Checklist for Therapeutic Use Exemption (TUE) Application

Kidney Failure and Kidney Transplantation

Prohibited Substances: Glucocorticoids, EPO, diuretics, beta-blockers, hypoxia-inducible factor (HIF), prolyl-hydroxylase inhibitors

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)] 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.

☐ **TUE Application form** must include:

- All sections completed in legible handwriting
- All information submitted in [language(s) as per ADO preferences]
- A signature from the applying physician
- The Athlete’s signature

☐ **Medical report** should include details of:

- Medical history: age at onset of symptoms, symptoms, diagnostic workup by treating physician
- History of declining renal function and associated evidence that criteria for renal transplantation have been met from or signed by nephrologist/renal physician. This may come from the family physician if endorsed by a nephrologist
- Surgical report of the transplantation signed by surgeon and/or a nephrologist
- In case of graft impairment/dysfunction, evidence thereof from or signed by nephrologist/renal physician
- In case of cardiovascular complications: evidence of arterial hypertension or ischemic heart disease with therapeutic rationale for beta-blocker by treating physician/cardiologist
- Dosage, frequency, administration route for prohibited substance(s) prescribed (glucocorticoids, EPO, diuretics, beta-blockers, Hypoxia-inducible factor (HIF) prolyl-hydroxylase inhibitors).

☐ **Diagnostic test results** should include copies of:

- Laboratory tests documenting decline in renal function prior to transplantation; blood results testifying to anemia in case of EPO treatment
- Blood pressure readings; ECG, coronary CT, echocardiography, coronary angiography etc. as applicable in case of diuretic or beta-blocker treatment

☐ **Additional information** (if necessary)

- [As per ADO specifications]