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# Blood Analytical Requirements for the *Athlete Biological Passport*

#### 1. Introduction

This <u>Technical Document</u> (<u>TD</u>) has been established to harmonize the analysis of blood *Samples* collected, both *In-Competition* and *Out-of-Competition*, for the measurement of individual *Athlete* blood *Markers* within the framework of the *Athlete Biological Passport* (*ABP*).

The <u>International Standard for Laboratories</u> (<u>ISL</u>) is applicable to the analysis of blood Samples carried out in connection with the measurement of individual *Athlete* blood Markers within the framework of the ABP. This <u>TD</u> describes certain specificities of blood analysis related to the ABP.

To standardize analytical results in the *ABP* framework, blood *Sample*s shall only be analyzed <u>with analyzers of comparable technical characteristics</u> in the dedicated network of laboratories (*i.e. WADA*-accredited or <u>WADA-Approved Laboratories for the ABP</u>) which are accredited or approved by WADA to perform the analysis and with analyzers of comparable technical characteristics.). The instrumentation and testAnalytical Method shall by validated and be included within the laboratory's ISO/IEC (17025 or 15189) accredited scope of accreditation, and the laboratories shall participate in the *WADA* External Quality Assessment Scheme (EQAS) for blood samples prior to analysis of *Doping Control Samples*.

If not reasonably possible for blood *Sample*s to be analyzed in a <u>Laboratory</u> or <u>WADA-Approved Laboratory</u> for the <u>ABP</u> for technical and/or geographical reasons, blood *Sample*s can be analyzed at a satellite facility of a <u>Laboratory</u> or using mobile units operated <u>by a Laboratory</u> under applicable ISO/IEC accreditation (17025 or 15189) <u>by a Laboratory.</u>). Satellite facilities and mobile units shall also be <u>validated</u>, ISO/IEC (17025 or 15189) accredited and participate in the *WADA* <u>EQAS</u> for blood samples prior to analysis of <u>Doping Control Samples</u>. <u>Sample</u> handling shall be conducted in compliance with the <u>Technical DocumentTD</u> on <u>Laboratory Internal Chain of Custody</u> (TD LCOC).

## 2. Sample Reception and Timing of Analysis

The blood *Sample* shall be analyzed as soon as possible upon reception and no later than 12 hours of after *Sample* reception unless the <u>Sample Collection Authority</u> provides specific information regarding the *Sample* collection and transportation conditions, which would allow the <u>Laboratory or WADA-Approved Laboratory for the</u>

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<u>ABP</u> to extend the time window of the analysis of the *Sample* without affecting blood stability.

In cases when the <u>Laboratory</u> or <u>WADA-Approved Laboratory</u> for the <u>ABP</u> is unable to <u>immediately</u> analyze the <u>Sample immediately</u> after reception, the <u>Laboratory</u> or <u>WADA-Approved Laboratory</u> for the <u>ABP</u> is responsible for maintaining the <u>Sample</u> at a cool temperature (approximately 4°C) between reception and the start of the <u>Analytical Testing</u> procedure. The temperature data logger shall accompany the <u>Sample</u> until <u>Sample</u> homogeneization. The blood <u>Sample</u> shall not be aliquoted before analysis<sup>1</sup>.

If there is a <u>Laboratory</u> or <u>WADA-Approved Laboratory</u> for the <u>ABP</u> deviation from the aforementioned procedure, the <u>Laboratory</u> or <u>WADA-Approved Laboratory</u> for the <u>ABP</u> shall proceed with the analysis and report the results into *ADAMS* with a detailed description of the deviation.

#### 3. Instrument Check

Before performing any blood analyses, all reagents must be verified The Laboratory or WADA-Approved Laboratory for the ABP shall maintain an instrument maintenance schedule to ensure proper performance; particularly in the case that they an analysis has not been recently conducted and the instrument is idle for an extended period of time.

The analyst shall ensure that all reagents are within their expiration dates, and that they comply with the reagent manufacturer's recommendations, before performing an analysis. Operational parameters of the instrument mustshall be properly controlled (background level, temperature of the incubation chambers, pressure, etc.) and shall fall within the manufacturer's specifications.

All internal quality controls (levels 1, 2 and 3) shall be analyzed twice consecutively, following the specifications provided by the manufacturer, prior to the analysis of Samples. All results shall be in agreement with the reference value ranges provided byof the manufacturer. These internal quality controls shall be furnished exclusively by the instrument manufacturer of the instrument and handled in strict accordance with the manufacturer specifications provided by the manufacturer (e.g. expiration dates, storage conditions). The analysis of internal quality controls shall be monitored via quality control charts with appropriate control limits.

<sup>&</sup>lt;sup>1</sup> It is possible to aliquot the *Sample* after the analysis for the *ABP* has been completed, when appropriate (e.g. for the performance of other analyses such as homologous blood transfusion).

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At least one internal quality control from the manufacturer (either level 1, 2 or 3) shall be analyzed after every 30 to 50 blood *Samples*. At the end of each analysis session and after all blood *Sample* analyses are completed, one internal quality control (either level 1, 2 or 3) shall be analyzed once again to demonstrate the continuous stability of the instrument and the quality of the analyses done.

On a regular basis (as determined by the head of the Laboratory or WADA Approved Laboratory for the ABP), At least once a month, following the satisfactory analysis of all internal quality controls (levels 1, 2 and 3) as described above, one fresh blood Sample shall be homogenized for a minimum period of 15 minutes on an appropriate mixer (e.g. roller mixer) and then analyzed at least seven (7) consecutive times—under Repeatability conditions. The Repeatability of the determinations, expressed as coefficients of variation (CV %), shall be below 1.5 % for Haemoglobin (HGB) and Haematocrit (HCT), and below 15 % for Reticulocyte percentage (RET%) to confirm the appropriate precision of the instrument.%).

## 4. <u>External Quality Assessment Scheme (EQAS)</u>

The <u>Laboratories</u> (or <del>as otherwise approved by WADA)-Approved Laboratories for the ABP</del> shall participate in and meet the requirements of *WADA's* <u>EQAS</u><sup>2</sup> for blood <u>variables</u> <u>Markers</u>.

All internal quality controls (levels 1, 2 and 3) shall be analyzed twice following the specifications provided by the manufacturer prior to the analysis of EQAS samples. All results shall be in agreement with the reference value ranges of the manufacturer. The EQAS sample shall be homogenized for a minimum period of 15 minutes using an appropriate mixer (e.g. roller mixer) prior to analysis. The external quality controls shall be analyzed multiple times consecutively (based on the EQAS rules), and then the mean results of the following blood variables Markers (full blood count) shall be returned:

Red Blood Cell (Erythrocyte) Count	RBC
Mean Corpuscular Volume	MCV
Haematocrit	HCT
Haemoglobin	HGB
Mean Corpuscular Haemoglobin	MCH
Mean Corpuscular Haemoglobin Concentration	MCHC

<sup>&</sup>lt;sup>2</sup> WADA's EQAS program is the only EQAS relevant to the Laboratory's or WADA-Approved Laboratory for the ABP's compliance with the requirements for the analysis of blood *Markers* within the framework of the for *ABP* (in case of discrepancy with other blood EOAS programs).

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White Blood Cell (Leukocyte) Count	WBC
Platelet (Thrombocyte) Count	PLT
Reticulocytes Percentage	RET%

<u>Laboratories</u> or <u>WADA-Approved Laboratory for the ABP</u> may also participate in ring tests between laboratories (hospitals, clinics, etc.) using the same technology and the same procedure.

## 5. Analysis of Blood Sample Samples

The temperature data logger shall be stopped before *Sample* homogenization, upon removal of the samples from the cooling device or refridgerator<sup>3</sup>. The blood *Sample* shall be homogenized for a minimum period of 15 minutes using an appropriate mixer (e.g. roller mixer) prior to analysis.

5.2 The blood Sample shall be analyzed twice consecutively.

\_Absolute differences between the two consecutive(2) analyses shall be equal or less (\( \) than each of the following criteria in order to accept the results:

- 0.1g/dL for HGB analysis;
- 0.15 absolute difference for RET% analysis if either the first or second measurement is lower or equal to 1.00 %; otherwise 0.25 absolute difference.

The data from the second injection is used to confirm the first injection data. Therefore, if the absolute differences between the results of the analyses are within the criteria above, then only the first injection data is reported into *ADAMS*. If the absolute differences between the results of the two analyses are greater than those defined above, then the analysis Sample shall be started analyzed twice again in accordance with section 5.2<sup>4</sup>. This process shall be repeated until the absolute differences between the results of the two (2) consecutive analyses are within the criteria specified above.

The requirements for an <u>Initial Testing Procedure</u>, an "A" <u>Sample Confirmation Procedure</u> and a "B" <u>Sample Confirmation Procedure</u>, as defined in the <u>ISL</u>, shall not be applicable to blood <u>Samples</u> analyzed for the purposes of the <u>ABP</u>.

<sup>&</sup>lt;sup>3</sup> In <u>casecases when</u> the temperature data logger accompanies multiple <u>Samples</u>, and <u>that</u> these <u>Samples</u> are analyzed in the same batch by the <u>Laboratory</u>, the temperature data logger shall be stopped before the homogenization of the first <u>Sample</u>. The <u>Laboratory</u> shall proceed with the analysis of all <u>Samples</u> associated to the temperature data logger without delay.

<sup>&</sup>lt;sup>4</sup> In cases of repeated analysis of a *Sample*, the *Sample* shall be mixed prior to re-analysis using the automated mixing feature of the blood analyzer or by inversion of the *Sample* seven (7) times.

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### 6. Reporting

The <u>Laboratory</u> or <u>WADA-Approved Laboratory</u> for the <u>ABP</u> shall promptly report into *ADAMS* the raw temperature profile recorded by the temperature data logger. The filename shall consist in the concatenation of the data logger ID with the date of *Sample* reception by the lab ("YYYY-MM-DD" in local time) separated by an underscore. For example, for a data logger ID "KG34V10" and a date of sample reception "2015-03-25", the <u>Laboratory</u> or <u>WADA-Approved Laboratory</u> for the <u>ABP</u> shall report the temperature profile under the filename "KG34V10\_2015-03-25.txt". The <u>Laboratory</u> or <u>WADA-Approved Laboratory</u> for the <u>ABP</u> shall report the temperature profile before the test results of the *Sample*.

The <u>Laboratory</u> or <u>WADA-Approved Laboratory for the ABP</u> shall then report the following into *ADAMS*:

- Sample code;
- Type of test (*Out\_of\_Competition*/\_*In-Competition*);
- Sport and discipline;
- Date and time of receipt of the Sample;
- Date and time of analysis of the Sample;
- The name of the Testing Authority;
- The name of the Sample Collection Authority;
- Type of Sample (blood Passport);
- Status ("Submitted" or "Not Analyzed");
- Type of analyzer;
- Test results (other variables may be included for quality purposes):

Blood <del>Variable Marker</del>		Unit(s)
Haemoglobin	HGB	g/dL
Hematocrit	HCT	%
Immature Reticulocyte Fraction	IRF	%
Mean Corpuscular Haemoglobin	MCH	pg
Mean Corpuscular Haemoglobin Concentration	MCHC	g/dL
Mean Corpuscular Volume	MCV	fL
OFF-Score	-	-
Platelets	PLT	10^3/uL
Red Blood Cell Distribution Width	RDW-SD	fL
Red Blood Cells	RBC	10^6/uL
Reticulocytes – in absolute number	RET	10^6/uL
Reticulocytes Percentage	RET%	%
White Blood Cells	WBC	10^3/uL

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• <u>Include a comment describing any relevant deviation as part of the Sample's ADAMS record.</u>