



WORLD ANTI-DOPING AGENCY

INDEPENDENT OBSERVER'S REPORT

2002 World Basketball Championships - Men

29th August – 8th September 2002

(Indianapolis - USA)

TABLE OF CONTENTS

I) Background

II) Independent Observer Team

III) Training

IV) Scope of Observations:

1. Doping Control Facilities

➤ **Conseco Fieldhouse**

➤ **RCA Dome**

2. Doping Control Equipment

3. Doping Control Personnel

4. Test Distribution Planning

5. Selection of Athletes

6. Athlete Notification/Chaperoning

7. Sample Collection Process

8. Chain of Custody

9. Results Management

V) Conclusion

VI) Recommendations

I. BACKGROUND

A WADA Independent Observer Team attended the 2002 World Basketball Championships - Men in Indianapolis, USA from August 29 – September 8, 2002. The Independent Observer team observed testing during the qualification rounds and final games. All doping controls were conducted in accordance with FIBA rules and regulations

The Independent Observer Program exists to help ensure fair and impartial doping control procedures and to promote an open and transparent doping control process. Achieving this objective leads to both improvements in current doping control policies and procedures and to increased athlete and public confidence in the sport system.

The primary role of the Independent Observer Team is to observe and to report on all facets of the doping control operation in an objective and unbiased manner.

II. INDEPENDENT OBSERVER TEAM

Prof.	Eduardo Henrique De Rose (Chair), PASO Medical Commission, Brazil
Mr.	Paul Melia, Canadian Centre for Ethics in Sport, Canada
Mr.	Petter Riiser, Norwegian Olympic Committee, Norway
Ms.	Jennifer Ebermann, Manager WADA Independent Observer Program, Germany

III. TRAINING

All members of the Independent Observer Team participated in a review and orientation of the IO Operations Manual.

A power point presentation was used to support the training. The training included a review of the purpose, roles and responsibilities, terms of reference and code of professional conduct.

IV. SCOPE OF OBSERVATIONS

The WADA Independent Observer Team observed and reviewed the following aspects of the doping control process:

1. Doping Control Facilities
2. Doping Control Equipment
3. Doping Control Personnel
4. Test Distribution Planning
5. Athlete Selection Process
6. Athlete Notification/Chaperoning
7. Sample Collection Procedures
8. Chain of Custody
9. Results Management

The Laboratory analysis was not observed, as all samples were sent for analysis to the IOC-accredited laboratory of the University of Los Angeles, California.

1. DOPING CONTROL FACILITIES

Conseco Fieldhouse

The doping control facilities at the Conseco Fieldhouse were adequate for effective and secure doping control. The doping station was located within 100 meters of the playing court on the way to the team locker room area.

Neither the public nor the media were given access to the area. As well, a security guard was placed outside the doping control station but did not control the access to the station. The actual role of the guard was not very clear.

The doping control station was situated in a large room, with a physical division between the waiting room and the processing room. The lavatory had mirrors to assist the witnessing of the collection process. A refrigerator was available in the station for the beverages but it was not used to store the samples.

RCA Dome

The doping control facilities in the RCA Dome were more spacious, and were also located in the locker room area, 150 meters from the playing court. The facilities were situated in a large room, with three lavatories, but without a division between the waiting room and the processing room. A security guard was also placed in front of the doping control area but did not restrict access. Here as well the actual role of the guard was not very clear.

Television was provided, but no reading materials or education videos in either of the facilities.

Beverages were also provided for the athletes. The selection included some caffeinated beverages (diet Pepsi). No alcoholic beverages were available in the doping control station.

2. DOPING CONTROL EQUIPMENT

The IOC-approved Berlinger sample collection equipment was used for the event. Most athletes were familiar with the equipment and confident with its security.

Two (2) separate Doping Control forms were used by FIBA: an Athlete Notification form and an Athlete Doping Control form. A USADA (United States Anti-doping Agency) form had to be used for partial samples because FIBA did not provide a special form for that situation.

Versapak transport bags with security numbered plastic seals were used to send the samples to the doping control laboratory. The samples were placed in these bags until the time of transportation to the laboratory. No special security measures have been taken concerning these bags.

3. DOPING CONTROL PERSONNEL

Doping control was conducted under the auspices of the FIBA Medical Commission. The Chair of the FIBA Medical Commission, Dr. Jacques Huguet, oversaw and ran the doping control operations, with assistance when required of Dr. Andrew Pipe, member of the FIBA Medical Commission. USADA was responsible for doping control on behalf of the Organizing Committee. Both teams worked well together and were extremely cooperative with the WADA Independent Observer Team.

Chaperones, witnesses, doping control officers (DCOs) and security personnel were sufficient for the size of the event.

As the number of tests conducted was relatively low, only two (2) DCOs were used in both stadiums. Chaperones and witnesses were adequately briefed by the DCO'S on their roles prior to the event.

Both facilities used a USADA Site Roster form at the entrance and the time of checking in and out for athletes, representatives and observers was duly controlled.

4. TEST DISTRIBUTION PLANNING

A total of 36 doping controls were performed, with 16 conducted in the first three days and 20 conducted in the last four days of the Championships. No doping controls were performed during the four middle days of the Championships

Athletes from all participating countries were tested. Given that 192 athletes played in the Championships, from 16 participating countries, the number of players tested represented around 18% of the total field.

From the total number of controls, three were adverse analytical findings, two Salbutamol cases and one Nandrolone. All cases were treated in accordance with the FIBA rules and the Olympic Movement Anti-doping Code.

5. SELECTION OF ATHLETES

The selection process of athletes was conducted at random, in an unpredictable draw. The selection process was carried out five minutes before the end of each game as provided in the FIBA regulations.

The Chair of the FIBA Medical Commission or his representative, accompanied by an official from the Organizing Committee, approached each bench and asked the respective team doctor to select numbered balls coinciding with each player's uniform number, from a small bag, without being able to see the numbers that were selected until after each ball was removed from the bag.

A ball was drawn and the number was matched to the player's name on the team roster list, which was in turn then verified by the team doctor. The same process was then repeated at the next team bench. One player from each team was selected for doping control on all occasions.

6. ATHLETE NOTIFICATION/CHAPERONING

A chaperone informed the players of their selection for doping control after the game, but in most of the cases, the notification form was only signed later in the process. The players in general were chaperoned following notification. However, in a few cases, the players went to their locker room and the chaperones were not allowed to accompany them, which nevertheless is in agreement with the rules of FIBA. All players selected reported to the doping control station within the FIBA limit of 15 minutes after the game.

7. SAMPLE COLLECTION PROCESS

The following summarizes the sample collection process:

- Four doping control officers, lead by Ms. Karen Matters from USADA with Dr. James Pohlman as senior doping control officer, carried out the sample collection process.
- Almost all athletes were fluent in English, so language was not a barrier to clear communication.
- The athletes were given a choice of equipment to use.
- There were only two athletes tested per game,
- The athletes filled out a separate doping control form in the station.
- A proper description of the sample collection procedure was always provided by the DCOs to the athlete.
- The respective team physicians or the physical therapist always accompanied the athletes.
- Density of the urine was read with refractometers and pH was assessed with pH strips.
- A partial sample kit from Berlinger, the Sydney version, was used in case of partial samples and the process was correctly conducted.

In general the sample collection process was good and the security of the samples were maintained.

8. CHAIN OF CUSTODY

- All samples collected were placed in the Versapak bags and sealed with a numbered security plastic seal.
- A FIBA "Transportation of Samples" form was used for each group/batch of samples sent to the laboratory.
- The samples in the bags were taken to a local hotel by the USADA doping control team and from there sent immediately by World Courier to the IOC-accredited laboratory in Los Angeles, California.
- Samples remained secure, although not in a refrigerated place, until being shipped to the Laboratory.

9. RESULTS MANAGEMENT

All samples were analyzed at the IOC-accredited laboratory in Los Angeles, California. Samples were not analyzed on a quick turnaround basis. Therefore, just 20 results were received during the event. The remaining results were sent to the WADA office, by fax, following the Championships.

V. CONCLUSION

The doping control process of the 2002 World Basketball Championships was run very well, in accordance with the Doping Rules, and samples collected were secure and protected athletes' rights.

The Executive Board of FIBA, Dr. Jacques Huguet, President of the FIBA Medical Commission, and Dr. Andrew Pipe, member of the FIBA MC, as well as the USADA Doping Control Team in place were most helpful and professional. The WADA IO Team thanks them for their assistance and cooperation.

FIBA also provided the Independent Observer Team with a copy of every doping control form used and the full results sent by the Doping Control Laboratory. The information regarding the use of medication was also provided.

The FIBA Medical Commission organized an excellent campaign for doping-free basketball. Videos on ten different idioms were presented on the videotron during the breaks in the matches and 14 of the 16 teams participating in the Championships used the logo of “no doping” on their uniforms.

VI. RECOMMENDATIONS

- The FIBA Medical Commission, in agreement with its Statutes and Doping Control Rules (Rule 6.5.1.3), notifies the team physician before the game whether doping control will be carried out during that specific game. This procedure provides prior information on the fact that doping control will be carried out, or, in its absence, that it will not be performed, which may create opportunities for manipulation of the athletes during the game. We recommend terminating this practice and changing the FIBA Rule 6.5.1.3 to reflect this change.
- During the process of athlete selection, the teams do not have the opportunity to verify which numbers are present in the bag prior to the draw. It would be more transparent if the numbers were placed in the bag in front of the physician or other representatives of the teams.

- The selected athlete should receive and sign the notification form directly from the DCO/chaperone and not through the team doctor. The FIBA rule (6.5.1.6 and 7) should be modified in accordance with ISDC to reflect this change.
- When notifying the athlete, the chaperone should inform him of his rights and responsibilities, and also ask him to sign the Notification form immediately. As well, the FIBA Doping Rule that allows the athlete to stay in the team locker room after the match, without being directly observed by the escort, should be terminated.
- The FIBA Doping Control form should be modified to follow the normal sequence of the doping control operation. The form should also include places for the density of the urine and partial samples to be recorded. A doping control form, consistent with the International Standard for Doping Control (ISDC), should be used by FIBA.
- A specific doping control pass should be provided to athletes, their representatives and doping control officials to allow restricted access to the doping control room. Because everyone in the area had similar accreditation, the security officers in front of the doors of the doping control station could not properly identify who should be allowed to enter in the doping control station and who should not.
- Reading materials and sample collection videos should be placed in the doping control station for the athletes and their representatives. In particular, sample collection videos would be most beneficial for athletes speaking different languages.
- Beverages provided in the doping control station should be of a non-caffeinated variety only.

- The number of samples should be enough to permit, at least, to test one game every evening, in each of the arenas, to avoid without any test at all in the Championship.
- The sample collection, if possible, should always be conducted in a room separate from the waiting area.
- The DCO/chaperone should always be inside the toilet facility with the athlete, and the door should be closed. The person who witnesses the provision of the sample should always sign the form indicating that the passing of the sample was done in accordance with the procedures.
- The samples, if possible, should always remain refrigerated until they are sent to the doping control laboratory.
- It is not an ideal situation to have a team physician in the Championships who is acting at the same time as a member of the FIBA Medical Commission. Other countries may consider that there is a conflict of interest in this situation.

Respectfully submitted by Prof. Eduardo Henrique De Rose.