ANTI-DOPING GUIDE

الألعاب الإفريقية
JEUX AFRICAINS
AFRICAN GAMES
JOGOS AFRICANOS

RABAT 2019
19 - 31 AOÛT

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WELCOME AFRICA

PREFACE

The African Games Rabat 2019 shall be the setting for great sports performances, in order to protect the integrity of the Games, the anti-doping commission, the other partners and the organizations involved in the fight against doping in sport collaborate closely, to ensure that rigorous anti-doping measures are put in place before and during this major event.

The COJAR has established and adopted the Anti-Doping Rules of the African Games Rabat 2019 (the Rules) in accordance with the World Anti-Doping Code (the Code), in expectation that, in the spirit of sports, they will contribute to the fight against doping. The Rules are supplemented by other COJAR documents, international standards mentioned in all the Rules and the anti-doping rules of the International Federations (IFs) and the National Anti-Doping Organizations (NADOs) concerned.

The anti-doping rules, like the rules of competition, define the conditions in which the sport should be practiced. All participants (Athletes and Athlete Support Personnel) and others agree to these rules as a condition of their participation and are deemed to have agreed to comply with them.

These Rules describe the doping test procedures established by COJAR through its Anti-doping Commission. The procedures are based on the anti-doping rules of the 12th African Games in accordance with the World Anti-Doping Code.

COJAR has set up a medical and anti-doping center whose head is Dr. ABOUALI Fatima
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01 | INTRODUCTION

THIS ANTI-DOPING GUIDEBOOK (THE GUIDE) DETAILS THE DESCRIPTION OF THE DOPING TEST PROCEDURES CARRIED OUT UNDER THE RESPONSIBILITY OF THE ORGANIZING COMMITTEE OF THE AFRICAN GAMES RABAT 2019 (COJAR) THROUGH ITS ANTI-DOPING COMMISSION.

These procedures abide by the standards of the World Anti-Doping Agency (WADA) based on the International Standard for Testing and Investigation (SICE) and the World Anti-Doping Code.

This Guide will apply to the 12th African Games Rabat 2019.

The following appendices are included in the Guide:

- **The list of prohibited substances and methods;**
- **Application for a Therapeutic Use Exemption;**

02 DOPING TEST PROCEDURES

2.1. SELECTION OF TESTS

A distribution plan of smart tests focused on tests both prior to the competition and during the competition, based on risk assessments to ensure effective and coordinated tests:

During the 12th African Games Rabat 2019, doping tests are carried out in all sports, modality or sports discipline.

COJAR is the body responsible for conducting doping tests at these Games (Rule 5 of COJAR Anti-Doping rules).

With regard to doping test during the Games, the COJAR Anti-Doping Commission will decide on the following points:

- Sports disciplines in which doping tests will be carried out;
- The total number of athletes to be tested;
- The partial number of samples to be taken in each sport;
- The circumstances in which these tests will be carried out.

Samples collected during the Games will be analyzed by a WADA accredited laboratory with which COJAR has established a memorandum of understanding for the event.

The COJAR Anti-Doping Commission may submit to any doping test any athlete accredited to participate in the Games, from the moment he/she enters the Games Village, both during the competition and out of competition.

An athlete may be subject to one or more doping tests during the Games.

At the end of a doping test, the National Olympic Committee (NOC), the delegation to which the athlete belongs will be responsible for the transportation of athletes and their accompanying persons during the test, from the Station (the Station) to the Games village.

2.2. NOTICE TO THE ATHLETE

A The athlete who has been selected for doping test will receive a Notice Form (the form) which contains the athlete's data, the time of the notice and his rights and obligations as laid down in the rules in SICE articles 5. 2, 5. 3 and 5. 4. 1.

The form must state that a person chosen by the athlete will be able to accompany him in the waiting and test room of the Station.

The form must also include a warning explaining the possible consequences of an athlete's arrival outside the time limits indicated in the notice, of absence at the Station or of his refusal to take test.

B DAt the end of the competition, the game, the match or as soon as the defined results have been known, the athlete selected for a doping test will receive a copy of the form that will be given to him by a doping test escort, appointed by COJAR 2019. The Doping Test Officer (DCO), responsible for the collection of samples, will have entered the date and other data corresponding to the test and the athlete on the form. From that moment, the escort will remain with the Athlete at all times, in order to monitor and accompany him at the Station as provided for in SICE articles 5. 4. 2 and 5. 4. 3.

C The athlete must report immediately to the Station with his/her accreditation card in order to undergo the test.

D After receiving notice, the Athlete may delay the time necessary for his presence at the Station, with the authorization of the ACD, if he is to participate in a medal ceremony or officially go to the media (for a press conference, for example). The athlete will then remain at all times under the supervision of his escort and shall not abandon the sports facility where he will be as provided in sections 5. 4. 4 to 5. 4. 8 SICE.

E If an athlete is required to undergo a test but because of a medical emergency has to be transferred, the DCO shall be informed immediately by the athlete's responsible person;

the athlete must be accompanied by an escort during his or her transfer to hospital except in cases of extreme urgency where the DCO responsible for the Doping Test Team may decide otherwise. The raison provided by the Athlete must be noted in an additional report and may be verified later.

The head of the doping test team must inform the head of the anti-doping commission, who in turn must inform the head of the medical and anti-doping unit of COJAR of any taken decision.

F Along the entire duration of the procedure, except in the area where the athlete will have to provide his direct deduction within the Station, the athlete may be accompanied by a person (the coach, a doctor or a member of his team). Only the DCO or his assistant will be able to observe directly the athlete when he is urinating as provided for in article 6. 3. 3 of the SICE.

This accompanying person must carry his accreditation card and be a member of the same delegation as the athlete, except in exceptional circumstances where the athlete may choose a companion belonging to another delegation. If this is the case, which must be justified, the ACD will be informed upon arrival at the Station.

G In addition to the persons indicated above, if the athlete is a minor, and at his request, his companion may be his father, mother or guardian, if they are present and their identity duly justified. In this case, and always at the minor's prior request, the accompanying person may be present during the entire sample collection procedure, including in the area specifically dedicated to the urine sample. However, the escort, unless he is a doctor, cannot directly observe this procedure.

H At the moment the escort gives the athlete the form, he must write the time of delivery. The athlete will then have to sign the form of which he will keep a copy while the escort will keep another.

I Upon arrival at the Station, the Athlete will present his accreditation card.

J The Athlete and his escort will provide the DCO with their respective copy of the form and the latter will mark the exact time of arrival. Before signing the form in turn, the DCO will test the Athlete's data using the credential card containing the athlete's photo, name and number.

K If there was a security guard at the entrance to the waiting room of the Station, the procedure described in point i. will be carried out by this security guard who will then have to sign the form.

L The DCO will retain the notice delivered by the escort, completed and signed, and the Athlete will take his/her own.

M In the event that the athlete refuses to sign the Doping Test Notice or fails to appear at the Station within the time limits indicated on the notice, this will be annotated on the form. The signatories would then be the escort, the ACD, and if present, the representative of the corresponding African Confederation. The person in charge of the COJAR pole would be immediately informed by the CDA. The head of the COJAR pole will then decide on the measures to be taken.

N In the event that the Athlete shows up at the Station after the deadlines indicated on the notice, this will be annotated on the Doping Notice and Test Forms. As in the previous point, the head of the COJAR pole would be informed immediately by the ACD. The head of the COJAR pole will then decide on the measures to be taken.

O As soon as the form has been duly completed, the Athlete will remain in the waiting room of the Station, under surveillance, until the CDA calls him to enter the test room or the Athlete confirms that he is ready to provide his levy.

P The athlete will only be able to enter the test room when no other athlete is there for another test.

Q Any use within the Station, of cameras for taking photos or videos, audio-visual recording systems or mobile phones is strictly prohibited. It is also forbidden to smoke there.

R In no case may the media have access to the doping test room, the entry and access of which will be restricted to authorized persons, duly accredited and in possession of the specific pass to enter the Station.

S The DCO will unite the original Doping Test Notice to the Doping Test Form.

T For out-of-competition doping tests, the procedure will be similar with the following differences:

- Procedures will be performed by the CDA without escorts.
- The test will be carried out in the doping test room installed at the Games Village for this purpose. This room will have the same restricted access as that established for the tests during the competition.
- Tests will be unannounced except in exceptional and justifiable circumstances.
- The same form as the tests during the competition may be used.
- The accreditation card will be used to identify the athlete.
- The Head of Mission of each delegation must provide the location of the athlete when it is required either by the head of the pole of COJAR, or by the person it has designated for this purpose.

2.3. THE DOPING TEST STATION (THE STATION)

The Station will be sufficiently equipped to comply with the requirements of the World Anti-Doping Code as well as International Standards and to preserve the dignity and privacy of athletes under scrutiny.

1. Conditions that must be met during a competition:

- The Station must be exclusively reserved for carrying out doping tests;
- The station must be well located in relation to the competition area, therefore, as close as possible to the playing field or finish line, in order to facilitate access and notice to the athletes. The station must be fully accessible to all athletes;
- The location of the Station must be clearly indicated within the sports facility to allow quick and easy access;
- The Station must be made available to the designated DCO for doping tests at a competition at least two hours before the start of the competition;
- The station will have to meet the necessary conditions to preserve the intimacy of the athlete and the confidentiality of the procedure. For this purpose, the Station will not be open to the public or the media;
- The Station will have access tests in order to restrict access to unauthorized persons;
- The Station will have to provide security conditions for, among other things, storing the equipment to be used for sampling;
- The station must be clean, well ventilated and refrigerated and equipped with water and electricity.

2. Station structure. During the competition, the Station will have separate dependencies that communicate with each other, as follows:

- A waiting room with a sufficient number of chairs corresponding to the total number of tests to be carried out and their possible simultaneity. This room will be equipped with a refrigerator with individual and closed bottles, water or refreshing drinks, which will contain no alcohol or caffeine, or any other component that could produce an adverse analytical result to doping test; these bottles will not contain the substances included in the doping test laboratory monitoring program.

The room will be equipped with a trash bin where these bottles can be thrown away once they have been used. If only one athlete is subject to a doping test, even during a competition, the use of this waiting room is not mandatory and its non-use will not affect the validity of the test.

- An adjoining work room connected directly to the waiting room. This room will be used to fill out the forms and to carry out the operations complementary to the sampling. The room will be large enough to accommodate at least one athlete, his/her accompanying person, the sample collection team and any other person authorized to be present during the procedure.

The room should have at least one table and sufficient chairs for people to sit down during each procedure. There must also be essential furniture for storing the equipment to be used during the taking of samples and during the additional procedures, as well as the necessary elements for disposing of the equipment used.

The room must also have a refrigerator or a refrigerated container where urine samples may be kept until transport.

- A room for the direct collection of urine samples, contiguous and connected directly to the work room. This room should have a toilet, toilet paper and, if possible, a large mirror above the toilet. This room, or the work room, should have a sink and soap. It will sufficiently large to accommodate sports and Assistant witness urine sample and, for minors and athletes with a disability, accompanying that has been required by the athlete in question authorized by CDA Doping Test designated as Doping Test Official during the competition in question.

2.4. SAMPLING PROCEDURE

A Only one athlete at a time may be in the work room during the sample collection process.

B In addition to the athlete and, if applicable, his accompanying person, only the following persons may exercise their right to be present in the work room:

1. A representative of the COJAR Anti-Doping Commission;
2. The DCO responsible for the Doping Test Team;
3. A second DCO who will act as an assistant;
4. For the minor athletes, the specific accompanist who will have been required by the athlete, according to the norms established;
5. An interpreter, if needed;
6. A representative of the corresponding African Confederation, if possible;
7. A representative of WADA, if present.

C The Station will be equipped with specific equipment for collecting urine samples, as follows:

1. Non-reusable containers for the direct collection of urine, translucent plastic with a lid that makes it easy to close and open and has a capacity greater than 100 ml of total urine volume. These receptacles should be graded so that the approximate volume of samples collected can be seen.

The lid of each non-reusable container, which shall not contain any internal parts, shall facilitate the pouring of the urine sample into the other containers used in the procedure. For this, the lid will be provided with a perforation with tip open to the outside.

These containers, individually wrapped with their lids, in a hermetically sealed or heat sealed pouch, will be presented to the Athlete for his selection. Opening a bag to take the material in it will cause it to tear.

2. Flasks to keep the urine sample. Each urine sample collected during the process should be viewed in two vials of glass, clearly identified as vial A and vial B.

They must be of resistant glass and each have a container of at least 100 ml, include an element that avoids an accidental closure (eg a red washer) and to see guarantee the identification of the athlete.

Each of these bottles, in addition to the letter A and B, will be identified by a unique common code, at least six digits in length, to which may be added capital letters to identify the organization responsible for test or competition during which is realized the test. This code must be properly written on each bottle, A and B, in indelible ink to allow identification and visual reading in equivocal, as long as the bottle is empty and filled.

3. Closing lids for storage vials. The lids will serve as a seal for each vial and will carry the same code as the vials, without the letters A or B. The code must also be clearly visible in indelible ink.

Once a bottle has been sealed by its lid, the opening can be done only once by mechanically breaking the lid irreversibly and thus breaking the seal security.

The lids of the bottles must ensure a hermetic closure which prevents the loss of sampling when it has been carried out according to established standards. This should be tested visually when closing the vials.

4. Packages are sealed with a security adhesive seal for a complete kit of material consisting of two bottles A and B with their safety cover, which should not contain any external sign of handling at the beginning of the sampling process. The hole will also behave a small bag of absorbent material so that the sample can be transported according to the rules required for the transport of biological samples.

Each package will have a code that will be the same as the one on the two bottles and the closing lids on the inside. It may also include a bar code identical to the code.

In order to ensure the inviolability of the package before the athlete chooses his kit, the adhesive security seals must make it clear whether they have been opened.

The package of the kit may be used as an individual container of the sample to be sent, in the appropriate transport bag, to the laboratory that will perform the analysis.

5. Equipment to measure the severity of urine.
A refractometer or test strips may be used for this purpose.

The refractometer should be digital and portable so that it can be used to carry out the direct measurement of gravity after having put drops of urine on the prism. Non-reusable plastic pipettes will be used for this purpose. To avoid possible contamination, it should be easy to clean manually between each measurement.

The urine test strips should be able to measure gravity, with a visual colorimetric assessment and a scale of values adapted to the needs for doping tests.

6. Material to keep a partial sample.
A non-reusable, clear rigid plastic container will be used that will have a hinged lid with a tamper-proof security seal. It must have a capacity of at least 150ml and be provided with a special device by which any manipulation to open the closed container will be detectable in an equivocal manner. The container should be labeled with a clearly visible volume scale, from 30-40ml up to 150ml, to allow the volume of partial samples to be measured until the single sample is obtained.

Each container and its lid shall be placed in a hermetically sealed transparent plastic bag, the unique opening of which involves the tearing of the bag. The bag will also have an adhesive tape to seal the container once it contains the partial sample and which will have to leave a visual trace if it is peeled off.

7. Equipment for transporting urine samples.
A container should be used to transport samples to the testing laboratory.

In order to transport the urine samples that would not require refrigeration or freezing, the sample vials will be introduced, preferably by code pair, into a sealed safety bag.

For the transport of urine specimens requiring refrigeration or freezing for analytical purposes, sample vials shall be placed in a sealed safety bag and adequate for the required temperature requirements. In this case, the pairs of vials in which the sample is to be placed must be of a material resistant to refrigeration or freezing.

The cold chain must be respected at all times and each sealed safety bag will have a telltale

to test the temperature variations, from its closure until it arrives at the laboratory and to download the register of variations. Whether for refrigeration or freezing, a sufficient number of cold storage units must be provided to ensure the required temperatures during transport.

8. Complementary material for the collection of urine samples.
Non-reusable gloves will be used as well as paper of a quality allowing the correct cleaning of the refractometer prism between each measurement and the cleaning for the installation of the material for the process of the sampling.

D When the Doping Test Team Leader has called the Athlete to enter the Work Room, the Worker will select a non-reusable container from a selection of at least two and will proceed to the room or collection space to directly fill the container with at least 90ml of urine. This will be done under the visual supervision of the Doping Test Team Leader or his/her deputy; these people must be of the same sex as the athlete.

At the end of the process, the athlete will return to the work room with the container containing his urine closed.

E During the entire process of urine collection the athlete will have to clear all the clothes which would prevent a direct observation of the operation, between the belt and the knees. In the case of minors please apply the content of article 6. 3. 3 of the SICE Code.

F If the Athlete has produced the required minimum of 90ml of urine, he will choose a complete kit from a selection of at least two; he will open it and place the bottles A and B on the table installed for that purpose in the working room. He will have to test that all the codes of the elements of the kit coincide.

G Then, under the supervision of the DCO responsible for taking the sample, the athlete will pour, first in bottle B, one third of the quantity of urine (25ml) and then two thirds of the quantity of urine (at least 60ml) in vial A. Then a little urine will remain in the non-reusable collection container. It can pour more into the 2 bottles if the amount of urine exceeds 90ml.

H The patient will remove the red plastic washers to seal the two vials tightly, being careful that there is no leakage of urine. The ACD may, with the Athlete's permission, assist him in the handling described above. This authorization must be entered on the doping test form and signed by the athlete, before the ACD can help.

I The ACD or his assistant will measure the severity of the urine in the non-reusable container where the urine remains and limit the samples to 2 if the density is less than 1.005 (refractometer) or less than 1.010 (strips). Both samples will be sent to the laboratory. If the levy does not meet these criteria, the ACD may request other samples.

J This sample would then be considered new and will be the subject of a new form. Both samples will be sent independently to the laboratory for analysis.

The remaining urine in the non-reusable container will be removed immediately after vials A and B have been sealed and the severity has been measured correctly.

K The Athlete will inform the Doping Test Team Leader of all medications he has taken during the previous seven days, even those for which he has a Therapeutic Use Exemption (TUE), where appropriate. The test team leader or his/her deputy will carry them on the doping test form.

If the Athlete is in possession of a TUE, it must have been issued by the corresponding African Confederation, have been validated by the CAUT of the COJAR, and the athlete must present it to the ACD at the time of the drawing of the sample.

L The athlete and the DCO shall verify, once the vials have been sealed, that the codes for these vials and the lids codes are identical and they will annotate these codes on the Doping Test Form. If a bottle or lid breaks, it may be substituted by another that the athlete chooses from the available test kits. In this case, and since the codes of bottles A and B will not coincide, even if the concordance between the codes of each vial and its cover is maintained, it will have to be mentioned on the Doping Test Form.

If it is not possible to maintain the concordance of the codes, the codes of the vials and lids will be written on the form to be signed but the sample will not be canceled.

M The athlete will then introduce bottles A and B into the original container while the head of the test team will test that these vials are in these containers where they will stay while they are in the workroom until their transport, which must be carried out in the optimal technical conditions for their conservation.

N The Athlete will certify, by signing the Doping Test Form, that the entire procedure has been conducted in accordance with established standards.

Any irregularities observed by the athlete or his companion will be recorded on the doping test form.

O The Doping Test Form will also be signed by the DCO and the Athlete Representative.

P If the Athlete refuses to submit to a urine sample, the consequences of his refusal, which are mentioned in the notice form, will be listed by the DCO.

If the Athlete persists in his attitude, this will be recorded in the Doping Test Form, which will be signed by the DCO responsible for taking samples and by the representative of the corresponding African Confederation.

The DCO shall report the case to the COJAR Pole Manager who will forward it to the relevant COJAR bodies.

Q If the athlete produces less than 90ml of urine in the non-reusable container, he or she must choose from among a selection of at least two, a coded partial sampling kit.

The athlete will then pour the urine into bottle A, of which he will replace the lid without removing the red ring. This vial will be introduced into the kit along with the rest of the sample material (vial B and both lids A and B).

The kit will then be closed according to established standards. The seal code of the kit will be communicated to the athlete.

Once the kit has been closed, the test team leader and the athlete will have their initials on the form.

The necessary data will be entered on the doping test form.

The person in charge of the doping test team may, with the athlete's authorization, help him for the duration of the procedure described above. In this case, this authorization must be made previously on the form and signed by the athlete.

R The athlete will then return to the waiting room where he will remain until he informs the test team leader that he is ready to resume the procedure. During this time, the kit with the partial sample will be kept in the work room. As soon as the athlete can produce a new urine sample, he will return to the work room if he is not occupied by another athlete.

S The Athlete will then choose a new non-reusable container and proceed to the extraction room or dedicated area where he/she will produce his/her sample, in front of the Doping Test Team Leader or his/her deputy. The athlete will return to the work room, verify that the code coincides with the code of the kit from which he chose the first bottle; he will then open this bottle and pour the contents into the non-reusable container, thus mixing the two urines. There will then be a single sample with which the procedure will continue.

T If the 90ml of urine has still not been obtained, this partial sampling process will be repeated until it is obtained.

U Two copies of the doping test form, with the original identifications and signatures, as well as the original notice form, will be sent to the COJAR pole manager.

The ACD will give the forms to the person in charge of the sample collection who will hand them over as soon as possible to the person in charge of the COJAR pole.

V At the end of the sampling procedure, all vials A and B shall be placed in accordance with established standards in the transport containers. Copies of doping test forms sent to the doping test laboratory will be placed in an envelope and placed in the transport container. This container will then be handed over to the General Sampling Manager who will take care of preserving them while waiting for the transfer to express mail.

W The containers will be sent to the laboratory by established means which will be fast and safe.

The athlete must stay in the Station until the end of the procedure.

03 TRANSPORT AND CONSERVATION OF SAMPLES

THE SAMPLES WILL BE DELIVERED TO THE LABORATORY BY DHL INTERNATIONAL TRANSPORT.

Urine samples should be sent to the laboratory, refrigerated, but never frozen; the ideal temperature will be 4 ° C, but the transport temperature may be between 2º and 12ºC.

Samples must be sent to the laboratory by express mail, preferably within 24 hours after collection.

A The Sample Chain of Custody Form will be completed by the Doping Test Team Leader and will be attached to the transport containers that will be sent centrally to the Doping Test Laboratory.

This form must include the carrier's signature and code of accreditation, the name of the site from which the containers originate and the carrier's departure time.

The form will be signed by the DCO responsible for the Doping Test Team on the site and by the carrier.

B A copy of the sample chain of custody form will be given to the COJAR pole manager.

C The carrier shall deliver the original form to the Director of the Doping Test Laboratory or a representative appointed by him.

Once the form has been signed by the Director of the laboratory or by his representative, a copy must be sent by confidential email to the manager of the COJAR pole.

D The carrier must return, as soon as possible, sealed transport containers to the laboratory.

The Director of the laboratory, or his representative, must verify the identity of the carrier as well as the codes of the security seals and their absence of manipulation. The result of this test will have to appear on the form.

E Once the security seals of the transport containers have been broken and they have been opened in the laboratory, the data of the samples inside them will be tested on the different forms as well as the absence of vials manipulation.

F The arrival of samples at the laboratory must be recorded on the chain of custody form. The laboratory will have to confirm, after a direct test e: the quality of the samples, the conditions of the delivery as well as the delivery times since their sampling. Any impact should be mentioned on the form. If the delivery manager is a transport company, the latter must deliver a delivery note. The laboratory will send the COJAR pole manager a copy of the chain of custody form.

04 SAMPLE ANALYSIS AND RESULTS

THE PROVISIONS OF ARTICLE 6 OF THE SICE (SAMPLE ANALYSIS) APPLY TO THIS SECTION.

The samples will be analyzed at the anti-doping laboratory in Lausanne, Switzerland, with a response time of 48 to 72 hours following their submission.

A The Doping Test Officer will receive and record the samples received for further analysis. The set of procedures will be carried out in accordance with the international standards established for the laboratories by WADA, and in accordance with the contract established between the organizers and the laboratory.

B Analyses will be conducted for the detection of substances included in the 2019 list of prohibited substances and methods approved by WADA.

Once the analyses have been completed, the results will be sent to the OJAR pole manager at the confidential email.

C All samples, once they have been analyzed, will remain under laboratory test for the time periods established by the standards. Overdue deadlines must be requested in writing from the President of COJAR.

4.1. PROCEDURE IN CASE OF A POSITIVE ANALYTICAL RESULT

The provisions of Article 7 (Results Management) of the COJAR Anti-Doping Rules apply to this section.

COJAR will assume responsibility for the management of results and conduct of hearings for anti-doping rule violations arising under these rules with respect to the consequences specified in Articles 9, 10.1 and 10.2.1.

A If a substance that is likely to produce a positive doping test result is detected in the A Sample analysis, COJAR will immediately inform in writing the Head of Mission, or his representative, of the delegation to which the Athlete belongs.

B If it is decided to sanction the athlete, his Head of Mission, the relevant IF and WADA will be informed before the sanction is made public by the COJAR, as provided for in Article 13.1 of the COJAR Anti-Doping Rules.

05 DELEGATION OF RESPONSIBILITIES

THE HEAD OF THE COJAR DIVISION MAY DELEGATE ITS RESPONSIBILITIES TO THE APPROPRIATE PERSON (S) IN EACH CASE. HE WILL INFORM THE PRESIDENT OF COJAR.

APPENDICE 1

LIST OF PROHIBITIONS

JANUARY 2019

SUBSTANCES AND METHODS PROHIBITED PERMANETLY

IN ACCORDANCE WITH ARTICLE 4.2.2 OF THE GLOBALANTI-DOPINGCODE,ALLPROHIBITED SUBSTANCES MUST BE CONSIDERED AS OF « SPECIFIED SUBSTANCES « EXCEPT THE SUBSTANCES IN THE CLASSES S1, S2, S4. 4, S4. 5, S6. A, AND THE PROHIBITED METHODS M1, M2 AND M3.

PROHIBITED SUBSTANCES

S0 - UNAPPROVED SUBSTANCES

Any pharmacological substance not included in a section of the List below that is not currently approved for therapeutic use in humans by a government regulatory health authority (eg, drugs in preclinical or clinical development or discontinued drugs, medicinal products). only approved substances for veterinary use) is permanently prohibited.

S1 - ANABOLIC AGENTS

The anabolic agents are prohibited.

1. STEROIDS ANABOLIC ANDROGEN (SAA)

A. Exogenous SAA*, including:

Androstenedio (5&-androst-1-ène-3ß,17ß-diol);
Androstènedio (5&-androst-1-ène-3,17-dione);
Androstérone (3&-hydroxy-5&-androst-1-ène-17-one);
Testostérone (17ß-hydroxy-5&-androst-1-ène-3-one);
Bolastérone;
Calustérone;
Clostébol;
Danazol ([1,2]oxazolo[4',5':2,3]prégna-4-ène-20-yn-17&-ol);
Déhydrochlorméthyltestostérone (4-chloro-17ß-hydroxy-17&- méthylandrosta-1,4-diène-3-one);
Désoxyméthyltestostérone (17&-méthyl-5&-androst-2-ène-17ß-ol et 17&-méthyl-5&-androst-3-ène-17ß-ol);
Drostanolone;

Éthylestrénol (19-norprégna-4-ène-17&-ol);
Fluoxymestérone; Formébolone;
Furazabol (17&-méthyl[1,2,5] oxadiazolo[3',4':2,3]-5&-androstane-17ß-ol);
Gestrinone;
Mestanolone;
Mestérolone;
Métandiénone (17ß-hydroxy-17&-méthylandrosta-1,4-diène-3-one);
Méténolone;
Méthandriol;
Méthastérone (17ßvv-hydroxy-2&,17&-diméthyl-5&-androstane-3-one);
Méthyldiénolon (17ß-hydroxy-17&-méthylestra-4,9-diène-3-one);
Méthyl-1-testostérone (17ß-hydroxy-17&-méthyl-5&-androst-1-ène-3-one);
Méthylnortestostérone (17ß-hydroxy-17&-méthylestr-4-en-3-one);
Méthyltestostérone;
Métribolone (méthyltriénolone, 17ß-hydroxy-17&-méthylestra-4,9,11- triène-3-one);
Mibolérone;
Norbolétone;
Norclostébol;
Noréthandrolone;
Oxabolone;
Oxandrolone;
Oxymestérone;
Oxymétholone;
Prostanozol (17ß-[(tétrahydropyrane-2-yl)oxy]-1'H-pyrazolo[3,4:2,3]- 5&-androstane);
Quinbolone;
Stanozolol;
Stenbolone;
Tétrahydrogestrinone (17-hydroxy-18a-homo-19-nor-17&-prégna- 4,9,11-triène-3-one);
Trenbolone (17ß-hydroxyestr-4,9,11-triène-3-one); et autres substances possédant une structure chimique similaire ou un (des) effet(s) biologique(s) similaire(s).

B. Endogenous SAA** and their metabolites and isomers, by exogenous administration, including without it limit:

Androstènediol (androst-4-ène-3ß,17ß-diol);
Hydroxytestostérone (4,17ß-dihydroxyandrost-4-ène-3-one);
Androstènedion (androst-5-ène-3,17-dione);
7&-hydroxy-DHEA;
7ß-hydroxy-DHEA; 7-Keto-DHEA;

19-Norandrostènediol (estr-4-ène-3,17-diol);
19-Norandrostènedione (estr-4-ène-3,17-dione);
Androstanolone (5&-dihydrotestostérone, 17ß-hydroxy- 5&-androstan-3-one);
Androstènediol (androst-5-ène-3ß,17ß-diol);
Androstènedione (androst-4-ène-3,17-dione);
Boldénone;
Boldione (androsta-1,4-diène-3,17-dione);
Épiandrostérone (3ß-hydroxy-5ß-androstane-17-one);
Épi-dihydrotestostérone (17ß-hydroxy-5ß-androstane-3-one);
Épitestostérone;
Nandrolone (19-nortestostérone);
Prastérone (déhydroépiandrostérone, DHEA, 3ß-hydroxyandrost-5- ène-17-one);
Testostérone.

2. OTHER ANABOLIC AGENTS

Including but not limited to:

Clenbuterol, selective androgen receptor modulators (SARMs eg andarine, LGD-4033, enobosarm (ostarine) and RAD140), tibolone, zeranol and zilpaterol.

For the purposes of this document:

* «exogenously» means a substance who born cannot be usually produced naturally by the human organism.

** «endogenous» means a substance who can be usually produced naturally by the human body.

S2 - PEPTIDE HORMONES, GROWTH FACTORS, RELATED SUBSTANCES AND MIMETICS

The following substances, and other substances with a similar chemical structure or similar biological effect (s), are prohibited:

1. Erythropoietin (EPO) and agents affecting the erythropoiesis, including without it limit:

1.1 Agonists of receiver of érythropoïétine, e.g
Darbépoétine (dEPO);
Érythropoïétines (EPO);
EPO derivatives [par ex. EPO-Fc, méthoxy polyéthylène glycol- époétine béta (CERA)];
Mimetics of EPO and derivatives e.g. CNTO-530 and peninsatide.

1.2 Activating agents of stationman inducible by hypoxia (HIF) e.g.
Argon;
Cobalt;

Daprodustat (GSK1278863);
Molidustat (BAY 85-3934);
Roxadustat (FG-4592);
Vadadustat (AKB-6548);
Xénon.

1.3 inhibitors of GATA, e.g. K-11706.

1.4 Inhibitors of growth factor- ß (TGF ß), e. g
Luspatercept;
Sotatercept.

1.5 Agonists of receiver of innate repair, e.g
Asialo-EPO;
EPO carbamylée (CEPO).

2. Peptide hormones and their factors release

2.1 Chorionic gonadotropin (CG) and hormone
All selective and non-selective beta-2 agonists. Luteinizing (LH) and their releasing factors, prohibited in the athletic of sex male, e.g. buserelin, deslorelin, gonadorelin, goserelin, leuprorelin, nafarelin and triptorelin;

2.2 Corticotrophins and their release factors e.g. corticoreline.

2.3 Growth hormone (GH), fragments and release factors including but not limited to:
the fragments of hormone of growth, e.g. AOD-9604 and hGH 176-191;
growth hormone releasing hormone (GHRH) and its analogues, e. g. CJC-1293, CJC-1295, sermorelin and tesamorelin;
secretagogues of growth hormone (GHS), e. g. lenorelin (ghrelin) and its mimetics, e. g. anamorelin, ipamorelin, macimorelin and tabimorelin;
growth hormone releasing peptides (GHRPs), e. g. alexamorelin, GHRP-1, GHRP-2 (pralmorelin), GHRP-3, GHRP-4, GHRP-5, GHRP-6and examorelin (hexarelin).

3. factors of growth and modulators of factors growth, including without it limit:

Factor of growth derivative of the platelets (PDGF); Vascular endothelial growth factor (VEGF); Insulin-1-like Growth Factor (IGF-1) and its analogues;
Hepatocyte Growth Factor (HGF); Fibroblastic growth factors (FGF); Mechanical growth factors (MGF); Thymosin- ß 4 and its derivatives, e. g. TB-500.

And other growth factors or modulators of growth factors that mediate muscle, tendon, or ligament, protein synthesis/degradation, vascularibility, energy use, regenerative capacity, or the change of type of fiber.

S3 - BÊTA-2 AGONISTES

including all their optical isomers, are prohibited.

Including but not limited to:
Fenotérol;
Formotérol;
Higénamine;
Indacatérol;
Olodatérol;
Procatérol;
Reprotérol;
Salbutamol;
Salmétérol;
Terbutaline;
Trétoquinol (trimétoquinol);
Tulobutérol;
Vilantérol.

Except:

- Inhaled salbutamol: maximum 1600 micrograms per 24 hours divided into individual doses, not exceeding 800 microgram by 12 hours at go of any catch;
- Inhaled formoterol: maximum dose delivered 54 micrograms per 24 hours;
- Inhaled salmeterol: maximum dose 200 micrograms per 24 hours.

The presence in the urine of salbutamol at a concentration greater than 1000 ng/mL or formoterol at a concentration greater than 40 ng/mL is not consistent with therapeutic use and will be considered an abnormal test result. (R AA), unless the athlete proves by a testled pharmacokinetic study that this abnormal result is the consequence of a therapeutic dose (by inhalation) up to the maximum dose indicated above.

S4 - HORMONAL AND METABOLIC MODULATORS

The following hormones and hormonal modulators are prohibited:

1. Aromatase inhibitors, including but not limited to:

Androsténol (5&-androst-2-ène-17-ol);
Androsténone (5&-androst-2-ène-17-one);
Androsténol (5&-androst-3-ène-17-ol);

Androsténone (5&-androst-3-ène-17-one);
Androstène -3,6,17 trione (6-oxo);
Aminoglutéthimide;
Anastrozole;
Androsta-1,4,6-triène-3,17-dione (androstatriènedione);
Androsta-3,5-diène-7,17-dione (arimistane);
Exémestane;
Formestane;
Létrozole;
Testolactone.

2. Selective modulators of the receptors the estrogen (SERM), including without it limit:

Raloxifène; Tamoxifène; Torémifène.

3. Other anti-estrogenic substances, including but not limited to:

Clomifène; Cyclofénil; Fulvestrant.

4. Agents preventing activation of receptor IIB activin, including, but not limited to:

antibodies neutralizing activin A;
the antibody anti-receptor IIB of activin (e.g. bimagrumab);
the competitors of the activin IIB receptor e. g. Activin lure receptors (eg ACE 031);
inhibitors of myostatin such as:
the agents reducing or removing expression of myostatin;
myostatin-neutralizing antibodies (eg domagrozumab, landogrozumab, stamulumab);
myostatin-binding proteins (eg, follistatin, propeptide of myostatin).

5. Metabolic modulators :

5.1 activators of the activated protein kinase by AMP AICAR, SR9009; and peroxisome proliferator activated receptor agonists ß (PPAR ß), e. g. 2- (2-methyl-4- (4-methyl-2- (4- (trifluoromethyl) phenyl) thiazol-5-yl) methylthio) phenoxy) acetic acid (GW 1516, GW501516);
5.2 Insulins and mimetics of insulin;
5.3 Meldonium;
5.4 Trimétazidine.

S5 - DIURETICS AND MASKING AGENTS

Diuretics and agents are prohibited, as well as other substances with a similar chemical structure or similar biological effect (s).

Including but not limited to:

• desmopressin; probenecid; plasma substitutes, e.g. intravenous administration of albumin, dextran, hydroxyethyl starch and mannitol.
• acetazolamide; amiloride; bumetanide; canrenone; chlorthalidone; etacrynic acid; furosemide; indapamide; metolazone; spironolactone; thiazides, e. g. bendroflumethiazide, chlorothiazide and hydrochlorothiazide; triamterene and vaptans, e.g. tolvap tan.

Except

• drospirenone; the pamabrome; and ophthalmic administration of the inhibitors of carbonic anhydrase (e.g. dorzolamide, brinzolamide);
• administration local of the felypressine in dental anesthesia.

Detection in the athlete's sample permanently or in competition, if applicable, of any quantity of the following substances being subject to a threshold level: formoterol, salbutamol, cathine, ephedrine, methylephedrine andpseudoephedrine, together with a diuretic or a masking agent, will be considered how a result abnormal analysis (RAA) except if the athlete has a authorization of use of the purposes therapeutics (TUE) approved for thissubstance, besides that obtained for the diuretic or the masking agent.

PROHIBITED METHODS

M1 - HANDLING OF BLOOD OR OF BLOOD COMPONENTS

The following is prohibited:

1. The administration or reintroduction of any quantity of autologous, allogeneic (homologous) or heterologous or of red blood cells of all origin in the circulatory system.

2. Artificial improvement of consumption, transport or of the release of oxygen.

perfluorinated chemicals; efaproxiral (RSR13); and modified hemoglobin products, e. g. hemoglobin-based blood substitutes and crosslinked hemoglobin products, but excluding inhalation oxygen supplementation.

3. Any intravascular manipulation of blood or blood component (s) by of the physical methods or chemical.

M2 - CHEMICAL AND PHYSICAL HANDLING

The following is prohibited:

1. The falsification, or the attempt of falsification, in the purpose of altering the integrity and validity of the samples collected during doping test.

Including, but not limited to:
Substitution and/or alteration of urine, e. g. proteases.

2. The intravenous infusions and or injections a total of more of 100 ml by period of 12 hours except those received legitimately in the context of hospital treatment of procedures surgical or during examinations diagnosis clinics.

M3 - GENETIC AND CELLULAR DOPING

This who follows, having the potential capacity improve sports performance, is not allowed:

1. The use of nucleic acid polymers or nucleic acid analogues;

2. The use of genomic editing agents designed to modify genomic sequences and/or regulation
The following is prohibited.

3. The use of normal or genetically modified cells.

SUBSTANCES AND METHODS PROHIBITED IN COMPETITION

IN ADDITION TO CLASSES S0 TO S5 AND M1 TO M3 DEFINED ABOVE, THE FOLLOWING CLASSES ARE PROHIBITED IN COMPETITION:

PROHIBITED SUBSTANCES

S6 - INCENTIVES

All the stimulants, there including all their optical isomers, e.g. d - and l - it there at place, are prohibited.

A: unspecified stimulants :

Adrafinil;
Amfépramone;
Amfétamine;
Amfétaminil;
Amiphénazol;
Benfluorex;
Benzylpipérazine;
Bromantan;
Clobenzorex;
Cocaïne;
Cropropamide;
Crotétamide;
Fencamine;
Fénétylline;
Fenfluramine;
Fenproporex;
Fonturacétam[4-phenylpiracétam(carphédon)];
Furfénorex;
Lisdexamfétamine;
Méfénorex;
Méphentermine;
Mésocarb;
Métamfétamine (d-);
p-méthylamfétamine; Modafinil;
Norfenfluramine;
Phendimétrazine;
Phentermine;
Prénylamine;
Prolintane.

A stimulant that is not specifically named in this section is a specified substance.

B: Specified stimulants.

Stimulants include:

Méthylhexan-2-amine
(1,2-diméthylpentylamine);
Méthylhexan-2-amine (méthylhexaneamine);
Méthylpentan-2-amine
(1,3-diméthylbutylamine);
Méthylhexan-2-amine
(1,4-diméthylpentylamine); Benzfétamine;
Cathine**;
Cathinone et ses analogues, par ex. méphédrone,
méthédrone et &-pyrrolidinovalerophénone;
Dimétamfétamine (diméthylamphétamine);
Éphédrine***; Epinéphrine**** (adrénaline);
Étamivan;
Étilamfétamine;
Étiléfrine;
Famprofazone;
Fenbutrazate;
Fencamfamine;
Heptaminol;
Hydroxyamphétamine
(parahydroxyamphétamine);
Isométheptène; Levmétamfétamine;
Méclofénoxate;
Méthylènedioxyméthamphétamine;
Méthyléphedrine***;
Méthylphénidate;
Nicéthamide;
Norfénefrine;
Octopamine;
Oxilofrine (méthylsynéphrine);
Pémoline;
Pentétrazol;
Phénéthylamine and its derivatives;
Phenmétrazine;
Phenprométhamine;
Propylhexédrine;
Pseudoéphédrine*****;
Sélégiline;
Sibutramine;
Strychnine;
Tenamfétamine (méthylènedioxyamphétamine);
Tuaminoheptane; and other substances with a similar chemical structure or similar biological effect (s).

Except:

• Clonidine;
• All glucocorticoids are prohibited when ophthalmic and the stimulants contained in the program of monitoring 2019 *.

* Bupropion, caffeine, nicotine, phenylephrine, phenylpropanolamine, pipradrol and synephrine: these substances are included in the 2019 Monitoring Program and are not considered prohibited substances.

** cathine: forbidden when her concentration in urine exceeds 5 micrograms per milliliter.

*** Ephedrine and Methylhephedrine: Prohibited When Their Concentrations in Urine Exceed 10 micrograms per milliliter.

**** Epinephrine (adrenaline): is not forbidden e at the use local, eg nasally or ophthalmologically or co-administered with local anesthetics.

***** Pseudoephedrine: forbidden when her concentration in urine exceeds 150 micrograms per milliliter.

S7 - NARCOTICS

The following narcotics are prohibited :

Buprénorphine;
Dextromoramide;
Diamorphine (héroïne);
Fentanyl et ses dérivés;
Hydromorphone;
Méthadone;
Morphine;
Nicomorphine;
Oxycodone;
Oxymorphone;
Pentazocine;
Péthidine.

S8 - CANNABINOIDS

The following cannabinoids are prohibited:

• Natural cannabinoids, e. g. cannabis, hashish, and marijuana.
• Synthetic cannabinoids e. g. Δ9-tetrahydrocannabinol (THC) and other cannabimimetics.

Except :
• Cannabidiol

S9 - GLUCOCORTICOSTEROIDS

All glucocorticoids are prohibited when administered orally, intravenously, intramuscularly or rectally.

Incluant sans s'y limiter :

Bétaméthasone;
Budésonide;
Cortisone;
Deflazacort;
Dexaméthasone;
Fluticasone;
Hydrocortisone;
Méthylprednisolone;
Prednisolone;
Prednisone;
Triamcinolone.

SUBSTANCES INTERDITES DANS CERTAINS SPORTS

P1 - BETA-BLOCKERS

Betablockers are prohibited in competition only, in the following sports and also prohibited out of competition if indicated.

- Automobile (FIA)
- Billard (toutes les disciplines) (WCBS)
- Fléchettes (WDF)
- Golf (IGF)
- Ski (FIS) for the jump at skis, the freestyle jump/ halfpipe and the halfpipe/big air snowboard
- Underwater Sports (CMAS) for dynamic apnea with or without fins, free diving apnea, apnea in constant weight with or without fins, apnea in variable weight, apnea Jump Blue, static apnea, the hunting underwater and the shoot sure target.
- Shooting (ISSF, IPC) *
- Archery bow (WA) *

*** Also forbidden out of competition**

Including but not limited to:

Acébutolol;
Alprénolol;
Aténolol;
Bétaxolol;
Bisoprolol;
Bunolol;
Cartéolol;
Carvédilol;
Céliprolol;
Esmolol;
Labétalol;
Métipranolol;
Métoprolol;
Nadolol;
Oxprénolol;
Pindolol;
Propranolol;
Sotalol;
Timolol.

APPENDICE 2

03 APPLICATION FORM OF THERAPEUTIC USE EXEMPTION

APPLICATION FORM FOR THERAPEUTIC USE EXEMPTION (AUT)

Please complete all sections in capital letters or machine. The athlete must complete sections 1, 5, 6 and 7; the physician must complete sections 2, 3 and 4. Unreadable or incomplete applications will be returned and must be resubmitted in a readable and complete form.

1. Athlete Information

Family name : ..... first names : .....

Gender : Female ..... Male ..... Date of birth (dd/mm/yyyy) .....

Address : .....

City : .....Country : .....Postal code : .....

Phone . : (with international code) ..... Email : .....

Sport : ..... Discipline/position : .....

International or national sports organization : .....

If you are an athlete with a disability, please specify which : .....

.....

2. Medical information (continue on a separate sheet if necessary)

Diagnostic : .....

If an authorized drug can be used to treat the condition, please provide clinical justification for the requested use of the prohibited drug.

.....

.....

.....

.....

.....

Note :

The elements confirming the diagnosis will be attached and transmitted with this request. Medical evidence will include a complete medical history as well as the results of all relevant examinations, laboratory tests and imaging studies. As far as possible, a copy of all original reports or letters will be attached. The evidence will be as objective as possible given the clinical circumstances. In the case of pathologies that cannot be demonstrated, an independent medical opinion will be enclosed to support this request.

WADA maintains a series of guidelines to assist physicians in the preparation of comprehensive and detailed TUE applications. These documents, titled Medical Information to Inform TUEC Decisions, can be accessed by entering the search term «Medical Information» on the WADA website (https://www.wada-ama.org). These guidelines address the diagnosis and treatment of a wide range of conditions that commonly affect athletes and require treatment with prohibited substances.

3. Details of medications

PROHIBITED SUBSTANCE (S): GENERIC NAME	DOSAGE	WAY OF ADMINISTRATION	FREQUENCY	DURATION OF TREATMENT
1				
2				
3				

4. Doctor's certificate

I, the undersigned, certify that the information in sections 2 and 3 above is exact, and that the treatment mentioned above is medically appropriate.

Name : .....

Medical specialty : .....

Address : .....

Phone : .....

Télécopieur : .....

Email : .....

Signature of Physician : ..... Date : .....

5. Retroactive requests

Is this request retroactive?

Yes : ☐

No : ☐

• If yes, when did the treatment start?

.....

.....

Please indicate the reason:

• Medical emergency or treatment of an acute pathology ☐

• Due to other exceptional circumstances, there was not enough time or opportunity to submit a TUE application prior to collecting the sample ☐

• Application before use of non-mandatory substance under applicable rules ☐

• Other reason ☐

• Please explain : .....

.....

.....

.....

6. Previous applications

Have you already submitted a TUE application (s) in the past?

Yes ☐ No ☐

For which substance or method?

.....

From who ? ..... When .....

Decision : Approved ☐ Refused ☐

I, ..., certify that the information in sections 1, 5 and 6 is accurate. I authorize the release of personal health information to authorized personnel of the Anti-Doping Organization (ADO) and the AMA, the CAUT (Use Exemption Committee for purposes therapeutic) WADA and other CAUT of OAD and authorized personnel who may be entitled to know this information under the World Anti-Doping Code and/or the International Standard for Therapeutic Use Clearances.

I authorize my physician (s) to provide the above individuals with any health information they deem necessary to review my application and take a decision.

I understand that this information will only be used to evaluate my TUE application and in the context of investigations and proceedings regarding potential anti-doping rule violations. I understand that if I wish to (1) obtain more information about the use of my information; (2) exercise my right of access and correction; or (3) revoke the right of these organizations to obtain information about my health, I must inform my physician and my ADO in writing. I understand and agree that it may be necessary for the TUE information submitted prior to the withdrawal of my consent to be retained for the sole purpose of establishing a potential anti-doping rule violation in accordance with the requirements of the Code.

I agree that the decision on this application be communicated to all Anti-Doping Organizations, or other organizations, competent for the tests and/or the management of results.

I understand and agree that the recipients of my information and the decision on this application may be outside my country of residence. It is possible that in some of these countries privacy and privacy laws may not be equivalent to those of the country where I live.

I understand that I have the opportunity to make a complaint to WADA or CAS if I consider that my personal information is not used in accordance with this consent and the International Standard for the Protection of Personal Information.

Athlete's Signature : ..... Date : .....

Athlete's parent or guardian's signature : ..... Date : .....

(If the Athlete is a minor or has a disability that prevents them from signing this form, a parent or guardian must sign it on their behalf.)

الألعاب الإفريقية
JEUX AFRICAINS
AFRICAN GAMES
JOGOS AFRICANOS

RABAT 2019
19 - 31 AOÛT

WELCOME AFRICA