be any Sample collection for Athletes who are Minors that may require modifications to the standard procedures for notification or Sample collection.

C.4.3. The DCO and MEGOC shall have the authority to make modifications as the situation requires when possible and as long as such modifications will not compromise the identity, security or integrity of the Sample.

C.4.4. Athletes who are Minors should be notified in the presence of an adult and may choose to be accompanied by a representative throughout the entire Sample Collection Session. The representative shall not witness the passing of a urine Sample unless requested to do so by the Minor. The objective is to ensure that the DCO is observing the Sample provision correctly. Even if the Minor declines a representative, MEGOC, the DCO or Chaperone, as applicable, shall consider whether another third party ought to be present during notification of and/or collection of the Sample from the Athlete.

C.4.5. The DCO shall determine who (in addition to the Sample Collection Personnel) may be present during the collection of a Sample from an Athlete who is a Minor, namely a representative of the Minor to observe the Sample Collection Session (including observing the DCO when the Minor is passing the urine Sample, but not directly observing the passing of the urine Sample unless requested to do so by the Minor) and the DCO's/Chaperone's representative, to observe the DCO/Chaperone when a Minor is passing a urine Sample, but without the representative directly observing the passing of the Sample unless requested by the Minor to do so.

C.4.6. Should an Athlete who is a Minor decline to have a representative present during the Sample Collection Session, this should be clearly documented by the DCO. This does not invalidate the test but must be recorded. If a Minor declines the presence of a representative, the representative of the DCO/Chaperone must be present.

C.4.7. The preferred venue for all Out-of-Competition Testing of a Minor is a location where the presence of an adult is most likely, e.g., a training venue.

C.4.8. MEGOC shall consider the appropriate course of action when no adult is present at the Testing of an Athlete who is a Minor and shall accommodate the Athlete in locating a representative in order to proceed with Testing.

ANNEX D. Collection of Urine Samples

D.1. Objective

To collect an Athlete's urine Sample in a manner that ensures:

a) consistency with relevant principles of internationally recognised standard precautions in healthcare settings so that the health and safety of the Athlete and Sample Collection Personnel are not compromised;

b) the Sample meets the Suitable Specific Gravity for Analysis and the Suitable Volume of Urine for Analysis. Failure of a Sample to meet these requirements in no way invalidates the suitability of the Sample for analysis. The determination of a Sample's suitability for analysis is the decision of the relevant laboratory, in consultation with the EOC for the Sample Collection Session in question;

c) the Sample has not been manipulated, substituted, contaminated or otherwise tampered with in any way;

d) the Sample is clearly and accurately identified; and

e) the Sample is securely sealed in a tamper-evident kit.

D.2. Scope

The collection of a urine Sample begins with ensuring the Athlete is informed of the Sample collection requirements and ends with discarding any residual urine remaining at the end of the Athlete's Sample Collection Session.

D.3. Responsibility

D.3.1. The DCO has the responsibility for ensuring that each Sample is properly collected, identified and sealed.

D.3.2. The DCO/Chaperone has the responsibility for directly witnessing the passing of the urine Sample.

D.4. Requirements

D.4.1. The DCO shall ensure that the Athlete is informed of the requirements of the Sample Collection Session, including any modifications as provided for in Annex B – Modifications for Athletes with Impairments.

D.4.2. The DCO shall ensure that the Athlete is offered a choice of appropriate equipment for collecting the Sample. If the nature of an Athlete's impairment requires that he/she must use additional or other equipment as provided for in Annex B – Modifications for Athletes with Impairments, the DCO shall inspect that equipment to ensure that it will not affect the identity or integrity of the Sample.

D.4.3. The DCO shall instruct the Athlete to select a collection vessel.

D.4.4. When the Athlete selects a collection vessel, and for selection of all other Sample Collection Equipment that directly holds the urine Sample, the DCO will instruct the Athlete to check that all seals on the selected equipment are intact and the equipment has not been tampered with. If the Athlete is not satisfied with the selected equipment, he/she may select another. If the Athlete is not satisfied with any of the equipment available for selection, this shall be recorded by the DCO. If the DCO does not agree with the Athlete that all of the equipment available for the selection is unsatisfactory, the DCO shall instruct the Athlete to proceed with the Sample Collection Session. If the DCO agrees with the Athlete that all of the equipment available for the selection is unsatisfactory, the DCO shall terminate the Sample Collection Session and this shall be recorded by the DCO.

D.4.5. The Athlete shall retain control of the collection vessel and any Sample provided until the Sample (or partial Sample) is sealed, unless assistance is required by reason of an Athlete's impairment as provided for in Annex B – Modifications for Athletes with Impairments. Additional assistance may be provided in exceptional circumstances to any Athlete by the Athlete's representative or Sample Collection Personnel during the Sample Collection Session where authorised by the Athlete and agreed to by the DCO.

D.4.6. The DCO/Chaperone who witnesses the passing of the Sample shall be of the same gender as the Athlete providing the Sample.

D.4.7. The DCO/Chaperone should, where practicable, ensure the Athlete thoroughly washes his/her hands prior to the provision of the Sample.

D.4.8. The DCO/Chaperone and Athlete shall proceed to an area of privacy to collect a Sample.

D.4.9. The DCO/Chaperone shall ensure an unobstructed view of the Sample leaving the Athlete's body and must continue to observe the Sample after provision until the Sample is securely sealed. In order to ensure a clear and unobstructed view of the passing of the Sample, the DCO/Chaperone shall instruct the Athlete to remove or adjust any clothing which restricts the DCO's/Chaperone's clear view of Sample provision. The DCO/Chaperone shall ensure that all urine passed by the Athlete at the time of provision of the Sample is collected in the collection vessel.

D.4.10. The DCO shall verify, in full view of the Athlete, that the Suitable Volume of Urine for Analysis has been provided.

D.4.11. Where the volume of urine provided by the Athlete is insufficient, the DCO shall follow the partial Sample collection procedure set out in Annex F – Urine Samples – Insufficient Volume.

D.4.12. Once the volume of urine provided by the Athlete is sufficient, the DCO shall instruct the Athlete to select a Sample collection kit containing A and B bottles in accordance with Article D.4.4.

D.4.13. Once a Sample collection kit has been selected, the DCO and the Athlete shall check that all code numbers match and that this code number is recorded accurately by the DCO on the Doping Control form. If the Athlete or DCO finds that the numbers are not the same, the DCO shall instruct the Athlete to choose another kit in accordance with Article D.4.4. The DCO shall record the matter.

D.4.14. The Athlete shall pour the minimum Suitable Volume of Urine for Analysis into the B bottle (to a minimum of 30 mL), and then pour the remainder of the urine into the A bottle (to a minimum of 60 mL). The Suitable Volume of Urine for Analysis shall be viewed as an absolute minimum. If more than the minimum Suitable Volume of Urine for Analysis has been provided, the DCO shall ensure that the Athlete fills the A bottle to capacity as per the recommendation of the equipment manufacturer. Should there still be urine remaining, the DCO shall ensure that the Athlete fills the B bottle to capacity as per the recommendation of the equipment manufacturer. The DCO shall instruct the Athlete to ensure that a small amount of urine is left in the collection vessel, explaining that this is to enable the DCO to test that residual urine in accordance with Article D.4.16.

D.4.15. The Athlete shall then seal the A and B bottles as directed by the DCO. The DCO shall check, in full view of the Athlete, that the bottles have been properly sealed.

D.4.16. The DCO shall test the residual urine in the collection vessel to determine if the Sample has a Suitable Specific Gravity for Analysis. If the DCO's field reading indicates that the Sample does not have a Suitable Specific Gravity for Analysis, then the DCO shall follow Annex G (Urine Samples that do not meet the requirement for Suitable Specific Gravity for Analysis).

D.4.17. Urine should only be discarded when both the A and B bottles have been filled to capacity in accordance with Article D.4.14 and the residual urine has been tested in accordance with Article D.4.16.

D.4.18. The Athlete shall be given the option of witnessing the discarding of any residual urine that will not be sent for analysis.

ANNEX E. Collection of Blood Samples

E.1. Objective

To collect an Athlete's blood Sample in a manner that ensures:

a) consistency with relevant principles of internationally recognised standard precautions in healthcare settings, and is collected by a suitably qualified person, so that the health and safety of the Athlete and Sample Collection Personnel are not compromised;

b) the Sample is of a quality and quantity that meets the relevant analytical guidelines;

c) that Samples intended for use in connection with the measurement of individual Athlete blood variables within the framework of the Athlete Biological Passport programme are collected in a manner appropriate for such use.

d) the Sample has not been manipulated, substituted, contaminated or otherwise tampered with in any way;

e) the Sample is clearly and accurately identified; and

f) the Sample is securely sealed.

E.2. Scope

The collection of a blood Sample begins with ensuring the Athlete is informed of the Sample collection requirements and ends with properly storing the Sample prior to transport to the laboratory that will be analysing the Sample.

E.3. Responsibility

E.3.1. The DCO has the responsibility for ensuring that:

a) Each Sample is properly collected, identified and sealed; and

b) All Samples have been properly stored and dispatched in accordance with the relevant analytical guidelines.

E.3.2. The Blood Collection Officer (BCO) has the responsibility for collecting the blood Sample, answering related questions during the provision of the Sample, and proper disposal of used blood sampling equipment not required to complete the Sample Collection Session.

E.4. Requirements

E.4.1. Procedures involving blood shall be consistent with the local standards and regulatory requirements regarding precautions in healthcare settings where those standards and requirements exceed the requirements set out below.

E.4.2. Blood Sample Collection Equipment shall consist of

(a) a single Sample tube for Samples to be used in connection with an Athlete Biological Passport programme; or

(b) both an A and B sample tube for Samples not to be used in connection with an Athlete Biological Passport programme; or

(c) other equipment as otherwise specified by the relevant laboratory. Collection tubes shall be labelled with a unique Sample code number by the DCO/BCO if they are not pre-labelled. The types of equipment to be used and the volume of blood to be collected for particular analyses shall be as set out in WADA's Blood Collection Guidelines.

E.4.3. The DCO shall ensure that the Athlete is properly notified of the requirements of the Sample collection, including any modifications as provided for in Annex B – Modifications for Athletes with Impairments. If the Sample is to be used in connection with the Athlete Biological Passport programme, the DCO/BCO shall use the Doping Control form that is specific to the Athlete Biological Passport (ABP) Programme. If such form is not available, the DCO/BCO shall use a regular Doping Control form, but he/she shall collect and record the following additional information on a supplementary report form that shall be signed by the Athlete and the DCO/BCO:

a) confirmation that the Athlete did not participate in training or Competition in the last two hours before the Sample was collected (see Article E.4.5);

b) whether the Athlete trained, competed or resided at an altitude greater than 1000 meters in the previous two weeks. If so, or if in doubt, the name and location of the place(s) where the Athlete has been, as well as the duration of his/her stay there, shall be recorded, along with the estimated altitude there (if known).

c) whether the Athlete used any form of altitude simulation (such as a hypoxy tent, mask, etc.) in the previous two weeks. If so, as much information as possible on the type of device and the manner in which it was used (frequency, duration, intensity, etc.) should be recorded; and

d) whether the Athlete received any blood transfusion(s) during the previous three months. Whether there was any blood loss due to accident, pathology or donation in the previous three months. In either case, if so, the estimated volume.

E.4.4. The DCO/Chaperone and Athlete shall proceed to the area where the Sample will be provided.

E.4.5. The DCO/BCO shall ensure the Athlete is offered comfortable conditions and shall instruct the Athlete to remain in a normal seated position with feet on the floor for at least 10 minutes prior to providing a Sample. If the Sample is to be used in connection with the Athlete Biological Passport programme, it shall not be collected within two hours of the Athlete training or competing. If the Athlete has trained or competed within two hours of the time that the Athlete is notified of his/her selection for Sample collection, the DCO/ BCO/Chaperone shall monitor the Athlete continuously until the two-hour period has elapsed, after which the Sample shall be collected. The nature of the exertion (Competition, training, etc.), as well as its duration and general intensity, shall be recorded by the DCO/BCO in the mission documentation.

E.4.6. The DCO shall instruct the Athlete to select the Sample collection kit(s) required for collecting the Sample and to check that the selected equipment has not been tampered with and the seals are intact. If the Athlete is not satisfied with a selected kit, he/she may select another. If the Athlete is not satisfied with any kits and no others are available, this shall be recorded by the DCO. If the DCO does not agree with the Athlete that all of the available kits are unsatisfactory, the DCO shall instruct the Athlete to proceed with the Sample Collection Session. If the DCO agrees with the Athlete that all available kits are unsatisfactory, the DCO shall terminate the Sample Collection Session and this shall be recorded by the DCO.

E.4.7. When a Sample collection kit has been selected, the DCO and the Athlete shall check that all code numbers match and that this code number is recorded accurately by the DCO on the Doping Control form. If the Athlete or DCO finds that the numbers are not the same, the DCO shall instruct the Athlete to choose another kit. The DCO shall record the matter.

E.4.8. The BCO shall clean the skin with a sterile disinfectant wipe or swab in a location unlikely to adversely affect the Athlete or his/her performance and, if required, apply a tourniquet. The BCO shall take the blood Sample from a superficial vein into the tube. The tourniquet, if applied, shall be immediately removed after the venipuncture has been made.

E.4.9. The amount of blood removed shall be adequate to satisfy the relevant analytical requirements for the Sample analysis to be performed, as set out in WADA's Blood Collection Guidelines.

E.4.10. If the amount of blood that can be removed from the Athlete at the first attempt is insufficient, the BCO shall repeat the procedure up to a maximum of three attempts in total. Should all three attempts fail to produce a sufficient amount of blood, then the BCO shall inform the DCO. The DCO shall terminate the Sample Collection Session and record this and the reasons for terminating the collection.

E.4.11. The BCO shall apply a dressing to the puncture site(s).

E.4.12. The BCO shall dispose of used blood sampling equipment not required to complete the Sample Collection Session in accordance with the required local standards for handling blood.

E.4.13. If the Sample requires further on-site processing, such as centrifugation or separation of serum (for example, in the case of a Sample intended for use in connection with the ABP Programme, after the blood flow into the tube ceases, the BCO shall remove the tube from the holder and homogenize the blood in the tube manually by inverting the tube gently at least three times), the Athlete shall remain to observe the Sample until final sealing in secure, tamper-evident kit.

E.4.14. The Athlete shall seal his/her Sample into the Sample collection kit as directed by the DCO. In full view of the Athlete, the DCO shall check that the sealing is satisfactory. The Athlete and the BCO/DCO shall sign the Doping Control form.

E.4.15. If the Sample is intended for use in connection with an ABP Programme, the DCO/BCO shall place it in a storage device that is capable of maintaining blood Samples at a cool temperature for the duration of the period of storage and transport but without allowing whole blood Samples to freeze (such as a refrigerator, an insulated cool box, an isotherm bag, or any other device with such capability). A temperature data logger shall be used to record the temperature of the Sample during storage and transport. In choosing the storage device, the Sample Collection Authority shall take into account the duration of the period of storage and transport, the number of Samples to be stored together, and the prevailing environmental conditions (hot or cold temperatures).

E.4.16. The sealed Sample shall be stored in a manner that protects its integrity, identity and security prior to transport from the Doping Control Station to the laboratory that will be analysing the Sample.

E.4.17. Blood Samples shall be transported in accordance with Procedure 9.0. The transport procedure is the responsibility of the Lead DCO/ DCO as applicable. Blood Samples shall be transported in a device that maintains the integrity of Samples over time notwithstanding changes in external temperature. The transport device shall be transported by secure means using a method authorized by the EOC. If the Sample is intended for use in connection with an ABP Programme, it shall be transported rapidly to the laboratory so that analysis can be performed ideally within 48 hours of Sample collection.

ANNEX F. Urine Samples - Insufficient Volume

F.1. Objective

To ensure that where a Suitable Volume of Urine for Analysis is not provided, appropriate procedures are followed.

F.2. Scope

The procedure begins with informing the Athlete that the Sample that he/she has provided is not of Suitable Volume of Urine for Analysis and ends with the Athlete's provision of a Sample of sufficient volume.

F.3. Responsibility

The DCO has the responsibility for declaring the Sample volume insufficient and for collecting the additional Sample(s) to obtain a combined Sample of sufficient volume.

F.4. Requirements

F.4.1. If the Sample collected is of insufficient volume, the DCO shall inform the Athlete that a further Sample shall be collected to meet the Suitable Volume of Urine for Analysis requirements.

F.4.2. The DCO shall instruct the Athlete to select partial Sample Collection Equipment in accordance with Article D.4.4.

F.4.3. The DCO shall then instruct the Athlete to open the relevant equipment, pour the insufficient Sample into the new container and seal it as directed by the DCO. The DCO shall check, in full view of the Athlete, that the container (or original collection vessel, if applicable) has been properly sealed.

F.4.4. The DCO and the Athlete shall check that the equipment code number and the volume and identity of the insufficient Sample are recorded accurately by the DCO on the Doping Control form. Either the Athlete or the DCO shall retain control of the sealed partial Sample.

F.4.5. While waiting to provide an additional Sample, the Athlete shall remain under continuous observation and be given the opportunity to hydrate.

F.4.6. When the Athlete is able to provide an additional Sample, the procedures for collection of the Sample shall be repeated as prescribed in Annex D – Collection of Urine Samples until a sufficient volume of urine will be provided by combining the initial and additional Sample(s).

F.4.7. When the DCO is satisfied that the requirements for Suitable Volume of Urine for Analysis have been met, the DCO and Athlete shall check the integrity of the seal(s) on the container(s) containing the previously provided partial Sample(s). Any irregularity with the integrity of the seal(s) will be recorded by the DCO and investigated according to Annex A – Investigating a Possible Failure to Comply.

F.4.8. The DCO shall then direct the Athlete to break the seal(s) and combine the Samples, ensuring that additional Samples are added in the order they were collected to the original partial Sample until, as a minimum, the requirement for Suitable Volume of Urine for Analysis is met.

F.4.9. The DCO and the Athlete shall then continue with Article D.4.12 or Article D.4.14 as appropriate.

F.4.10. The DCO shall check the residual urine in accordance with Article D.4.16 to ensure that it meets the requirement for Suitable Specific Gravity for Analysis.

F.4.11. Urine should only be discarded when both the A and B bottles have been filled to capacity in accordance with Article D.4.14 and the residual urine has been checked in accordance with Article.

F.4.12. The Suitable Volume of Urine for Analysis shall be viewed as an absolute minimum.

ANNEX G. Urine Samples that do not meet the requirement for Suitable Specific Gravity for Analysis

G.1. Objective

To ensure that when the urine Sample does not meet the requirement for Suitable Specific Gravity for Analysis, appropriate procedures are followed.

G.2. Scope

The procedure begins with the DCO informing the Athlete that a further Sample is required and ends with the collection of a Sample that meets the requirements for Suitable Specific Gravity for Analysis, or appropriate follow-up action by the EOC if required.

G.3. Responsibility

MEGOC is responsible for establishing procedures to ensure that a suitable Sample is collected. If the original Sample collected does not meet the requirement for Suitable Specific Gravity for Analysis, the DCO is responsible for collecting additional Samples until a suitable Sample is obtained.

G.4. Requirements

G.4.1. The DCO shall determine that the requirements for Suitable Specific Gravity for Analysis have not been met.

G.4.2. The DCO shall inform the Athlete that he/she is required to provide a further Sample.

G.4.3. While waiting to provide a further Sample, the Athlete shall remain under continuous observation.

G.4.4. The Athlete shall be advised not to hydrate excessively, since this may delay the production of a suitable Sample. In appropriate circumstances, excessive hydration may be pursued as a violation of Code Article 2.5 (Tampering or Attempted Tampering with any part of Doping Control).

G.4.5. When the Athlete is able to provide an additional Sample, the DCO shall repeat the procedures for Sample collection set out in Annex D – Collection of Urine Samples.

G.4.6. The DCO should continue to collect additional Samples until the requirement for Suitable Specific Gravity for Analysis is met, or until the DCO determines that there are exceptional circumstances which mean that for logistical reasons it is impossible to continue with the Sample Collection Session. Such exceptional circumstances shall be documented accordingly by the DCO.

G.4.7. In accordance with Article G.4.6, given the logistical nature of the Games, it would typically be impossible to collect more than two (2) Samples from the Athletes during one Doping Control session. As such, the EOC will typically require Athletes to provide one (1) additional Sample in the event the Athlete's Sample does not meet the requirements for Suitable Specific gravity for Analysis.

G.4.8. The DCO shall record that the Samples collected belong to a single Athlete and the order in which the Samples were provided.

G.4.9. The DCO shall then continue with the Sample Collection Session in accordance with Article D.4.17.

G.4.10. If it is determined that none of the Samples collected from the Athlete meets the requirement for Suitable Specific Gravity for Analysis and the DCO determines that for logistical reasons it is impossible to continue with the Sample Collection Session, the DCO may end the Sample Collection Session.

G.4.11. The DCO shall send to the laboratory for analysis all Samples which were collected, irrespective of whether or not they meet the requirement for Suitable Specific Gravity for Analysis.

G.4.12. The laboratory shall determine, in conjunction with the EOC, which Samples shall be analysed.

ANNEX H. Sample Collection Personnel Requirements

H.1. Objective

To ensure that Sample Collection Personnel have no conflict of interest and have adequate qualifications and experience to conduct Sample Collection Sessions.

H.2. Scope

Sample Collection Personnel requirements start with the development of the necessary competencies for Sample Collection Personnel and end with the provision of identifiable accreditation.

H.3. Responsibility

MEGOC has the ultimate responsibility for all activities defined in this Annex H. However, certain activities have been delegated to the National Anti-Doping Agency of Belarus (NADA Belarus).

H.4. Requirements – Qualifications and Training

H.4.1. MEGOC shall ensure that the operational delivery partner for the Doping Control Programme will:

a) determine the necessary competence and qualification requirements for the positions of DCO, Chaperone and BCO; and

b) develop duty statements for all Sample Collection Personnel that outline their respective responsibilities. As a minimum:

i) Sample Collection Personnel shall not be Minors; and

ii) BCOs shall have adequate qualifications and practical skills required to perform blood collection from a vein.

H.4.2. MEGOC shall ensure that Sample Collection Personnel that have an interest in the outcome of a Sample Collection Session are not appointed to that Sample Collection Session. Sample Collection Personnel are deemed to have such an interest if they are:

a) Involved in the administration of the sport for which Testing is being conducted; or

b) Related to, or involved in the personal affairs of, any Athlete who might provide a Sample at that session.

H.4.3. MEGOC shall ensure that NADA Belarus establishes a system that ensures that Sample Collection Personnel are adequately trained to carry out their duties.

H.4.3.1. The training programme for BCOs shall include, as a minimum, studies of all relevant requirements of the Testing process and familiarization with relevant standard precautions in healthcare settings.

H.4.3.2. The training programme for DCOs shall include, as a minimum:

a) Comprehensive theoretical training in different types of Testing activities relevant to the DCO position;

b) Observation of all Doping Control activities that are the responsibility of the DCO as set out in this International Standard for Testing and Investigations, preferably on-site; and

c) The satisfactory performance of one complete Sample Collection Session on site under observation by a qualified DCO or similar. The requirement related to the actual passing of a urine Sample shall not be included in the on-site observations.

H.4.3.3. The training programme for Chaperones shall include studies of all relevant requirements of the Sample collection process.

H.4.4. MEGOC shall ensure that the Doping Control Supplier maintains records of education, training, skills and experience of all Sample Collection Personnel.

H.5. Requirements - Accreditation, Re-accreditation and Delegation

H.5.1. MEGOC shall ensure that NADA Belarus establishes a system for accrediting and re-accrediting Sample Collection Personnel.

H.5.2. MEGOC shall ensure that Sample Collection Personnel have completed the training programme and are familiar with the requirements of this International Standard for Testing and Investigations (including, where Article H.4.3.4 applies, in relation to the collection of Samples from Athletes who are of a different nationality to the Sample Collection Personnel) before granting accreditation.

H.5.3. Accreditation shall only be valid for a maximum of two years. Sample Collection Personnel shall be required to repeat a full training programme if they have not participated in Sample collection activities within the year prior to re-accreditation.

H.5.4. Only Sample Collection Personnel who have an accreditation recognised by MEGOC shall be authorised to conduct Sample collection activities on behalf of MEGOC.

H.5.5. DCOs may personally perform any activities involved in the Sample Collection Session, with the exception of blood collection unless particularly qualified, or they may direct a Chaperone to perform specified activities that fall within the scope of the Chaperone's authorised duties.

APPENDICES

APPENDIX 1.

GLOSSARY

AVL	Athletes' Village
EF	European Federation
IF	International Federation
MEGOC	Minsk European Games Organising Committee
NADA BELARUS	National Anti-Doping Agency of Belarus
NF	National Federation
NOC	National Olympic Committee
TUE	Therapeutic Use Exemptions
TUEC	Therapeutic Use Exemption Committee
AAF	Adverse Analytical Finding
ABP	Athlete Blood Passport
ADO	Anti-Doping Organisation
ADAMS	Anti-Doping Administration and Management System
BCO	Blood Collection Officer
DCO	Doping Control Officer
DCS	Doping Control Station
NADO	National Anti-Doping Organisation
RTP	Registered Testing Pool
TDP	Test Distribution Plan
WADA	World Anti-Doping Agency

APPENDIX 2.

DEFINITIONS

ADAMS: The Anti-Doping Administration and Management System is a Web-based database management tool for data entry, storage, sharing, and reporting designed to assist stakeholders and WADA in their anti-doping operations in conjunction with data protection legislation.

Adverse Analytical Finding (AAF): A report from a WADA-accredited laboratory or other WADA-approved laboratory that, consistent with the International Standard for Laboratories and related Technical Documents, 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.

Anti-Doping Organisation (ADO): A Signatory that is responsible for adopting rules for initiating, implementing or enforcing any part of the Doping Control process. This includes, for example, the International Olympic Committee, the International Paralympic Committee, other Major Event Organisations that conduct Testing at their Events, WADA, International Federations, and National Anti-Doping Organisations.

Athlete Biological Passport (ABP): The programme and methods of gathering and collating data as described in the International Standard for Testing and Investigations and International Standard for Laboratories.

The Code: The World Anti-Doping Code.

Doping Control: 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, TUEs, results management and hearings.

Event: A series of individual Competitions conducted together under one ruling body (e.g., the Olympic Games, FINA World Championships, or European Games).

In-Competition: Unless provided otherwise in the rules of an International Federation or the ruling body of the Event in question, "In-Competition" means the period commencing twelve hours before a Competition in which the Athlete is scheduled to participate through the end of such Competition and the Sample collection process related to such Competition.

Minor: A natural Person who has not reached the age of eighteen years.

National Anti-Doping Organisation (NADO): 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 at the national level. 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.

National Olympic Committee (NOC): The organisation recognised by the International Olympic Committee. The term National Olympic Committee shall also include the National Sport Confederation in those countries where the National Sport Confederation assumes typical National Olympic Committee responsibilities in the anti-doping area.

Out-of-Competition: Any period which is not In-Competition.

Registered Testing Pool (RTP): The pool of highest-priority Athletes established separately at the international level by International Federations and at the national level by National Anti-Doping Organisations, who are subject to focused In-Competition and Out-of-Competition Testing as part of that International Federation's or National Anti-Doping Organisation's test distribution plan and therefore are required to provide whereabouts information as provided in Article 5.6 and the International Standard for Testing and Investigations.

Sample: Any biological material collected for the purposes of Doping Control.

Signatories: Those entities signing the Code and agreeing to comply with the Code, as provided in the Code Article 23.

Target Testing: Selection of specific Athletes for Testing based on criteria set forth in the International Standard for Testing and Investigations.

Testing: The parts of the Doping Control process involving test distribution planning, Sample collection, Sample handling, and Sample transport to the laboratory.

Blood Collection Officer (BCO): An official who is qualified and has been authorised by the Sample Collection Authority to collect a blood Sample from an Athlete.

Chain of Custody: The sequence of individuals or organisations who have responsibility for the custody of a Sample from the provision of the Sample until the Sample has been delivered to the laboratory for analysis.

Chaperone: An official who is trained and authorised by the Sample Collection Authority to carry out specific duties including one or more of the following (at the election of the Sample Collection Authority): notification of the Athlete selected for Sample collection; accompanying and observing the Athlete until arrival at the Doping Control Station; accompanying and/or observing Athletes who are present in the Doping Control Station; and/or witnessing and verifying the provision of the Sample where the training qualifies him/her to do so.

Doping Control Officer (DCO): An official who has been trained and authorised by the Sample Collection Authority to carry out the responsibilities given to DCOs in the International Standard for Testing and Investigations.

Doping Control Station (DCS): The location where the Sample Collection Session will be conducted.

Failure to Comply: A term used to describe anti-doping rule violations under Code Articles 2.3 and/or 2.5.

No Advance Notice Testing (Sample collection): Sample collection that takes place with no advance warning to the Athlete and where the Athlete is continuously chaperoned from the moment of notification through Sample provision.

Sample Collection Equipment: Containers or apparatus used to collect or hold the Sample at any time during the Sample Collection Session. Sample Collection Equipment shall, as a minimum, consist of:

For urine Sample collection:

Collection vessels for collecting the Sample as it leaves the Athlete's body;

Suitable kit for storing partial Samples securely until the Athlete is able to provide more urine; and

Sealable and tamper-evident bottles and lids for storing and transporting the complete Sample securely.

For blood Sample collection:

Needles for collecting the Sample;

Blood tubes with sealable and tamper-evident devices for storing and transporting the Sample securely.

Sample Collection Personnel: A collective term for qualified officials authorised by the Sample Collection Authority to carry out or assist with duties during the Sample Collection Session.

Sample Collection Session: All of the sequential activities that directly involve the Athlete from the point that initial contact is made until the Athlete leaves the Doping Control Station after having provided his/her Sample(s).

Suitable Specific Gravity for Analysis: Specific gravity measured at 1.005 or higher with a refractometer, or 1.010 or higher with lab sticks.

Test Distribution Plan(TDP): A document written by an Anti-Doping Organisation that plans Testing on Athletes over whom it has Testing Authority, in accordance with the requirements of Article 4 of the International Standard for Testing and Investigations.

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