

Summary of Audit Outcomes

Audit details

Signatory	Dates of Audit	Type of Audit	Scope of Audit
UZB-NADO National Antidoping Agency of Uzbekistan (Uzbekistan NADO)	5-7 February 2025	In-person ⊠ Virtual □ Desk □	Full Audit ⊠ Partial Audit □

Background of the audit

The audit was proposed by WADA's internal Compliance Taskforce and endorsed by the Compliance Review Committee (CRC) based on the monitoring process outlined in the International Standard for Code Compliance by Signatories (ISCCS), specifically Articles 7.2.1 and 7.2.2. WADA officially notified Uzbekistan NADO of the audit on 26 November 2024.

The Lead Auditor communicated with Uzbekistan NADO via email to provide initial details and a draft audit plan, and on 9 January 2025 held a teleconference to discuss the objectives of the audit, the audit plan, logistical details, and to confirm the availability of all Uzbekistan NADO staff and documentation during the period of the audit.

Methodology

To prepare for this audit, the audit team used data held by WADA, including ADAMS, Gracenote, and the legal department's database, as part of its review of Uzbekistan NADO's anti-doping program. Furthermore, WADA requested that Uzbekistan NADO provide a number of documents in advance of the audit.

From the discussions, interviews, observation of procedures and review of documents provided by Uzbekistan NADO during the audit, it was apparent that Uzbekistan NADO had prepared for the audit and was open in the discussions. Staff and documents were available to the audit team during the audit.



Table of findings

Date Updated:	3 September 2025			
Program Area	Critical Findings	High Priority Findings	General Findings	Total
	(completed and signed off)			
Governance	1 (0)	3 (3)	-	4 (3)
Testing	7 (4)	5 (0)	-	12 (4)
Intelligence & Investigations	-	2 (2)	-	2 (2)
Results Management	6 (5)	8 (4)	2 (0)	16 (9)
Therapeutic Use Exemptions	-	2 (2)	-	2 (2)
Education	-	-	-	-
Data Privacy	-	-	5 (0)	5 (0)
Total	14 (9)	20 (11)	7 (0)	41 (20)

Summary of findings¹

Critical findings

1. Following a review of various legal instruments in the Uzbekistan legal system, a number of non-conformities with the World Anti-Doping Code (Code) were identified. A list of required amendments was provided to the Uzbekistan NADO.

- 2. It was identified that there were errors and some missing data for Doping Control Forms (DCFs) entered into ADAMS and some duplicate athlete profiles requiring attention.
- 3. Although Uzbekistan NADO had completed a testing risk assessment, it did not meet the requirements of the International Standard for Testing and Investigations (ISTI), including, the seasonal nature of certain sports/disciplines and at what times of the year athletes benefit from certain substances.
- 4. The Test Distribution Plan (TDP) was not aligned with the risk assessment and there were examples of tests not allocated proportionally based upon the risk of the sport/discipline. In addition, certain athletes

¹ The following is a summary of the key findings of the audit as opposed to an exhaustive list of all findings. In respect of each finding, WADA required a specific corrective action to be undertaken in order to avoid similar issues in the future.



- were not prioritized within team sports as well as prior to the Paris Olympic and Paralympic Games. Insufficient tests were collected on RTP athletes and Testing Pool athletes.
- 5. Shortfalls were observed across various sports/disciplines with respect to the Technical Document for Sport Specific Analysis (TDSSA) as well as in relation to the effective utilization of the Athlete Biological Passport (ABP) program, including not collecting sufficient samples on Registered Testing Pool (RTP) athletes as required by the TDSSA.
- 6. Uzbekistan NADO's notice of charge and notice of an apparent anti-doping rule violation for non-analytical cases did not contain a number of the mandatory requirements as detailed in the International Standard for Results Management (ISRM). In all notices, there was also an absence of notifying the athlete that they can provide substantial assistance.
- 7. In general, results management cases exceeded the required timelines in the ISRM. Uzbekistan NADO did not conduct a proper and timely pursuit of whereabouts failures in accordance with the Code and ISRM, nor adequately monitor filing failures. In addition, the notice of a potential filing failure does not advise the athlete that in order to avoid a further filing failure they must file the missing whereabouts information by a deadline which must be within 48 hours.

High priority findings

- 1. Uzbekistan NADO did not publish a statistical report of their doping control activities as required in the Code.
- 2. No evidence was provided ensuring that Uzbekistan NADO staff sign confidentiality documentation to protect sensitive information.
- 3. A lack of coordination was observed with regard to Uzbekistan NADO's testing efforts, including provision of whereabouts information to other Anti-Doping Organizations (ADOs) with testing authority.
- 4. There was no evidence of Uzbekistan NADO using temperature data loggers for certain blood sample shipments.
- 5. Uzbekistan NADO does not notify athletes of their removal from its RTP in a timely manner when they cease to meet the criteria for inclusion, as required in the ISTI.
- 6. Uzbekistan NADO does not maintain records of education, training, skills and experience of its sample collection personnel as required by the ISTI.
- 7. In general, there were shortfalls identified in Uzbekistan NADO's intelligence policies. Similarly, procedures were not in place to ensure that automatic investigations are conducted if a protected person or more than one athlete from a team or group is found to have committed an anti-doping rule violation.
- 8. The systematic upload of decisions and whereabouts notices into ADAMS was not in place as detailed in the ISRM. In addition, rather than offer an athlete the right to an administrative review of a whereabouts decision, Uzbekistan NADO offer the opportunity to appeal the decision. Notifications to athletes do not contain the identity of hearing panel members nor the right to challenge the appointment



- of a panel member. No evidence was provided of conflict of interest declarations of the hearing panel members.
- 9. The publication of results management case outcomes, as required in the ISRM, did not contain all mandatory details, such as the specific anti-doping rule violation committed and the substance or method used.
- 10. The hearing panels do not include all mandatory requirements in their decisions as required in the Code and ISRM.
- 11. Uzbekistan NADO did not systematically upload all the required documentation into ADAMS regarding results management cases, such as notifications of AAFs, apparent anti-doping rule violations, notices of charge and decisions as required in the ISRM.
- 12. On a number of occasions, the Therapeutic Use Exemption Committee (TUEC) did not render its decision within 21-days as required by the International Standard for Therapeutic Use Exemptions (ISTUE). In addition, complete documentation to support an application was not always entered into ADAMS.

General findings

- 1. Prior to issuing a notice of charge, Uzbekistan NADO did not systematically check ADAMS or contact WADA to see whether prior anti-doping rule violations existed. In addition, staff was not allocated to conduct administrative reviews of its assessment of apparent whereabouts failures.
- 2. In the area of data privacy a number of findings were identified.

Conclusion

Uzbekistan NADO recorded a significant number of findings during its audit. Shortfalls were identified in the Uzbekistan legal system that will require amendments to current laws and regulations in place. Results management generated the most findings with 16, six of which are critical. In general, results management processes are not dealt with promptly and the various notifications, decisions (including publication) and procedures for uploading information into ADAMS require updating to be in line with the ISRM. Testing also recorded 12 findings with seven critical and requiring urgent attention. The testing risk assessment required updating in order to improve the TDP, as well as corrections to improve TDSSA compliance and RTP management.