
6 Regulations governing Doping Control

6.1 Definitions

Terms in *italic* are given the meanings assigned by the WADA World Anti-Doping Code from time to time.

6.2 Anti-Doping Rule Violations

6.2.1 Doping is prohibited. Doping is the occurrence of one or more anti-doping rule violations as set forth in 6.2.1.1 to 6.2.1.8:

6.2.1.1 Presence of a *Prohibited Substance* or its *Metabolites* or *Markers* in a *Player's* bodily specimen.

6.2.1.1.1 It is each *Player's* personal duty to ensure that no *Prohibited Substance* enters his or her body. *Players* are responsible for any *Prohibited Substance* or its *Metabolites* or *Markers* found to be present in their *bodily specimens*. Accordingly, it is not necessary that intent, fault, negligence or knowing Use on the *Player's* part be demonstrated in order to establish an anti-doping rule violation under this paragraph.

6.2.1.1.2 Excepting those substances for which a quantitative reporting threshold is specifically identified in the *Prohibited List*, the detected presence of any quantity of *Prohibited Substances* or its *Metabolites* or *Markers* in a *Player's Sample* shall constitute an anti-doping rule violation.

6.2.1.1.3 As an exception to the general rule of Article 6.2.1.1, the *Prohibited List* may establish special criteria for the evaluation of *Prohibited Substances* that can also be produced endogenously.

6.2.1.2 Use or attempted *Use* of a *Prohibited Substance* or a *Prohibited Method*.

The success or failure of the *Use* of a *Prohibited Substance* or a *Prohibited Method* is not material. It is sufficient that the *Prohibited Substance* or *Prohibited Method* was *used* or *attempted* to be *used* for an anti-doping rule violation to be committed.

6.2.1.3 Refusing, or failing without compelling justification, to submit to *Sample* collection after proper notification or otherwise evading *Sample* collection.

6.2.1.4 Violation of applicable requirements regarding the *Player's* availability for *Out-of-Competition Testing* including failure to provide required whereabouts information and missed tests which are declared based on reasonable rules.

6.2.1.5 *Tampering*, or attempting to tamper with any part of Doping Control.

6.2.1.6 *Possession of Prohibited Substances* and methods.



Possession by a *Player* at any time or place of a substance that is prohibited in *Out-of-Competition Testing* or a *Prohibited Method* unless the *Player* establishes that the *Possession* is pursuant to a therapeutic *Use* exemption in accordance with Annex 2 hereto or other acceptable justification.

Possession of a substance that is prohibited in *Out-of-Competition Testing* or a *Prohibited Method* by *Player Support Personnel* in connection with a *Player*, *Competition* or training, unless the *Player Support Personnel* establishes that the *Possession* is pursuant to a therapeutic *Use* exemption granted to a *Player* in accordance with Annex 2 hereto or other acceptable justification.

- 6.2.1.7 *Trafficking* in any *Prohibited Substance* or *Prohibited Methods*.
- 6.2.1.8 Administration or attempted administration of a *Prohibited Substance* or *Prohibited Method* to any *Player*, or assisting, encouraging, aiding, abetting, covering up or any other type of complicity involving an anti-doping rule violation or any attempted violation.

- 6.2.2 *Prohibited substances* and *Prohibited Methods* are classed in a *Prohibited List* which is issued by the World Anti Doping Agency (WADA) and amended regularly at least once a year. It is the *Player's* responsibility to keep himself informed of the current List, which is to be found on the WADA homepage :
http://www.wada-ama.org/en/dynamic.ch2?pageCategory_id=47

Players who take medication containing *Prohibited Substances* must request therapeutic justification in accordance with Annex 2 hereto.

- 6.2.3 All *Players* registered for *Competitions* of FIBA agree to undergo *Doping Control* tests, and to provide *Samples* of bodily fluids (e.g. urine, blood, saliva, sweat) and to undergo any other type of control test provided for by the IOC, the World Anti-Doping Agency (WADA) or FIBA.
- 6.2.4 All doctors and physiotherapists involved in the supervision, care and doping-related problems affecting *Players* registered for FIBA *Competitions* are bound by professional confidentiality, in particular vis-à-vis the media.

Any failure to abide by the professional code of ethics will lead to an official warning and the refusal of permission to accompany the teams participating in FIBA *Competitions*.

6.3 Burden and Standards of Proof

- 6.3.1 Facts related to anti-doping rule violations may be established by any reliable means, including admissions.
- 6.3.2 FIBA shall have the burden of establishing that an anti-doping rule violation has occurred.
- 6.3.3 The standard of proof shall be whether FIBA has established an anti-doping rule violation to the comfortable satisfaction of the hearing body bearing in mind the seriousness of the allegation which is made. This standard of proof in all cases is greater than a mere balance

of probability but less than proof beyond a reasonable doubt. Where the *Code* places the burden of proof upon the *Player* or other persons alleged to have committed an anti-doping-rule violation to rebut a presumption or establish specified facts or circumstances, the standard of proof shall be by a balance of probability.

6.3.4 Facts related to anti-doping rule violations may be established by any reliable means, including admissions. The following rules of proof shall be applicable in doping cases:

6.3.4.1 WADA-accredited laboratories are presumed to have conducted *Sample* analysis and custodial procedures in accordance with the *International Standard* for laboratory analysis. The *Player* may rebut this presumption by establishing that a departure from the *International Standard* occurred.

If the *Player* rebuts the preceding presumption by showing that a departure from the *International Standard* occurred, then the *Anti-Doping Organisation* shall have the burden to establish that such departure did not cause the *Adverse Analytical Finding*.

6.3.4.2 Departures from the *International Standard* for *Testing* which did not cause an *Adverse Analytical Finding* or other anti-doping rule violation shall not invalidate such results. If the *Player* establishes that departures from the *International Standard* occurred during *Testing* then the *Anti-Doping Organisation* shall have the burden to establish that such departures did not cause the *Adverse Analytical Finding* or the factual basis for the anti-doping rule violation.

6.4 In-Competition Testing

Doping control tests may be carried out at FIBA *Competitions* (*In-competition* testing). *In-competition* testing is compulsory during the following *Competitions*:

1. Olympic Qualifying Tournaments for Men and Women,
2. FIBA World Championship,
3. FIBA Women's World Championship,
4. FIBA U-21 and U-19 World Championships for Men and Women,
5. Continental or Zone Championships for Men and Women, if the FIBA Zone Commissions have the facilities to carry out such tests,
6. Official FIBA cups and tournaments for club teams, if the appropriate body of FIBA has the facilities to carry out such tests,

In-competition testing for these purposes is defined as follows:

1. For the competitions 1 to 5 as set out above: 7 days before the first game of the competition through to and including 24 hours after the last game of the team in question.
2. For the competition 6 as set out above: 48 hours before each game of the competition through to and including 24 hours after that game of the team in question.

The competent bodies of FIBA responsible for the organisation of the *Competitions* mentioned under 5 and 6 above are requested to do their best to ensure that *Doping Control* tests are carried



out. This is very important in order to maintain the health of the *Players* as well as sports ethics in basketball.

FIBA as well as the national federations shall be informed of the results of the tests and hearings related to these regulations or the equivalent regulations of the national federations.

6.5 Out of Competition Testing

1. FIBA will undertake *Out-of-Competition Doping Control* tests on *Players* registered for competitions of FIBA without giving prior notice to the *Players*, clubs or national federations. For their part, the national federations may also carry out such controls in accordance with their regulations or the domestic laws of the respective countries.
2. *Out-of-Competition Doping Control* tests include:
 - a) Those carried out at the clubs' training venues.
 - b) Those carried out on national teams preparing for official *Competitions* of FIBA (clinics, training camps, games and tournaments).
 - c) Those carried out outside the *Competitions*/venues listed in a) to b) above.

The controls will be conducted by FIBA sample-taking officers or agents of the World Anti-Doping Agency (WADA) or National Anti-Doping Organisations.

3. National federations and clubs are obliged to provide at FIBA's request:
 - a) The addresses of the venues where the national team *Players* are training.
 - b) The addresses of the training venues of those clubs participating in official *Competitions* of FIBA.
 - c) The names, private addresses and telephone numbers of the *Players*.

FIBA is authorised to communicate the information obtained in 3a), 3b) and 3c) above to WADA.

4. National federations that undertake *Out-of-Competition Doping Control* tests shall inform FIBA of the results thereof.
5. Sanctions to be imposed in the case of results having proved positive or being considered as positive (refusal to undergo *Testing*) can be found in 6.8 of these regulations.

6.6 Accredited laboratories

1. FIBA will submit all the *Samples* to be tested to laboratories accredited by WADA.
2. If the *Samples* cannot be analysed by a laboratory accredited by WADA because this would disrupt the time schedule of the competition or because the laboratory is too far away from the venue of the competition, then FIBA or its competent body shall take the appropriate decision in accordance with the local situation, after consultation with WADA.

6.7 Procedure for Doping Control

Testing shall be conducted in accordance with the procedure set out in Article 6.7. In the event of a lacuna, the *International Standards for Testing* shall apply.

The forms used for the *doping controls* are available on the FIBA website www.fiba.com, under "About FIBA", "Free Downloads" or under "Training", "Medical Corner".

6.7.1 Selection of *Players*

1. During *Competitions* each team shall be included in the *Doping Control* programme.
2. The *Players* shall be chosen by draw approximately **five (5) minutes prior to the end of the game**. The number of *Players* to be tested is generally two (2) from each team, but may be increased or decreased. During *Competitions*, a *Player* may be selected for several *Doping Control* tests.
3. The draw shall be carried out at the site of the competition. The team doctors will be advised that a *Doping Control* is to take place by the supervisory doctor representing the Medical Council of FIBA before the beginning of the game or, at the latest, at half-time.

Five (5) minutes before the end of the game, the supervisory doctor of FIBA, or other agent, will present the team doctor (or a team official) with a bag and detachable tokens, each corresponding to a player number. The team doctor (or a team official) will put the tokens in the bag and draw a number of tokens equal to the number of *Players* to be tested. Only the *Players* indicated on the official score sheet may be selected, except for those that were not in uniform from the beginning of the game.

4. If, during the game, a *Player* sustains a serious injury necessitating immediate hospitalisation, his number shall not be taken into consideration in the draw. If such a situation occurs after the draw, another draw shall be held to replace the *Player* in question who had been previously designated. In case of doubts regarding the seriousness of the injury, the supervisory doctor of FIBA shall rule on the matter.
5. If the team is not accompanied by a doctor, the coach, team official or physiotherapist may be advised of the draw.
6. Once the numbers have been drawn and the *Players* to be tested are known, the supervisory doctor of FIBA (or the *Doping Control* officer) shall give the team doctor the "Notification of a Doping Control Test".
7. At the end of the game, the team doctor shall hand the form "Notification of a Doping Control Test" to the selected *Player(s)*.
8. The team doctor will be shown the way to the *Doping Control* station. At some *Competitions*, the selected *Players* shall be accompanied by an escort directly to the *Doping Control* Station.
9. The supervisory doctor of FIBA (or the *Doping Control* officer) shall make a note of the name and number of the selected *Player(s)* and inform the persons responsible for escorting them to the control station.
10. The "Notification of a Doping Control Test" shall include:
 - a) The *Player's* name, his shirt number, the date and time.
 - b) The summons to report within fifteen (15) minutes of the end of the game to the *Doping Control* station with a document proving his identity (e.g. FIBA Identity Card, Player Licence, or other papers with a photograph proving identity).
 - c) Exceptions to the fifteen (15) minute rule will be announced (e.g. closing ceremony).
 - d) The consequences of refusing to submit to the *Doping Control* test by the deadline.



11. The "Notification of a Doping Control Test" shall be signed by:
 - a) The supervisory doctor of FIBA,
 - b) The *Doping Control* officer (head of the *Doping Control* station and/or the sample-taking doctor),
 - c) The *Player* confirming that he agrees to the test and to submit any appeal exclusively and to the exclusion of any state court to the Court of Arbitration for Sport in Lausanne, Switzerland, which rules in the last instance.

Once signed, this form shall be given to the supervisory doctor of FIBA.

12. One or more *Doping Control* tests may be required by the official representative of FIBA should one or more *Players* behave in an odd manner during the game. This decision shall be announced to the *Doping Control* officer and to the supervisory doctor of FIBA by the Secretary General of FIBA (or his representative).

The Secretary General of FIBA (or his representative) shall decide upon the criteria for the selection of *Players* (in the event of suspected doping in Olympic *Competitions*, the Medical Commission of the International Olympic Committee equally reserves the right to select other *Players* for *Testing*).

13. Each *Player* summoned for a *Doping Control* test, either after being selected at the draw or because of the official FIBA representative's suspicion of doping, shall undergo any medical examination deemed to be necessary by the supervisory doctor of FIBA, which shall be conducted by the supervisory doctor of FIBA.
14. At the *Doping Control* station the *Player* shall write on the "Official Doping Control Report" all medicines and supplements taken in the seventy-two (72) hours prior to the collection of urine or other bodily fluids. Any medication administered by injection (corticosteroids and local anaesthetics) shall be mentioned on the "Declaration of Medicines taken prior to the Doping Control" (pink form).

Doctors prescribing medications shall be familiar with the list of *Prohibited Substances*.

15. The collection of urine *Samples* (or any other bodily fluids, e.g. blood, saliva, sweat) shall be obligatory in all cases and shall be fully completed.
16. If the *Player* does not appear at the *Doping Control* station within fifteen (15) minutes of the end of the game at the latest (save for the exception under 10 c) above), this fact shall be recorded on the "Notification of a Doping Control Test", and he shall be subject to sanctions by FIBA. In this case another *Player* from the same team shall be selected by draw.

6.7.2 Collection of urine *Samples*

1. The *Doping Control* officer takes full responsibility for carrying out the test. He verifies the identity of the *Player*.
2. The selected *Players* shall remain in the waiting room of the *Doping Control* station until the *Samples* are taken. The organisers shall provide a comfortable, well-lit room with a table, chairs and armchairs for relaxation, cool drinks, a shower and closed toilets.

3. In addition to the *Players* and the accompanying team doctor (or the person replacing the team doctor), the following persons shall be admitted to the *Doping Control* station:
 - a) The *Doping Control* officer, if possible a doctor,
 - b) One or two assistants to fill in the forms,
 - c) The supervisory doctor of FIBA,
 - d) The FIBA commissioner (optional),
 - e) An interpreter (if necessary),
 - f) The *Independent Observer*.

The *Doping Control* officer is in charge of taking the urine *Samples*.

Taking photographs inside the *Doping Control* station is not allowed.

4. The containers used for collecting the *Samples* and the two bottles facilitating their transport shall be in sealed packages, in compliance with the *WADA International Standard for Testing*.
5. Each *Player* shall choose a container for the collection of the urine and two (2) bottles bearing a code number which shall be used to identify the *Samples*. This code number shall be noted on the "Official Doping Control Report". In the case that there is no code number on the bottles, the *Player* shall choose his own.
6. Each *Player* shall urinate into the container in a private room, under the supervision of the *Doping Control* officer or delegated alternate.

The amount of urine to be collected will be determined according to the requirements of the laboratory carrying out the analysis (75 ml minimum).

7. At each attempt the *Player* shall remain under the strict supervision of the *Doping Control* officer until the total amount of urine required has been collected. He shall be allowed to have cool non-alcoholic drinks - carbonated or non-carbonated - which contain no *Prohibited Substances*. These drinks shall be available to the *Players* in unlimited amounts in the waiting room of the *Doping Control* station. They should be provided in sealed cans or glass bottles. The *Player* should not accept any drinks presented in open containers.
8. In front of the *Doping Control* officer, the *Player* shall pour the collected urine from the container into two (2) bottles chosen by the *Player*, 50 ml into the bottle A and 25 ml into the bottle B.
9. Immediately after that, the *Doping Control* officer shall measure the pH value and urine specific gravity using the last drops of urine left in the container. The result shall be indicated on the "Official Doping Control Report".
10. The "Official Doping Control Report" shall include:
 - a) The *Player's* name, his shirt number and his nationality.
 - b) Indication of the game, date and time of sample taking.
 - c) Data concerning the sample taking.



d) The signatures of the supervisory doctor of FIBA, the *Doping Control* officer, the team doctor and the *Player*.

e) Data concerning the *Samples* sent to the laboratory (code number of bottles A and B, etc.).

There shall be four (4) copies:

a) One (1) **white** copy to be returned to the supervisory doctor of FIBA in a sealed envelope,

b) One (1) **blue** copy to be returned to the *Doping Control* officer and put in a sealed envelope. This envelope may only be opened at the request of the supervisory doctor of FIBA,

c) One (1) **green** copy to be given to the team doctor or to the *Player* if the doctor is not present,

d) One (1) **pink** copy to be sent to the laboratory. The duplicate shall not contain the *Player's* identity, nor data concerning the sample taking. It should be verified that the code number(s) is (are) clearly legible and correctly transcribed on the doping report forms.

11. Once the collected sample has been divided between the two bottles, the *Player* shall close the bottles and seal them hermetically. The *Player* and the *Doping Control* officer shall then ensure that the code number on the bottles and the code number noted on the "Official Doping Control Report" are identical.

12. The *Player* and the team doctor (or the accompanying person) shall verify that the bottles are properly sealed and that the code number on the two bottles corresponds to the number noted on the "Official Doping Control Report". The *Player* shall confirm on the "Official Doping Control Report" that the doping control has been properly carried out and shall be invited to note any comments.

13. The bottles shall be marked to distinguish between the *Samples* for analysis (A) and control analysis (B).

14. The *Doping Control* officer shall put the forms "Notification of a Doping Control Test", "Official Doping Control Report", and "Transportation of the Samples" (in accordance with point 16 below), in an envelope which he shall send to the Secretariat of FIBA or hand to the supervisory doctor of FIBA.

He shall keep the blue duplicate in a sealed envelope.

15. The *Samples* A and B taken from each *Player* shall be duly kept until transportation to the laboratory.

16. In order to ensure the chain of custody of the transportation of the *Samples*, the *Doping Control* officer shall verify that the shipment packaging (e.g. box, bag, case) to be sent to the laboratory has seals, codes or adhesive tapes for security purposes.

He shall complete the form, "Transportation of the Samples", indicating the security method used on the packaging (code number of the seals or adhesive security tapes used).

The *Doping Control* officer shall hand the shipment packaging to the person authorised to transport the sample to the laboratory, send it to the laboratory by transportation company, or take it to the laboratory personally.

The shipment packaging shall include a copy of the form "Transportation of the Samples" and the pink copy of the "Official Doping Control Report" for the laboratory with all details

concerning the *Samples* to be analysed. The *Samples* shall only be identified by their code number since the *Player's* name is not written on the pink copy of the "Official Doping Control Report".

The WADA-accredited laboratory must confirm on receipt of the *Samples* that the shipment packaging has not been opened. They must return the form "Transportation of the Samples" to the Secretariat of FIBA, stamped, dated and duly signed acknowledging receipt of the sample undamaged and intact, and noting if the packaging has been tampered with, should the case arise.

6.7.3 Analysis of *Samples*

1. The analysis of sample A shall take place at the laboratory as soon as possible.
2. Sample B shall be kept in a refrigerator, access to which shall be denied to everyone but the person in charge of the laboratory.
3. Free access to the laboratory shall be given to the FIBA officials, the officer of the *Doping Control* station and laboratory staff.
4. If and when a hearing is organised in connection with the application of sanctions and involving the national federations, clubs or players, FIBA shall be authorised to make the organisation of such hearing dependent upon the parties paying to FIBA reasonable administrative costs.

6.7.4 Transmission of results

6.7.4.1 During *Competitions* over a longer period

1. In the event of an adverse analytical finding (sample A), the head of the laboratory shall immediately notify the supervisory doctor of FIBA and WADA, informing them of the code number of the *Player*. The supervisory doctor of FIBA shall conduct a review to determine whether (a) an applicable *TUE* has been granted, or (b) there is any apparent departure from the *International Standard for Testing* or laboratory analysis that undermines the validity of the *Adverse Analytical Finding*. The actual identity of the *Player* shall be disclosed by the supervisory doctor of FIBA who shall reveal the name of the *Player* corresponding to the code number on the "Official Doping Control Report" to the FIBA Secretary General or his representative.
2. The Secretary General of FIBA (or his representative) shall then inform the head of the delegation of the team of which the *Player* tested positive.

6.7.4.2 Following a control at a single game

1. In the event of an adverse analytical finding (sample A), the Secretariat of FIBA shall be informed at the FIBA headquarters of the code number of the *Player* and shall discover his identity by consulting the "Official Doping Control Report".
2. The *Player*, the President of his club and the Secretary General of the national federation shall then be informed of the adverse analytical finding in writing.



6.7.5 Second analysis

1. In the event of an adverse analytical finding, the head of the delegation of the team and/or the *Player* in question, after receiving the communication, shall have the right to request, at the costs of the requesting party, a second analysis using bottle B, such request to be made within ten (10) days of the receipt of the communication. This analysis shall be carried out as soon as possible after the announcement of the adverse analytical finding. The head of the delegation shall be informed of the time of the analysis by the Secretary General of FIBA (or his representative).

Failure by the head of the delegation of the team and/or the *Player* to request within the ten (10) day deadline a second analysis, shall be deemed to be a waiver of such second analysis.

2. The analysis of sample B shall be carried out at the same laboratory, in the presence of one (1) representative of FIBA (optional), by different people from those who carried out the analysis of bottle A.

One (1) representative of the team in question and/or the *Player* himself or his representative has/have the right to be present. They shall witness the opening of bottle B and its identification.

3. The results shall be recorded on the pink copy of the "Official Doping Control Report".
4. The Secretary General of FIBA and WADA (or their representatives) shall be informed immediately of the results of this second analysis. The decisions on the application of sanctions shall be in accordance with 6.8.

6.8 Sanctions

6.8.1 General provisions

6.8.1.1 Provisional suspension

If there is an *Adverse Analytical Finding* with respect to a *Player* (A-sample), the *Player* in question shall be suspended immediately. This suspension shall be communicated to the *Player* in writing, to the representative of the national federation or club to which the *Player* belongs and to WADA, by a representative of FIBA.

6.8.1.2 Games results

If a *Player* has been found to have committed an anti-doping rule violation during a *Competition*, the result of the game shall remain valid. However, in such a case, the *Player* in question shall forfeit any medals and prizes.

If more than one team member is found to have committed an anti-doping rule violation during a *competition*, the team may be subject to disqualification or other disciplinary action. In case of a disqualification, the team shall not be allowed to finish the *competition* and shall lose the game by forfeit, as well as the games that have already been played. Where more than one team member has been notified of a possible anti-doping rule violation in connection with a *competition*, the team shall be subject to *Target Testing* for the entire *competition*.

6.8.2 Suspension and banning

6.8.2.1 *Imposition of Ineligibility for Prohibited Substances and Prohibited Methods*

Except for the specified substances identified in 6.8.2.2, the period of *Ineligibility* imposed for a violation of 6.2.1.1 (presence of *Prohibited Substance* or its *Metabolites* or *Markers*), 6.2.1.2 (*Use* or attempted *Use of Prohibited Substance* or *Prohibited Method*), 6.2.1.3 (refusing or failing to submit to sample collection) or 6.2.1.5 (*Tampering with Doping Control*) and 6.2.1.6 (*Possession of Prohibited Substances and Methods*) shall be:

First violation: two (2) years' *Ineligibility*

Second violation: lifetime *Ineligibility*

However, the *Player* or other *Person* shall have the opportunity in each case, before a period of *Ineligibility* is imposed, to establish the basis for eliminating or reducing this sanction as provided in Article 6.8.2.4.

6.8.2.2 *Specified Substances*

The *Prohibited List* may identify specified substances which are particularly susceptible to unintentional anti-doping rules violations because of their general availability in medicinal products or which are less likely to be successfully abused as doping agents. Where a *Player* can establish that the use of such a specified substance was not intended to enhance sport performance, the period of *Ineligibility* shall be:

First violation: at a minimum, a warning and reprimand and no period of *Ineligibility* from future *Events*, and at a maximum one (1) year's *Ineligibility*

Second violation: two (2) years' *Ineligibility*

Third violation: lifetime *Ineligibility*.

However, the *Player* or other *Person* shall have the opportunity in each case, before a period of *Ineligibility* is imposed, to establish the basis for eliminating or reducing (in the case of a second or third violation) this sanction as provided in Article 6.8.2.4.

6.8.2.3 *Ineligibility for Other Anti-Doping Rule Violations*

For violations of 6.2.1.7 (*Trafficking*) or 6.2.1.8 (administration or attempted administration of *Prohibited Substance* or *Prohibited Methods*), the period of *Ineligibility* imposed shall be a minimum of four (4) years up to lifetime *Ineligibility*. An anti-doping rule violation involving a *Minor* shall be considered a particularly serious violation, and, if committed by *Player Support Personnel* for violations other than specified substances referenced in 6.8.2.2, shall result in lifetime *Ineligibility* for such *Player Support Personnel*. In addition, violations of such articles which also violate non-sporting laws and regulations, may be reported to the competent administrative, professional or judicial authorities.

For violations of 6.2.1.4 (whereabouts violation or missed test), the period of *Ineligibility* shall be at a minimum 3 months and at a maximum 2 years.



6.8.2.4 Elimination or Reduction of Period of Ineligibility Based on Exceptional Circumstances

1. If the *Player* establishes in an individual case involving an anti-doping rule violation under 6.2.1.1 (presence of *Prohibited Substance* or its *Metabolites* or *Markers*) or *Use* of a *Prohibited Substance* or *Prohibited Methods* under 6.2.1.2 that he or she bears *No Fault or Negligence* for the violation, the otherwise applicable period of *Ineligibility* shall be eliminated. When a *Prohibited Substance* or its *Markers* or *Metabolites* is detected in a *Player's* specimen in violation of 6.2.1.1 (presence of *Prohibited Substance*), the *Player* must also establish how the *Prohibited Substance* entered his or her system in order to have the period of *Ineligibility* eliminated. In the event this article is applied and the period of *Ineligibility* otherwise applicable is eliminated, the anti-doping rule violation shall not be considered a violation for the limited purpose of determining the period of *Ineligibility* for multiple violations under Article 6.8.2.1, 6.8.2.2 and 6.8.2.6.
2. If a *Player* establishes in an individual case involving an anti-doping rule violation under 6.2.1.1 (presence of *Prohibited Substance* or its *Metabolites* or *Markers*), 6.2.1.2 (*Use* of a *Prohibited Substance* or *Prohibited Methods*), 6.2.1.3 (failing to submit to sample collection) or 6.2.1.8 (administration of a *Prohibited Substance* or *Prohibited Methods*) that he or she bears *No Significant Fault or Negligence*, then the period of *Ineligibility* may be reduced, but the reduced period of *Ineligibility* may not be less than one-half of the minimum period of *Ineligibility* otherwise applicable. If the otherwise applicable period of *Ineligibility* is a lifetime, the reduced period under this section may be no less than eight (8) years. When a *Prohibited Substance* or its *Markers* or *Metabolites* is detected in a *Player's* specimen in violation of 6.2.1.1 (presence of *Prohibited Substance*), the *Player* must also establish how the *Prohibited Substance* entered his or her system in order to have the period of *Ineligibility* reduced.

6.8.2.5 Player's Substantial Assistance in Discovering or Establishing Anti-Doping Rule Violations by Player Support Personnel and Others

The period of *Ineligibility* may also be reduced in an individual case where the *Player* has provided substantial assistance which results in discovering or establishing an anti-doping rule violation by another person involving *Possession* under 6.2.1.6 sub-paragraph 2 (*Possession* by *Player Support Personnel*), 6.2.1.7 (*Trafficking*), or 6.2.1.8 (administration to a *Player*). The reduced period of *Ineligibility* may not, however, be less than one-half of the minimum period of *Ineligibility* otherwise applicable. If the otherwise applicable period of *Ineligibility* is a lifetime, the reduced period under this section may be no less than eight (8) years.

6.8.2.6 Rules for Certain Potential Multiple Violations

1. For purposes of imposing sanctions under 6.8.2.1, 6.8.2.2 and 6.8.2.3, a second anti-doping rule violation may be considered for purposes of imposing sanctions only if it can be established that the *Player* or other person committed the second anti-doping rule violation after the *Player* or other person received notice, or after a reasonable attempt has been made to give notice, of the first anti-doping rule violation; if this cannot be established, the violations shall be

considered as one single first violation, and the sanction imposed shall be based on the violation that carries the more severe sanction.

2. Where a *Player*, based on the same *Doping Control*, is found to have committed an anti-doping rule violation involving both a specified substance under 6.8.2.2 and another *Prohibited Substance* or *Prohibited Methods*, the *Player* shall be considered to have committed a single anti-doping rule violation, but the sanction imposed shall be based on the *Prohibited Substance* or *Prohibited Methods* that carries the most severe sanction.
3. Where a *Player* is found to have committed two separate anti-doping rule violations, one involving a specified substance governed by the sanctions set forth in 6.8.2.2 (specified substances) and the other involving a *Prohibited Substance* or *Prohibited Methods* governed by the sanctions set forth in 6.8.2.1, the period of *Ineligibility* imposed for the second offence shall be at a minimum two years' *Ineligibility* and at a maximum three years' *Ineligibility*. Any *Player* found to have committed a third anti-doping rule violation involving any combination of specified substances under 6.8.2.2 and any other anti-doping rule violation under 6.8.2.1 shall receive a sanction of lifetime *Ineligibility*.

6.8.2.7 Commencement of Ineligibility Period

The period of *Ineligibility* shall start on the date of the hearing decision providing for *Ineligibility* or, if the hearing is waived, on the date *Ineligibility* is accepted or otherwise imposed. Any period of *Provisional Suspension* (whether imposed or voluntarily accepted) shall be credited against the total period of *Ineligibility* to be served. Where required by fairness, such as delays in the hearing process or other aspects of *Doping Control* not attributable to the *Player*, the body imposing the sanction may start the period of *Ineligibility* at an earlier date commencing as early as the date of sample collection. On the other hand, the body imposing the sanction may bear in mind the effect the sanction will have on the implicated *Player's* ability to participate in his team's official *Competitions*. By way of example, the body in charge may decide that a sanction for an *Anti-Doping Rule Violation* which occurred during the off-season shall not begin until the beginning of the following season.

6.8.2.8 Status During Ineligibility

No person who has been declared ineligible may, during the period of *Ineligibility*, participate in any capacity in a competition or activity other than authorised anti-doping education or rehabilitation programmes. In addition, for any anti-doping rule violation not involving specified substances described in 6.8.2.2, some or all sport-related financial support or other sport-related benefits received by such person will be withheld by FIBA. A person subject to a period of *Ineligibility* longer than four years may, after completing four years of the period of *Ineligibility*, participate in local sport events, but only so long as the local sport event is not at a level that could otherwise qualify such person directly or indirectly to compete in (or accumulate points towards) a national championship or international *Event*.

6.8.2.9 Reinstatement Testing

As a condition to regaining eligibility at the end of a specified period of *Ineligibility*, a *Player* must, during any period of *Provisional Suspension* or *Ineligibility*, make him or herself available for *Out-of-Competition Testing* by any Anti-Doping Organisation having *Testing* jurisdiction, and must, if requested, provide current and accurate whereabouts information. If a *Player* subject to a period of *Ineligibility* retires from sport and is removed from *Out-of-Competition Testing* pools and later



seeks reinstatement, the *Player* shall not be eligible for reinstatement until the *Player* has notified relevant Anti-Doping Organisations and has been subject to *Out-of-Competition Testing* for a period of time equal to the period of *Ineligibility* remaining as of the date the *Player* had retired.

6.8.3 Procedure for the Application of Sanctions

1. The decision to impose a sanction shall be taken in the first instance as quickly as possible by a commission consisting of three (3) persons: the President of the FIBA Commission for Legal Matters or his representative, the President of the FIBA Medical Council or his representative and the Secretary General of FIBA or his representative. No quorum is required. The members of this commission shall be of a neutral nationality with regard to that of the *Player* in breach of the regulations. The commission is authorised to impose suspended sanctions.
2. The implicated *Player* has the right to be heard by the body of FIBA (FIBA commission as per 1. above) called to take the decision. If the player fails to reply within 7 days to the invitation to be heard, he shall be deemed to have waived his right to be heard.

If and when a hearing is organised in connection with this Article 6.8.3.2, FIBA shall be authorised to make the organisation of such hearing dependent upon the *Player* paying to FIBA reasonable administrative costs.

3. An appeal against the decision in the first instance may be lodged with the Appeals Commission of FIBA.
4. To introduce an appeal does not avert the execution of the penalty.
5. Any complaint against faulty laboratory proceedings is not valid unless these faulty proceedings had an influence on the results of the *Doping Control* tests.
6. A decision can be disclosed publicly after all procedures are complete and the decision is final. FIBA shall inform WADA after completion of each stage of the procedures.

6.8.4 Appeals

An Appeal against the decision of the Appeals Commission of FIBA may be lodged as follows, and the appealing party must pay a non-reimbursable fee of USD 4,000:

6.8.4.1 Decisions Subject to Appeal

Decisions made under these Regulations or rules adopted pursuant to these Regulations may be appealed as set forth below in Articles 6.8.4.2 through 6.8.4.4. Such decisions shall remain in effect while under appeal unless the appellate body orders otherwise. Before an appeal is commenced, any post-decision review provided in these Regulations must be exhausted.

6.8.4.2 Appeals from Decisions regarding Anti-Doping Rule Violations, Consequences, and Provisional Suspensions

A decision that an anti-doping rule violation was committed, a decision imposing *Consequences* for an anti-doping rule violation, a decision that no anti-doping rule violation was committed, a decision that an *Anti-Doping Organisation* lacks jurisdiction to rule on an alleged anti-doping rule violation or its *Consequences*, and a decision to impose a *Provisional Suspension* may be appealed as provided in this Article 6.8.4.2.

1. Appeals

Appeals may be lodged exclusively with the Court of Arbitration for Sport (“CAS”) in accordance with the provisions applicable before such court. Recourse to a civil court is not permitted.

2. Persons Entitled to Appeal

The following parties shall have the right to appeal to CAS: (a) the *Player* or other *Person* who is the subject of the decision being appealed; (b) the other party to the case in which the decision was rendered; (c) the relevant International Federation and any other *Anti-Doping Organisation* under whose rules a sanction could have been imposed; (d) the International Olympic Committee or International Paralympic Committee, as applicable, where the decision may have an effect in relation to the Olympic Games or Paralympic Games, including decision affecting eligibility for the Olympic Games or Paralympic Games; and (e) *WADA*.

Notwithstanding any other provision herein, the only *Person* that may appeal from a *Provisional Suspension* is the *Player* or other *Person* upon whom the *Provisional Suspension* is imposed.

6.8.4.3 Appeals from Decisions Granting or Denying a Therapeutic Use Exemption

Decisions by *WADA* reversing the grant or denial of a therapeutic use exemption may be appealed exclusively to CAS by the *Player* or the *Anti-Doping Organisation* whose decision was reversed. Decisions by *Anti-Doping Organisations* other than *WADA* denying therapeutic use exemptions that are not reversed by *WADA*, may be appealed to CAS.

6.8.4.4 Appeals from Decisions Imposing Consequences under Part Three of the WADA Code

With respect to *consequences* imposed under Part Three (Roles and Responsibilities) of the World Anti-Doping Code, the entity upon which *consequences* are imposed under Part Three of the Code shall have the right to appeal exclusively to CAS in accordance with the provisions applicable before such court.

6.8.5 Sanctions imposed by national federations or organisations outside FIBA and the application of FIBA sanctions by national federations

1. National federations shall inform the Secretariat of FIBA and WADA of any *Anti-Doping Rule Violation* of a *Player* and of any sanction that they impose on a *Player*. This information must be accompanied by a copy of the complete file on the *Doping Control* test and must be sent to FIBA as soon as the decision of the national federation becomes final.

National federations shall include in their regulations a provision granting to FIBA and WADA a right to appeal against any decision taken by the National Federations in doping matters. The time limit for such an appeal shall be specified along with the transmittal of the information set out in the preceding paragraph and shall not begin until such information has been received by FIBA and WADA.



2. The commission mentioned in 6.8.3 above may decide whether and to what extent a sanction shall be imposed for the purposes of FIBA *Competitions* on a player sanctioned by a national federation. In taking this decision, the reliability of the doping test and of the analysis of the sample and the substance detected shall be taken into account. The implicated *Player* has the right to be heard.
3. If a sanction imposed by a national federation is adopted by FIBA according to the preceding paragraph, all other national federations shall apply this sanction for the purposes of their national *Competitions*. To this end, FIBA shall inform all affiliated national federations of the sanction thus adopted.
4. In the event of sanctions being imposed by FIBA on the basis of *Doping Control* tests conducted according to these regulations, the national federations shall apply this sanction for the purposes of their national *Competitions*. To this end, FIBA shall inform all affiliated national federations of such sanctions.
5. In the event that a basketball *Player* is found guilty of doping during *Doping Control* tests conducted under the control of organisations outside FIBA and its affiliated national federations (e.g. state bodies, the IOC or other national or international sports organisations inside or outside the Olympic movement), the commission mentioned in 6.8.3 above shall decide whether and to what extent a sanction shall be imposed on the *Player* for the purposes of FIBA *Competitions*; in taking the decision the reliability of the doping test and of the analysis of the sample and the substance detected shall be taken into account. The implicated *Player* has the right to be heard. If a sanction is imposed, FIBA shall inform all affiliated national federations of the sanction thus imposed which shall be applied by them for the purposes of their national *Competitions*. Whatever the circumstances, a suspended *Player* may not use his licence (national or FIBA) for the duration of the sanction.
6. In the event of a positive doping test by a national federation, the commission mentioned in 6.8.3 above is authorised to impose a sanction according to these regulations if the national federation fails to do so, provided that in performing the Doping Control test the provisions of these regulations were followed and, in particular, that the analysis of the sample was performed by a WADA-accredited laboratory (see 6.6).
7. If and when a hearing is organised in connection with this Article 6.8.5 and involving the national federations, clubs or players, FIBA shall be authorised to make the organisation of such hearing dependent upon the parties paying to FIBA reasonable administrative costs.

6.8.6 Statute of Limitations

No action may be commenced against a Player or other Person for a violation of an anti-doping rule unless such action is commenced within eight (8) years from the date the violation occurred.

6.9 Supervisory doctor for *Doping Control*

1. For the Doping Control tests foreseen in 6.4 (*In-Competition Testing*) and 6.5 (*Out-of-Competition Testing*) above, FIBA shall appoint a supervisory doctor.
2. The members of the Medical Council of FIBA who may be delegated supervisory doctors for Doping Controls will receive an identity card from FIBA for supervisory doctors.

3. Travel and staying expenses, as well as allowances due to the supervisory doctor, will be paid as follows:

6.9.1 Controls *In-Competition*

6.9.1.1 Allowances

Single game:	USD 100
Championship with controls over more than three days:	USD 250
Plus, per each additional day (for controls and travel):	USD 75

Covered by:

- | | |
|------------------------------------|--|
| 1. For main official competitions | FIBA |
| 2. For other official competitions | As per the regulations for the competition in question |

6.9.1.2 Travel expenses covered by:

- | | |
|------------------------------------|--|
| 1. For main official competitions | FIBA |
| 2. For other official competitions | As per the regulations for the competition in question |

6.9.1.3 Staying expenses covered by:

- | | |
|------------------------------------|--|
| 1. For main official competitions | Organisers |
| 2. For other official competitions | As per the regulations for the competition in question |

6.9.1.4 Medical Equipment, Shipment and Laboratory Costs

All costs covered by FIBA.

6.9.2 Controls *Out-of-Competition* (decided by FIBA)

6.9.2.1 Allowances

These controls are considered as being the same as those at individual games	USD 100
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6.9.2.2 Travel and staying expenses:

On presentation of receipts	Reimbursed
Plus for meals and other expenses per day	USD 50
Allowance, travel and staying expenses covered by:	FIBA

6.9.2.3 Medical Equipment, Shipment and Laboratory Costs

All costs covered by FIBA.

Annex 2: Therapeutic Use of medication containing *Prohibited Substances*

Note: The TUE procedures as defined in this Annex may be subject to modifications based on any updates of the WADA guidelines.

1. Criteria for authorisation

A *Therapeutic Use Exemption (TUE)* may be granted to a Player permitting the use of a prohibited substance or prohibited method contained in the Prohibited List.

The *Therapeutic Use Exemption Committee (TUEC)*, as nominated by FIBA, will study a *TUE* application in accordance with the following criteria:

- The players likely to participate in competitions of FIBA (see the Regulations governing the Competitions of FIBA, section 1.1.), must submit, prior to a competition (national team or club) and within an acceptable timeframe, a *TUE* application so that all the points put forward can be studied. Urgent medical cases may, however, be taken in to consideration, even those for retrospective approval on condition that probative documents are provided.

A Player who holds a TUE issued by a NADO and who wants to participate in competitions of FIBA, requires a TUE by the FIBA TUEC. The FIBA TUEC shall take into account the TUE issued by the NADO:

- This arrangement, however, does not relate to the use of beta-2 agonists or glucocorticosteroids injected locally which would involve a separate procedure.
- The *TUE* is subject to a precise duration of approval, as defined by the *Therapeutic Use Exemption Committee (TUEC)*.
- The Players would experience a significant impairment to health if the prohibited substance or method were to be withheld in the course of treating an acute or chronic medical condition.
- The therapeutic use of the prohibited substance or prohibited method should not enhance performance in any way other than that attributable to the return to a normal state of health following the treatment of a legitimate medical condition. The use of prohibited substances or prohibited methods to increase physiologically lowered levels of endogenous hormones is not considered as acceptable treatment.
- There should be no reasonable therapeutic alternative to the use of the otherwise prohibited substance or prohibited method.

2. Confidentiality

The members of the *TUEC*, appointed medical or scientific experts and staff involved in the management or processing of the TUE must respect the regulations regarding confidentiality and conflict of interests. They must sign an acceptance clause to this effect.

3. The Therapeutic Use Exemption Committee (TUEC)

The FIBA *TUEC* shall consist of a minimum of four doctors including the President of the Medical Council. They shall be able to handle cases brought before the TUEC in English, French or Spanish.

The *TUEC* may request the advice of external medical or scientific experts.

4. TUE application process

A *TUE* will be studied following the receipt of a duly completed and legible application form in English, French and/or Spanish.

The standard TUE application form must include medical case history, results from laboratory tests, reports, examinations carried out (imaging studies, specialist tests etc.), certificates from medical specialists.

It must be stressed that there is no possibility of recourse to an authorised therapeutic alternative.

The dose, route and duration of administration of the used substance that is otherwise prohibited must be specified.

Decisions of the *TUEC* will be conveyed in writing by FIBA to the relevant Player by means of a certificate of approval.

WADA must receive without delay a copy of:

- the standard TUE application form,
- the TUE approval form, which will mention the substance being used, the dose and the duration of the treatment (permanent or temporary).

WADA, at the request of a player or on its own initiation, may review the granting or denial of any *TUE* by FIBA. If WADA determines that the granting or denial of a *TUE* did not comply with the *WADA International Standard for Therapeutic Use Exemptions*, in force at the time, then WADA may reverse that decision.

The Player or FIBA may appeal to the CAS against a decision by WADA which reverses an authorisation or a refusal for a *therapeutic use exemption*.

5. Criteria for granting a TUE

Specific cases:

A: Beta 2 agonists by inhalation

- Salbutamol – Formoterol – Salmeterol – Terbutaline.
- The use of these substances is permitted by inhalation only to prevent and/or treat asthma or bronchial constriction brought on by exercise.

Players wishing to obtain a *TUE* must complete on the basis of the information leaflet for asthmatics an abbreviated *TUE* application form (both documents available on www.fiba.com)



which must be sent to FIBA together with a personal medical file which confirms the player's illness.

The application must include:

- A spirometry with flow/volume loop after administration of a placebo and a beta-2 mimetic agent,
 - If the test is inconclusive, a provocation test using metacholine or carbachol,
 - If inconclusive, an exercise test on a cycle ergometer or a treadmill,
 - If inconclusive, an adenosine test,
 - If inconclusive a mannitol stress test

These tests must be performed under the supervision of a specialist in pneumology or allergology at a specialist facility (hospital, clinic or laboratory).

- A certificate signed by the specialist to include: diagnosis, treatment (name of the prescribed patent medicines, dose and duration)
- A doctor's prescription is not considered sufficient evidence. Illegible (fax) photocopies of documents are not valid and will be returned.

Decisions of the *TUEC* will be conveyed in writing by FIBA to the relevant player by means of a certificate of approval.

If the above evidence is submitted early enough prior to a competition, the player will not be subject to sanctions in the case of an adverse analytical finding.

B Glucocorticosteroids

- All glucocorticosteroids are prohibited when administered orally (swallowed), rectally, intravenously or intramuscularly. Their use requires a standard *TUE* to be approved (or not) by the FIBA *TUE* Committee.
- Except for the routes of administration mentioned under point below, all other routes of administration require an abbreviated *TUE*.
Example :
 - Subcutaneous injections in articular or ligament areas
 - aerosols

The abbreviated *TUE* application is granted a priori upon receipt by FIBA of the player's application, on the condition that the abbreviated *TUE* application form has been correctly filled in.

Incomplete forms will be returned to the applicant.

- Preparations containing corticosteroids for local use in the case of disorders such as :
 - dermatological (creams, lotions, ointments, gels)
 - nasal (drops, spray)
 - aural/otic (drops)
 - buccal cavity (tablets)
 - ophthalmologic (eye-lotions, creams)

are not prohibited and therefore do not require a *TUE*.

6. Forms

- Standard *TUE* application form
- Abbreviated *TUE* application form,
- Information leaflet for asthmatic *players*,
- Application form for *players* with diabetes,
- Notification of medicines used before a doping control,
- Certificate granting a *TUE* (for the player, copy to *WADA*).

The respective *TUE* application forms and the information leaflet for asthmatic players can be downloaded from the FIBA Website.

These application forms must include:

- The doctor's name, function and contact details
- The player's name, contact details and his team's name
- Details of the local injection to include:
 - Name of the substance,
 - Diagnosis,
 - Date and dose,
 - Site of injection,
 - Doctor's and player's signature.

Annex 3: Statutory obligations for organisers in doping control matters

At FIBA Official Competitions during which **doping controls** are carried out, the following is necessary:

- Special "doping control / contrôle de dopage" badges for general distribution to *Players*, doctors, staff and accompanying persons.
- Seats close to the team benches for those involved in the doping control tests.
- A security guard to screen the entrance to the doping control station.
- A sample-taking officer (if possible a doctor from the organisation or agency conducting the controls in the host country) of the same sex as the *Players* selected for the control. The Supervisory Doctor of FIBA present will monitor the correct procedure.
- Details of the procedure to follow when taking *Samples* which can be found on the FIBA doping control forms ("Official Doping Control Report"). Should local sample-taking doctors insist on using their own forms, they should be asked to complete both sets of forms.
- One staff member for administrative work (completing the forms), although the sample-taking doctor can also do this.
- Transport to the hotel/guesthouse for the *Players* and doctors (team doctor, FIBA Supervisory Doctor) after the *Samples* have been taken. It can sometimes take hours to obtain the amount of urine necessary for analysis.
- A room for sample-taking, which complies with the description in the following table.
- Transport of the bottles to the laboratory, in accordance with the statutory conditions (chain of custody).

THE DOPING CONTROL STATION

The doping control station must be in the hall in which the competition is being held and should not be used for any other purpose (storage, sick room, office, toilets, etc.).

A "doping control/contrôle de dopage" sign must be hung on the door.

"Doping control/contrôle de dopage" signs must be posted in the corridors leading to the doping control station.

The room must be able to accommodate at least 10 people (players, team doctor, FIBA doctor, sample-taking staff and occasionally an interpreter).

The doping control station must have:

- A **waiting area** with comfortable chairs, a refrigerator containing drinks in cans or sealed glass bottles (mineral water, fizzy drinks, fruit juice).
- A **sample-taking area** with a writing desk, seats for the sample-taking doctor, the secretary, the selected player and his escort.
- A cupboard and/or a refrigerator for the samples, both preferably lockable.
- A table upon which to place the sample containers and the bottles marked A and B.
- A large rubbish bin.
- A sanitary area with a shower with hot and cold running water.
- Toilets with a front-facing mirror or a $\frac{3}{4}$ reflection at seat-level.
- Toilet paper.
- Soap.

Standard Doping Control Station

