**Checklist for Therapeutic Use Exemption (TUE) Application:

Musculoskeletal Conditions

*Prohibited Substances: Glucocorticoids by oral, rectal or injectable routes (for narcotics or cannabis see Pain Management Checklist)*

This Checklist is to guide the athlete and their physician on the requirements for a TUE application that will allow the TUE Committee to assess whether the relevant [International Standard for Therapeutic Exemptions (ISTUE)](https://www.wada-ama.org/en/resources/world-anti-doping-code-and-international-standards/international-standard-therapeutic-use) criteria are met.

Please note that the completed TUE application form alone is not sufficient; supporting documents MUST be provided. A completed application and checklist do NOT guarantee the granting of a TUE*.* Conversely, in some situations a legitimate application may not include every element on the checklist.

Although prohibited in-competition only, *glucocorticoids* taken prior to the competition, and particularly during the washout period ([2022 List\_Explanatory Note](https://www.wada-ama.org/sites/default/files/resources/files/2022list_explanatory_note_final_en.pdf)), may result in a positive anti-doping test in-competition. Athletes may apply for TUE retroactively following a positive test.

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|[ ]  **TUE Application form** must include: |
|  |[ ]  All sections completed legibly |
|  |[ ]  All information submitted in English as per Sport Integrity Commission’s requirements |
|  |[ ]  A signature from the applying physician |
|  |[ ]  The athlete’s signature |
|[ ]  **Medical report** should include details of: |
|  |[ ]  Medical history: symptoms; first or recurrent manifestation including dates; course of disease including disease activity scores, if applicable |
|  |[ ]  Findings on examination |
|  |[ ]  Interpretation of symptoms, signs and test results by the physician |
|  |[ ]  Diagnosis |
|  |[ ]  Medication prescribed including dosage, frequency, administration route; (Note that glucocorticoids are prohibited by some routes and in-competition only) |
|  |[ ]  Response to other (non-prohibited) treatments, where applicable |
|  | [ ]  | Explain why glucocorticoid was the appropriate treatment considering the functional consequences of the injury or disease |
|[ ]  **Diagnostic test results**, if applicable, should include copies of: |
|  |[ ]  Imaging findings (X-ray, CT, ultrasound, MRI). For simple acute injuries (e.g., bursitis), it is recognized that imaging may not be necessary or readily available. |
|  |[ ]  Laboratory tests |

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Checklist for a TUE Application – Musculoskeletal conditions – Version 5.1 – October 2023