

# ***DOPING AND YOU***

GUIDANCE FOR RUGBY LEAGUE PLAYERS  
AND SUPPORT PERSONNEL

## ***2022***



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## 1. FOREWORD | RALPH RIMMER, RFL CEO

Welcome to the RFL's anti-doping information for players and their support personnel at all levels of our game – and thank you to UKAD for their considerable assistance in producing it.

At the RFL we are committed to the principles of clean sport to:

- uphold and preserve the ethics of the game;
- safeguard players' physical and mental health; and
- ensure that all players have an opportunity to compete equally.

To underpin this commitment we will:

- educate and inform players about the dangers of drugs, and of the consequences of taking drugs or breaching Anti-Doping Regulations;
- comply with the World Anti-Doping Code; and
- test players to confirm they train and play clean.

This booklet will either provide, or direct you to, the information you need about your rights and responsibilities as players and support personnel in relation to the World Anti-Doping Code and RFL Anti-Doping Regulations.

At the heart of the anti-doping code is the desire to achieve a level playing field on which players in all sports can compete with confidence and natural sporting ability. It is there to preserve sport by harmonising the anti-doping rules and regulations across all sports in all countries.

At the RFL we want to ensure that all players in this country, at all levels, have the support they need to perform to the very best of their ability. We want to ensure that all players can make well informed and positive decisions so they can say with pride 'That was one hundred per cent me'.



**This guide is intended only as an overview of current anti-doping information. It does not constitute business, medical or other professional advice.**

**Every care has been taken to ensure that the content is correct at the time of publication. However, the RFL cannot guarantee its correctness and completeness, and no responsibility is taken for any errors or omissions.**

**It should be used in conjunction with the RFL Anti-doping Regulations and the World Anti-doping Agency (WADA) Prohibited List. If there is any dispute between the contents of this booklet and the Anti-Doping Rules, the Anti-Doping Rules will take precedence.**





THE ANTICIPATION



“

# ELLERY

## HANLEY MBE

I achieved a great many things as a Rugby League player but I am just as proud of the things I didn't do during my time with at Bradford, Wigan, Leeds, Balmain, Western Suburbs, Yorkshire, England and Great Britain – I didn't smoke, I didn't drink and I didn't take drugs.

Looking back on my career, it is a source of immense personal satisfaction that everything I achieved was as a result of my hard work and determination.

All the highs from Championship successes, Challenge Cup wins, Test Match victories and individual awards came not from chemicals, corner cutting or cheating but from commitment, application and being true to myself and my body. I can truly say it was 100% me.

Don't put yourself in the position of being branded a cheat, or risk bringing disgrace on your family and your own reputation. Be clean. Be true to yourself and your sport. Be 100%me!

”



### **UK SPORT / UNITED KINGDOM ANTI-DOPING**

**UK Anti-Doping (UKAD) is the national organisation dedicated to confidence in clean sport. It is an ‘arm’s length’ body that is accountable to Parliament through the Secretary of state for the Department for Digital, Culture, for Media and Sport.**

**UKAD raises awareness of doping issues through an extensive education and smart testing programme. It helps athletes to understand and follow the rules, and prosecutes offenders.**

**UKAD is responsible for ensuring that sports bodies such as the RFL are compliant with the World Anti-Doping Code through implementation and management of the UK’s National Anti-Doping Policy.**

**The RFL’s role is to provide information, education and support to players and wider support personnel to ensure they can train and compete or operate effectively within the anti- doping framework. The RFL fully cooperates with UKAD on any investigations and/or prosecution cases where members of the RFL are found to be have committed an ADRV.**

## 2. ANTI-DOPING RULES

All sports, including Rugby League, are governed by a set of anti-doping rules called the World Anti-Doping Code.

The anti-doping code is the basis of the World Anti-Doping Programme and RFL Anti-Doping Regulations comply with the code. It aims to harmonise the rules and regulations governing anti-doping for all participants, in all sports, throughout the world.

A fundamental principle of the code is to protect the rights of all players who are committed to competing in sport cleanly and fairly.

Players are bound by the rules of the code as a condition of their participation at any level of Rugby League. Player support personnel are also expected to abide by the rules of the code because they too are involved in Rugby League and are therefore subject to the RFL Anti-Doping Regulations.

An important principle of the code and the regulations is that of 'strict liability'. This means that players are solely responsible for any banned substance found in their body – regardless of how it got there, or if there was an intention to cheat.

### 2021 WORLD ANTI-DOPING CODE

There are some significant changes to the revised World Anti-Doping Code which came into effect on 1 January 2021. It is important that you are aware of them. These are summarised on the following pages.





## ANTI-DOPING RULE VIOLATIONS (ADRVs)

- › There are now 11 violations (previously 10).
- › The 'Complicity' violation now covers 'intentional' and 'attempted' third party involvement (such as an attempt another person to cover up, or to attempt to cover up, a doping violation) or helping a player avoid detection. The third party would probably face the same sanction as the player.
- › Under a new Protection of Whistleblowers clause, further sanctions will be enforced against anyone found to have attempted to deter, or retaliate against, someone who suspects and/or reports a doping violation to the authorities.

The 2022 Prohibited List includes a group of illegal, so-called 'recreational' drugs, which are sometimes used in a non-sporting context. For example, cannabis and cocaine. In cases where such substances are found in-competition, there will be a reduction in the length of sanction if:

- › use occurred out-of-competition and was unrelated to sports performance; and
- › the athlete completes an approved treatment programme

### Revised definition of 'in competition'

The period commencing at 11:59 pm on the day before a competition in which the athlete is scheduled to compete, through to the end of such competition and the sample collection process related to such competition.





## SANCTIONS

- › There will be a four-year ban for cheating involving serious doping substances, such as steroids or human growth hormone (HGH) – unless the player can prove that use was not intentional.
- › Positive tests for stimulants, such as Methylhexanamine and Ephedrine, will lead to a minimum two-year or a four-year ban where use is proven to be intentional.
- › Some players may test positive after taking a ‘contaminated product, for example supplements. If a player can prove\* ‘no significant fault or negligence’ then the sanction can range from a reprimand to a two-year ban.  
*\*Players must be able to provide evidence that they had no intention to cheat. For example, the results of a ‘reasonable internet search’ to check that a product is free from banned substances.*
- › Refusing or evading sample collection can lead to a four-year ban.
- › Providing substantial assistance will be rewarded. Admitting a violation, or providing assistance which leads to the discovery of other violations, can lead to reduced sanctions – including the elimination of any sanction.
- › The statute of limitations (the timeframe within anti-doping action can be brought) is 10 years.
- › The 2021 Code reintroduces ‘aggravating circumstances’. This means that a ban can be extended by an additional two years in certain circumstances, for example the use of more than one prohibited substance at the same time.
- › Result management agreements have been introduced. A ban of four or more years can be reduced by one year if the person admits to a violation and accepts the sanction within 20 days.





## EDUCATION

- › There is a separation between ‘education’ and ‘information’.
- › Information programmes should contain basic anti-doping information.
- › Education programmes should focus on prevention and be values based. Professional clubs must ensure that all players at all levels are educated by an approved educator.
- › Resources for professional and community clubs are available on Our Learning Zone.
- › Professional and Community sport will receive education throughout the season via different, appropriate means.

## INTERNATIONAL STANDARDS

The World Anti-Doping Code is underpinned by eight international standards. These outline mandatory systems and processes for: education; testing and investigations; the therapeutic use of a prohibited substance or method; the Prohibited List; WADA accredited laboratories; anti-doping code compliance by signatories; and privacy.

## UK NATIONAL ANTI-DOPING POLICY

The RFL has signed up to the UK National Anti-Doping Policy. RFL Anti-Doping Regulations reaffirm our commitment to upholding the principles of the anti-doping code. We support and comply with UKAD's world class anti-doping programme, while sustaining systems that are appropriate to the structure and varying needs of Rugby League players.



## RFL ANTI-DOPING RULES

The RFL Anti-Doping Rules are available online via the RFL's website or from your club (see *Operational Rule Section D3*).

## ANTI-DOPING RULE VIOLATIONS (ADRV)

To avoid breaking the rules, you need to make sure you know what the rules are. Under the anti-doping code and RFL Anti-Doping Regulations you don't need to test positive to break an anti-doping rule. It's important that you understand the following Anti-Doping Rule Violations.

You are breaking anti-doping rules if:

**Presence** – a prohibited substance and/or prohibited method is found in your bodily specimen, including blood and urine

**Use** – you use or attempt to use a prohibited substance or prohibited method

**Refusal** – you avoid or refuse to undertake a drugs test

**Whereabouts failure** (national registered testing pool players only) – you fail to provide details of your whereabouts for out of competition testing or give inaccurate details of your whereabouts details leading to a missed test. Any combination of three strikes within 12 months is an anti-doping violation.





**Tamper** – you tamper or attempt to tamper with any part of the dopin control process. This is now updated to include engaging in fraudulent conduct during the results management of an adv. For example, submitting falsified documents. This will be treated as a separate offence and a further consecutive sanction may be applied.

**Possession** – you possess prohibited substances and/or methods

**Administer** – you administer or attempt to administer a prohibited substance and/or prohibited method to any player, or assist, encourage, aid, abet or cover up an anti-doping rule offence.

**Trafficking** – you traffick prohibited substances.

**Complicity** – you are involved in an anti-doping violation committed by another person, such as helping to cover it up or helping another player avoid detection. Sanctions for complicity are likely to be the same as those given to the person who committed the violation.

This also now covers any ‘attempted complicity’ by another person, with a sanction length of between two years and a lifetime ban.

**Prohibited association** – you associate with a person, for example a coach or doctor, who is serving a suspension for a doping offence or who has been found guilty of a criminal or disciplinary offence equivalent to a doping offence, for example providing banned substances.





You will be informed if you are associated with such a person and you must end the association or face a ban of up to two-years.

## PROTECTION OF WHISTLEBLOWERS -

Anti-Doping Organisations (ADOs) need people to come forward to report doping. This new rule gives these people more protection and applies if:

- › someone is threatened or intimidated in order to discourage them from reporting doping activity to authorities; or
- › they are retaliated against for doing so.

This violation can carry a lifetime ban from the sport.

All support personnel can be sanctioned for the following violations: trafficking; possession; use; administering; tampering; complicity; protection of whistleblowers; and prohibited association. Support personnel should ensure they are familiar with the ADRVs that affect them. Some can carry a lifetime ban from sport. The RFL strongly advises all support personnel to understand their anti- doping responsibilities.

## To find out more...

Further details of the relevant rules can be found throughout this booklet. To learn more about the rules and procedures you must follow, visit the websites listed at the end of this booklet.





## 3. YOUR RESPONSIBILITIES

As player it is your responsibility to compete cleanly and fairly. Under the World Anti-Doping Code and RFL Anti-Doping Regulations you are ultimately responsible for any prohibited substance found in your system. This is referred to as **strict liability**. The absence of a manufacturer's warning or a guarantee about the safety of a product does not reduce the seriousness of the doping offence.

### CLEAN SPORT APP

UKAD has launched the 100% me Clean Sport App to give players clear and concise anti-doping advice and information. This is also a useful place to keep a log of any medication or supplements. You can download this via iTunes or Google Play.

### WHO DO YOU TRUST?

Who you trust to take advice from about substances, medication and supplements is your responsibility. You are accountable for those you entrust with access to your food and drink. This means that if you take medication from your doctor (GP or club doctor) and do not check whether it is permitted you are at fault if you provide a positive sample.

Likewise, if you take a supplement that is contaminated – even after getting a guarantee from the manufacturer or anyone else – you are still responsible for choosing to use that product.

All players have five key responsibilities.



- › Stay up to date with the latest Prohibited List of Substances and Methods
- › Check the status of any substance before you use on GlobalDRO.  
Note: It is considered an anti-doping offence if a Prohibited Substance is found in your system, regardless of how it came to be there
- › Inform all medical personnel responsible for your health and wellbeing that you compete under specific anti-doping rules, and ensure that any medical treatment you receive does not violate anti-doping rules
- › Submit a Therapeutic Use Exemption (TUE) for any prohibited substance and/or method you are prescribed for a legitimate medical condition
- › Undertake thorough research of any product prior to use.

Those players in the National Registered Testing Pool (further details below) are also responsible for:

- › Providing accurate whereabouts details for out of competition testing if required by the RFL or UKAD. You will receive notification informing you that you are in the National Registered Testing Pool of players who must provide whereabouts information.

## PLAYER SUPPORT PERSONNEL RESPONSIBILITIES

Player support personnel have a highly influential and important role. Your views and actions could have great impact on decisions taken by your players. It is vital that you set a positive and moral example by consistently enforcing clean anti-doping messages.





In your player support role (coaching or medical staff) you have a responsibility to ensure that you fully understand and promote anti-doping rules. This will help guide your players through a clean and successful Rugby League career.

You should:

- make it clear to all players that doping in Rugby League is unacceptable and not necessary in order to win;
- ensure your players understand the anti-doping regulations, including the prohibited substances and methods, testing procedures and therapeutic use exemption applications;
- Be aware of your role in the testing procedures so you can support your players during the testing process;
- encourage and remind your players to provide accurate and up-to-date whereabouts information (if they are required to do so);
- safeguard the health of your players by emphasizing the risks associated with Prohibited Substances;
- demonstrate full support of the doping process.

If you are supporting a player, you should not:

- ignore possible evidence of doping in your team. Take positive action and speak to the RFL, UKAD or call the Report Doping In Sport hotline anonymously on **08000 32 23 32**;



- avoid enforcing rules or enforce the rules selectively;
- ignore doping because the team needs a particular player;
- Ignore drug misuse by player support staff.

## THE PENALTY

If you administer or attempt to administer a prohibited substance and /or prohibited method to any player, or assist, encourage, aid, abet or cover up an anti-doping rule offence, you are committing a violation. The sanction is a ban of four years to life from sport.

## 4. ABOUT SUBSTANCES

Many medications that you may need to take for common illnesses, such as asthma or hayfever, contain prohibited substances.

It is vital that you do not accidentally take a prohibited substance. The consequences are too great. For a first offence, the usual sanction is a two-year ban from sport (including training and competing), depending upon the substance and individual circumstances.

### **Ignorance is no excuse!**

You are responsible for checking the status of any substance before you use it. If you unknowingly take a banned medication you will still face a sanction.





The Prohibited List outlines which substances and methods are prohibited in competition and/or out of competition. The list is updated every January. However, it may be changed from time to time, so it is important that you check for changes on a regular basis.

Unless reported otherwise, any new version of the Prohibited List will come into effect three months after its publication by the World Anti-Doping Agency (WADA).

If you are consulting this directory you should check the WADA website to be certain that you are referring to the latest version of the Prohibited List when checking your medication.

You can also find out the status of a substance according to the rules at Global Drug Reference Online. This site only includes licensed medications and drugs; it does not include supplements as these are subject to different regulations. Supplements are discussed in depth in Section 3.

The RFL will always endeavour to keep club medical staff up to date with any changes in the WADA regulations.

## THE 2022 PROHIBITED LIST INCLUDES THE FOLLOWING SUBSTANCES

If you administer or attempt to administer a prohibited substance and /or prohibited method to any player, or assist, encourage, aid, abet or cover up an anti-doping rule offence, you are committing a violation. The sanction is a ban of four years to life from sport.

- Anabolic agents
- Peptide hormones, growth factors, mimetics and related substances
- Hormone and metabolic modulators





- Beta-2 agonists (bronchodilators) (new upper limits for Salbutamol as of January 2022)
- Diuretics and other masking agents Stimulants, for example methylhexanamine and pseudoephedrine)
- Narcotics
- Cannaboids
- Glucocorticosteroids (as well as oral, rectal, intramuscular and intravenous routes, in-competition local injections are now prohibited as of January 2022)

## S0. NON-APPROVED SUBSTANCES

It is prohibited to take any substances that are undergoing pre-clinical or clinical development and are therefore not officially allowed for human therapeutic use. NB. This list is subject to change and should be read in conjunction with the current WADA Prohibited List.

Newly added to the prohibited list in 2022 is BPC-157 (Body Protecting Compound-157 BPC-157). Athletes should remain vigilant for any supplements that market BPC-157 as it is not approved for human consumption.

## PROHIBITED METHODS

- Manipulation of blood and blood components
- Chemical and physical manipulation
- Gene and cell doping

Please note that this list is a guide only and ensure that you refer to the full Prohibited List.

Find out more...**visit [wada-ama.org](https://wada-ama.org)** for the Prohibited List.





## PSEUDOEPHEDRINE

Any player who provides a sample containing pseudoephedrine is likely to face at least a ban. Pseudoephedrine is commonly found in cold remedies so be careful which remedies you take when you have a cold. Consult club medical staff before taking any cold remedies. Many cold remedies do not contain pseudoephedrine and these are often more effective. Therapeutic Use Exemptions (TUEs) will not be granted for cold remedies containing pseudoephedrine.

Over-using pseudoephedrine can lead to:

- Fast, pounding or uneven heartbeat
- Increased blood pressure
- Severe dizziness
- Easy bruising and bleeding
- Flu-like symptoms; chills, fevers, aches
- Anxiety and restlessness
- Unusual weakness

## METHYLHEXANEAMINE

Methylhexaneamine has been found in a number of supplements recently and is a Prohibited Substance. Supplements containing methylhexaneamine cannot be sold in the UK as they are potentially dangerous and can have serious side-effects. Any player who provides a sample containing it faces a two-year ban.

Methylhexaneamine is commonly referred to by a number of alternative names including forthan, forthane, floradrene, geranamine, dimethylamylamine, DMAA, dimethylpentylamine, 1,3-dimethylamylamine, geranium oil, geranium extract or pelargonium gravelons. Please note that this list of alternative names is not definitive, and not all the various names will appear the Global Drugs Reference website.





The supplements most likely to contain methylhexanamine are those which are designed to increase energy or aid weight loss. There is no guarantee that supplements are drug free. Any player who is considering the use of a supplement should assess the need, risks, and consequences of doing so.

The **Informed-Sport** programme evaluates supplement manufacturers for their process integrity, and screens supplements and ingredients for the presence of some prohibited substances. Informed Sport also recommend that you keep records of all the checks you carry out before taking any medications or supplements.

Please be aware that under the principles of **strict liability** contaminated supplements are not a valid defence for a player who tests positive. You are solely responsible for any substance found in a sample you provide.

## HEALTH RISKS

One of the criteria for WADA to include a particular substance on to the Prohibited List is that it does, or may, pose a risk to your health. The use of a Prohibited Substance can seriously damage health and all players should be aware of these risks.

## PERMITTED SUBSTANCES

There are many permitted substances that your doctor or pharmacist may find suitable for treatment of illness or injury.

**Note:** If your doctor cannot find a permitted alternative to treat a legitimate illness or injury, you can use the Therapeutic Use Exemption (TUE) process outlined in Section 6 to apply for an exemption to use that prohibited substance or method. Due to the changing nature of the pharmaceutical market, neither UKAD nor the RFL are able to provide a definitive list of products that contain permitted substances.



## CHECKING YOUR MEDICATION GUIDANCE

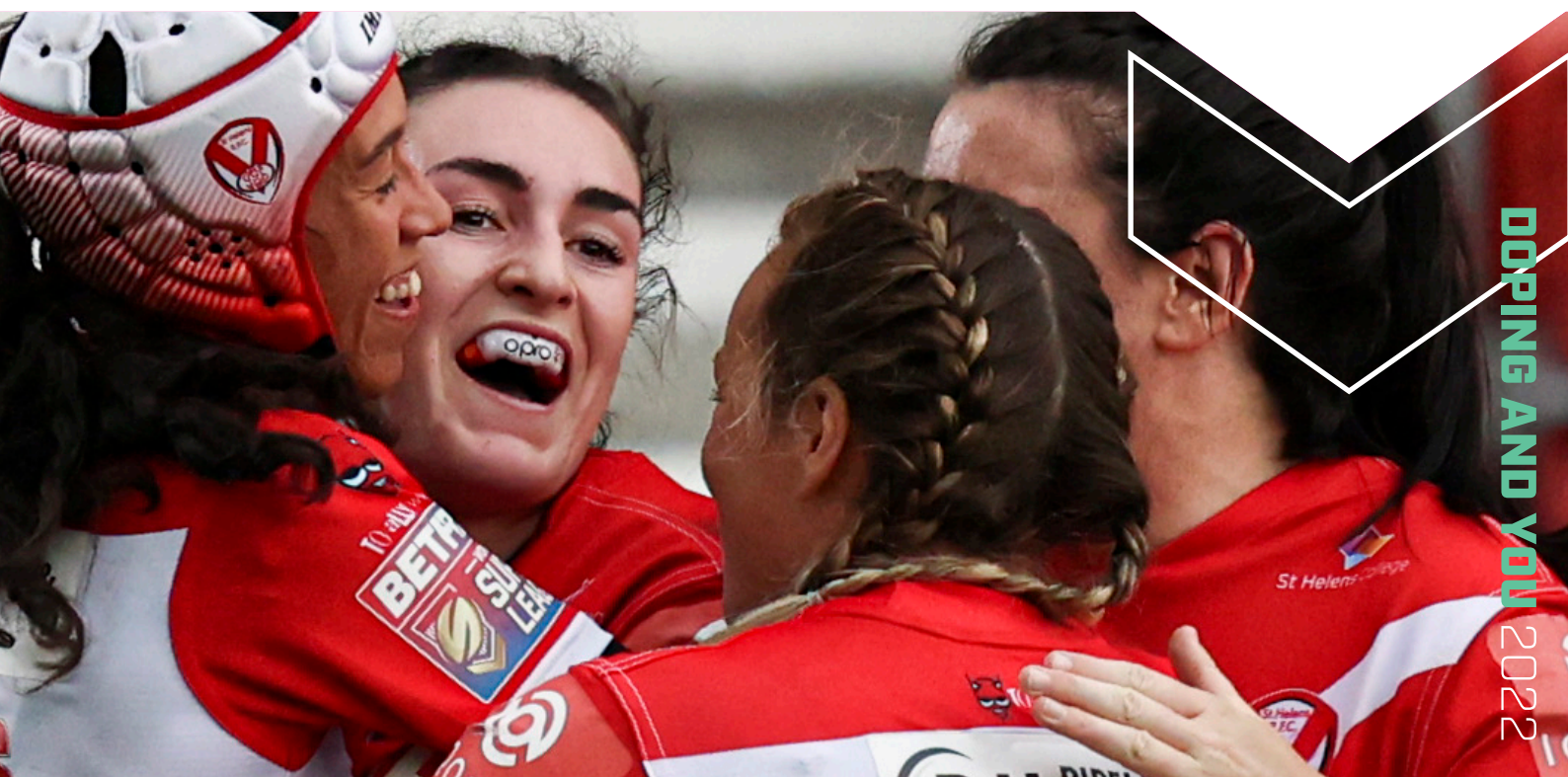
The advice is simple: check every single substance or medication before you use it – even if it's a medication you have used and checked before.

The Services and Resources section of this booklet tells you how to check the status of your medication.

The following information will help you to use and interpret these services correctly, enabling you to get the right answer to your query.

## WHEN CHECKING YOUR MEDICATION ON GLOBALDRO, YOU SHOULD:

- › check the status of all the active ingredients listed on the contents label of your medication;
- › ensure that the ingredients listed on the response page match the substances listed on the contents label of your product;
- › check the correct 'route of administration' (see below for more information);
- › see if there are any conditions attached to the response. For example, 'this substance is only permitted with a Therapeutic Use Exemption'; and
- › check if there are any Rugby League-specific regulations for a substance (check the RFL anti-doping regulations).





## ROUTE OF ADMINISTRATION

This refers to the way in which a medication or substance is taken or used – for example, tablets, injections or creams. Always check your medication according to the route of administration as its status may change according to how the medication is used.

The information below should be used as a guide only. If you are unsure about the route of administration, check with your doctor or a local pharmacist.

‘Oral’ or ‘systemic’ preparations (e.g. tablets, capsules and syrups) are swallowed and go directly into your system.

‘Topical’ or ‘local’ preparations (excluding dermatological) such as drops, sprays and inhalers (eye, ear, nasal) affect only the areas to which they are applied.

Dermatological preparations, such as creams, ointments and gels, are applied externally to treat skin conditions. For the purposes of the TUE process, this route of administration does not include eye drops, ear drops and nasal sprays, or oral gels containing a glucocorticosteroid.

Rectal preparations such as suppositories are applied via the rectum and go directly into your system.

Local or intra-articular injections affect only the area to which they are applied.

Intra-muscular or intravenous injections: These are injections that are considered “SYSTEMIC” preparations that are administered to the muscle or the vein and go directly into the system.



## MONITORING PROGRAM - INCLUDING NICOTINE

Nicotine is on the WADA Monitoring Programme in order to detect potential patterns of abuse, not to target smokers. WADA is monitoring the effects nicotine can have on performance when taken in oral tobacco products such as snus.

Nicotine is one of several stimulants included in the monitoring programme, along with the narcotics hydrocone, mitragynine and tramadol. Use of glucocorticosteroids are also included.

The full list is on the WADA website.

## 5. ABOUT SUPPLEMENTS

Some players take supplements in the belief that it will help maintain their health and improve their performance. However, it is now generally accepted that any player who is liable to be tested in or out of competition may be at risk of a positive drug test from the use of supplements.

An estimated quarter of the dietary supplements on sale to players may contain small amounts of prohibited substances, commonly including anabolic androgenic steroids and stimulants. These quantities have been found to cause positive drug tests, leading to players and athletes being banned from sport.

The RFL cannot guarantee that supplements, including vitamins and minerals, ergogenic aids and herbal remedies, are free from prohibited substances. We strongly advise players to assess the need to use supplements and to consider the risks associated with them, including the potential consequences of a ban.





## WHY ARE SUPPLEMENTS UNSAFE FOR PLAYERS?

The manufacture, distribution and promotion of dietary supplements are covered by a variety of regulations that relate mainly to their safety for the general public – not professional athletes who are subject to stringent anti-doping regulations. Pharmaceutical industry standards are in place to protect the consumer against the risk of ingesting substances that are potentially harmful to their health. These standards are set to ensure that levels of contamination in medicines or supplements do not exceed 0.1% by mass.

As most people are not subject to sport's anti-doping rules and are not drug tested as athletes are, these standards are satisfactory for the majority of people. In the case of some doping substances, however, much smaller levels of contamination may cause a player to test positive. This is because all WADA accredited laboratories are required to analyse your urine or blood sample to a standard that could detect a level of contamination of 0.00001% - or ten thousand times less than the pharmaceutical standard of 0.1%. Where supplements are consumed in relatively large amounts, for example, protein powders where daily intakes by players may reach 100g, contamination could result in a positive drug test and an anti-doping rule offence.

It is important to realise that these substances may not be an ingredient in the supplement, but a contaminant from other products made on the same production line. Manufacturers that advertise their products as being 'IOC Permitted' or 'WADA approved' are misleading. The IOC, WADA or UKAD do not endorse the safety or legality of any supplements for players.

## ASSESS THE NEED

Players should look to optimise diet, lifestyle and training before considering supplements. But your lifestyle, training and game demands may not give you enough time to be able to ingest what you need to meet your nutritional needs. Sometimes you may need to use





legal supplements. Before doing so, you should consult an accredited sports dietician and/or registered nutritionist, and a sports and exercise medicine doctor.

## ASSESS THE RISK

Do not take chances with supplements. You need to know that:

- › no Prohibited Substance has been introduced as a by-product of any part of the manufacturing process; and
- › the product (including the raw ingredients) has been manufactured, packaged and distributed in such a way that minimises the risk of a contamination.

You should:

- › avoid purchasing supplements from a manufacturer who also produces supplements that contain Prohibited Substances;
- › understand why some supplements could contain Prohibited Substances as contaminants;
- › understand what supplement testing for Prohibited Substances is. Look for supplements that are produced by companies which batch test their products;
- › seek expert guidance to assess your dietary and performance needs and supplement requirements (registered nutritionist or accredited sports dietician).

## ASSESS THE CONSEQUENCES

- › Remember **strict liability**. Players must be aware that any positive test as a result of supplement use will lead to you receiving a ban. Bans start at four years for intentional cheating, or where the player cannot prove lack of intent.
- › There is less leniency for carelessness. You are still likely to receive a two-year ban for inadvertent doping.



- To get any reduction in sanction from two years you must have substantial proof that you have done your research and be able to demonstrate that you were not at fault or intending to cheat.

Is the risk worth the gain? If a supplement does contain a Prohibited Substance, how will this affect your career? It can be very difficult to prove that the presence of Prohibited Substances from supplements were through no significant fault on your part as you already know there is a risk in taking them.

## SUPPLEMENT TESTING

Getting your supplements tested by a reliable laboratory does not guarantee their safety or legality.

Supplement testing is one step towards assessing the risk of contamination to your product. Manufacturers are encouraged to test their products. However, you must be aware that this is not a guaranteed way of identifying safe products.

There are services available to help you minimise the risk of a supplement being contaminated. One of these is the website Informed Sport. However, please note that sites of this nature do not give any guarantees regarding the status of a particular supplement and you are responsible for any supplements you decide to use.



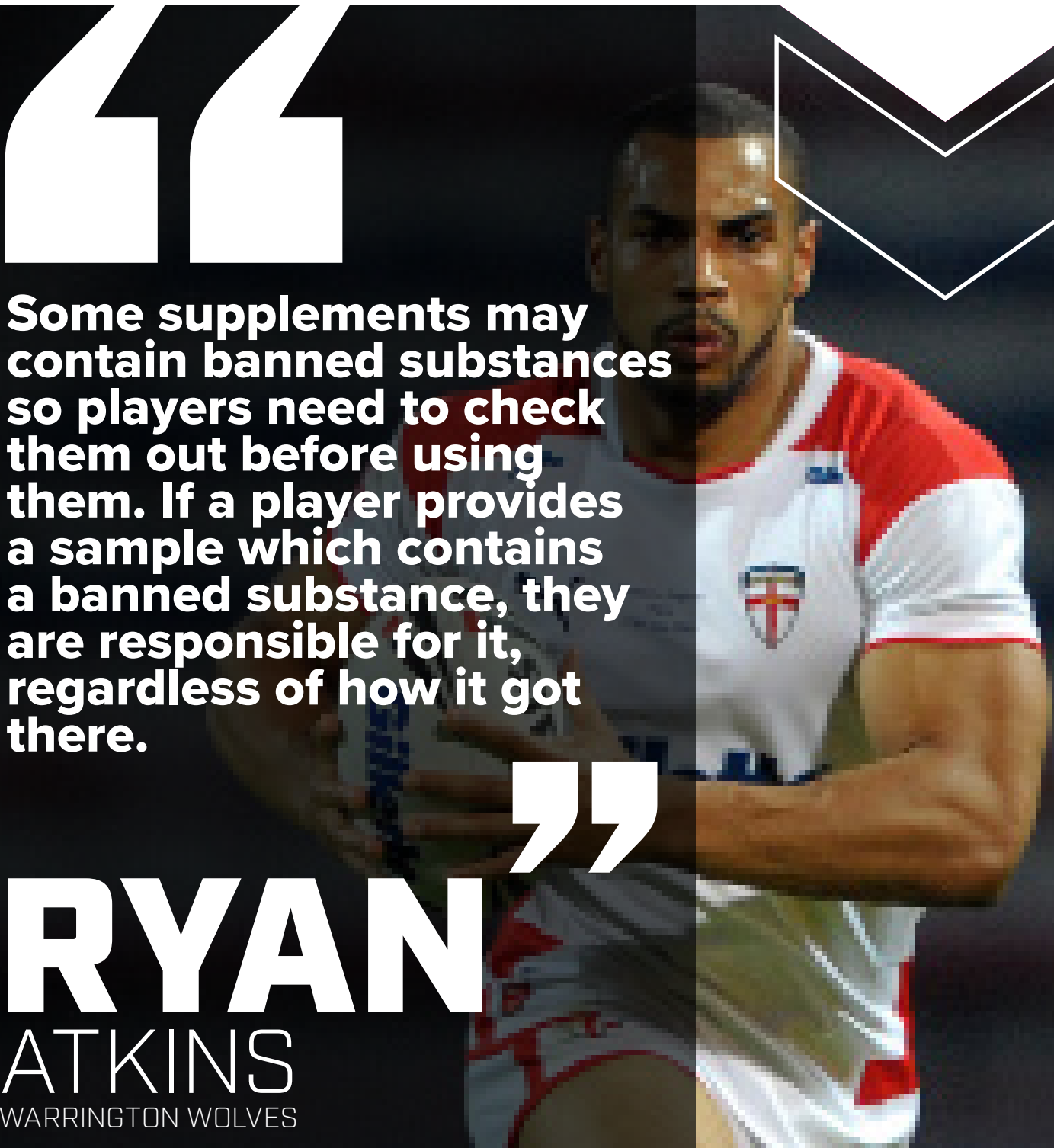


## 6. SERVICES & RESOURCES

We recommend that players and support personnel use UKAD's drug information services and resources to help you make well informed and safe choices about medication.

### GLOBAL DRUG REFERENCE ONLINE (GLOBALDRO)

For an immediate answer to an enquiry about the status of a substance in Rugby League, visit **Global Drug Reference Online**.



**Some supplements may contain banned substances so players need to check them out before using them. If a player provides a sample which contains a banned substance, they are responsible for it, regardless of how it got there.**

**RYAN**  
ATKINS  
WARRINGTON WOLVES



The website allows you to search for the status of a licensed medication that can be purchased in the UK, USA, Canada and Japan (in Japanese only). You can search for the brand name, for example Lemsip, or the individual ingredients of medicines such as Ibuprofen. When searching by brand name you must ensure that you enter the brand correctly and any derivatives it might have – for example, Lemsip ‘Cold and Flu’.

**Please note that GlobalDRO cannot be used to check the status of supplements.**

## ANTI-DOPING RESOURCES

Players and support personnel looking for additional information on anti-doping should visit the UKAD website. From here you will find the following information and resources.

- The Prohibited List
- TUE process and application forms
- Fact sheets on Prohibited Substances and Methods
- Advice about supplements
- Anti-Doping rules and policy documents

## TRAVELLING ABROAD - MEDICATION ADVICE

If you travel abroad to train or play it is important that you continue to check your medication.

When you're in another country, although your medication may sound or look the same, the ingredients can vary from country to country. So permitted medication in the UK could contain Prohibited Substances when purchased abroad!





## BE SAFE!

If you are going abroad, before you travel be sure that you check:

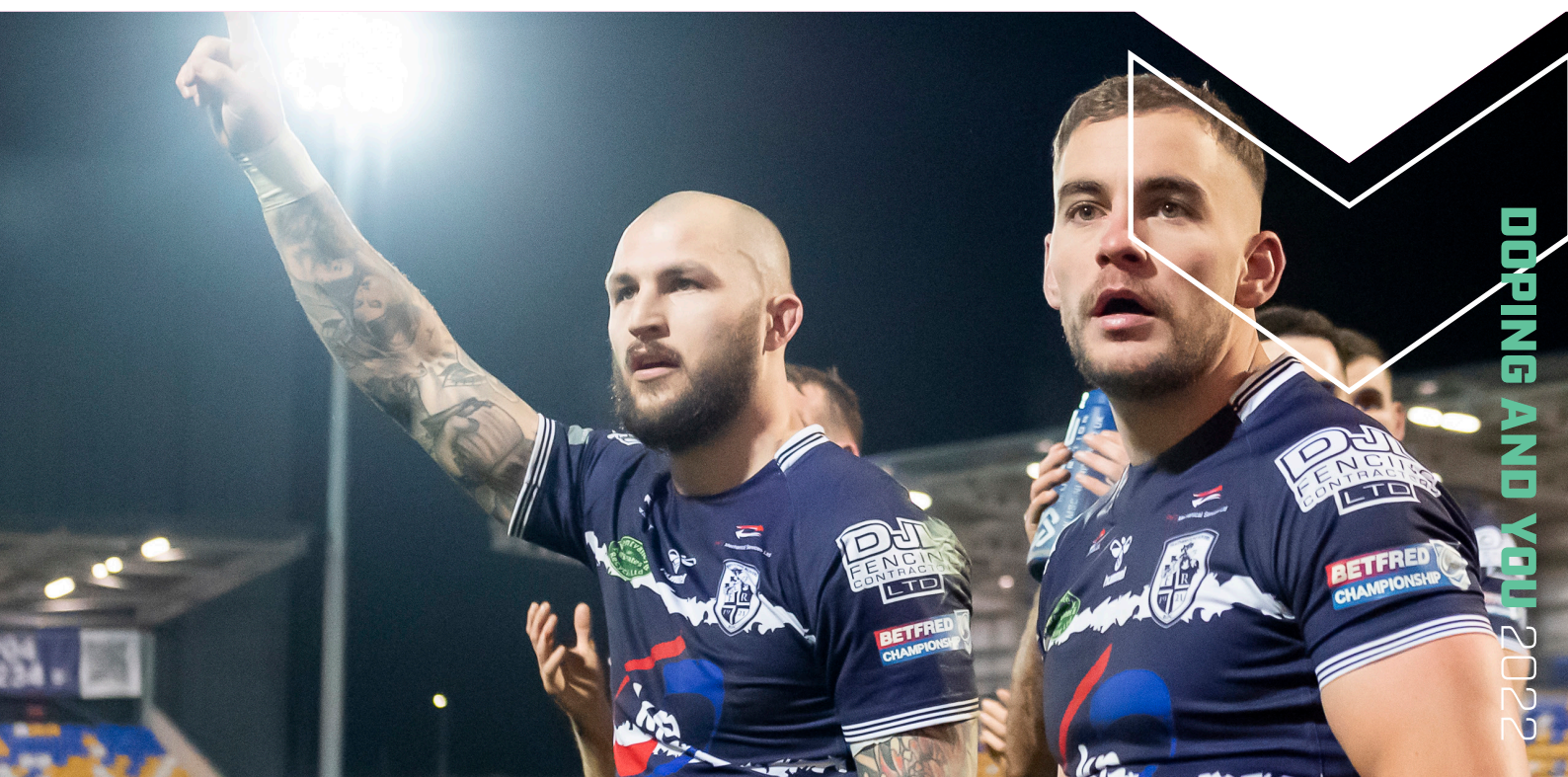
- › that you have taken enough medication to allow continuation of a treatment;
- › that you have notified the RFL and/or UKAD of any changes to your whereabouts details if required;
- › the status of all products you buy before you leave;
- › that you have downloaded the Clean Sport App;
- › that any medication you take into the country is permitted through customs.

## TRAVELLING ABROAD – CUSTOMS ADVICE

Some countries have different laws that may prohibit you from taking some substances into a particular country.

If you are carrying a prohibited substance for a legitimate medical condition, you should carry the following documents with you at all times.

- › Your prescription from your prescribing physician, including the name of the substance, dosage and strength.
- › Your Therapeutic Use Exemption (TUE) certificate to demonstrate that the anti-doping authorities have permitted you to use a prohibited substance for medical purposes.



Remember: If you need to buy a product overseas you must check carefully as common medications can and do contain different substances to those available in the UK. Wherever possible you should take your own medication abroad with you as this will help to avoid buying foreign products.

## 7. THERAPEUTIC USE EXEMPTIONS (TUEs)

Any player who is eligible for drug testing in the UK or abroad will need to apply for a Therapeutic Use Exemption (TUE) if they are prescribed a prohibited substance or prohibited method by their doctor to treat a legitimate medical condition. Before applying for a TUE, you should check with your doctor to see if there are any permitted alternative treatments or medications. If there are not, you will need to apply for a TUE according to the information and process outlined below.

### GLUCOCORTICOSTEROIDS

#### GLUCOCORTICOSTEROIDS

The use of Glucocorticosteroids administered via inhalation, intranasal or dermal (or a non-systemic route) do not require a TUE.

Players should declare the use of Glucocorticosteroids on the Sample Collection Form when tested. Glucocorticosteroids administered via a systemic route (oral, rectal, intravenous or intra-muscular) require a full TUE.

From 01 January 2022, all injectable routes of administration (including local injections) will be prohibited in-competition. Examples of local injectable routes of administration that this new regulation applies to includes epidural, intra-articular, intrabursal, intradermal, intraligamentary, intratendinous, intrathecal, periarticular, peritendinous, and subcutaneous. The administration of glucocorticoids by topical routes such as inhaled, intranasal, and dermal remain permitted.

If you have been tested 'in-competition' you will require a retroactive TUE if you have received a local injection of Glucocorticosteroids.

Further information can be found here [https://www.ukad.org.uk/sites/default/files/2021-12/2112\\_GC\\_TUE\\_Policy\\_v1.1.pdf](https://www.ukad.org.uk/sites/default/files/2021-12/2112_GC_TUE_Policy_v1.1.pdf)

### BETA-2 AGONISTS (ASTHMA MEDICATION)

The table below lists types of asthma medication and the action required (if any) to be permitted to use it.





MEDICATION	ACTION REQUIRED
Salbutamol	None*
Salmeterol	None*
Formoterol	None*
Terbutaline	TUE
Vilanterol	None*
Corticosteroids	None*

\*Please be aware that there are upper limits for Salbutamol, Salmeterol Formoterol and Vilanterol. For further info please read the section titled Upper Limits.

TUE applications for Beta-2 Agonists now require:

- comprehensive medical history;
- clinical review;
- objective spirometry assessment at rest and following a challenge

**Option 1** – Bronchodilator challenge

**Option 2** – Bronchoprovocation challenge

**Option 3** – Clinical suspicion persists (used if the above 2 options are negative and clinical suspicion persists)





It is essential that the TUE Beta-2 Agonist Guidance document is consulted to obtain full details of these requirements so that the correct evidence is submitted with TUE applications. Also, please note that there is a specific form for TUEs for Beta-2 Agonists. Applications on regular TUE forms will not be accepted.

Only the 25-man first team squads from Super League clubs will have to complete proactive TUEs for Beta-2 Agonists. This means that TUEs must be granted before these players take the medication.

All other players (non-25 man squad Super League players, Championships players, Academy, Foundation & Scholarship players) must complete TUEs for Beta-2 Agonists retroactively i.e. once they are tested they have 10 days to submit the TUE application. All players are advised to show the Beta-2 Agonist guidance documents to their doctors and to tell the doctor that they are drug tested as they play professional sport and would need sufficient objective evidence to confirm the diagnosis of asthma.

If you cannot meet the criteria, you need to have a discussion with your doctor to find out why you have been prescribed asthma medication. If clinical suspicion of asthma or any other respiratory problem is still present, this must be recorded as this can be used to support a TUE application if the criteria are not met. This is not a guarantee that the TUE will be granted.

TUEs for all other Prohibited Substances must be submitted proactively by all players.

TUE applications are reviewed by a panel of independent physicians known as UKAD's TUE Committee. Applications should be posted, in an envelope marked 'Private and Confidential', to:

UKAD – TUEs, Fleetbank House, 2-6 Salisbury Square, London, EC4Y 8AE.  
Alternatively, applications can be sent via the confidential fax line, 0800 298 3362, or emailed to [tue@ukad.org.uk](mailto:tue@ukad.org.uk)





## CAN MY CLUB DOCTOR COMPLETE MY TUE FOR ME?

Your club doctor can help you complete the form, but you must ensure that you are happy with the contents before you sign it. It is ultimately your responsibility, in line with the principles of strict liability, to ensure that the form is lodged correctly – and that you receive the TUE certificate stating that the TUE has been granted.

## ASTHMA AND OTHER BREATHING PROBLEMS

Many asthma medications are classified as 'Prohibited Substances'. You should therefore seek advice before making any decisions. This leaflet can be downloaded from the RFL website [https://www.rugby-league.com/the\\_rfl/rules\\_and\\_regulations/anti-doping\\_integrity\\_betting/anti-doping/exemptions\\_asthma](https://www.rugby-league.com/the_rfl/rules_and_regulations/anti-doping_integrity_betting/anti-doping/exemptions_asthma). All players must be aware that many asthma medications are Prohibited Substances so all players need to seek advice before making any decisions.

## UPPER LIMITS

Players need to be aware that there are upper limits for salbutamol, salmeterol formoterol and inhaled vilanterol. If these limits are exceeded players may be charged with an Anti-Doping Rule Violation.

The limits for salbutamol are a maximum of:

- 1600 microgrammes over 24 hours;
- 600 microgrammes over 8 hours.

Salbutamol inhalers commonly dispense either 100 or 200 microgrammes per puff/inhalation, therefore this 600 microgramme allowance equates to either one or three puffs per 8 hour period.





The limit for formoterol is 54 microgrammes over 24 hours.

Salmeterol has a maximum allowable amount permitted over 24 hours as 200 microgrammes. If a player requires more than 200 microgrammes per day, UKAD should be consulted as it may be necessary to apply for a TUE.

Inhaled vilanterol has been introduced into the 2021 code. It is permitted to inhale up to 25 microgrammes over a 24-hour period. Exceeding this dosage is prohibited.

The dose administered per puff/inhalation varies between inhalers. You should check the product information leaflet that comes with the inhaler to establish the dose per puff/inhalation.

If the presence of these substances found in urine samples exceeds the respective limits, it will be presumed not to have been because of therapeutic use. It will instead be considered an 'Adverse Analytical Finding'. This means that you will have to prove (through what is known as a controlled pharmacokinetic study) that the abnormal result was caused by you inhaling a therapeutic dose up to the maximum indicated above.

Poor administration technique or poorly controlled asthma could contribute to such abnormal urine findings. However, such a result will lead to an Anti-Doping Rule Violation hearing following which sanctions, including a suspension of up to two years, may be applied.

## HOW DO I KNOW IF I HAVE TO APPLY FOR A TUE?

Firstly, visit the Global Drug Reference Online system to find out if the medication you have been prescribed is prohibited. If it is, utilise the TUE Wizard on the UKAD website, which will help you work out the next appropriate steps. <https://www.ukad.org.uk/tue-wizard>

If you apply for a therapeutic use exemption (TUE), you can download an application form (and guidance documents) from the UKAD website.



Complete all sections of the form thoroughly and accurately and ensure you and your prescribing physician sign the application.

Submit your application to UKAD as follows.

- Email [TUE@ukad.org.uk](mailto:TUE@ukad.org.uk)
- Fax 0800 298 3362

Post (in an envelope marked 'Private and Confidential TUE application') to:  
UKAD – TUEs, Fleetbank House, 2-6 Salisbury Square, London EC4Y 8AE

Players should keep a copy of the application and other medical information that was sent to UKAD, along with a receipt (if possible) as proof of the date you sent in your TUE application.

## WHEN SHOULD I APPLY FOR A TUE?

In accordance with the International Standard for TUEs, players are required to obtain a TUE in advance of the use of any Prohibited Substance(s) or Prohibited Method(s). You should apply for a TUE as soon as you are prescribed a prohibited substance for a medical condition.

Please note that TUE applications can take up to 28 days to be approved, but it is your responsibility to ensure that your TUE has been approved before taking a Prohibited Substance. To ensure a swift process, make sure you supply all the relevant medical information relating to your illness, with results of medical examinations and tests conducted and details of any alternative permitted treatments previously tried.





## WHAT IF I AM PRESCRIBED A PROHIBITED SUBSTANCE IN THE WEEK BEFORE A MATCH?

Emergency or retrospective applications for a TUE will be considered only if:

- › emergency treatment or treatment of an acute medical condition was necessary; or
- › in exceptional circumstances, there was insufficient time or opportunity for you to submit, or for the UKAD TUE Committee to consider, an application prior to providing a sample.

You should not assume that by submitting a TUE application it will be granted. Any use or possession of a Prohibited Substance or Prohibited Method before an application has been granted is entirely at your own risk.

You should keep a copy of your application and any enclosures sent to UKAD, along with a receipt (if possible) as proof of the date it was sent.

## I'M NOT USUALLY SUBJECT TO TESTING BUT WAS RANDOMLY TESTED

Players who are not regularly subject to testing (e.g. trialists) are not normally required to submit TUE applications. If you are tested at random, and you are using a prohibited substance for a legitimate medical condition, you should submit a TUE application straight away.

You should also inform the Doping Control Officer at the time of the test that you need to apply for a TUE. A fully completed TUE application needs to be received by UKAD no later than five working days after the test is completed (see mailing details above).





## WHAT IF MY TUE APPLICATION IS REJECTED?

You have a right to appeal to UKAD, in writing, specifying the grounds of the appeal, within 14 days of being notified of the rejection.

- Email [TUE@ukad.org.uk](mailto:TUE@ukad.org.uk)
- Fax 0800 298 3362
- Post (in an envelope marked 'Private and Confidential TUE application') to:  
UKAD – TUEs, Fleetbank House, 2-6 Salisbury Square, London EC4Y 8AE

For further information on whether you need to apply for a TUE and where to send the application, check the TUE section of the UKAD website. From here you can download:

- TUE application forms
- A checklist to help you in preparing your TUE application
- Advice to your prescribing physician to ensure the relevant medical information is provided

Visit the UKAD website for further information on TUEs, including a range of factsheets and guidance documents for further information.





## 8. TESTING

UKAD testing is conducted according to the International Standard for Testing and Investigations.

Under the RFL's Anti-Doping Programme, players are required to submit to testing when notified by a Doping Control Officer or Chaperone. There may be little or no notice.

Testing can take place in the following three ways for all players.

- › In-competition testing (at a match)
- › Out-of-competition testing at squad training)
- › Out-of-competition testing at home or other venues

### DRUG TESTING IN THE UK

UKAD adheres to the World Anti-Doping Code's International Standard for Testing and Investigations. The international standard ensures that the integrity, anonymity and security of samples are maintained throughout the whole procedure – from player notification to transporting samples to the laboratory. A departure from the international standard would not invalidate a test result unless it is determined that the integrity of the sample has been affected.

You should ensure that the following aspects of the doping control procedure are maintained.

- › The Doping Control Officer (DCO) has official identification and evidence of his/her authority to carry out the test from UKAD or another official anti-doping agency





- › The DCO or official chaperone accompanies you at all times after you have been notified, until you arrive at the Doping Control Station.
- › At the doping control station, the DCO remains with you at all times until the sample collection procedures are complete
- › The DCO offers you the right to take a representative of your choice to the Doping Control Station
- › The DCO offers you an explanation of the testing procedures
- › You are given a choice of sample collection equipment
- › You are given a copy of the notification and sample collection documentation
- › That the DCO observed the sample provision process
- › That your name is not on any documentation to be sent to the laboratory

## YOUR RESPONSIBILITIES

In accordance with the international Standard for Testing and the RFL Anti-Doping Regulations, players have the following responsibilities to uphold when providing a sample.

- › Report immediately to the Doping Control station unless you have been granted a delay.
- › Remain in direct observation of the DCO/Chaperone at all times, from the point of notification until the completion of the testing procedure.
- › Produce your identification
- › Comply/undertake the test – refusing is a violation and may result in a ban from sport.

## YOUR RIGHTS

As a player, you should know your rights during the doping control procedure. You have the right to:





- › be notified by a Doping Control Officer or Chaperone DCO carrying official identification and evidence of their authority from an official anti-doping organisation;
- › be accompanied to the Doping Control Station by a representative of your choice;
- › ask for an interpreter;
- › be observed during the provision of your sample by a DCO of the same gender;
- › give comments or ask for additional information on the testing procedures;
- › receive a copy of the Doping Control Form;
- › confidentiality (no name should be on any documentation that is to be sent to the laboratory);
- › request a delay in reporting to the doping control station for a valid reason.

The new Athletes' **Anti-Doping Rights Act** promotes athlete rights within anti-doping and ensures they are clearly outlined, accessible, and universally applicable. For example, you have the right to receive anti-doping education.

## VALID REASONS TO REQUEST A DELAY

Valid reasons are as follows.

### In-competition

- › Obtain photo ID
- › Attend a cup presentation ceremony
- › Fulfil media commitments
- › Receive medical treatment
- › Finish competing
- › Warm down
- › Locate a representative/interpreter

### Out-of-competition

- › Obtain photo ID
- › Locate a representative/interpreter
- › Receive medical treatment
- › Finish training



Please note that a team de-brief/team talk is not a valid reason to delay reporting to the Doping Control Station after being notified. However Doping Control staff will normally allow you to return to the dressing rooms after reporting to the Doping Control Station (on some occasions this may not be possible). If you are allowed to return to the dressing room you will be chaperoned at all times, you must stay within sight of the chaperone and you must report to the Doping Control Station in a timely manner.

## SAMPLE COLLECTION – FURTHER INFORMATION

Players are asked to consent to their sample being used for anti-doping research purposes. This is completely anonymous and you will not be penalised if you decline.

You should ensure that any concerns you may have about a test or a Doping Control Officer are recorded on the Doping Control Form.

Collected samples may be held and retested up to 10 years following sample collection.

## DOPING CONTROL OFFICERS

Testing is conducted by trained, independent doping control officers (DCOs) on behalf of UKAD. All DCOs are re-certified annually, and are regularly audited to ensure that they always comply with the International Standard for Testing and Investigations.

In sample collecting DCOs must follow Covid regulations. This includes social distancing, wearing PPE, and undertaking wellbeing screenings prior to attending for testing.

## CHAPERONES

UKAD has a team of trained chaperones to assist the DCOs during doping control. These conduct notifications and escort players to doping control stations.





Chaperoning is essential to protect the integrity and validity of a player's sample and to exclude any possibility of manipulation of a sample from the time of official notification to sample collection.

## BLOOD OR URINE?

Both blood and urine samples are collected as part of the RFL's testing programme.

## URINE TESTING

Players must provide a 90ml sample. If the first sample fails, the doping control officer will request additional samples. Players must also wash their hands or wear gloves when dividing the sample between the A and B sample bottles.

## BLOOD TESTING

The notification process for blood testing is the same as for a urine test. It will be undertaken by a Doping Control Officer (DCO) in the same manner as a urine test. However, the sample collection is carried out by a trained Blood Control Officer (BCO).

Before you give a blood sample, you are required to sit down for at least 10 minutes. The BCO will find a suitable vein and cleanse your skin, unseal a hypodermic needle and attach self-sealing secure containers, then withdraw enough of your blood to fill the required number of tubes. No more than three attempts will be made per session.

After withdrawing the needle, the BCO or athlete will place one container into each of the A and B sample bottles. These should be checked for any leakage. The sealed blood sample shall be kept in the Doping Control Station, at a cool but not freezing temperature, prior to dispatching for analysis. Samples will be stored and transported at a controlled temperature between 2-8°C.



During the 2012 London Olympic Games a new method of analysing blood samples was launched which significantly extended the window of detection of Human Growth Hormone (HGH). This new test does not detect HGH directly, but looks for any unnatural increase in other biological markers which occur after the injection of HGH.

The only legitimate reason to refuse a blood test is if you have a medical condition which means you cannot give blood. Medical evidence would need to be provided in this instance. Having a phobia of needles, or holding certain religious beliefs, are not valid excuses.

## TESTING YOUNG PLAYERS

In Rugby League, a 'minor' is someone under the age of 16. Under UK National Anti-Doping Policy and Rules, testing can only be conducted on a minor with the prior written consent of the player's legal guardian. For a minor to compete in Rugby League, a parent or guardian must have given their consent.

Any player aged under 16 has the right to be accompanied by a representative of their choice at all times during the sample collection process. UKAD encourages this.

If you are a minor, your representative should be present to observe the DCO when you are providing a urine sample. Your representative should not directly watch the provision.

## TESTING PROGRAMME

The RFL works in partnership with UKAD to determine the levels of testing for each year. Depending on the level in which you compete, you will be required to fulfil certain obligations for anti-doping. These obligations are outlined below.





## IN-COMPETITION TESTING

In-competition testing is where players are selected for testing whilst participating in a match. UKAD-authorised doping control officers will be present to oversee the player selection process, verify and coordinate the collection of samples, and securely dispatch samples to the laboratory.

## OUT OF COMPETITION TESTING OF SQUADS

UKAD conduct tests at squad training sessions. These tests are known as out of competition squad tests.

## OUT OF COMPETITION TESTING OF INDIVIDUALS (ALL PLAYERS)

All players should note that they should make themselves available for testing at all times and all locations when notified.



**“  
Drugs in sport don’t  
work, drugs in Rugby  
League don’t work and  
drugs in life don’t work.  
”**

**KEVIN  
SINFIELD**

## 9. RESULTS

On completion of a drug test conducted under the International Standard for Testing and Investigations, your A and B sample bottles and doping control paperwork will be sent by a secure chain of custody to a WADA accredited laboratory. The A-sample is then analysed, while the B-sample is securely stored as a back up. There are two possible scenarios that will follow sample analysis: a negative result may be reported; or an adverse analytical finding may be reported.

### NEGATIVE RESULTS

You will not be notified of a negative result. Any sample may be stored and subjected to further analysis at any time at the direction of UKAD or WADA.

### ADVERSE ANALYTICAL FINDINGS

The process for dealing with an adverse finding is conducted in three stages.

1. Review
2. Hearing
3. Appeal

Review. If an adverse finding is reported, UKAD will investigate. They will find out whether an applicable TUE has been granted or if there was any apparent departure from the International Standards for Testing or Laboratories that may have undermined the validity of the finding. If it is determined from this review that there is a 'Case to Answer', UKAD will inform the player. You may then be provisionally suspended. You have the right to request the analysis of the B sample and a right to witness (or to nominate a representative to witness on your behalf) the B sample opening and analysis. The B sample should be analysed within 30 days of the A sample result being reported to the player. If you do not request the B sample analysis, this right may be deemed waived.





Hearing. Players have the right to a fair hearing. This should be on a timely basis (within three months of the initial A sample report). The hearing gives you the opportunity to present your case to a panel, with the aim of reducing or eliminating the period of your ban. More information about the hearing and the reduction or elimination of sanctions can be found in the RFL Anti-doping Regulations. The RFL has delegated responsibility to hear doping cases to the National Anti-Doping Panel.

Appeal. Players have the right to appeal a panel's decision. Please refer to the RFL Anti-Doping regulations for further information.

## RFL SUPPORT

We understand that professional sports people face unique pressures and expectations, and that when things go wrong it can be difficult for players to know where to turn.

Counselling and support services are available to any player who tests positive for a Prohibited Substance. Details will be provided with the correspondence regarding the case and any queries should be directed to the RFL who will work closely with RLCares.

Rugby League Cares is an independent charity that plays an important role in the field of player welfare. RL Cares is there for you in lots of ways, offering practical advice and signposting players in the direction of the experts who have the skills, experience and know-how to help you.

## SANCTIONS FOR ANTI-DOPING RULE VIOLATIONS

The World Anti-Doping Code outlines a clear and definitive set of sanctions for players found to have committed a doping offence. These sanctions have been adopted by the RFL and are detailed in the Anti-doping Regulations.



Player support personnel found guilty of violating the anti-doping code face harsh penalties. It is outlined in the code that individuals involved in aiding, abetting, encouraging or covering up doping in sport, will be subject to more severe sanctions than players who test positive.

Player support personnel found guilty of the administration or trafficking of prohibited substances may face a minimum of four years or a lifetime ban.

## REPORT DOPING IN SPORT

UKAD has a 24-hour confidential phone line to support the fight against doping in sport. The phone line provides a service for athletes, support personnel, and concerned family or friends to securely pass on information to UKAD with guaranteed anonymity. Hosted by Crimestoppers, a dedicated team of trained operators are able to manage calls related to anti-doping. All information provided will be treated in confidence and re-searched and investigated by UKAD.

**08000 032 2332**

Information can also be submitted anonymously via the Crimestoppers website at <https://crimestoppers-uk.org/give-information/forms/give-information-anonymously>





## 10. KEEPING RECORDS

It is important for you to keep a list of the medication or substances that you have taken and the dates that you took them. This will ensure that you record them accurately on the Sample Collection Form at the time of testing.

**The best place to keep a record is on the 100% me Clean Sport App.** You can download this via iTunes or Google Play.

Alternatively, you can use the following form. You may want to take this Directory with you to the Doping Control Station so you can record each substance accurately.

MEDICATION/SUPPLEMENT	DATE TAKEN	DOSAGE



## TESTING RECORDS

Players are encouraged to keep a record of any drug test they have undertaken. Your record of drug tests taken is also a great way of demonstrating you've been tested and that you're clean. You could use the following form.

**DATE OF TEST:**

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**IN COMPETITION /  
OUT OF COMPETITION**

**VENUE OF TEST:**

--	--	--

**NAME OF DOPING CONTROL OFFICER  
(DCO):**

**AUTHORITY CONDUCTING THE TEST  
(SEE DCO AUTHORISATION LETTER):**

--	--	--

**RESULT OF TEST:**

**DATE RECEIVED:**

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## 11. USEFUL CONTACTS & LINKS

<b>RFL</b>	RFL ANTI-DOPING ONLINE E: ANTI.DOPING@RFL.UK.COM
<b>UKAD</b>	WWW.UKAD.ORG. UK ATHLETE@UKAD.ORG.UK TEL 020 7842 3450 FLEETBANK HOUSE, 2-6 SALISBURY SQUARE, LONDON, EC4Y 8AE
<b>REPORT DOPING IN SPORT</b>	08000 032 2332 SECURE.CRIMESTOPPERS-UK.ORG/AMS.FORM. ANONYMOUS.ASP
<b>NATIONAL ANTI-DOPING PANEL</b>	WWW.SPORTRESOLUTIONS.CO.UK
<b>AUSTRALIAN SPORTS DRUG AGENCY, ASADA</b>	WWW.ASADA.ORG.AU ASADA@ASADA.ORG.AU
<b>FRENCH ANTI-DOPING ORGANISATION</b>	WWW.AFLD.FR/
<b>IRISH SPORTS COUNCIL</b>	WWW.SPORTIRELAND.IE/ANTI-DOPING CONTACTUS@SPORTIRELAND.IE
<b>NEW ZEALAND ANTI-DOPING ORGANISATION</b>	DRUGFREESPORT.ORG.NZ INFO@DRUGFREESPORT.ORG.NZ
<b>IRL</b>	WWW.INTRL.SPORT/ANTI-DOPING/HOME/



## 11. USEFUL CONTACTS & LINKS

**WORLD ANTI-DOPING AGENCY** [WWW.WADA-AMA.ORG](http://WWW.WADA-AMA.ORG) [INFO@WADA-AMA.ORG](mailto:INFO@WADA-AMA.ORG)

**INFORMED SPORT - SUPPLEMENT TESTING** [WWW.INFORMED-SPORT.COM](http://WWW.INFORMED-SPORT.COM)  
[@TRUSTEDBYSPORT](https://twitter.com/TRUSTEDBYSPORT)

### OTHER DRUG INFORMATION SERVICES

FOR HELP AND ADVICE ABOUT GENERAL DRUG MISUSE YOU COULD CONTACT:

**TALK TO FRANK** [WWW.TALKTOFRANK.COM](http://WWW.TALKTOFRANK.COM)  
[FRANK@TALKTOFRANK.COM](mailto:FRANK@TALKTOFRANK.COM)  
TEL 0800 77 66 00

**DRUG SCOPE** [WWW.DRUGSCOPE.ORG.UK](http://WWW.DRUGSCOPE.ORG.UK) TEL 020 7928 1211

**NATIONAL HEALTH SERVICE** [WWW.NHS.UK](http://WWW.NHS.UK)  
TEL: 0845 46 47





