

# **TABLE OF CONTENTS**

Introduction	3
Governance and Anti-Doping Policy	4
Anti-Doping Resources and Education	4
Out-of-Competition Testing	6
Test Distribution Planning for In-Competition Testing	7
Doping Control Procedures	8
The Doping Control Station	9
ADAMS	10
Therapeutic Use Exemption Process	10
Results Management	11
Transfer of knowledge	13
Appendix 1	14
Appendix 2	14
Annendix 3	14

#### **Preface**

The WADA Independent Observers Team for the 2010 Paralympic Winter Games is pleased to recognize the outstanding efforts of the International Paralympic Committee (IPC) and the Vancouver Organizing Committee for the 2010 Paralympic Games (VANOC) for implementing a comprehensive anti-doping program. The execution of the anti-doping program, thanks to the exceptional Doping Control workforce trained by VANOC, ensured that athletes and athlete support personnel were clear as to their rights and responsibilities relative to the doping control procedures and that those rights were respected throughout the doping control process.

The Independent Observer Team (IO Team) wishes to thank the IPC and VANOC for their excellent cooperation throughout the Paralympic Games (the Games). Meeting the mandate of our mission was facilitated through an open and collaborative process that allowed the collective expertise of the individuals involved in the oversight and management of the anti-doping program to enhance the operations and procedures. The IPC works with limited resources and limited staff and is to be commended for their commitment to running an effective anti-doping program at the event.

The fact that there was a 30% increase in the number of tests carried out during the 2010 Paralympic Games (when compared to the 2006 Paralympic Games) is illustrative of the significant increase in resources and expertise that combined to ensure that the rights of clean athletes were protected. Further, the anti-doping procedures were conducted at a level of proficiency and consistency not matched in previous Games.

#### Introduction

The IO Team, appointed by WADA, was operational from the date of the Opening Ceremony of the 2010 Paralympic Games, March 12, 2010, until and including the day of the Closing Ceremony, March 21, 2010. The IO Team also observed the hearing of April 22, 2010 as noted in the Results Management Section that follows.

The scope of the IO Teams' mandate included:

- Selection of competitors
- Notification of doping control
- Therapeutic Use Exemption Procedure
- Sample collection procedures
- Transport and chain of custody of samples; and
- Result management process including all hearings

The IO Team executed its mandate in a collaborative manner. The Chair of the IO Team met daily with the IPC Anti-Doping Committee (IPC ADC), IPC Management Team, and senior management of the VANOC Anti-Doping Team. A verbal report was given daily which summarized the observations and recommendations of the IO Team based on the work of the previous day. This verbal report was formalized and submitted in writing to the IPC following each meeting. The IPC and VANOC were consistently receptive to the feedback presented and were responsive to all recommendations.

All procedural issues raised by the IO Team were noted by the VANOC team. Based on conclusions reached through discussion, appropriate notice and communications were distributed to the Doping Control staff through daily communications with the Site Managers and, where necessary, directly to any Doping Control Personnel involved. This immediate response ensured that any inconsistencies noted did not perpetuate. In no instance did the IO Team observe a situation which it felt compromised the integrity of the sample collection process.

Issues of an operational or strategic nature, examples of which include potential modifications to the sample collection documentation for future Games and Test Distribution Planning, were discussed openly during these meetings. The IO Team made recommendations in these areas and the group was able to collectively analyze the concepts presented. As the outcomes of many of these recommendations were not intended to be implemented during the period of these Games, the IO Team cannot confirm the final outcomes. These recommendations are, however, summarized within the report and the IO Team is confident that the IPC will continue to give appropriate consideration to their effectiveness and feasibility.

What follows are further details summarizing the efforts of the IPC and VANOC in executing a comprehensive anti-doping program for the 2010 Paralympic Games. Within each functional area, this report serves to recapitulate our observations and, where appropriate, formalize recommendations to the IPC, future Games organizers, WADA and other relevant anti-doping stakeholders. Additionally, we hope that this summary identifies key areas within which the IPC must work with its National Paralympic Committees (NPCs), federations and athletes to ensure the delivery of necessary information and education in

order to improve compliance with the requirements of its ongoing anti-doping initiatives, not limited to their application in the context of the Paralympic Games.

The term modification is common when talking about adaptations made to the Doping Control Procedures when testing athletes with disabilities. Paralympic sport, and thus its anti-doping initiatives, require more than modifications to ensure the effectiveness of its program and to equally ensure that the rights and responsibilities of all athletes are complied with. Both VANOC and the IPC consistently demonstrated their commitment to maximize the effectiveness of their efforts through educational initiatives, the planning and execution of testing and in carrying out its results management responsibilities. The IPC is challenged not to simply modify standard anti-doping policy and procedure, but rather to factor in the complexity of its sport program, its unique classification system, the varied domestic anti-doping resources within the countries participating in these Games and the rights and responsibilities of its athletes to implement an anti-doping program that is effective in the context of the Paralympic Games.

When all is said and done one should not forget that the Paralympic Games are about sport and athletes, everyone involved willingly and graciously accepted the realities of doping control as a part of sporting competition.

# **Governance and Anti-Doping Policy**

In accordance with the provisions stipulated in the Vancouver 2010 Paralympic Anti-Doping Guide, the IPC was the sole anti-doping authority for all sports on the Vancouver 2010 Paralympic Games program during the period of the Games.

This Games period was defined as from the opening of the Paralympic Village on March 6, 2010, up to the Closing Ceremony on March 21, 2010.

A formal transfer of governance occurred between the World Curling Federation (WCF) and the IPC to formalize jurisdiction for the sport of Wheelchair Curling during the Games. The IPC is the International Federation for Skiing and Sledge Hockey, so there was effectively no transference of governance. The WCF did have a representative present to informally observe testing conducted in wheelchair curling.

### **Anti-Doping Resources and Education**

### Specific activities at the 2010 Paralympic Winter Games:

A "Paralympic Anti-Doping Guide" had been prepared by VANOC in collaboration with IPC and distributed to NPCs by VANOC four months before the Games. It included:

- detailed information on the governance of the Games anti-doping program, Prohibited Substances, Medication Use and TUEs, Whereabouts information, Use of Catheters, and the WADA Independent Observers Program;
- a "Helpful Information" document for Athletes, Athletes Support Personnel and NPCs section in the form of a Q&A: and
- a 18-slide PowerPoint Presentation.

All these documents were available on the IPC website in a subsection dedicated to content related to the Vancouver 2010 Games.

In addition, on 3 February 2010, a letter was sent to NPCs which included Whereabouts information provisions for the Games, Medication overview and TUEs, Results Management, application of the IPC Anti-Doping Code and a reminder on the strict liability principle, together with a detailed 3-page Information Sheet on the "Therapeutic Use Exemption (TUE) Management for the Vancouver 2010 Winter Paralympic Winter Games."

Also a NPC Team Physicians' Meeting was convened on 9 March 2010 where the Games anti-doping program was presented.

It was, however, up to NPCS to educate their participating athletes as the IPC had no direct contact with them. The IPC management made significant efforts to identify a contact person for anti-doping matters within NPCs to confirm that information was being delivered to the athletes and support personnel. However, the actual distribution was not fully confirmed.

Following the distribution of VANOC documents, most questions received by IPC were related to whereabouts and TUEs. The IPC specifically noted that they were challenged to explain procedural differences from those in place through the International Olympic Committee (IOC) for the Olympic Games (eg, whereabouts and TUE requirements). The IPC management did note a better awareness in countries where they were conscious of the involvement of the relevant National Anti-Doping Organization in supporting the delegation.

The IPC gave its full support to the WADA Outreach program operating out of the primary village in Whistler but also extended aspects of the program to various venues to ensure that all athletes had the opportunity to experience the program. This was reported by the IPC to be much appreciated by the athletes and their support personnel.

#### Anti-Doping Resources at Doping Control Stations (DCS):

Doping Control procedures posters were displayed in all waiting rooms and most of the processing rooms.

In most waiting rooms, there was a designated area with signage for Anti-Doping Resources, however the nature and amount of materials available varied from one DCS to another; from one single copy of the WADA Athlete Guide and/or the 2010 Prohibited List for consultation, to a small pile available for athletes to take away. In some cases, a few copies of the WADA newsletter on Vancouver 2010 were available as well as invitation cards to the WADA Outreach Booth at the Village.

There was no proactive approach from the DCS staff to invite athletes to read or take the documents when available, except in one case observed where one of the DCOs systematically distributed the WADA Outreach invitations and encouraged all athletes to visit the booth.

#### Related Recommendations:

The IPC should consider providing practical information and procedures earlier before the Games in order to reduce confusion if or when their requirements or procedures may differ from the IOC's procedures with regard to the Olympic Games. Specifically, these may include the IPC whereabouts information and TUE management.

The IO Team feels that there may be an opportunity for the IPC Anti-Doping Committee to take a proactive role in the education of NPCs during the Games. Ideas to be explored include a forum similar to the session for Team Physicians which could focus on issues and updates in anti-doping. Additionally, targeted meetings with NPCs are seen as an effective opportunity to deliver key messages regarding compliance and education. The Committee is already involved in casual support and dialogue when observing testing at various venues and these initiatives could expand their role if time and resources allowed.

The IPC should work with WADA and event organizers to ensure consistency in the information material provided at DCS and clarify the role of DCS staff in promoting and encouraging athletes to read / take them.

# **Out-of-Competition Testing**

Because the out-of-competition (OOC) testing constituted roughly 50% of the overall testing conducted during the Games, the IO Team felt it important to include comments on this component of anti-doping. While the OOC testing is outside the scope of the IO's mission, the IPC and VANOC did agree to provide the IO Team with a narrative overview of the activities and it is based on this that the IO Team has based its comment.

The OOC testing was conducted on a no-advance notice basis beginning on the day the Olympic Village opened and concluding on the day of the Opening Ceremony. During that time 182 urine and 41 blood samples were collected. This represents a significant undertaking by the IPC and VANOC from a planning and execution perspective. Most of the selections for this phase of testing were conducted well in advance of the Games and were directed by the IPC. The methodology was reasonably applied given the limited availability of historical and analytical testing data. The IPC was limited to conducting testing only at Paralympic Venues as the VANOC Sample Collection Personnel did not have jurisdiction to test outside theses venues and no alternatives were put into place. The IPC did not require individual athletes to file whereabouts; rather, it relied on delegation compliance with the requirements to provide complete information on the whereabouts of its athletes and complemented that with the available training information and intelligence gathered by the VANOC team. This system proved sufficient and allowed for the execution of the OOC testing in accordance with the pre-established goals.

### Related Recommendations:

WADA and the IPC should consider expanding the scope of the IO Teams' mission to include the out-of-competition testing program. This would include observation of OOC testing conducted in the days leading up to the Opening Ceremony, as well as during the period of the Games. As this testing is the first conducted by the sample collection personnel it would allow for earlier identification of any inconsistencies and recommendations applicable to the

sample collection procedures or personnel. Additionally, given the significant resources allocated to this phase of testing, the involvement of appropriate IO Team members could further enhance the targeted nature of this testing.

The IPC should secure services that would allow for testing athletes outside of Paralympic Venues. This could be accomplished through an expanded agreement with the organizers or through a separate agreement with the relevant National Anti-Doping Agency. While historically very few athletes have opted to stay outside the Paralympic Villages, it was noted that there is a trend whereby more athletes and delegations are securing their own accommodations and the IPC must ensure that these athletes are accessible for testing at any time.

The IPC should look to establish higher accountabilities to ensure full compliance with the whereabouts responsibilities delegated to the delegations themselves. Additionally, it must continue to monitor its position of not requiring individual athletes to provide whereabouts for the period of the Games to ensure it is not negatively impacting their ability to conduct a comprehensive OOC testing program.

The IPC should work to develop and obtain more relevant test history, analytical data, and intelligence to increase the sophistication and targeted nature of the OOC testing phase for further Games. Additionally, the OOC testing should not be an isolated component of its program, and ongoing testing should be targeted based on the testing, analytical and performance outcomes of the Games.

The IPC should consider further expansion of its OOC testing program to include additional targeted testing after competition begins. Information would suggest that the detection and deterrence of specific substances may be improved through such strategies. Increased intelligence and data will provide further support for targeted testing as well.

# **Test Distribution Planning for In-Competition Testing**

The IPC has a challenge in allocating its in-competition tests. The dominance of certain athletes within specific classifications can lead to over-testing if standard selection criteria are applied. Thus, the IPC has developed a practice of reviewing and modifying the selection criteria on a daily basis to go beyond simply selecting specific medalists and/or from a limited number of place finishers. Additionally, targeted selections were made when laboratory intelligence supported follow-up testing.

The IO Team accepts and agrees with the IPC's general approach and intent regarding ongoing modifications to the in-competition selection criteria. This is recognized as strength if executed effectively, but could create potential exposure for the IPC should the system become predictable or if external scrutiny requires a more public explanation.

### Related Recommendation:

The IO Team suggested that the IPC consider developing some general guidelines that can be followed in principle and which outline the considerations applied to developing or adjusting in-competition selection criteria. This would be useful to provide consistency to this approach at future Games and potentially within testing conducted under IF or NADO jurisdiction outside the Games. It is not the intention to hinder the flexibility of the

approach, but rather to validate it and allow future events to benefit from the considerations being applied and lessons learned in the context of these Games. It is further recommended that possible guidelines should include the utilization of analytical data in identifying opportunities for targeted follow-up testing. Such guidelines would also prepare the organizers to anticipate adjustments so that they can train and staff their workforce accordingly.

# **Doping Control Procedures**

The VANOC Sample Collection Personnel proved to be highly trained and highly proficient in the conduct of the sample collection procedures and the management of the doping control procedures in the field. VANOC made a multi-year commitment to ensure that they would operate with an experienced workforce of Doping Control Officers, Blood Collection Officers, Station and Field personnel and Notifying Chaperones. This also included Sample Collection Personnel from other Anti-Doping Agencies which contributed to the high-level proficiency of the volunteer workforce. In total they had a full time paid staff of 9 individuals and a volunteer workforce of 222.

Notification of the athletes occurred as soon as possible after the conclusion of competition. There was some confusion among notifying chaperones and athletes because the IPC requires athletes to report to the doping control station as soon as possible following notification. Because the IOC had specified a 60-minute reporting time for the Olympic Games, which was consistent with previous versions of the IST, many notifying chaperones continued to advise athletes of this specific reporting requirement. The IO Team did not observe any athlete abuse the reporting guidelines and sample collection personnel took appropriate measures to document any exceptions. Nonetheless, there was inconsistency in the notification and the explanation of reporting requirements because of the differing guidelines. The IPCs' procedures are consistent with the current IST.

VANOC was committed to ensuring that athletes understood their rights and responsibilities following notification of their selection for testing. To overcome any language barriers, Notifying Chaperones had cards which translated the athletes' rights and responsibilities into several languages. However, it was noted that despite efforts by the Notifying Chaperones to ensure understanding, most athletes who had been tested before (regardless of any language barriers) simply signed-off on the Notification Form without a true awareness for the information the chaperone was trying to explain. The Doping Control Officers made efforts to confirm athletes' understanding of their rights during the sample processing, but this was often time consuming and the athlete and their representatives were often suggesting that the DCO did not need to repeat the information.

The doping control procedures allowed for necessary modifications for testing athletes with a disability. The DCOs and Chaperones appeared to use appropriate judgment in determining the need for modifications and were trained to record all modifications on a Supplementary Report Form. The protocol did not call for the athlete to receive a copy of this form as part of their paperwork.

The Sample Collection Documentation itself proved challenging at times. The system for documentation and requirements for error-free records did seem to lead to the need for a high percentage of forms to be re-done. This was one contributing factor to the reality that the sample processing time was quite long for many athletes.

In a number of cases during the sample collection procedure, it was noted that some athletes hesitated or felt uncomfortable with the question on whether they would allow their sample to be used for anti-doping research. Some of them asked their representative, and if asked, DCOs could not give many details on laboratory/IPC policy on this matter (e.g. on how long the laboratory would keep the samples for research and/or detection purposes).

#### Related Recommendation:

The IPC should consider the requirements and procedures for recording modifications to verify the need for recording all modifications, identify possible means to streamline this process, and consider means to consolidate the recording of modifications such that a separate Supplementary Report Form would not be necessary in all cases and the information could potentially be included on the Doping Control Official Record itself.

All anti-doping organizations should consider all possible processing efficiencies when considering the tools available for testing and training Sample Collection Personnel (for example paperwork, collection equipment, the integration of technology and the doping control station layout and logistics) to identify opportunities to consolidate and streamline the sample collection procedures. Certainly, all modifications must be weighed against their potential to compromise the integrity of the samples collected.

All anti-doping organizations must ensure effective means to communicate athletes' rights and responsibilities which are applicable following their notification for testing. This is critical to minimize opportunities for inadvertent or unintentional non-compliance which could be deemed as a failure to comply. Additionally, communicating these rights and responsibilities must be done efficiently to avoid unnecessary delays or confusion during the doping control process.

The IPC should develop and provide better information regarding athletes' consent to research being conducted on their sample. This can be done as part of general athlete and support personnel information tools, and at future Games, by explaining clearly to the athletes the details of the laboratory policy and IPC agreement on this matter. It would be useful for Sample Collection Personnel to be able to display this information to the athletes in the Doping Control Station and/or at the time of the sample processing. Beyond that, there may be an opportunity to use ADAMS to record an athlete's consent (or not) which could apply to all of their tests which could eliminate this as a step in the sample collection process.

### The Doping Control Station

The size, location and accessibility of the Doping Control Stations were appropriate for the testing conducted for the Paralympic Games. It should be noted that securing the designated space and access for these stations was an area of great focus for the VANOC Team. They spent significant time working with venue personnel to ensure the necessary space was available to them and that these spaces were accessible and secure during the Games. These requirements were developed by VANOC as the technical guidelines developed by the IOC and IPC are not specific in these areas.

#### Related Recommendation:

The IPC should work with Games Organizers to provide specific requirements regarding space and access for doping control. Such requirements, specified up front, will eliminate the need for such intense negotiations between the Games anti-doping team and the venue staff and would also ensure greater consistency to ensure total space available, its proximity to the field of play, and its accessibility.

### **ADAMS**

The ADAMS database was key to the reporting and tracking of testing and results by the IPC, VANOC, the IO Team and the Laboratory. The functionality in ADAMS clearly proved to have great value in ensuring the efficiencies of reporting and data sharing. In particular, the laboratory entered additional analytical comment when appropriate which was very useful to provide additional intelligence to inform the need for follow-up or targeted testing. The ADAMS support team was responsive to requests for assistance from all relevant users. ADAMS was not utilized by the IPC for whereabouts during the period of the Games.

#### Related Recommendation:

Significant time was spent by the IO Team, the IPC and VANOC to develop customized reports within ADAMS. As the use of ADAMS is standard for the IPC in Paralympic Games, and increasingly for other Major Games Organizing Committees, it would be useful for the WADA ADAMS team to develop comprehensive reporting functionality and standard reporting templates for Major Games based on specific reports used for these Games. For example, because of limitations of the data that is available in the standard reporting functionality in ADAMS, the IO Team had to export data and manually combine fields from two separate ADAMS reports in order to view all relevant athlete test history and analytical data in one report. It would be useful if the ADAMS team could coordinate with the IPC and VANOC to evaluate the reporting functionality and assist in expanding functionality to develop standard reports that could be utilized consistently for Major Games.

## **Therapeutic Use Exemption Process**

According to the IPC Anti-Doping Code issued November 2009, all athletes competing at the Paralympic Games who sought a Therapeutic Use Exemption (TUE) were expected to have applied to their relevant Anti-Doping Organization (International Federation (IF) or National Anti-Doping Agency (NADO)) and these applications had to be processed and granted no later than March 5, 2010.

From the date of Opening of the Village (6 March), IPC was the sole anti-doping authority for all sports on the Games' program. All TUE Applications during the Games period were to be dealt with by the IPC Medical Committee (IPC MC).

During the Games, the IPC only considered TUE Applications for substances and/or methods used in an emergency situation or where the treatment of an acute medical condition was necessary. Seven such applications were made, considered by the IPC MC and six were subsequently granted in accordance with the IPC Anti-Doping Guide 2009. The other application was for a permitted substance and subsequently not accessed. One of these approved applications did not have the athlete's signature. The athlete received treatment

at the Village Polyclinic and left without the TUE form completed. A note stated that an attempt was to be made to later obtain the form signed.

The IPC recognized all TUEs issued from decisions by any Signatory of the World Anti-Doping Code (WADC) that had appropriate jurisdiction over the individual athlete (subject to compliance with the WADC International Standard for TUEs). The IPC is the IF for four of the five sports on the 2010 Winter Games Programme. The World Curling Federation (WCF) is the IF for wheelchair curling.

It was expected that athletes requiring TUEs would have done so prior to the Games. The number of athletes who actually had applied for and were granted TUEs were not ascertained by the IPC Medical Committee (MC) or IO Team since this information was not available. This is because most would have done so through their NADO or IF in the case of WCF and for athletes in the International Registered Testing Pool via the IPC. Those athletes on the IRTP are found on the IPCs website.

Thirteen TUE certificates were submitted as paper copies to the IPC MC. Among those were the TUEs granted by the WCF for the two athletes with AAFs. Both the IPC and IO Team had access to the TUE Module in ADAMS for all IPC athletes.

All copies of Doping Control Forms were inspected daily by the IPC MC. Declarations of substances were noted to determine if any were prohibited in competition. TUEs were checked via ADAMS and by review of paper copies of certificates to determine if any ADRV may have been recorded. None were noted.

#### Related Recommendations

The IPC should consider a policy whereby all countries would be required to use ADAMS for submission of TUEs for Paralympic Games. Alternatively, if the NPC does not use ADAMS, hard copies should be sent to the IPC before the Games with the date of submission stamped on the certificates.

The IPC should ensure that NPCs use ADAMS for input of information before and during the Games.

The IO Team should have access to all TUEs for the period of the Games, and specifically, in the case of the winter Games, the WCF TUEs.

All TUE forms should be completed in English or with attached translation.

NPCs should state if athletes had TUEs issued by NADOs if in national RTP, or IPC if in the International RTP.

Follow up education on TUE applications and use should start immediately after the Games and continue as a priority, rather than occurring just before the Games.

### **Results Management**

The results management of all Adverse Analytical Findings (AAF) was handled by the IPC staff and the IPC Anti-Doping Committee with relevant input from the IPC MC.

The points raised above with regard to the need for consistent and immediate access to all relevant TUEs bear repeating as the IPC did have to do additional work to confirm the status of TUEs.

There was one hearing conducted in the case of an AAF for which a curling athlete did not have a valid TUE. The IPC acted in accordance with their timelines to notify the athlete, his NPC and the WCF of the finding. The IPC utilized templates which are being used by the IPC for the sports under its governance, for the Notification of an Adverse Analytical Finding and Letter of Decision. These documents were delivered in person to the delegation.

Unfortunately there was confusion within the delegation regarding the implications of the notice and their obligation to provide public notice. Because the athlete was due to compete only hours after the notice, the NPC held an immediate press conference at the competition venue. This was not necessary and certainly created unfortunate media and public inquiry into a pending case. In accordance with the WADA Code Article 14.2.5, the IPC did comment after the hearing had concluded in order to correct and clarify misinformation which was circulating from press releases issued by the other parties to the hearing.

The IO Team was present with the IPC ADC throughout their review of the case and preparation of the letters of notification. The Chair of the IO Team was present for the initial hearing.

It did not seem that the athlete or his support personnel came sufficiently prepared for the hearing. The IPC ADC made special efforts during the hearing to ensure that the athlete and his support personnel fully understood the process and applicable rules. Because of confusion in interpreting the Letter of Decision, that athlete did complete a revised form during the hearing. The panel suspended its recommendation of sanction and requested that the athlete provide the panel with documentation regarding his medical history and prescriptions for the substances in question.

Following the conclusion of the initial hearing, the IO Team did recommend that the IPC send written confirmation of the status of the hearing, the athlete's obligations, the athlete's status relative to Games accreditation, and finally the timeline within which the athlete must respond to the panel to the athlete and his NPC. It was further recommended that the IPC include language clarifying the separate results management authority of the WCF as this was not clear from the hearing.

A subsequent hearing was convened on April 22, 2010 during which the athlete presented additional information which the IPC ADC considered as grounds for a reduction in sanction in accordance with Article 10.4 of the IPC rules. Upon consideration, the IPC ADC concluded that there was negligence on the part of the athlete, his doctor, his federation, his NADO and his NPC; but that the athlete had no intent to improve his performance through the use of the prescribed medication. The IPC ADC put forward a recommended sanction of 6 months for final confirmation by the IPC Governing Board. Pursuant to the IPC Anti-Doping Code (Article 10.2 and 10.4) the IPC Governing Board imposed a six-month period of ineligibility which is applied to all events sanctioned by the IPC. Within the decision the Governing Board noted the IPC's intent to address the NPC Sweden with the need for improved preparation and screening of medications within the delegation and to

address the NPC Sweden and WCF on the importance of pre-games testing and education on the national (NPC) and international (WCF) levels.

# Related Recommendation:

The IPC should continue their review and revisions to their templates for the IPC Notification of an Adverse Analytical Finding and the IPC Letter of Decision to address the points of confusion and ensure clarity.

The IPC should provide education to NPCs to advise them on models of best practice should they receive notice of an AAF to avoid confusion similar to what occurred during these Games and also to ensure they would be prepared in the case of a hearing. The anti-doping forum suggested above could be another opportunity for the delivery of such information.

It was evident from this case that the IPC and its member federations must continue to work with NPCs and NADOs to ensure that athletes and athlete support personnel are thoroughly reviewing ALL medications against the Prohibited List and to ensure that athletes are making the necessary TUE applications.

# Transfer of knowledge

It was notable to the IO Team that the VANOC Anti-Doping program staff and the IPC had collectively developed tremendous resources and gained invaluable experience during the planning and execution of the anti-doping efforts for these Games. While this IO report certainly intends to both validate their work and provide recommendations that can be considered and implemented, there is certainly practical and hands-on experience that could be gained by future organizers by finding an effective means to participate in the program. It was notable to the IO Team that the participation and presence of doping control staff for future Games was very minimal and the IO Team views this as a missed opportunity.

### Related Recommendation:

The IPC Anti-Doping Committee should work proactively to identify a means and support the appropriate and active participation of pertinent doping control staff for upcoming Games during the period of the Games to ensure a practical transfer of knowledge and experience.

### Appendix 1

# The Members of the IO Team Members were:

- Chair: Kate Mittelstadt (USA), Director of Anti-Doping Services, ANADO-ADS
- Françoise Dagouret (FRA), Manager, Doping-Free Sport Unit SportAccord/GAISF
- Dr Adrian Lorde (BAR), Chairman National Anti-Doping Commission of Barbados
- The Team was managed by Natalie Grenier (CAN) of WADA.

# Appendix 2

### Summary of testing for the 2010 Paralympics

Number of tests	Urine	Blood	Total
OOC:	182	41	223
In-Competition:	188	33	221
Total:	370	74	444

# Appendix 3

### **Summary of Adverse Analytical Findings**

	Samples	TUE applies	<i>ADRV</i>
Adverse Analytical Findings	3	2	1

# Therapeutic Use Exemptions in place for:

Oxycodone 1 Propanolol 1

# Anti-Doping Rule Violations committed in relation to:

Metoprolol and Hydrochlorothiazide