



MEDICAL & ANTI-DOPING REGULATIONS

Edition 2014

A.	ANTI-DOPING RULES	3
	Introduction	3
	1 Definition of doping.....	4
	2 Anti-Doping Rule Violations	4
	3 Proof of doping.....	5
	4 The Prohibited List	6
	5 Doping Controls.....	8
	6 Analysis of Samples	12
	7 Results Management.....	12
	8 Right to a Fair Hearing	16
	9 Intentionally left blank.....	18
	10 Sanctions on Individuals.....	18
	11 Consequences to Teams.....	25
	12 Sanctions and Costs assessed against National Federations.....	25
	13 Appeals	26
	14 National Federation Incorporation of FIVB rules, Reporting and Recognition	28
	15 Recognition of decisions by other organisations.....	29
	16 Statute of Limitations.....	29
	17 FIVB Compliance Reports to WADA	30
	18 Amendment and Interpretation of Anti-Doping Rules.....	30
B.	ANTI-DOPING EDUCATION	31
C.	MEDICAL CONTROLS FOR REFEREES	31
	1 Health Certificate for International Referees.....	31
	2 Illnesses that are incompatible with Refereeing in FIVB Competitions.....	32
	3 Medical Control during Competitions	33
D.	MEDICAL SERVICES TO BE PROVIDED DURING FIVB SANCTIONED COMPETITIONS.....	34
E.	NUTRITION OF PLAYERS DURING COMPETITIONS	35
F.	DUTIES OF THE FIVB MEDICAL DELEGATE.....	36
	1 Doping Control	37
	2 Medical Controls for Referees	37
	3 Medical Assistance	38
	4 Athletes' Nutrition	38
	5 Injury Surveillance Program.....	38
	6 Medical Reports.....	39
G.	HEALTH CERTIFICATES – PLAYERS' HEALTH & SAFETY	39
H.	ACCREDITATION OF TEAM MEDICAL DOCTOR AND TEAM THERAPIST	40

I.	FIVB INJURY SURVEILLANCE PROGRAM	41
1	Background	41
2	Confidentiality	41
3	Implementation	42
4	Procedures during the tournament	42
5	Procedures for the FIVB Injury Report Forms distribution and collection	43
6	At the end of the tournament.....	44
	Injury Prevention Devices Players are using	44
J.	FIVB SPORT SCIENCE AWARD	45
1	Aim	45
2	Selection.....	45
3	Awarding Ceremony	45
K.	APPENDICES	46
1	Definitions	46
2	List of Prohibited Substances	50

A.

Anti-Doping Rules

INTRODUCTION

Preface

At the FIVB Congress held on 16-17 June 2008 in Dubai, the FIVB accepted the revised (2009) World Anti-Doping Code (the "Code"). These Anti-Doping Rules are adopted and implemented in conformity with FIVB's responsibilities under the Code, and are in furtherance of FIVB's continuing efforts to maintain volleyball as a doping-free sport.

Anti-Doping Rules, like *Competition* rules, are sport rules governing the conditions under which sport is played. Athletes and other Persons accept these rules as a condition of participation and shall be bound by them. These sport-specific rules and procedures, aimed at enforcing anti-doping principles in a global and harmonized manner, are distinct in nature and, therefore, not intended to be subject to, or limited by any national requirements and legal standards applicable to criminal proceedings or employment matters. When reviewing the facts and the law of a given case, all courts, arbitral tribunals and other adjudicating bodies should be aware of and respect the distinct nature of the anti-doping rules in the *Code* and the fact that these rules represent the consensus of a broad spectrum of stakeholders around the world with an interest in fair sport.

Fundamental Rationale for the Code and FIVB's Anti-Doping Rules

Anti-doping programs seek to preserve what is intrinsically valuable about sport. This intrinsic value is often referred to as "the spirit of sport"; it is the essence of Olympism; it is how we play true. The spirit of sport is the celebration of the human spirit, body and mind, and is characterized by the following values:

- Ethics, fair play and honesty
- Health
- Excellence in performance
- Character and education
- Fun and joy
- Teamwork
- Dedication and commitment
- Respect for rules and laws
- Respect for self and other participants
- Courage
- Community and solidarity

Doping is fundamentally contrary to the spirit of sport.

Scope

These Anti-Doping Rules shall apply to the FIVB, each *National Federation* and Confederations, and each Participant in the activities of the FIVB or any of its *National Federations* by virtue of the Participant's membership, accreditation, or participation in the FIVB, its *National Federations*, or their activities or *Events*.

It is the responsibility of each *National Federation* to ensure that all national-level *Testing* on the *National Federation's Athletes* complies with these Anti-Doping Rules. In some countries, the *National Federation* itself will be conducting the *Doping Control* described in these Anti-Doping Rules. In other countries, many of the *Doping Control* responsibilities of the *National Federation* have been delegated or assigned by statute or agreement to a *National Anti-Doping Organization*.

In those countries, references in these Anti-Doping Rules to the *National Federation* shall apply, as appropriate, to the *National Anti-Doping Organization*.

These Anti-Doping Rules shall apply to all *Doping Controls* over which the FIVB and its *National Federations* and *Confederations* have jurisdiction.

ARTICLE 1 DEFINITION OF DOPING

Doping is defined as the occurrence of one or more of the anti-doping rule violations set forth in Article 2.1 through Article 2.8 of these Anti-Doping Rules.

ARTICLE 2 ANTI-DOPING RULE VIOLATIONS

Athletes and other *Persons* shall be responsible for knowing what constitutes an anti-doping rule violation and the substances and methods which have been included on the Prohibited List.

The following constitute anti-doping rule violations:

2.1 The presence of a *Prohibited Substance* or its *Metabolites* or *Markers* in an *Athlete's Sample*.

2.1.1 It is each *Athlete's* personal duty to ensure that no *Prohibited Substance* enters his or her body. *Athletes* are responsible for any *Prohibited Substance* or its *Metabolites* or *Markers* found to be present in their *Samples*. Accordingly, it is not necessary that intent, fault, negligence or knowing *Use* on the *Athlete's* part be demonstrated in order to establish an anti-doping violation under Article 2.1.

2.1.2 Sufficient proof of an anti-doping rule violation under Article 2.1 is established by either of the following: presence of a *Prohibited Substance* or its *Metabolites* or *Markers* in the *Athlete's* A Sample where the *Athlete* waives analysis of the B Sample and the B Sample is not analyzed or where the *Athlete's* B Sample is analyzed and the analysis of the *Athlete's* B Sample confirms the presence of the *Prohibited Substance* or its *Metabolites* or *Markers* found in the *Athlete's* A Sample.

2.1.3 Excepting those substances for which a quantitative reporting threshold is specifically identified in the *Prohibited List*, the detected presence of any quantity of a *Prohibited Substance* or its *Metabolites* or *Markers* in an *Athlete's Sample* shall constitute an anti-doping rule violation.

2.1.4 As an exception to the general rule of Article 2.1, the *Prohibited List* or *International Standards* may establish special criteria for the evaluation of *Prohibited Substances* that can also be produced endogenously.

2.2 Use or Attempted Use by an *Athlete* of a *Prohibited Substance* or a *Prohibited Method*

2.2.1 The success or failure of the *Use* of a *Prohibited Substance* or *Prohibited Method* is not material. It is sufficient that the *Prohibited Substance* or *Prohibited Method* was *Used* or *Attempted* to be *Used* for an anti-doping rule violation to be committed.

2.3 Refusing or failing without compelling justification to submit to *Sample* collection after notification as authorized in these Anti-Doping Rules or otherwise evading *Sample* collection.

- 2.4 Violation of applicable requirements regarding *Athlete* availability for *Out-of-Competition Testing* set out in the International Standard for Testing, including failure to file whereabouts information** in accordance with Article 11.3 of the International Standard for Testing (a “**Filing Failure**”) and failure to be available for Testing at the declared whereabouts in accordance with Article 11.4 of the International Standard for Testing (a “**Missed Test**”). Any combination of three Missed Tests and/or Filing Failures committed within an eighteen-month period, as declared by the FIVB or any other Anti-Doping Organization with jurisdiction over an Athlete, shall constitute an anti-doping rule violation.
- 2.5 *Tampering or Attempted Tampering with any part of Doping Control.***
- 2.6 *Possession of Prohibited Substances and Methods***
- 2.6.1** *Possession by an Athlete In-Competition of any Prohibited Method or any Prohibited Substance, or Possession by an Athlete Out-of-Competition of any Prohibited Method or any Prohibited Substance which is prohibited in Out-of-Competition Testing unless the Athlete establishes that the Possession is pursuant to a therapeutic use exemption (“TUE”) granted in accordance with Article 4.4 (Therapeutic Use) or other acceptable justification.*
- 2.6.2** *Possession by Athlete Support Personnel In-Competition of any Prohibited Method or any Prohibited Substance, or Possession by Athlete Support Personnel Out-of-Competition of any Prohibited Method or any Prohibited Substance which is prohibited Out-of-Competition, in connection with an Athlete, Competition or training, unless the Athlete Support Personnel establishes that the Possession is pursuant to a TUE granted to an Athlete in accordance with Article 4.4 (Therapeutic Use) or other acceptable justification.*
- 2.7 *Trafficking or Attempted Trafficking in any Prohibited Substance or Prohibited Method.***
- 2.8 *Administration or Attempted administration to any Athlete In-Competition of any Prohibited Method or Prohibited Substance, or administration or Attempted administration to any Athlete Out-of-Competition of any Prohibited Method or any Prohibited Substance that is prohibited Out-of-Competition, or assisting, encouraging, aiding, abetting, covering up or any other type of complicity involving an anti-doping rule violation or any Attempted anti-doping rule violation.***

ARTICLE 3 PROOF OF DOPING

3.1 Burdens and Standards of Proof

The FIVB and its *National Federations* shall have the burden of establishing that an anti-doping rule violation has occurred. The standard of proof shall be whether the FIVB or its *National Federation* has established an anti-doping rule violation to the comfortable satisfaction of the hearing body bearing in mind the seriousness of the allegation which is made. This standard of proof in all cases is greater than a mere balance of probability but less than proof beyond a reasonable doubt. Where these Rules place the burden of proof upon the *Athlete* or other *Person* alleged to have committed an anti-doping rule violation to rebut a presumption or establish specified facts or circumstances, the standard of proof shall be by a balance of probability, except as provided in Articles 10.4 and 10.6 where the *Athlete* must satisfy a higher burden of proof.

3.2 Methods of Establishing Facts and Presumptions

Facts related to anti-doping rule violations may be established by any reliable means, including admissions. The following rules of proof shall be applicable in doping cases:

3.2.1 WADA-accredited laboratories are presumed to have conducted *Sample* analysis and custodial procedures in accordance with the *International Standard* for Laboratories. The *Athlete* or other *Person* may rebut this presumption by establishing that a departure from the *International Standard* occurred which could reasonably have caused the *Adverse Analytical Finding*.

If the *Athlete* or other *Person* rebuts the preceding presumption by showing that a departure from the *International Standard* occurred which could reasonably have caused the *Adverse Analytical Finding*, then the FIVB or its *National Federation* shall have the burden to establish that such departure did not cause the *Adverse Analytical Finding*.

3.2.2 Departures from any other *International Standard* or other anti-doping rule or policy which did not cause an *Adverse Analytical Finding* or other anti-doping rule violation shall not invalidate such results. If the *Athlete* or other *Person* establishes that a departure from the *International Standard* or other anti-doping rule or policy which could reasonably have caused the *Adverse Analytical Finding* or other anti-doping rule violation occurred, then the FIVB or its *National Federation* shall have the burden to establish that such departures did not cause the *Adverse Analytical Finding* or the factual basis for the anti-doping rule violation.

3.2.3 The facts established by a decision of a court or professional disciplinary tribunal of competent jurisdiction which is not the subject of a pending appeal shall be irrebuttable evidence against the *Athlete* or other *Person* to whom the decision pertained of those facts unless the *Athlete* or other *Person* establishes that the decision violated principles of natural justice.

3.2.4 The panel in a hearing on an anti-doping rule violation may draw an inference adverse to the *Athlete* or other *Person* who is asserted to have committed an anti-doping rule violation based on the *Athlete's* or other *Person's* refusal, after a request made in a reasonable time in advance of the hearing, to appear at the hearing (either in person or telephonically as directed by the tribunal) and to answer questions either from the hearing panel or from the *Anti-Doping Organization* asserting the anti-doping rule violation.

ARTICLE 4 THE PROHIBITED LIST

4.1 Incorporation of the *Prohibited List*

These Anti-Doping Rules incorporate the *Prohibited List* which is published and revised by WADA as described in Article 4.1 of the *Code*. The FIVB will make the current *Prohibited List* available to each *National Federation*, and each *National Federation* shall ensure that the current *Prohibited List* is available to its members and constituents. The *Prohibited List* in force is available on WADA's website at www.wada-ama.org.

4.2 *Prohibited Substances* and *Prohibited Methods* Identified on the *Prohibited List*

4.2.1 *Prohibited Substances* and *Prohibited Methods*

Unless provided otherwise in the *Prohibited List* and/or a revision, the *Prohibited List* and revisions shall go into effect under these Anti-Doping Rules three months after publication of the *Prohibited List* by WADA without requiring any further action by the FIVB. As described in Article 4.2 of the *Code*, the FIVB may request that WADA expand the *Prohibited List* for the sport of volleyball and/or beach volleyball. The FIVB may also request that WADA include additional substances or methods, which have the potential for abuse in the sport of volleyball and/or beach volleyball, in the monitoring program described in Article 4.5 of the *Code*. As provided in the *Code*, WADA shall make the final decision on such requests by the FIVB.

4.2.2 Specified Substances

For purposes of the application of Article 10 (Sanctions on Individuals), all *Prohibited Substances* shall be "*Specified Substances*" except (a) substances in the classes of anabolic agents and hormones; and (b) those stimulants and hormone antagonists and modulators so identified on the *Prohibited List*. *Prohibited Methods* shall not be *Specified Substances*.

4.2.3 New Classes of Prohibited Substances

In the event WADA expands the *Prohibited List* by adding a new class of *Prohibited Substances* in accordance with Article 4.1 of the *Code*, WADA's Executive Committee shall determine whether any or all *Prohibited Substances* within the new class of *Prohibited Substances* shall be considered *Specified Substances* under Article 4.2.2.

4.3 Criteria for Including Substances and Methods on the Prohibited List

As provided in Article 4.3.3 of the *Code*, WADA's determination of the *Prohibited Substances* and *Prohibited Methods* that will be included on the *Prohibited List* and the classification of substances into categories on the *Prohibited List* is final and shall not be subject to challenge by an *Athlete* or other *Person* based on an argument that the substance or method was not a masking agent or did not have the potential to enhance performance, represent a health risk or violate the spirit of sport.

4.4 Therapeutic Use

4.4.1 *Athletes* with a documented medical condition requiring the use of a *Prohibited Substance* or a *Prohibited Method* must first obtain a TUE. The presence of a *Prohibited Substance* or its *Metabolites* or *Markers* (Article 2.1), *Use* or *Attempted Use* of a *Prohibited Substance* or a *Prohibited Method* (Article 2.2), *Possession* of *Prohibited Substances* or *Prohibited Methods* (Article 2.6) or administration of a *Prohibited Substance* or *Prohibited Method* (Article 2.8) consistent with the provisions of an applicable TUE issued pursuant to the *International Standard* for Therapeutic Use Exemptions shall not be considered an anti-doping rule violation.

4.4.2 Subject to Article 4.4.3, *Athletes* included by the FIVB in its *Registered Testing Pool* and other *Athletes* participating in any *International Event* must obtain a TUE from the FIVB (regardless of whether the *Athlete* previously has received a TUE at the national level). The application for a TUE must be made as soon as possible (in the case of an *Athlete* in the *Registered Testing Pool*, this would be when he/she is first notified of his/her inclusion in the pool) and, in any event (save in emergency situations), no later than 30 days before the *Athlete's* participation in the *Event*.

In cases where a medical condition occurs during an FIVB competition and an *Athlete* needs to apply for a Therapeutic Use Exemption, the FIVB Medical

Delegate can approve an expedited *TUE* which shall be valid for the duration of the event only.

4.4.3 *TUEs* granted by the FIVB shall be reported to the *Athlete's National Federation* and to *WADA*. Other *Athletes* subject to *Testing* who need to use a *Prohibited Substance* or a *Prohibited Method* for therapeutic reasons must obtain a *TUE* from their *National Anti-Doping Organization* or other body designated by their *National Federation*, as required under the rules of the *National Anti-Doping Organization/other body*. *National Federations* shall promptly report any such *TUEs* to the FIVB and *WADA*.

4.4.4 The FIVB President shall appoint a panel of physicians to consider requests for *TUEs* (the "*TUE Panel*"). Upon FIVB receipt of a *TUE* request, the Chair of the *TUE Panel* shall appoint one or more members of the *TUE Panel* (which may include the Chair) to consider such request. The *TUE Panel* member(s) so designated shall promptly evaluate such request in accordance with the *International Standard* for Therapeutic Use Exemptions and render a decision on such request, which shall be the final decision of the FIVB.

4.4.5 *WADA*, at the request of an *Athlete* or on its own initiation, may review the granting or denial of any *TUE* by the FIVB. If *WADA* determines that the granting or denial of a *TUE* did not comply with the *International Standard* for Therapeutic Use Exemptions in force at the time, then *WADA* may reverse that decision. Decisions on *TUEs* are subject to further appeal as provided in Article 12.

ARTICLE 5 DOPING CONTROLS

5.1 Authority to Test

All *Athletes* under the jurisdiction of a *National Federation* shall be subject to *In-Competition Testing* by the FIVB, the *Athlete's National Federation*, and any other *Anti-Doping Organization* responsible for *Testing* at a *Competition* or *Event* in which they participate. All *Athletes* under the jurisdiction of a *National Federation*, including *Athletes* serving a period of ineligibility or a *Provisional Suspension*, shall also be subject to *Out-of-Competition Testing* at any time or place, with or without advance notice, by the FIVB, *WADA*, the *Athlete's National Federation*, the *Athlete's National Anti-Doping Organization*, the IOC during the Olympic Games, and the IPC during Paralympics Games. *Target Testing* will be made a priority. Such controls may be carried out during a non-FIVB world competition (such as friendly tournaments or regional competition). The FIVB requires that all its affiliated *National Federations* and Confederations organize systematic *Out-of-Competition Testing* on the *Athletes* placed under their jurisdiction, in particular during the training periods before important competitions.

5.2 Responsibility for FIVB Testing

The FIVB Medical Commission shall be responsible for overseeing all *Testing* conducted by drawing up a test distribution plan for the sport of volleyball and beach volleyball in accordance with Article 4 of the *International Standard for Testing*, and for the implementation of that plan, including overseeing all *Testing* conducted by or on behalf of the FIVB. *Testing* may be conducted by members of the FIVB Medical Commission or by other qualified persons so authorized by the FIVB.

5.2.1 Doping controls may be performed during any or all competitions governed by the FIVB General Regulations for International Volleyball and Beach Volleyball Competitions. Such controls may be carried out at any stage, following any match of those competitions, as shall be decided by the FIVB.

5.2.2 The minimum number of controls to be performed shall be determined in the Specific Competition Regulations according to the decision of the FIVB Board of Administration, upon recommendation of the FIVB Medical Commission President. Additional controls can be performed at other times, either at the request of the FIVB, or the Control Committee.

5.2.3 In competitions organised under the exclusive responsibility of the Confederations, other than world and official competitions (e.g. continental club cups, regional championships, etc.), or by *National Federations*, *Doping Control* is the responsibility of the respective Confederation or *National Federation*. The FIVB and WADA shall be informed immediately of the results of such controls through the WADA clearinghouse.

5.3 Testing Standards

Testing conducted by the FIVB and its *National Federations* and Confederations shall be in substantial conformity with the *International Standard for Testing* in force at the time of *Testing*.

5.3.1 Blood (or other non-urine) *Samples* may be used to detect *Prohibited Substances* or *Prohibited Methods*, for screening procedure purposes, or for longitudinal haematological profiling (“the passport”). If the *Sample* is collected for screening only, it will have no consequences for the *Athlete* other than to identify him/her for a urine test under these Anti-Doping Rules. In these circumstances, the FIVB may decide at its own discretion which blood parameters are to be measured in the screening *Sample* and what levels of those parameters will be used to indicate that an *Athlete* should be selected for a urine test. If, however, the *Sample* is collected for longitudinal haematological profiling (“the passport”), it may be used for anti-doping purposes in accordance with Article 2.2 of the *Code*.

5.4 Coordination of Testing

The FIVB and its *National Federations* shall promptly report completed tests through the WADA clearinghouse to avoid unnecessary duplication in *Testing*.

5.5 Athlete Whereabouts Requirements

5.5.1 The FIVB shall identify a *Registered Testing Pool* of those *Athletes* who are required to comply with the whereabouts requirements of the *International Standard for Testing* and shall publish the criteria for *Athletes* to be included in this *Registered Testing Pool* as well as a list of the *Athletes* meeting those criteria for the period in question. The FIVB shall review and update as necessary its criteria for including *Athletes* in its *Registered Testing Pool*, and shall revise the membership of its *Registered Testing Pool* from time to time as appropriate in accordance with the set criteria. Each *Athlete* in the *Registered Testing Pool* (a) shall advise the FIVB of his/her whereabouts for the required period in the manner set out in Article 11.3 of the *International Standard for Testing*; (b) shall update that information as necessary in accordance with Article 11.4.2 of the *International Standard for Testing*, so that it remains accurate and complete at all times; and (c) shall make him/herself available for *Testing* at such whereabouts in accordance with Article 11.4 of the *International Standard for Testing*.

5.5.2 An *Athlete's* failure to advise FIVB of his/her whereabouts shall be deemed a *Filing Failure* for purposes of Article 2.4 when the conditions of Article 11.3.5 of the *International Standard for Testing* are met.

5.5.3 An *Athlete's* failure to be available for *Testing* at his/her declared whereabouts shall be deemed a *Missed Test* for purposes of Article 2.4 when the conditions of Article 11.4.3 of the *International Standard for Testing* are met.

5.5.4 Each *National Federation* shall also assist its *National Anti-Doping Organization* in establishing a national level *Registered Testing Pool* of top-level national *Athletes* to whom the whereabouts requirements of the *International Standard for Testing* shall also apply. Where those *Athletes* are also in the FIVB's *Registered Testing Pool*, the FIVB and the *National Anti-Doping Organization* will agree (with the assistance of *WADA* if required) on which of them will take responsibility for receiving whereabouts filings from the *Athlete* and sharing it with the other (and with other *Anti-Doping Organizations*) in accordance with Article 5.5.5.

5.5.5 Whereabouts information provided pursuant to Articles 5.5.1 and 5.5.4 shall be shared with *WADA* and other *Anti-Doping Organizations* having jurisdiction to test an *Athlete* in accordance with Articles 11.7.1(d) and 11.7.3(d) of the *International Standard for Testing*, including the strict condition that it be used only for *Doping Control* purposes.

5.6 Retirement and Return to *Competition*

5.6.1 An *Athlete* who has been identified by the FIVB for inclusion in FIVB's *Registered Testing Pool* shall continue to be subject to these Anti-Doping Rules, including the obligation to comply with the whereabouts requirements of the *International Standard for Testing* unless and until the *Athlete* gives written notice to FIVB that he or she has retired or until he or she no longer satisfies the criteria for inclusion in FIVB's *Registered Testing Pool* and has been so informed by the FIVB.

5.6.2 An *Athlete* who has given notice of retirement to FIVB may not resume competing unless he or she notifies FIVB at least six months before he or she expects to return to competition and makes him/herself available for unannounced *Out-of-Competition Testing*, including (if requested) complying with the whereabouts requirements of the *International Standard for Testing*, at any time during the period before actual return to competition.

5.6.3 *National Federations/National Anti-Doping Organizations* may establish similar requirements for retirement and returning to competition for *Athletes* in the national *Registered Testing Pool*.

5.7 Selection of *Athletes* to be Tested

5.7.1 For Beach Volleyball competitions, doping controls should be performed according to a schedule that is agreed upon by the Medical Delegate and the Technical Supervisor.

If only one *Athlete* on the team is to be tested from a given match, the routine selection should be performed by the drawing of lots at the scorer's table immediately upon conclusion of the match, usually by the team captain. However, the drawing of lots may also be undertaken by the Medical Delegate or by the *Doping Control* team. Players are not allowed to leave the court area until the draw has been completed. The result of the draw should be recorded on the form M-1.

The Medical Delegate can decide to submit one or several *Athletes* for testing at any time during the tournament. This testing includes *Athletes* withdrawing from competition because of injury or for other reasons.

Athletes are normally only tested after their last match of the day. However, *Athletes* may be selected for *Doping Control* at any time, and in exceptional circumstances may even be tested between matches on the same day.

5.7.2 For Volleyball competitions, anti-doping controls should be performed according to a schedule that is agreed upon by the Medical Delegate and the Control Committee in accordance with the Specific Competition Regulations (see Article 5.2.3).

Before each match, the person in charge of the team must proceed to the Jury table with:

- Identification papers of the players (accreditations, ID Cards, or passports).

The routine selection of *Athletes* for *Doping Control* for a given match is performed by the drawing of lots. The draw should take place immediately upon conclusion of the match in the presence of representatives from the competing teams, a Control Committee member and the Medical Delegate (if present).

All *Athletes* recorded on the score sheet are eligible for the draw, regardless whether they participated in the match or not. This also includes players withdrawing from the game because of injury or for other reasons. *Athletes* are not allowed to leave the court area until the draw has been completed, except to receive emergency medical treatment and only after receiving permission by the Control Committee chair.

The Control Committee member responsible for the draw should place chips corresponding to the uniform numbers of each of the eligible *Athletes* into neutral boxes. The team representative draws the number of chips corresponding to the number of anti-doping tests imposed on the team. The result of the draw should be recorded on the form M-1.

The Control Committee members on duty at a given match, after consultation with the Medical Delegate, may decide to subject one or more additional *Athletes* to control.

Athletes are normally only tested after their last match of the day. However, *Athletes* may be selected for *Doping Control* at any time and, in exceptional circumstances, may even be tested between matches on the same day.

5.7.3 An *Athlete* may be subject to *Doping Control* on more than one occasion during a *Competition*.

5.7.4 *Athletes* selected for *Doping Control* through Article 5.7.1 (for Beach Volleyball) or Article 5.7.2 (for Volleyball) shall immediately report for *Doping Control* and deliver a *Doping Control Sample* according to the sampling procedure described in the *International Standard for Testing*.

5.7.5 For *Out-of-Competition Testing*, the anti-doping officer can decide to organize a drawing of lots between all *Athletes* present or pick out specific *Athletes*. In any case, the selected *Athlete* has right to finish his training session. Notification of *Out-of-Competition Testing* during a tournament (see Article 5.7.1) is normally done after the *Athlete's* last match of the day. The sampling procedure is the same as for *In-Competition Testing*.

ARTICLE 6 ANALYSIS OF SAMPLES

Doping Control Samples collected under these Anti-Doping Rules shall be analyzed in accordance with the following principles:

6.1 Use of Approved Laboratories

The FIVB shall send *Doping Control Samples* for analysis only to WADA-accredited laboratories or as otherwise approved by WADA. The choice of the WADA-accredited laboratory (or other laboratory approved by WADA) used for the Sample analysis shall be determined exclusively by FIVB.

6.2 Purpose of Collection and Analysis of Samples

Samples shall be analyzed to detect *Prohibited Substances* and *Prohibited Methods* identified on the *Prohibited List* and other substances as may be directed by WADA pursuant to the Monitoring Program described in Article 4.5 of the Code or to assist the FIVB in profiling relevant parameters in an *Athlete's* urine, blood or other matrix, including DNA or genomic profiling, for anti-doping purposes.

6.3 Research on Samples

No *Sample* may be used for research purposes or any purpose other than as described in Article 6.2 without the *Athlete's* written consent. *Samples* used (with the *Athlete's* consent) for purposes other than Article 6.2 shall have any means of identification removed such that they cannot be traced back to a particular *Athlete*.

6.4 Standards for Sample Analysis and Reporting

Laboratories shall analyze *Samples* and report results in conformity with the *International Standard for Laboratories*.

6.5 Retesting Samples

A *Sample* may be reanalyzed for the purposes described in Article 6.2 at any time exclusively at the direction of the FIVB or WADA. The circumstances and conditions for retesting *Samples* shall conform with the requirements of the *International Standard for Laboratories*.

ARTICLE 7 RESULTS MANAGEMENT

7.1 Results Management for Tests initiated by FIVB

Results management for *Tests* initiated by FIVB (including *Tests* performed by WADA pursuant to an agreement with FIVB) shall proceed as set forth below:

7.1.1 The results from all analyses must be sent to FIVB, in encoded form, in a report signed by an authorised representative of the laboratory. All communication must be conducted in such a way that the results of the analyses are confidential.

7.1.2 Upon receipt of an A *Sample Adverse Analytical Finding*, the FIVB Anti-Doping Administrator in consultation with the FIVB Medical Commission President shall conduct a review to determine whether: (a) the *Adverse Analytical Finding* is consistent with an applicable TUE, or (b) there is any apparent departure from the *International Standards for Testing* or *International Standard for Laboratories* that caused the *Adverse Analytical*

Finding.

7.1.3 If the initial review of an *Adverse Analytical Finding* under Article 7.1.2 does not reveal an applicable *TUE* or departure from the *International Standard for Testing* or the *International Standard for Laboratories* that caused the *Adverse Analytical Finding*, the FIVB shall promptly notify the *Athlete* of: (a) the *Adverse Analytical Finding*; (b) the anti-doping rule violated, (c) the *Athlete's* right to promptly request the analysis of the *B Sample* or, failing such request, that the *B Sample* analysis may be deemed waived; (d) the scheduled date, time and place for the *B Sample* analysis (which shall be within the time period specified in the *International Standard for Laboratories*) if the *Athlete* or the FIVB chooses to request an analysis of the *B Sample*; (e) the opportunity for the *Athlete* and/or the *Athlete's* representative to attend the *B Sample* opening and analysis at the scheduled date, time and place if such analysis is requested; and (f) the *Athlete's* right to request copies of the *A* and *B Sample* laboratory documentation package which includes information as required by the *International Standard for Laboratories*. FIVB shall also notify the *Athlete's National Anti-Doping Organization* and *WADA*. If the FIVB decides not to bring forward the *Adverse Analytical Finding* as an anti-doping rule violation, it shall so notify the *Athlete*, the *Athlete's National Anti-Doping Organization* and *WADA*.

7.1.4 Where requested by the *Athlete* or FIVB, arrangements shall be made for *Testing* the *B Sample* within the time period specified in the *International Standard for Testing*. An *Athlete* may accept the *A Sample* analytical results by waiving the requirement for *B Sample* analysis. The FIVB may nonetheless elect to proceed with the *B Sample* analysis.

7.1.5 The *Athlete* and/or his representative shall be allowed to be present at the analysis of the *B Sample* within the time period specified in the *International Standard for Laboratories*. Also, a representative of the *Athlete's National Federation* as well as a representative of the FIVB shall be allowed to be present.

7.1.6 If the *B Sample* proves negative, then (unless the FIVB takes the case forward as an anti-doping rule violation under Article 2.2) the entire test shall be considered negative and the *Athlete*, his *National Federation*, and FIVB shall be so informed.

7.1.7 If a *Prohibited Substance* or the *Use of a Prohibited Method* is identified, the findings shall be reported to the *Athlete*, his *National Federation*, the FIVB, and to *WADA*.

7.1.8 For apparent anti-doping rule violations that do not involve *Adverse Analytical Findings*, the FIVB shall conduct any necessary follow-up investigation and, at such time as it is satisfied that an anti-doping rule violation has occurred, it shall then promptly notify the *Athlete* of the anti-doping rule which appears to have been violated and the basis of the violation.

7.2 Results Management for Atypical Findings

7.2.1 As provided in the *International Standards*, in certain circumstances laboratories are directed to report the presence of *Prohibited Substances* that may also be produced endogenously as *Atypical Findings* that should be investigated further.

7.2.2 If a laboratory reports an *Atypical Finding* in respect of a *Sample* collected from an *Athlete* by or on behalf of the FIVB, the FIVB Anti-Doping Administrator in consultation with the FIVB Medical Commission President shall conduct a review to determine whether: (a) the *Atypical Finding* is consistent with an applicable *TUE* that has been granted as provided in the *International Standard* for Therapeutic Use Exemptions, or (b) there is any apparent departure from the *International Standard* for Testing or *International Standard* for Laboratories that caused the *Atypical Analytical Finding*.

7.2.3 If the initial review of an *Atypical Finding* under Article 7.2.2 reveals an applicable *TUE* or departure from the *International Standard* for Testing or the *International Standard* for Laboratories that caused the *Atypical Finding*, the entire test shall be considered negative.

7.2.4 If the initial review of an *Atypical Finding* under Article 7.2.2 does not reveal an applicable *TUE* or departure from the *International Standard* for Testing or the *International Standard* for Laboratories that caused the *Atypical Finding*, FIVB shall conduct the follow-up investigation required by the *International Standards*. If, once that investigation is completed, it is concluded that the *Atypical Finding* should be considered an *Adverse Analytical Finding*, FIVB shall pursue the matter in accordance with Article 7.1.3.

7.2.5 The FIVB will not provide notice of an *Atypical Finding* until it has completed its investigation and has decided whether it will bring the *Atypical Finding* forward as an *Adverse Analytical Finding* unless one of the following circumstances exists:

(a) If the FIVB determines the B *Sample* should be analyzed prior to the conclusion of its follow-up investigation, it may conduct the B *Sample* analysis after notifying the *Athlete* with such notice to include a description of the *Atypical Finding* and the information described in Article 7.1.3(c) to (f).

(b) If the FIVB receives a request, either from a *Major Event Organization* shortly before one of its *International Events* or from a sports organization responsible for meeting an imminent deadline for selecting team members for an *International Event*, to disclose whether any *Athlete* identified on a list provided by the *Major Event Organization* or sports organization has a pending *Atypical Finding*, FIVB shall so identify any such *Athlete* after first providing notice of the *Atypical Finding* to the *Athlete*.

7.3 Results Management for for Tests Initiated During Other International Events

Results management and the conduct of hearings from *Tests* initiated during Other *International Events*, by the International Olympic Committee, the International Paralympics Committee, or a *Major Event Organization*, shall be managed, as far as sanctions beyond Disqualification from the Event or the results of the Event, by the FIVB.

7.4 Results Management for Tests Initiated by National Federations

Results management conducted by *National Federations* for *Tests* initiated by them shall be consistent with the general principles for effective and fair results management which underlie the detailed provisions set forth in Article 7. Results of all *Doping Controls* shall be reported to the FIVB and to WADA within 14 days of the conclusion of the *National*

Federation's results management process. Any apparent anti-doping rule violation by an *Athlete* who is a member of that *National Federation* shall be promptly referred to an appropriate hearing panel established pursuant to the rules of the *National Federation* or national law. Apparent anti-doping rule violations by *Athletes* who are members of another *National Federation* shall be referred to the *Athlete's National Federation* for hearing.

7.5 Results Management for *Whereabouts Violations*

7.5.1 Results management in respect of an apparent *Filing Failure* by an *Athlete* in FIVB's *Registered Testing Pool* shall be conducted by FIVB in accordance with Article 11.6.2 of the *International Standard for Testing* (unless it has been agreed in accordance with Article 5.5.4 that the *National Federation* or *National Anti-Doping Organization* shall take such responsibility).

7.5.2 Results management in respect of an apparent Missed Test by an *Athlete* in FIVB's *Registered Testing Pool* as a result of an attempt to test the *Athlete* by or on behalf of the FIVB shall be conducted by FIVB in accordance with Article 11.6.3 of the *International Standard for Testing*. Results management in respect of an apparent Missed Test by such *Athlete* as a result of an attempt to test the *Athlete* by or on behalf of another *Anti-Doping Organization* shall be conducted by that other *Anti-Doping Organization* in accordance with Article 11.7.6(c) of the *International Standard for Testing*.

7.5.3 Where, in any eighteen-month period, an *Athlete* in FIVB's *Registered Testing Pool* is declared to have three Filing Failures, or three Missed Tests, or any combination of Filing Failures or Missed Tests adding up to three in total, whether under these Anti-Doping Rules or under the rules of any other *Anti-Doping Organization*, FIVB shall bring them forward as an apparent anti-doping rule violation.

7.6 Provisional Suspensions

7.6.1 If analysis of an *A Sample* has resulted in an *Adverse Analytical Finding* for a *Prohibited Substance* that is not a *Specified Substance*, and a review in accordance with Article 7.1.2 does not reveal an applicable *TUE* or departure from the *International Standard for Testing* or the *International Standard for Laboratories* that caused the *Adverse Analytical Finding*, the FIVB shall *Provisionally Suspend* the *Athlete* pending the hearing panel's determination of whether he/she has committed an anti-doping rule violation.

7.6.2 In any case not covered by Article 7.6.1 where the FIVB decides to take the matter forward as an apparent anti-doping rule violation in accordance with the foregoing provisions of this Article 7, the FIVB President, after consultation with the FIVB Anti-Doping Administrator and FIVB Medical Commission President, may *Provisionally Suspend* the *Athlete* pending the hearing panel's determination of whether he/she has committed an anti-doping rule violation.

7.6.3 Where a *Provisional Suspension* is imposed, whether pursuant to Article 7.6.1 or Article 7.6.2, the *Athlete* shall be given either (a) an opportunity for a *Provisional Hearing* before imposition of the *Provisional Suspension* or on a timely basis after the imposition of the *Provisional Suspension*; or (b) an opportunity for an expedited hearing in accordance with Article 8 (Right to a Fair Hearing) on a timely basis after imposition of a *Provisional Suspension*. *National Federations* shall impose *Provisional*

Suspensions in accordance with the principles set forth in this Article 7.6.

7.6.4 If a *Provisional Suspension* is imposed based on an *Adverse Analytical Finding* in respect of an *A Sample*, and any subsequent analysis of the *B Sample* analysis does not confirm the *A Sample* analysis, then the *Athlete* shall not be subject to any further *Provisional Suspension* on account of a violation of Article 2.1 of the *Code* (Presence of a *Prohibited Substance* or its *Metabolites* or *Markers*). In circumstances where the *Athlete* (or the *Athlete's* team as may be provided in the rules of the FIVB) has been removed from a *Competition* based on a violation of Article 2.1 and the subsequent *B Sample* analysis does not confirm the *A Sample* finding, if, without otherwise affecting the *Competition*, it is still possible for the *Athlete* or team to be reinserted, the *Athlete* or team may continue to take part in the *Competition*.

7.7 Retirement from Sport

If an *Athlete* or other *Person* retires while a results management process is underway, the FIVB retains jurisdiction to complete its results management process. If an *Athlete* or other *Person* retires before any results management process has begun and the FIVB would have had results management jurisdiction over the *Athlete* or other *Person* at the time the *Athlete* or other *Person* committed an anti-doping rule violation, the FIVB has jurisdiction to conduct results management.

ARTICLE 8 RIGHT TO A FAIR HEARING

8.1 Hearings arising out of FIVB Testing or Tests at International Events

8.1.1 When it appears, following the Results Management process described in Article 7, that these Anti-Doping Rules have been violated in connection with FIVB *Testing* or *Testing* at an *International Event* then the case shall be assigned to the FIVB Disciplinary Panel for adjudication.

8.1.2 A FIVB Disciplinary Panel with three members shall be appointed to hear each case. The Chairperson of the FIVB Disciplinary Panel shall appoint two members from the FIVB Disciplinary Panel (which may include the Chairperson). One of these members shall chair the Panel. The President of the FIVB Medical Commission shall appoint a physician from the FIVB Medical Commission as the third member. The appointed members shall have had no prior involvement with the case and shall not have the same nationality as the *Athlete* or other *Person* alleged to have violated these Anti-Doping Rules.

8.1.3 Hearings pursuant to this Article shall be completed expeditiously following the completion of the results management process described in Article 7. Hearings held in connection with *Events* may be conducted on an expedited basis.

8.1.4 The *National Federation* of the *Athlete* or other *Person* alleged to have violated these Anti-Doping Rules may attend the hearing as an observer.

8.1.5 The FIVB shall keep WADA fully apprised as to the status of pending cases and the result of all hearings.

8.1.6 An *Athlete* or other *Person* may forego a hearing by acknowledging the Anti-Doping Rule violation and accepting *Consequences* consistent with Articles 10 and 11 as proposed by the FIVB. The right to a hearing may be waived either expressly or by the *Athlete's* or other *Person's*

failure to challenge FIVB's assertion that an anti-doping rule violation has occurred within three weeks. Where no hearing occurs, FIVB shall submit to the persons described in Article 12.2.3 a reasoned decision explaining the action taken.

8.1.7 Decisions of the FIVB Disciplinary Panel may be appealed to the Court of Arbitration for Sport ("CAS") as provided in Article 12.

8.2 Hearings arising out of National Testing

8.2.1 When it appears, following the Results Management process described in Article 7, that these Anti-Doping Rules have been violated in connection with *Testing* other than in connection with FIVB *Testing* or *Testing* at an *International Event*, the *Athlete* or other *Person* involved shall be brought before a disciplinary panel of the *Athlete* or other *Person's National Federation* for a hearing to adjudicate whether a violation of these Anti-Doping Rules occurred and, if so, what *Consequences* should be imposed.

8.2.2 Hearings pursuant to this Article 8.2 shall be completed expeditiously and in all cases within three months of the completion of the Results Management process described in Article 7. Hearings held in connection with *Events* may be conducted by an expedited process. If the completion of the hearing is delayed beyond three months, FIVB may elect to bring the case directly before the FIVB Doping Hearing Panel at the responsibility and at the expense of the *National Federation*.

8.2.3 *National Federations* shall keep FIVB and WADA fully apprised as to the status of pending cases and the results of all hearings.

8.2.4 FIVB and WADA shall have the right to attend hearings as an observer.

8.2.5 The *Athlete* or other *Person* may forego a hearing by acknowledging the violation of these Anti-Doping Rules and accepting *Consequences* consistent with Articles 10 and 11 as proposed by the *National Federation*. The right to a hearing may be waived either expressly or by the *Athlete's* or other *Person's* failure to challenge the *National Federation's* assertion that an anti-doping rule violation has occurred within three weeks. Where no hearing occurs, the *National Federation* shall submit to the persons described in Article 12.2.3 a reasoned decision explaining the action taken.

8.2.6 Decisions by *National Federations*, whether as the result of a hearing or the *Athlete* or other *Person's* acceptance of *Consequences*, may be appealed as provided in Article 12.

8.2.7 Hearing decisions by the *National Federation* shall not be subject to further administrative review at the national level except as provided in Article 12 or required by applicable national law.

8.3 Principles for a Fair Hearing

All hearings, pursuant to either Article 8.1 or 8.2, shall respect the following principles:

- a timely hearing;
- fair and impartial hearing panel;

- the right to be represented by counsel at the Person's own expense;
- the right to be informed in a fair and timely manner of the asserted anti-doping rule violation;
- the right to respond to the asserted anti-doping rule violation and resulting *Consequences*;
- the right of each party to present evidence, including the right to call and question witnesses (subject to the hearing panel's discretion to accept testimony by telephone or written submission);
- the Person's right to an interpreter at the hearing, with the hearing panel to determine the identity, and responsibility for the cost of the interpreter; and
- a timely, written, reasoned decision, specifically including an explanation of the reason(s) for any period of *Ineligibility*.

ARTICLE 9 INTENTIONALLY LEFT BLANK

ARTICLE 10 SANCTIONS ON INDIVIDUALS

10.1 *Disqualification of Results in Event During which an Anti-Doping Rule Violation Occurs*

An Anti-Doping Rule violation occurring during or in connection with an *Event* may lead to *Disqualification* of all of the *Athlete's* individual results obtained in that *Event* with all consequences, including forfeiture of all medals, points and prizes, except as provided in Article 10.1.1.

10.1.1 If the *Athlete* establishes that he or she bears *No Fault or Negligence* for the violation, the *Athlete's* individual results in the other *Competition* shall not be *Disqualified* unless the *Athlete's* results in a *Competition* other than the *Competition* in which the anti-doping rule violation occurred were likely to have been affected by the *Athlete's* anti-doping rule violation.

10.2 *Ineligibility for Presence, Use or Attempted Use, or Possession of Prohibited Substances and Prohibited Methods*

The period of *Ineligibility* imposed for a violation of Article 2.1 (Presence of *Prohibited Substance* or its *Metabolites* or *Markers*), Article 2.2 (*Use* or *Attempted Use* of *Prohibited Substance* or *Prohibited Method*) or Article 2.6 (*Possession* of *Prohibited Substances* and *Methods*) shall be as follows, unless the conditions for eliminating or reducing the period of *Ineligibility*, as provided in Articles 10.4 and 10.5, or the conditions for increasing the period of *Ineligibility*, as provided in Article 10.6, are met:

First violation: Two (2) years' *Ineligibility*.

10.3 *Ineligibility for Other Anti-Doping Rule Violations*

The period of *Ineligibility* for violations of these Anti-Doping Rules other than as provided in Article 10.2 shall be as follows:

10.3.1 For violations of Article 2.3 (refusing or failing to submit to *Sample* collection) or Article 2.5 (*Tampering with Doping Control*), the *Ineligibility* period shall be two (2) years unless the conditions provided in Article 10.5, or

the conditions provided in Article 10.6, are met.

10.3.2 For violations of Article 2.7 (*Trafficking*) or Article 2.8 (Administration of *Prohibited Substance* or *Prohibited Method*), the period of *Ineligibility* imposed shall be a minimum of four (4) years up to lifetime *Ineligibility* unless the conditions provided in Article 10.5 are met. An anti-doping rule violation involving a *Minor* shall be considered a particularly serious violation, and, if committed by *Athlete Support Personnel* for violations, other than *Specified Substances*, shall result in lifetime *Ineligibility* for such *Athlete Support Personnel*. In addition, significant violations of such Articles which also violate non-sporting laws and regulations shall be reported to the competent administrative, professional or judicial authorities.

10.3.3 For violations of Article 2.4 (Whereabouts Violations or Missed Tests), the period of *Ineligibility* shall be at a minimum one (1) year and at a maximum two (2) years based on the *Athlete's* degree of fault.

10.4 Elimination or Reduction of the Period of *Ineligibility* for *Specified Substances* under Specific Circumstances

Where an *Athlete* or other *Person* can establish how a *Specified Substance* entered his or her body or came into his or her possession and that such *Specified Substance* was not intended to enhance the *Athlete's* sport performance or mask the use of a performance-enhancing substance, the period of *Ineligibility* found in Article 10.2 shall be replaced with the following:

First violation: At a minimum, a reprimand and no period of *Ineligibility* from future *Events*, and at a maximum, two (2) years of *Ineligibility*.

To justify any elimination or reduction, the *Athlete* or other *Person* must produce corroborating evidence in addition to his or her word which establishes to the comfortable satisfaction of the hearing panel the absence of an intent to enhance sport performance or mask the use of a performance enhancing substance. The *Athlete* or other *Person's* degree of fault shall be the criterion considered in assessing any reduction of the period of *Ineligibility*.

10.5 Elimination or Reduction of Period of *Ineligibility* Based on Exceptional Circumstances

10.5.1 *No Fault or Negligence*

If an *Athlete* establishes in an individual case that he or she bears *No Fault or Negligence* for the violation, the otherwise applicable period of *Ineligibility* shall be eliminated. When a *Prohibited Substance* or its *Markers* or *Metabolites* is detected in an *Athlete's Sample* in violation of Article 2.1 (presence of *Prohibited Substance*), the *Athlete* must also establish how the *Prohibited Substance* entered his or her system in order to have the period of *Ineligibility* eliminated. In the event this Article is applied and the period of *Ineligibility* otherwise applicable is eliminated, the anti-doping rule violation shall not be considered a violation for the limited purpose of determining the period of *Ineligibility* for multiple violations under Article 10.7.

10.5.2 *No Significant Fault or Negligence*

If an *Athlete* or Other *Person* establishes in an individual case that he or she bears *No Significant Fault or Negligence*, then the period of *Ineligibility* may be reduced, but the reduced period of *Ineligibility* may not be less than one-half of the period of *Ineligibility* otherwise applicable. If the otherwise applicable period of *Ineligibility* is a lifetime, the reduced period under this

section may be no less than 8 years. When a *Prohibited Substance* or its *Markers* or *Metabolites* is detected in an *Athlete's Sample* in violation of Article 2.1 (Presence of *Prohibited Substance*), the *Athlete* must also establish how the *Prohibited Substance* entered his or her system in order to have the period of *Ineligibility* reduced.

10.5.3 *Substantial Assistance* in Discovering or Establishing Anti-Doping Rule Violations

The FIVB President or the FIVB Disciplinary Panel may, prior to a final appellate decision under Article 13 or the expiration of the time to appeal, suspend a part of the period of *Ineligibility* imposed in an individual case where the *Athlete* or other *Person* has provided *Substantial Assistance* to an *Anti-Doping Organization*, criminal authority or professional disciplinary body which results in the *Anti-Doping Organization* discovering or establishing an anti-doping rule violation by another *Person* or which results in a criminal or disciplinary body discovering or establishing a criminal offense or the breach of professional rules by another *Person*. After a final appellate decision under Article 13 or the expiration of time to appeal, the FIVB may only suspend a part of the applicable period of *Ineligibility* with the approval of WADA. The extent to which the otherwise applicable period of *Ineligibility* may be suspended shall be based on the seriousness of the anti-doping rule violation committed by the *Athlete* or other *Person* and the significance of the *Substantial Assistance* provided by the *Athlete* or other *Person* to the effort to eliminate doping in sport. No more than three-quarters of the otherwise applicable period of *Ineligibility* may be suspended. If the otherwise applicable period of *Ineligibility* is a lifetime, the non-suspended period under this Article must be no less than 8 years. If the FIVB suspends any part of the period of *Ineligibility* under this Article, it shall promptly provide a written justification for its decision to each *Anti-Doping Organization* having a right to appeal the decision. If the FIVB subsequently reinstates any part of the suspended period of *Ineligibility* because the *Athlete* or other *Person* has failed to provide the *Substantial Assistance* which was anticipated, the *Athlete* or other *Person* may appeal the reinstatement pursuant to Article 13.2.

10.5.4 Admission of an Anti-Doping Rule Violation in the Absence of Other Evidence

Where an *Athlete* or other *Person* voluntarily admits the commission of an anti-doping rule violation before having received notice of a *Sample* collection which could establish an anti-doping rule violation (or, in the case of an anti-doping rule violation other than Article 2.1, before receiving first notice of the admitted violation pursuant to Article 7) and that admission is the only reliable evidence of the violation at the time of admission, then the period of *Ineligibility* may be reduced, but not below one-half of the period of *Ineligibility* otherwise applicable.

10.5.5 Where an *Athlete* or Other *Person* Establishes Entitlement to Reduction in Sanction under More than One Provision of this Article

Before applying any reductions under Articles 10.5.2, 10.5.3 or 10.5.4, the otherwise applicable period of *Ineligibility* shall be determined in accordance with Articles 10.2, 10.3, 10.4 and 10.6. If the *Athlete* or other *Person* establishes entitlement to a reduction or suspension of the period of *Ineligibility* under two or more of Articles 10.5.2, 10.5.3 or 10.5.4, then the period of *Ineligibility* may be reduced or suspended, but not below one-quarter of the otherwise applicable period of *Ineligibility*.

10.6 Aggravating Circumstances Which May Increase the Period of Ineligibility

If the FIVB establishes in an individual case involving an anti-doping rule violation other than violations under Article 2.7 (*Trafficking*) and 2.8 (Administration) that aggravating circumstances are present which justify the imposition of a period of *Ineligibility* greater than the standard sanction, then the period of *Ineligibility* otherwise applicable shall be increased up to a maximum of four years unless the *Athlete* or other *Person* can prove to the comfortable satisfaction of the hearing panel that he did not knowingly violate the anti-doping rule.

An *Athlete* or other *Person* can avoid the application of this Article by admitting the anti-doping rule violation as asserted promptly after being confronted with the anti-doping rule violation by the FIVB.

10.7 Multiple Violations

10.7.1 Second Anti-Doping Rule Violation

For an *Athlete's* or other *Person's* first anti-doping rule violation, the period of Ineligibility is set forth in Articles 10.2 and 10.3 (subject to elimination, reduction or suspension under Articles 10.4 or 10.5, or to an increase under Article 10.6). For a second anti-doping rule violation, the period of *Ineligibility* shall be within the range set forth in the table below:

Second Violation	RS	FFMT	NSF	St	AS	TRA
First Violation						
RS	1-4	2-4	2-4	4-6	8-10	10-life
FFMT	1-4	4-8	4-8	6-8	10-life	life
NSF	1-4	4-8	4-8	6-8	10-life	life
St	2-4	6-8	6-8	8-life	life	life
AS	4-5	10-life	10-life	life	life	life
TRA	8-life	life	Life	life	life	life

Definitions for purposes of the second anti-doping rule violation table:

RS (Reduced sanction for *Specified Substance* under Article 10.4): The anti-doping rule violation was or should be sanctioned by a reduced sanction under Article 10.4 because it involved a *Specified Substance* and the other conditions under Article 10.4 were met.

FFMT (Filing Failures and/or Missed Tests): The anti-doping rule violation was or should be sanctioned under Article 10.3.3 (Filing Failures and/or Missed Tests).

NSF (Reduced sanction for *No Significant Fault or Negligence*): The anti-doping rule violation was or should be sanctioned by a reduced sanction under Article 10.5.2 because *No Significant Fault or Negligence* under Article 10.5.2 was proved by the *Athlete*.

St (Standard sanction under Articles 10.2 or 10.3.1): The anti-doping rule violation was or should be sanctioned by the standard sanction of two years under Article 10.2 or 10.3.1.

AS (Aggravated sanction): The anti-doping rule violation was or should be sanctioned by an aggravated sanction under Article 10.6 because the *Anti-Doping Organization* established the conditions set forth under Article 10.6.

TRA (*Trafficking* or *Attempted Trafficking* and administration or *Attempted*

administration): The anti-doping rule violation was or should be sanctioned by a sanction under Article 10.3.2.

The table is applied by locating the *Athlete's* or other *Person's* first anti-doping rule violation in the left-hand column and then moving across the table to the right to the column representing the second violation. By way of example, assume an *Athlete* receives the standard period of *Ineligibility* for a first violation under Article 10.2 and then commits a second violation for which he receives a reduced sanction for a *Specified Substance* under Article 10.4. The table is used to determine the period of *Ineligibility* for the second violation. The table is applied to this example by starting in the left-hand column and going down to the fourth row which is "St" for standard sanction, then moving across the table to the first column which is "RS" for reduced sanction for a *Specified Substance*, thus resulting in a 2-4 year range for the period of *Ineligibility* for the second violation. The *Athlete's* or other *Person's* degree of fault shall be the criterion considered in assessing a period of *Ineligibility* within the applicable range.

10.7.2 Application of Articles 10.5.3 and 10.5.4 to Second Anti-Doping Rule Violation

Where an *Athlete* or other *Person* who commits a second anti-doping rule violation establishes entitlement to suspension or reduction of a portion of the period of *Ineligibility* under Article 10.5.3 or Article 10.5.4, the hearing panel shall first determine the otherwise applicable period of *Ineligibility* within the range established in the table in Article 10.7.1, and then apply the appropriate suspension or reduction of the period of *Ineligibility*. The remaining period of *Ineligibility*, after applying any suspension or reduction under Articles 10.5.3 and 10.5.4, must be at least one-fourth of the otherwise applicable period of *Ineligibility*.

10.7.3 Third Anti-Doping Rule Violation

A third anti-doping rule violation will always result in a lifetime period of *Ineligibility*, except if the third violation fulfills the condition for elimination or reduction of the period of *Ineligibility* under Article 10.4 or involves a violation of Article 2.4 (Filing Failures and/or and Missed Tests). In these particular cases, the period of *Ineligibility* shall be from eight (8) years to life ban.

10.7.4 Additional Rules for Certain Potential Multiple Violations

For purposes of imposing sanctions under Articles 10.7, an anti-doping rule violation will only be considered a second violation if the FIVB (or its *National Federation*) can establish that the *Athlete* or other *Person* committed the second anti-doping rule violation after the *Athlete* or other *Person* received notice pursuant to Article 7 (Results Management), or after the FIVB (or its *National Federation*) made reasonable efforts to give notice, of the first anti-doping rule violation; if the FIVB (or its *National Federation*) cannot establish this, the violations shall be considered together as one single first violation, and the sanction imposed shall be based on the violation that carries the more severe sanction; however, the occurrence of multiple violations may be considered as a factor in determining *Aggravating Circumstances* (Article 10.6).

If, after the resolution of a first anti-doping rule violation, the FIVB discovers facts involving an anti-doping rule violation by the *Athlete* or other *Person* which occurred prior to notification regarding the first violation, then FIVB shall impose an additional sanction based on the sanction that could have been imposed if the two violations would have been adjudicated at the same time. Results in all *Competitions* dating back to the earlier anti-doping rule violation will be *Disqualified* as provided in Article 10.8. To avoid the

possibility of a finding of *Aggravating Circumstances* (Article 10.6) on account of the earlier-in-time but later-discovered violation, the *Athlete* or other *Person* must voluntarily admit the earlier anti-doping rule violation on a timely basis after notice of the violation for which he or she is first charged. The same rule shall also apply when the FIVB discovers facts involving another prior violation after the resolution of a second anti-doping rule violation.

10.7.5 Multiple Anti-Doping Rule Violations during an Eight-Year Period

For purposes of Article 10.7, each anti-doping rule violation must take place within the same eight (8) year period in order to be considered multiple violations.

10.8 Disqualification of Results in Competitions Subsequent to Sample Collection or Commission of an Anti-Doping Rule Violation

In addition to the automatic *Disqualification* of the results in the *Competition* which produced the positive *Sample* under Article 11 (Consequences to Teams), all other competitive results obtained from the date a positive *Sample* was collected (whether *In-Competition* or *Out-of-Competition*), or other anti-doping rule violation occurred, through the commencement of any *Provisional Suspension* or *Ineligibility* period, shall, unless fairness requires otherwise, be *Disqualified* with all of the resulting consequences including forfeiture of any medals, points and prizes.

10.8.1 As a condition of regaining eligibility after being found to have committed an anti-doping rule violation, the *Athlete* must first repay all prize money forfeited under this Article.

10.8.2 Forfeited prize money shall be allocated to other athletes.

10.9 Commencement of Ineligibility Period

Except as provided below, the period of *Ineligibility* shall start on the date of the hearing decision providing for *Ineligibility* or, if the hearing is waived, on the date *Ineligibility* is accepted or otherwise imposed.

10.9.1 Delays Not Attributable to the Athlete or other Person

Where there have been substantial delays in the hearing process or other aspects of *Doping Control* not attributable to the *Athlete* or *Other Person*, the FIVB may start the period of *Ineligibility* at an earlier date commencing as early as the date of *Sample* collection or the date on which another anti-doping rule violation last occurred.

10.9.2 Timely Admission

Where the *Athlete* promptly (which, in all events, means before the *Athlete* competes again) admits the anti-doping rule violation after being confronted with the anti-doping rule violation by the FIVB, the period of *Ineligibility* may start as early as the date of *Sample* collection or the date on which another anti-doping rule violation last occurred. In each case, however, where this Article is applied, the *Athlete* or other *Person* shall serve at least one-half of the period of *Ineligibility* going forward from the date the *Athlete* or other *Person* accepted the imposition of a sanction, the date of a hearing decision imposing a sanction, or the date the sanction is otherwise imposed.

10.9.3 If a *Provisional Suspension* is imposed and respected by the *Athlete*, then the *Athlete* shall receive a credit for such period of *Provisional Suspension* against any period of *Ineligibility* which may ultimately be imposed.

10.9.4 If an *Athlete* voluntarily accepts a *Provisional Suspension* in writing from the FIVB and thereafter refrains from competing, the *Athlete* shall

receive a credit for such period of voluntary *Provisional Suspension* against any period of *Ineligibility* which may ultimately be imposed. A copy of the *Athlete's* voluntary acceptance of a *Provisional Suspension* shall be provided promptly to each party entitled to receive notice of a potential anti-doping rule violation under Article 14.3.

10.9.5 No credit against a period of *Ineligibility* shall be given for any time period before the effective date of the *Provisional Suspension* or voluntary *Provisional Suspension* regardless of whether the *Athlete* elected not to compete or was suspended by his or her team.

10.10 Status during *Ineligibility*

10.10.1 Prohibition against Participation during *Ineligibility*

No *Athlete* or other *Person* who has been declared *Ineligible* may, during the period of *Ineligibility*, participate in any capacity in an *Event* or activity (other than authorized anti-doping education or rehabilitation programs) authorized or organized by the FIVB or any *National Federation* or a club or other member organization of the FIVB or any *National Federation*, or in *Competitions* authorized or organized by any professional league or any international or national level *Event* organization.

An *Athlete* or other *Person* subject to a period of *Ineligibility* longer than four years may, after completing four years of the period of *Ineligibility*, participate in local sport events in a sport other than sports subject to the jurisdictions of FIVB and its *National Federations*, but only so long as the local sport event is not at a level that could otherwise qualify such *Person* directly or indirectly to compete in (or accumulate points toward) a national championship or *International Event*.

An *Athlete* or other *Person* subject to a period of *Ineligibility* shall remain subject to *Testing*.

10.10.2 Violation of the Prohibition of Participation during *Ineligibility*

Where an *Athlete* or other *Person* who has been declared *Ineligible* violates the prohibition against participation during *Ineligibility* described in Article 10.10.1, the results of such participation shall be *Disqualified* and the period of *Ineligibility* which was originally imposed shall start over again as of the date of the violation. The new period of *Ineligibility* may be reduced under Article 10.5.2 if the *Athlete* or other *Person* establishes he or she bears *No Significant Fault or Negligence* for violating the prohibition against participation. The determination of whether an *Athlete* or other *Person* has violated the prohibition against participation, and whether a reduction under Article 10.5.2 is appropriate, shall be made by the FIVB.

10.10.3 Withholding of Financial Support during *Ineligibility*

In addition, for any anti-doping rule violation not involving a reduced sanction for *Specified Substances* as described in Article 10.4, some or all sport-related financial support or other sport-related benefits received by such *Person* will be withheld by the FIVB and its *National Federations*.

10.11 Reinstatement *Testing*

As a condition to regaining eligibility at the end of a specified period of *Ineligibility*, an *Athlete* must, during any period of *Provisional Suspension* or *Ineligibility*, make him or herself available for *Out-of-Competition Testing* by the FIVB, the applicable *National Federation*, and any other *Anti-Doping Organization* having *Testing* jurisdiction, and must comply with the whereabouts requirements of Article 11 of the *International Standard for Testing*. If an *Athlete* subject to a period of *Ineligibility* retires from sport and is removed

from *Out-of-Competition Testing* pools and later seeks reinstatement, the *Athlete* shall not be eligible for reinstatement until the *Athlete* has notified the FIVB and the applicable *National Federation* and has been subject to *Out-of-Competition Testing* for a period of time equal to the period of *Ineligibility* remaining as of the date the *Athlete* had retired. During such remaining period of *Ineligibility*, a minimum of 3 tests must be conducted on the *Athlete* with at least three months between each test. The *National Federation* shall be responsible for conducting the necessary tests, but tests by any *Anti-Doping Organization* may be used to satisfy the requirement. The results of such tests shall be reported to the FIVB. In addition, immediately prior to the end of the period of *Ineligibility*, an *Athlete* must undergo *Testing* by the FIVB for the *Prohibited Substances* and *Methods* that are prohibited in *Out-of-Competition Testing*. Once the period of an *Athlete's* suspension has expired, and the *Athlete* has fulfilled the conditions of reinstatement, then the *Athlete* will become automatically re-eligible and no application by the *Athlete* or by the *Athlete's National Federation* will then be necessary.

ARTICLE 11 CONSEQUENCES TO TEAMS

11.1 Where one team member of a volleyball team has been notified of a possible Anti-Doping Rule violation under Article 2. in connection with an *Event*, the Team may lose the match and be subject to *Target Testing* for the *Event*. If a team member is found to have committed an Anti-Doping Rule violation during the *Event*, the team may be subject to *Disqualification* or other disciplinary action, including forfeit of any medals and prizes, irrespective of any *Consequences* imposed upon the individual *Athlete(s)* committing the Anti-Doping Rule violation.

11.2 If a member of a beach volleyball team is found to have committed a violation of these Anti-Doping Rules during an *Event*, the team shall be *Disqualified* from the *Event*, including forfeit of any medals and prizes, irrespective of any *Consequences* imposed upon the individual *Athlete(s)* committing the Anti-Doping Rule violation.

ARTICLE 12 SANCTIONS AND COSTS ASSESSED AGAINST NATIONAL FEDERATIONS

12.1 The FIVB Board of Administration has the authority to withhold some or all funding or other non-financial support to *National Federations* that are not in compliance with these Anti-Doping Rules.

12.2 The FIVB may elect to take additional disciplinary action against *National Federations* with respect to recognition, the eligibility of its officials and athletes to participate in *International Events* and fines based on the following:

12.2.1 Four or more violations of these Anti-Doping Rules (other than violations involving Articles 2.4 and 10.3) are committed by *Athletes* or other *Persons* affiliated with a *National Federation* within a 12-month period in testing conducted by the FIVB or Anti-Doping Organizations other than the *National Federation* or its *National Anti-Doping Organization*.

12.3.2 More than one *Athlete* or other *Person* from a *National Federation* commits an *Anti-Doping Rule* violation during an *International Event*.

12.2.3 A *National Federation* has failed to make diligent efforts to keep the FIVB informed about an *Athlete's* whereabouts after receiving a request for that information from the FIVB.

ARTICLE 13 APPEALS

13.1 Decisions Subject to Appeal

Decisions made under these Anti-Doping Rules may be appealed as set forth below in Articles 13.2 through 13.4 or as otherwise provided in these Anti-Doping Rules. Such decisions shall remain in effect while under appeal unless the appellate body orders otherwise. Before an appeal is commenced, any post-decision review authorized in these rules must be exhausted (except as provided in Article 13.1.1).

13.1.1 WADA Not Required to Exhaust Internal Remedies

When WADA has a right to appeal under Article 13 and no other party has appealed a final decision within the FIVB or its *National Federation's* process, WADA may appeal such decision directly to CAS without having to exhaust other remedies in the FIVB or its *National Federation's* process.

13.2 Appeals from Decisions Regarding Anti-Doping Rule Violations, Consequences, and Provisional Suspensions

A decision that an anti-doping rule violation was committed, a decision imposing *Consequences* for an anti-doping rule violation, or a decision that no anti-doping rule violation was committed; a decision that an anti-doping rule violation proceeding cannot go forward for procedural reasons (including, for example, prescription); a decision under Article 10.10.2 (prohibition of participation during *Ineligibility*); a decision that the FIVB or its *National Federation* lacks jurisdiction to rule on an alleged anti-doping rule violation or its *Consequences*; a decision by any *National Federation* not to bring forward an *Adverse Analytical Finding* or an *Atypical Finding* as an anti-doping rule violation, or a decision not to go forward with an anti-doping rule violation after an investigation under Article 7.4; and a decision to impose a *Provisional Suspension* as a result of a *Provisional Hearing* or otherwise in violation of Article 7.4 may be appealed exclusively as provided in this Article 13.2.

13.2.1 Appeals Involving *International-Level Athletes*

In cases arising from competition in an *International Event* or in cases involving *International-Level Athletes*, the decision may be appealed exclusively to CAS in accordance with the provisions applicable before such court.

13.2.2 Appeals Involving *National-Level Athletes*

In cases involving *Athletes* who do not have a right to appeal, each *National Federation* shall have in place an appeal procedure that respects the following principles: a timely hearing, a fair and impartial hearing panel; the right to be represented by a counsel at the person's expense; and a timely, written, reasoned decision. The FIVB's rights of appeal with respect to these cases are set forth in Article 13.2.3 below.

13.2.3 *Persons* Entitled to Appeal

In cases under Article 13.2.1, the following parties shall have the right to appeal to CAS: (a) the *Athlete* or other *Person* who is the subject of the decision being appealed; (b) the other party to the case in which the decision was rendered; (c) the FIVB and any other *Anti-Doping Organization* under whose rules a sanction could have been imposed; (d) the International

Olympic Committee or International Paralympics Committee, as applicable, where the decision may have an effect in relation to the Olympic Games or Paralympics Games, including decisions affecting eligibility for the Olympic Games or Paralympics Games; and (e) WADA. In cases under Article 13.2.2, the parties having the right to appeal to the national-level reviewing body shall be as provided in the *National Federation's* rules but, at a minimum, shall include the following parties: (a) the *Athlete* or other *Person* who is the subject of the decision being appealed; (b) the other party to the case in which the decision was rendered; (c) FIVB; and (d) WADA. For cases under Article 13.2.2, WADA and FIVB shall also have the right to appeal to CAS with respect to the decision of the national-level reviewing body.

13.3 Failure to Render a Timely Decision by the FIVB and its *National Federations*

When, in a particular case, the FIVB or its *National Federations* fail to render a decision with respect to whether an anti-doping rule violation was committed within a reasonable deadline set by WADA, WADA may elect to appeal directly to CAS as if FIVB or its *National Federations* had rendered a decision finding no anti-doping rule violation. If the CAS panel determines that an anti-doping rule violation was committed and that WADA acted reasonably in electing to appeal directly to CAS, then WADA's costs and attorney's fees in prosecuting the appeal shall be reimbursed to WADA by FIVB or its *National Federations*.

13.4 Appeals from Decisions Granting or Denying a Therapeutic Use Exemption

Decisions by WADA reversing the grant or denial of a TUE may be appealed exclusively to CAS by the *Athlete*, FIVB, or *National Anti-Doping Organization* or other body designated by a *National Federation* which granted or denied the exemption. Decisions to deny TUEs, and which are not reversed by WADA, may be appealed by *International-Level Athletes* to CAS and by other *Athletes* to the national level reviewing body described in Article 13.2.2. If the national level reviewing body reverses the decision to deny a TUE, that decision may be appealed to CAS by WADA.

When the FIVB, *National Anti-Doping Organizations* or other bodies designated by *National Federations* fail to take action on a properly submitted TUE application within a reasonable time, their failure to decide may be considered a denial for purposes of the appeal rights provided in this Article.

13.5 Appeals from Decisions Pursuant to Article 12

Decisions by the FIVB pursuant to Article 12 may be appealed exclusively to CAS by the *National Federation*.

13.6 Time for Filing Appeals

The time to file an appeal to CAS shall be twenty-one (21) days from the date of receipt of the decision by the appealing party. The above notwithstanding, the following shall apply in connection with appeals filed by a party entitled to appeal but which was not a party to the proceedings having lead to the decision subject to appeal:

- a) Within ten (10) days from notice of the decision, such parties shall have the right to request from the body having issued the decision a copy of the file on which such body relied;
- b) If such a request is made within the ten-day period, then the party making such

request shall have twenty-one (21) days from receipt of the file to file an appeal to CAS.

The above notwithstanding, the filing deadline for an appeal or intervention filed by WADA shall be the later of:

(a) Twenty-one (21) days after the last day on which any other party in the case could have appealed, or

(b) Twenty-one (21) days after WADA's receipt of the complete file relating to the decision.

ARTICLE 14 NATIONAL FEDERATION INCORPORATION OF FIVB RULES, REPORTING AND RECOGNITION

14.1 Incorporation of FIVB Anti-Doping Rules

All *National Federations* shall comply with these Anti-Doping Rules. These Anti-Doping Rules shall also be incorporated either directly or by reference into each *National Federation's* Rules. All *National Federations* shall include in their regulations the procedural rules necessary to effectively implement these Anti-Doping Rules. Each *National Federation* shall obtain the written acknowledgement and agreement of all *Athletes* subject to *Doping Control* and *Athlete Support Personnel* for such *Athletes*. Notwithstanding whether or not the required agreement has been signed, the Rules of each *National Federation* shall specifically provide that all *Athletes*, *Athlete Support Personnel* and other *Persons* under the jurisdiction of the *National Federation* shall be bound by these Anti-Doping Rules.

14.2 Statistical Reporting

14.2.1 *National Federations* shall report to the FIVB, at the end of every year, results of all *Doping Controls* within their jurisdiction sorted by *Athlete* and identifying each date on which the *Athlete* was tested, the entity conducting the *Test*, and whether the *Test* was *In-Competition* or *Out-of-Competition*. The FIVB may periodically publish *Testing* data received from *National Federations* as well as comparable data from *Testing* under FIVB jurisdiction.

14.2.2 FIVB shall publish annually a general statistical report of its *Doping Control* activities during the calendar year with a copy provided to WADA.

14.3 Doping Control Information Clearinghouse

When a *National Federation* has received an *Adverse Analytical Finding* on one of its *Athletes*, it shall report the following information to FIVB and WADA within fourteen (14) days of the process described in Articles 7.1.2 and 7.1.3: the *Athlete's* name, country, sport and discipline within the sport, whether the *Test* was *In-Competition* or *Out-of-Competition*, the date of *Sample* collection and the analytical result reported by the laboratory. The *National Federation* shall also regularly update FIVB and WADA on the status and findings of any review or proceedings conducted pursuant to Article 7 (Results Management), Article 8 (Hearings and Procedures) or Article 13 (Appeals), and comparable information shall be provided to FIVB and WADA within 14 days of the notification described in Article 7.1.9, with respect to other violations of these Anti-Doping Rules. In any case in which the period of *Ineligibility* is eliminated under Article 10.5.1 (*No Fault or Negligence*) or reduced under Article 10.5.2 (*No Significant Fault or Negligence*), FIVB and WADA shall be provided with a written reasoned decision explaining the basis for the elimination or reduction. Neither FIVB nor WADA shall disclose this information beyond those persons within their organizations with a need to

know until the *National Federation* has made public disclosure or has failed to make public disclosure as required in Article 14.4 below.

14.4 Public Disclosure

14.4.1 Neither FIVB nor its *National Federation* shall publicly identify *Athletes* whose *Samples* have resulted in *Adverse Analytical Findings*, or who were alleged to have violated other Articles of these Anti-Doping Rules until it has been determined in a hearing in accordance with Article 8 that an Anti-Doping Rule violation has occurred, or such hearing has been waived, or the assertion of an Anti-Doping Rule violation has not been timely challenged. Once a violation of these Anti-Doping Rules has been established, it shall be publicly reported within 20 days. FIVB or its *National Federation* must also report appeal decisions on an Anti-Doping Rule violation within 20 days. FIVB or its *National Federation* shall also, within the time period for publication, send all hearing and appeal decisions to WADA.

14.4.2 In any case where it is determined, after a hearing or appeal, that the *Athlete* or other *Person* did not commit an Anti-Doping Rule violation, the decision may be disclosed publicly only with the consent of the *Athlete* or other *Person* who is the subject of the decision. FIVB or its *National Federation* shall use reasonable efforts to obtain such consent, and if consent is obtained, shall publicly disclose the decision in its entirety or in such redacted form as the *Athlete* or other *Person* may approve.

14.4.3 Neither FIVB nor its *National Federation* or WADA-accredited laboratory, or official of either, shall publicly comment on the specific facts of a pending case (as opposed to general description of process and science) except in response to public comments attributed to the *Athlete*, other *Person* or their representatives.

14.5 Recognition of Decisions by FIVB and *National Federations*

Any decision of FIVB or a *National Federation* regarding a violation of these Anti-Doping Rules shall be recognized by all *National Federations*, which shall take all necessary action to render such results effective.

ARTICLE 15 RECOGNITION OF DECISIONS BY OTHER ORGANISATIONS

Subject to the right to appeal provided in Article 13, the *Testing*, *TUEs* and hearing results or other final adjudications of any Signatory to the *Code* which are consistent with the *Code* and are within the Signatory's authority, shall be recognized and respected by the FIVB and its *National Federations*. FIVB and its *National Federations* may recognize the same actions of other bodies which have not accepted the *Code* if the rules of those bodies are otherwise consistent with the *Code*.

ARTICLE 16 STATUTE OF LIMITATIONS

No action may be commenced under these Anti-Doping Rules against an *Athlete* or other *Person* for a violation of an Anti-Doping Rule contained in these Anti-Doping Rules unless such action is commenced within eight years from the date the violation occurred.

ARTICLE 17 FIVB COMPLIANCE REPORTS TO WADA

The FIVB will report to WADA on the FIVB's compliance with the *Code* every second year and shall explain reasons for any noncompliance.

ARTICLE 18 AMENDMENT AND INTERPRETATION OF ANTI-DOPING RULES

- 18.1** These Anti-Doping Rules may be amended from time to time by the FIVB Board of Administration.
- 18.2** Except as provided in Article 18.5, these Anti-Doping Rules shall be interpreted as an independent and autonomous text and not by reference to existing law or statutes.
- 18.3** The headings used for the various Parts and Articles of these Anti-Doping Rules are for convenience only and shall not be deemed part of the substance of these Anti-Doping Rules or to affect in any way the language of the provisions to which they refer.
- 18.4** The INTRODUCTION and Appendix 1 DEFINITIONS shall be considered an integral part of these Anti-Doping Rules.
- 18.5** These Anti-Doping Rules have been adopted pursuant to the applicable provisions of the *Code* and shall be interpreted in a manner that is consistent with applicable provisions of the *Code*. The comments annotating various provisions of the *Code* may, where applicable, assist in the understanding and interpretation of these Anti-Doping Rules.
- 18.6** Notice to an *Athlete* or other *Person* who is a member of a *National Federation* may be accomplished by delivery of the notice to the *National Federation*.
- 18.7** These Anti-Doping Rules shall come into full force and effect on 4 April 2014 (the "Effective Date"). They shall not apply retroactively to matters pending before the Effective Date; provided, however, that:
- 18.7.1** Any case pending prior to the Effective Date, or brought after the Effective Date based on an Anti-Doping Rule violation that occurred prior to the Effective Date, shall be governed by the predecessor to these Anti-Doping Rules in force at the time of the Anti-Doping Rule violation, subject to any application of the principle of *lex mitior* by the hearing panel determining the case.
- 18.7.2** Any Article 2.4 whereabouts violation (whether a filing failure or a missed test) declared by FIVB under rules in force prior to the Effective Date that has not expired prior to the Effective Date and that would qualify as a whereabouts violation under Article 11 of the *International Standard for Testing* shall be carried forward and may be relied upon, prior to expiry, as one of the three Filing Failures and/or Missed Tests giving rise to an Anti-Doping Rule violation under Article 2.4 of these Anti-Doping Rules.
- 18.7.3** When a period of *Ineligibility* imposed by FIVB under rules in force prior to the Effective Date has not yet expired as of the Effective Date, the *Person* who is *Ineligible* may apply to the FIVB for a reduction in the period of

Ineligibility in light of the amendments made to the *Code* as from the Effective Date. To be valid, such application must be made before the period of *Ineligibility* has expired.

18.7.4 Subject always to Article 10.7.5, Anti-Doping Rule violations committed under rules in force prior to the Effective Date shall be taken into account as prior offences for purposes of determining sanctions under Article 10.7. Where such pre-Effective Date Anti-Doping Rule violation involved a substance that would be treated as a *Specified Substance* under these Anti-Doping Rules, for which a period of *Ineligibility* of less than two years was imposed, such violation shall be considered a *Reduced Sanction* violation for purposes of Article 10.7.1.

B. Anti-Doping Education

1. FIVB's Anti-Doping programme seeks to preserve the “spirit of sport”. With doping being fundamentally contrary to the spirit of sport, the aim of the FIVB Anti-Doping education programme is to prevent the intentional or unintentional use of *Prohibited Substances* and *Prohibited Methods* in Volleyball and Beach Volleyball. Preventing doping involves raising awareness of the pertinent issues, disseminating relevant and accurate information, and positively influencing beliefs, attitudes and behaviours.
2. FIVB believes that it is vital that its *Athletes* are aware of their rights when it comes to Anti-Doping. Therefore the FIVB develops, maintains and distributes its Anti-Doping education programme, an interactive online learning tool that educates Volleyball and Beach Volleyball *Athletes* on their rights and responsibilities as well as guiding them towards a healthy lifestyle preventing them from doping. *Athletes* who successfully run through this education system will be awarded with an Anti-Doping certificate.
3. Prior to entering in Volleyball and Beach Volleyball FIVB competitions (such as, but not limited to: World Championships -including Youth and Junior-, World Tour, World League, World Grand Prix, World Cup, Club World Championships and Olympic Qualification tournaments) all *Athletes* and accredited team personnel have to successfully complete the FIVB Anti-Doping education programme.

C. Medical Controls for Referees

1. HEALTH CERTIFICATE FOR INTERNATIONAL REFEREES (REF. FORM M-4)

- 1.1 All FIVB-accredited referees must submit a completed Health Certificate for Referees (M-4) to the FIVB Medical Commission by the end of December each year.
- 1.2 FIVB-accredited referees with conditions that are incompatible with refereeing in FIVB competitions must develop a health management plan in consultation with his/her personal physician, to be submitted to the Medical Commission for approval. This plan must include specific goals to be met according to a

time schedule to be approved. Follow-up reports from the personal physician documenting adequate progress according to the plan must be submitted at regular intervals to remain on or re-enter the list of active International and FIVB referees.

2. ILLNESSES THAT ARE INCOMPATIBLE WITH REFEREEING IN FIVB COMPETITIONS

This list is not intended to be comprehensive, and the list may be continuously refined or updated. It is presented as a guide only, and it should be understood that each case will be considered independently, on its own merits.

- 2.1 Respiratory ailments
 - Acute or chronic infectious pneumopathy
 - Chronic respiratory insufficiency
- 2.2 Cardiovascular disease
 - Complicated systemic hypertension
 - Recent myocardial infarction or ischemic cardiomyopathy
 - Acute or chronic cardiac insufficiency
- 2.3 Diseases of the digestive system
 - Acute bleeding gastroduodenal ulcer
 - Haemorrhagic rectocolitis
- 2.4 Diseases of the nervous system
 - Untreated epilepsy
 - Untreated psychiatric problems
 - Acute or chronic alcoholism
 - Stroke
- 2.5 ENT disease
 - Significant hearing loss
 - Vertiginous syndromes
- 2.6 Ophthalmologic disease
 - Visual acuity on either eye of >0.80 with correction
 - Uncorrected strabismus
 - No visual field deficit
 - Untreated glaucoma
 - Other acute or chronic visual disturbances or conditions as identified by the specialist
- 2.7 Metabolic disease
 - Diabetes with degenerative complications
 - Untreated metabolic disease
 - Body mass index >30 or abdominal circumference of >102 cm for males and >88 cm for females
- 2.8 Pregnancy
 - From 6 months after gestation

3. MEDICAL CONTROL DURING COMPETITIONS

- 3.1 Prior to participating in international FIVB-sanctioned *Competitions*, the referees must present evidence of adequate health and fitness to permit completion of their assigned duties. The referee must therefore submit the appropriate form verifying their state of health, as determined by their physician, once annually. (Health Certificate for Referees M-4).
- 3.2 In all FIVB events, before starting the *Competition*, the Medical Delegate should supervise a medical check (history, blood pressure, visual acuity, visual field, color blindness, height and weight (to calculate body mass index), abdominal circumference). The medical examination should take place as early as possible after arrival at the *Event*. The results of this examination should be recorded on a report form (Referee Health Control Form M-6), which should be sealed and sent to the FIVB Medical Department at the conclusion of the event. The recommendations based on the medical examination as to the suitability of each of the referees should be communicated to the president of the Control Committee for volleyball events and the Technical Supervisor for beach volleyball events, who are the only persons entitled to exclude a referee from a competition after the report of the Medical Delegate. The details of the health examination should be kept confidential.
- 3.3. Prior to world, official and FIVB competitions, the first and second referee, and the alternate referee, line judges and scorers may be asked to undergo a breath analysis to ensure they are not intoxicated. Such random testing should be arranged by the local medical staff, and should be performed in the presence of the FIVB Medical Delegate and/or the FIVB Referee Delegate.
- 3.4 The FIVB Medical Delegate must ratify the alcohol control procedure before it is undertaken, to ensure that it is reproducible, sensitive, and that the user's breath alcohol content is reported in appropriate units to permit comparison with the FIVB standard.
- 3.5 Procedures:
- a) Forty-five minutes before the start of the match, the designated referees must be present in the control room. They should be instructed to not consume anything by mouth for 15 minutes prior to undergoing breath analysis.
 - b) The highest level of alcohol permitted is 0.1 promille (mg/L).
 - c) In the case of a positive reaction, a second test will be conducted after fifteen minutes.
 - d) If the second test is also positive, the referee must then be replaced by the FIVB Referee Delegate.
 - e) If the referee, whose alcohol breath test proved positive contests the results, he or she may request a confirmatory blood test to be performed.
 - f) The results of this examination should be recorded on a report form (Alcohol Test testimonial M-2).
 - g) The FIVB Refereeing Commission will decide on the appropriate sanctions in the case of a positive alcohol control.

D. Medical Services to be Provided During FIVB Sanctioned Competitions

The FIVB Board of Administration in its meeting of 17-19 March 2012 decided to adopt the Medical Code of the Olympic Movement for the purposes of all FIVB, World and official *Competitions*.

Prior to the actual *Competition*, the proposed venue(s) and associated facilities should be inspected to ensure the services outlined in the following checklist are available (see Operational Manual Check List Template, H Medical Room, Anti-Doping Facilities).

Checklist:

1. Confirm the availability of a *WADA*-accredited doping laboratory, and the availability of trained personnel and the necessary *Doping Control* equipment.
2. Confirm the availability of suitable rooms for the collection of urine samples in accordance with FIVB *Doping Control* Regulations.
3. Confirm the availability of breath alcohol analysis equipment.
4. Confirm the availability of appropriate space to permit referee medical controls. This medical room must be equipped with a calibrated weight scale, height rod, Snellen chart and blood pressure monitor. The referee examinations to be conducted by a physician from the organizers who is licensed to practise medicine in the organizing country.
5. Assess the adequacy of rooms designated for the Player's Medical Area and for Spectator First Aid, confirm the availability of medical equipment and personnel to staff the medical areas at the competition and training venues.
6. Discuss with the organiser the daily menu for the players, to ensure that the meal planning is in accordance with FIVB Medical & Anti-Doping Regulations.
7. Designate hospitals for possible emergency medical service for both athletes and spectators, and determine if there is an adequate mechanism for securing timely medical assistance in the hotels where the participants will be accommodated.
8. Assess the adequacy of necessary medical services, and verify the identity of:
 - The local Medical Director;
 - *Doping Control* teams:
 - medical doctor - responsible for *Doping Control*;
 - 1-2 Doping Control Officers (DCOs)
 - 2-4 persons for the escort of selected players;
 - one medical doctor, and (if indicated) one additional health care provider for the First Aid area;
 - one health care provider assigned to cover the training venue;
 - the availability of urgent care on an as-needed basis at the players' hotel, in addition to on-site emergency medical services at the playing venue(s).
 - an ambulance in front of the sports hall: resuscitation equipment and specialized medical staff to be compulsory in sports halls during competitions. An ambulance is highly recommended. In any case, the time to get an ambulance should be less than 10 minutes.
9. Following the pre-competition inspection a complete written report should be prepared, which, in turn, should be forwarded to the Medical Delegate assigned to the *Competition* in question.

10. Upon arrival at the *Competition*, the Medical Delegate should confirm that all items in the above checklist are indeed adequately addressed and provided for.

E.

Nutrition of Players During Competitions

INTRODUCTION:

The Nutritional Goal is to provide athletes with adequate amounts of food and fluids to maintain energy levels and health. The recommended amount and type of food will vary depending on what stage of competition the athlete is at when they have time to eat. These stages include pre-competition, during competition and post-competition (recovery). In some events, athletes from different teams may be in different stages at the same time, so it may be necessary to have food choices appropriate to each of the stages available on the same buffet table.

In most circumstances, a buffet table with several food choices is the best option for supplying all of the competitors with optimal nutrition. There should be at least two options from each category of the necessary food choices available for athletes at each meal. The organizer should provide at least one hot meal per day, preferably two hot meals if possible. It is also important to make every effort to supply food choices that athletes enjoy eating. They will only be able to replenish their nutritional stores if they actually consume the food and fluids. It may be necessary to consider food options that may appeal to athletes from different geographic regions, ethnicities, and religious preferences in preparing buffet menu options.

Male athletes may be expected to consume between 4500 and 5200 calories daily during competition; while women may be expected to consume 3700 to 4200 calories daily. Foods should be consumed in the following distribution to satisfy metabolic demands:

- Carbohydrates: 60-65%
- Fats: 18-20%
- Proteins: 15-18%

Calories should be consumed throughout the day, divided into four or more meals daily in accordance with the schedule of the matches. Ample time in the dining room should be allowed to meet the needs of the competing athletes. Avoid serving the same dishes repeatedly. Alternate types of meat (beef, pork, poultry, fish), as well as menu items from other food groups.

The buffet menu should be available to the FIVB Medical Delegate at the time of his or her initial inspection, prior to the start of the *Competition*.

The FIVB Medical Delegate has the right and the obligation to assess the adequacy and quality of nutrition provided to *Athletes* in FIVB-sanctioned *Events*.

ESSENTIAL COMPONENTS OF NUTRITION FOR COMPETITION

Fluids

Adequate fluid intake is important to compensate for body water loss during exercise. Greater amounts may be needed during prolonged competition, or competition in hot climates. Water, fruit juices and other non-caffeinated beverages are the best choices for the buffet line to quench thirst and prevent dehydration. An unlimited supply of water and a fluid replacement drink containing electrolytes and 6-8% carbohydrate and electrolytes should be available to all athletes at all times during training and competition. Allow for athletes to drink small quantities frequently. For beach volleyball competition, provide enough fluid for each athlete to be able to consume 4 liters of water *and* fluid replacement drink each day, so that athletes may be free to choose one or the other. This will be enough fluid to compensate for losses on hot humid days when athletes may have multiple matches. For indoor volleyball, provide 2-3 liters per competing athlete per day.

Macronutrients: Carbohydrate, Fat & Protein

The human body can metabolize energy from three dietary sources: carbohydrate, fat, and protein. Carbohydrate is the primary source of energy for all athletes. Fat is an important energy source for events that last several days. Protein is usually not used for energy, unless energy intake is less than energy expenditure. Yet, adequate amounts of dietary protein are needed for muscle building and repair after physically demanding activity.

Carbohydrate: Most athletes benefit from consuming a high carbohydrate diet. Carbohydrate-rich foods are characterized by the *Glycemic Index* (GI), which is an indicator of how rapidly blood sugar levels rise in response to the type of carbohydrate ingested. When consumed, high GI foods increase blood sugar levels rapidly, whereas medium and low GI foods take longer to digest and thus cause more gradual increases in blood sugar. Each type of carbohydrate has a place in the athlete's diet.

High GI Foods such as sugary cereals, hard candies, juices, fruit drinks, non-diet soda pop, sport drinks, white bread, and some nutrition bars largely contain primarily simple carbohydrates, or sugars. Some of these foods are sources of quick energy but provide few or none of the essential vitamins and minerals. High GI foods, particularly sport drinks, are beneficial during intense training and competition, as well as during recovery.

Medium & Low GI Foods such as brown rice and *whole grain* breads, cereals and pasta are sources of complex carbohydrates that provide energy as well as essential nutrients. Legumes (peas and lentils) and beans are rich in both carbohydrate and protein. Vegetables and fruits contain mixtures of simple and complex carbohydrates and are loaded with essential nutrients. It is important to include a variety of these foods in most, if not all, meals.

Protein: Athletes need about 250 grams of protein a day, which can be obtained by eating 5-6 servings of protein-rich foods such as 85 grams of meat, 250 mL of cottage cheese, or a glass of milk. The majority of daily protein calories should come from foods that provide high quality protein containing all of the essential amino acids.

Sources of high quality protein: lean meats and poultry, fish (fresh and canned), egg whites, dairy products (milk, cheese, cottage cheese, yogurt), and tofu.

Plant sources (lower quality): mushrooms, legumes, beans, pasta, whole grains, nuts.

Fat: Although fat is a major source of energy, excessive intakes can cause unwanted weight gain and adversely affect performance. Fats should be eaten in moderation. Fats differ in their nutritional and health values.

Limit saturated fat found in butter, rich creamy desserts and some salad dressings, pastry, animal products (bacon, fatty meats), and deep-fried foods.

Supply in moderation mono- and poly-unsaturated fats that are found in fatty fish, such as salmon, and plant-based foods, such as peanut butter, nuts, seeds, and plant oils.

F.

Duties of THE FIVB Medical Delegate

The Medical Delegate is responsible for ensuring that all relevant FIVB Medical & Anti-Doping Regulations are followed during the *Competition*. In practice, this means making certain that all medical controls carried out during the *Competition* are performed according to schedule and adhere to the FIVB protocol. Furthermore, the Medical Delegate oversees the medical services

provided during the *Competition* to assess their adequacy. To do this, he should be in contact with both the Organizing Committee and the FIVB Appeals Committee for that particular event.

Before departure: the Medical Delegate should carefully read his duties as indicated in the Operations Manual or Beach Volleyball handbook, which he should receive well before the event, and the latest FIVB Medical & Anti-Doping Regulations.

Following the pre-competition inspection (if it took place): the Medical Delegate should receive a complete written report with medical matters being described in all possible details. Based on this report, the Medical Delegate should contact the Organizer to check the medical plans and contracts (hospital, emergency, laboratories) guaranteeing the smooth running of the medical controls and medical assistance during the *Competition*.

During the Competition: the Medical Delegate is a member of the Control Committee (member of the Appeals Sub-Committee). The Medical Delegate participates in daily Control Committee meetings, General Technical Meeting, and team briefings presenting medical matters related to that event. The Medical Delegate is also responsible for organization of team doctors, physiotherapists, and local medical delegates' meeting. The purpose of the delegates' meeting is to update the team representatives and local medical delegates on the expected medical procedures during the event. It is advised to hold this meeting immediately after the General Technical Meeting.

The main responsibilities of the FIVB Medical Delegate for the particular competition are among others: anti-doping control, medical control for referees, medical assistance, athletes' nutrition.

1. DOPING CONTROL

1.1. Well before the start of the *Competition*, and after receiving the pre-competition report (if a pre-competition inspection took place), the assigned Medical Delegate, in cooperation with the event organizers, should contact the local anti-doping authority and agree upon a schedule for performing *Doping Controls*.

1.2. After arrival on site and before the start of the *Competition*, the Medical Delegate should check the state of readiness for the *Competition*. The duties of the Medical Delegate are, among others:

- to inspect the *Doping Control* facilities in competition halls,
- to verify the chips and bags for the drawing of lots,
- to supervise the medical staff two days before the *Competition* for all medical and technical matters involved in anti-doping control and give his final instructions and approval,
- to check the arrangements for transportation of the urine samples from the competition venues to the laboratory.

1.3. During the *Competition*, the Medical Delegate supervises the work of the *Doping Control* team, helping to ensure that samples are properly collected and processed, and that the "chain of custody" is maintained.

2. MEDICAL CONTROLS FOR REFEREES

2.1 After arrival on site and before the *Competition*, the Medical Delegate must inspect the rooms for medical control and check the equipment for alcohol tests and must give his final instructions and approval. He must also consult with the Refereeing Delegate about this.

2.2 Before starting the competition, the Medical Delegate should supervise the medical check (history, blood pressure, visual acuity, visual field, color blindness, height and

weight (to calculate body mass index), abdominal circumference). The medical examination should take place as early as possible after arrival at the **Event**. The results of this examination should be recorded on a report form (Referee Health Control Form M-6), which should be sealed and sent to the FIVB Medical Department at the conclusion of the *Event*. The recommendations based on the medical examination as to the suitability of each of the referees should be communicated to the president of the Control Committee for volleyball events and the Technical Supervisor for beach volleyball events, who are the only persons entitled to exclude a referee from a competition after the report of the Medical Delegate. The details of the health examination should be kept confidential.

2.3 During the *Competition*, the Medical Delegate, if possible, supervises the work of referees' alcohol control, which should be done by a medical team in the *Event* venue. The Medical Delegate should undersign the protocol from the tests performed. The protocol should then be collected by the Refereeing Delegate.

3. MEDICAL ASSISTANCE

3.1 After arrival on site and before the start of the *Competition*, the Medical Delegate should check again and confirm with the Organizer the medical plans and contracts (hospital, emergency, laboratories) guaranteeing smooth running of medical assistance during the *Competition*. The duties of the Medical Delegate are among others:

- to contact the local medical services and check the state of readiness for the *Competition*,
- to participate in the inspections of the competition and training halls and verify the rooms and equipment for medical care of the athletes and first aid for the public,
- to check the hospital proposed by the Organizer and the medical assistance where the participants are to be accommodated,
- to verify (or make sure that other Control Committee members verify) that during the preliminary enquiry the Health Certificates (M-3 form) of all players participating in the competition, the players and Officials' Agreements (M-7 form), and the accreditation of the Team Doctors are presented.

3.2 During the *Competition*, the Medical Delegate must continue to verify and propose any adjustments required for the good functioning of medical services. He supervises medical assistance in the first-aid room, on courts, and in training halls.

4. ATHLETE`S NUTRITION

The Medical Delegate must verify that meals and refreshments are provided in appropriate quality and quantity as outlined in the FIVB Medical & Anti-Doping Regulations.

4.1 After arrival on site and before the start of the *Competition*, the Medical Delegate must inspect kitchen facilities and restaurants in the venue where the participants are accommodated. He must verify that the menu fulfils all of the criteria and requirements of the teams participating in the *Competition*.

4.2. During the *Competition*, the Medical Delegate must continue to verify and propose any adjustments required for the continued proper nutrition of athletes.

5. INJURY SURVEILLANCE PROGRAM

If decided by the FIVB Medical Commission, to prepare for and implement the FIVB

Injury Surveillance Program according to the procedures outlined in Section H.

6. MEDICAL REPORTS

At the end of the *Competition*:

6.1 After the *Competition*, the Medical Delegate is obliged to prepare a report on the medical aspects of the *Competition* using the FIVB Medical Delegate Report (M-9) and forwards it to the FIVB Medical Department, and also to the President of the FIVB Medical Commission within one week after the *Competition*. He also participates in preparing the Control Committee Report before leaving the competition site.

6.2 The Medical Delegate collects the following M-Forms:

1. M-1 Form (Doping Control Form);
2. M-6 Form (Referee Health Control Form);
3. M-10 Form (Injury Report Form);

and sends them to the FIVB Medical Department **by PDF** and in a sealed envelope as confidential medical information; he can also give them to a FIVB staff going back to the Headquarters along with the results of referee medical controls.

Prior to sending the forms, the Medical Delegate must copy all forms and keep these copies in a sealed envelope for at least one month after the end of the *Competition*.

G. Health Certificates

1. All players participating in official FIVB-sanctioned Volleyball and Beach Volleyball competitions must present Player Health Certificates (M-3 Form) issued not earlier than two months prior to the start of the *Competition*. For the World League and World Grand Prix, the M-3 Form is valid for the duration of the competition period, including the finals. For Beach Volleyball, the M-3 Form is valid for one year.
2. The M-3 form should be signed by a medical doctor trained in sports medicine and by the President of the *Athlete's National Federation*.
3. The Health Certificates must be presented during the Preliminary Inquiry preceding the *Competition*.

PLAYERS' HEALTH – SAFETY

The FIVB Medical Commission strongly recommends that any team that does not have a medical doctor with them should hire a local doctor to guarantee the health and safety of their own athletes and staff on the team.

H.

Accreditation of Team Medical Doctor and Team Therapist

Possession of FIVB accreditation as an official Team Medical Doctor/Team Therapist allows an individual to take a place on the team bench during FIVB sanctioned Volleyball matches. For Beach Volleyball such an accreditation allows the individual access to the field of play to provide medical assistance during a medical time-out.

Accreditation as a Team Medical Doctor or Team Medical Doctor will be granted by the FIVB Medical Commission (or its President, acting on behalf of the Commission) on presentation of the following documents:

- 1) University diploma or therapist Education
- 2) Medical license from appropriate national health authority
- 3) Letter of support from the relevant National Olympic Committee or National Volleyball Federation
- 4) Certificate of FIVB Anti-Doping Education programme: <http://www.fivb.org/RealWinner/>
- 5) Passport sized picture (jpeg)

A Team Therapist shall be defined as an individual who has been certified as a physical therapist, athletic trainer, chiropractor or equivalent by the relevant health authorities and has a minimum a bachelor's degree (3 years of college level education).

The above mentioned documents shall be received by the FIVB Medical Department no later than 6 weeks prior to the involvement in a competition. Documents provided in a language other than English must be accompanied by a certified English translation.

The FIVB accreditation is valid also for the purposes of competitions organized by Confederations.

In case a Confederation has established an accreditation process in accordance with the provisions of this article, the holder of such accreditation is entitled to the equivalent FIVB accreditation upon filing his application together with a passport sized picture.

I. FIVB Injury Surveillance Program

1. BACKGROUND

Injury surveillance during FIVB competitions aims at providing important epidemiological information about injuries in volleyball, but also directions for injury prevention and the opportunity for monitoring long-term changes in the frequency and circumstances of injury. The FIVB Injury Surveillance Program is modelled after the IOC protocols developed for the 2008 Summer Olympic Games in Beijing and 2010 Winter Olympic Games in Vancouver.

An injury report form and procedures have been created based on the IOC model to enter the data from a particular team participating in the *Competition*. The standardized report form comprises a single page containing three sections: (A) descriptive, giving information about *Event* and particular match, (B) giving the team doctor's contact information and details about injuries, and (C) definitions and codes of all variables to be documented.


Injury Report Form
M-10

Event:

Team: Match: - Match #: Date:

Place: Dates:

Team Doctor: Mobile: E-mail:

A

NOTE: An injury is defined as any physical complaint sustained by a player during the match or during training prior to the match.

Any injury? NO YES If "YES", please complete information below

Player #	Function	Time of injury		Injury location	Type of injury			Cause of injury		Severity	
		Training (date)	Match (set #)		Code	Description	Code	Description	Code	Description	Returned to game
										<input type="checkbox"/> Yes <input type="checkbox"/> No	
										<input type="checkbox"/> Yes <input type="checkbox"/> No	
										<input type="checkbox"/> Yes <input type="checkbox"/> No	
										<input type="checkbox"/> Yes <input type="checkbox"/> No	
										<input type="checkbox"/> Yes <input type="checkbox"/> No	

B

Definitions & Codes

Player function:
S: Setter
D: Diagonal
O: Outside hitter
C: Center player
L: Libero

Injury location - injured body part:
Head and trunk
1. face (incl. eye, ear, nose)
2. head
3. neck/cervical spine
4. thoracic spine/upper back
5. sternum/ribs
6. lumbar spine/lower back
7. abdomen
8. pelvis/sacrum/buttock

Upper extremity
11. shoulder/clavicle
12. upper arm
13. elbow
14. forearm
15. wrist
16. hand
17. finger
18. thumb

Lower extremity
21. hip
22. groin
23. thigh (a: anterior/p: posterior)
24. knee (m: medial/l: lateral)
25. lower leg (a: anterior/p: posterior)
26. Achilles tendon
27. ankle (m: medial/l: lateral)
28. foot/toe

Type of injury - diagnosis:
1. concussion (regardless of loss of consciousness)
2. fracture (traumatic)
3. stress fracture (overuse)
4. other bone injuries
5. dislocation, subluxation
6. tendon rupture
7. ligamentous rupture
8. sprain (injury of joint and/or ligaments)
9. lesion of meniscus or cartilage
10. strain/muscle rupture/tear
11. contusion/haematoma/bruise
12. tendinitis/tendinopathy
13. arthritis/synovitis/bursitis
14. fasciitis/aponeurosis injury
15. impingement
16. laceration/abrasion/skin lesion
17. dental injury/broken tooth

18. nerve injury/spinal cord injury
19. muscle cramps or spasm
20. other

Cause of injury - diagnosis:
1. overuse (gradual onset)
2. overuse (sudden onset)
3. non-contact trauma
4. recurrence of previous injury
11. contact with another athlete
12. contact: moving object (eg. ball)
13. contact: stagnant object (eg. net, post)
14. violation of rules (foul play)
21. field of play conditions
22. hall environmental conditions
23. equipment failure
24. other

Severity - expected duration of absence from training or competition (in days):
0: 0 days
1: 1 day
2: 2 days
7: 1 week
14: 2 weeks
21: 3 weeks
28: 4 weeks
>30: more than 4 weeks
>180: 6 months or more

Signature Team Doctor:

C

2. CONFIDENTIALITY

Confidentiality of all information shall be ensured.

The player number is used only to avoid duplicate reports. The identity of the player will not be entered into the injury database; all injury report forms will be stored in a locked filing cabinet and will be anonymized after the end of each *Event*. All M-10 forms will be safely stored and anonymized after the tournament. All reports will be written to guarantee that no individual athlete or team can be identified.

3. IMPLEMENTATION

Implementation of the Injury Surveillance Program should consist of the following steps:

3.1. The FIVB Medical Commission decides, on an annual basis, during which FIVB *Events* the FIVB Injury Surveillance Program should be implemented.

3.2. *National Federations* and the medical representatives of all participating teams should be informed in writing about the program well before the particular *Event* (at least 30 days), with a request to participate in the study. Team medical representatives should receive a copy of the protocol, the FIVB Injury Report Form (M-10), as well as examples of how to record injuries.

3.3. The *Athlete's* informed consent to participate in the Injury Surveillance Program should be included in their registration for the tournament. During the Team Doctor's Meeting (immediately after the General Technical Meeting), the medical representatives of each team and local medical staff should be informed about the FIVB Injury Surveillance Program and instructed about how to record injuries.

3.4. During the tournament the returned injury report forms should be checked on a daily basis by the FIVB Medical Delegate, who should be available to answer questions and to provide motivation to the team physicians. Each day, all team physicians should receive feedback from the FIVB Medical Delegate on the completeness of their reports to increase their compliance with the study.

3.5. The team physicians and all participating volleyball federations should receive a formal report on the results of the surveillance program in due time after the end of the tournament.

4. PROCEDURES DURING THE TOURNAMENT

4.1. Team Doctor's Meeting

During the Team Doctor's Meeting held immediately after the General Technical Meeting with team medical representatives and local medical staff participating, all aspects of the FIVB Injury Surveillance Program should be clarified by the FIVB Medical Delegate. Further detailed instructions should be given with examples of how to report injuries. Special attention should be focused on the following points:

4.1.1 Definition of injury

Any musculoskeletal complaint newly incurred due to competition and/or training during the tournament that received medical attention regardless of the consequences with respect to absence from competition or training. The injury definition includes five aspects: (1) all injuries that received medical attention (not only time loss or reduced performance), (2) newly incurred (exclusion of pre-existing and fully rehabilitated injuries), (3) injuries occurring during competition or training, (4) injuries occurring during the period of the tournament and (5) exclusion of illness and diseases.

4.1.2 Definition of newly incurred injuries

Only injuries that have occurred during the present match or during the training period since the last match of the team should be reported. Recurrent injuries (injuries of the same location and type) should only be reported if the *Athlete* has returned to full participation after the previous injury. Pre-existing, not fully rehabilitated injuries should not be reported.

If an *Athlete* injures two body parts (e.g. an ankle sprain and an abrasion of the knee) or incurs two types of injury in one body part (a contusion and a laceration of the calf) in one incident, this is counted as one injury with two diagnoses. If the same injury of an

Athlete is again reported with the same date of injury but a different diagnosis and/or duration of absence, this should be regarded as a corrected update of the injury report. If an *Athlete* incurs the same type of injury at the same body part more than once during a championship, this should be regarded as a recurrence and should not be counted as a new injury.

If an injury was reported for the first time during a tournament but the physician reports the cause as a “recurrence of previous injury”, this injury is counted as an injury because no details about recovery from the previous injury are available, and it is assumed that the *Athlete* was able to compete at the beginning of the tournament.

Injuries should be diagnosed and reported by qualified medical personnel (team physician, physiotherapist) to ensure valid information regarding the characteristics of the injury and a comparable standard of data. In order to ensure that the information about injured athletes of teams that do not have a physician or physiotherapist is also received, injuries should also be reported using the same M-10 form by the local physician in the First Aid Area or the polyclinic of the local organizers.

4.1.3 Quality control and response check

On a daily basis, all team physicians should receive from FIVB Medical Delegate feedback on the completeness of their reports to increase their compliance with the study.

The FIVB Medical Delegate should provide medical representatives of all participating teams with copies of M-10 forms with examples of how to complete information.

5. PROCEDURE FOR THE FIVB INJURY REPORT FORMS DISTRIBUTION AND COLLECTION

5.1. Implementation

The implementation of the system of distribution and collection of the M-10 forms during the tournament is the responsibility of the FIVB Medical Delegate. Before each day of the tournament, the Medical Delegate should prepare M-10 forms and complete the information on the forms (Section A, see example below) according to the match schedule for that particular day.

FIVB		Injury Report Form		M-10	
Event:	<input type="text" value="FIVB World League Finals"/>	Place:	<input type="text" value="Belgrade, SRB"/>	Dates:	<input type="text" value="21.07.-26.07.2009"/>
Team:	<input type="text" value="USA"/>	Match:	<input type="text" value="SRB"/> - <input type="text" value="USA"/>	Match #:	<input type="text" value="5"/>
		Date:	<input type="text" value="26.07.2009"/>		
Team Doctor:	<input type="text"/>	Mobile:	<input type="text"/>	E-mail:	<input type="text"/>

5.2 Data Collection Procedure

Well before the start of the first match of a particular day of the tournament, the Jury President designated for each competition hall should receive from the FIVB Medical Delegate M-10 forms in a sufficient number corresponding to the number of teams, according to match schedule of that day, with completed information in section A, as well as envelopes to be sealed.

The responsibility of the Jury President before each match is to give the appropriate M-10 forms to the person in charge of the team who proceeds to the jury table with the identification papers of the players. This person should be informed by the Jury President about his responsibility to return, in a sealed envelope, the M-10 forms completed by the team doctor/physiotherapist immediately upon conclusion of the match.

The responsibility of the Jury President after each match is to collect completed M-10 forms from the team manager, when he/she approaches the jury table to collect the identification papers of the players.

The responsibility of the FIVB Medical Delegate is to collect completed M-10 forms from Jury President from each competition hall (if there is more than one venue) at the end of each competition day.

The responsibility of the FIVB Medical Delegate is to review the M-10 forms each day for accuracy and completeness, store the completed forms safely and guarantee the confidentiality of all information collected throughout the tournament.

6. AT THE END OF THE TOURNAMENT

The original M-10 forms are sent under seal to the FIVB after the *Event* (which is the responsibility of the Technical Supervisor). The Medical Delegate is responsible for sending a sealed set of copies of the M-10 forms to the FIVB Medical Department.

INJURY PREVENTION DEVICES PLAYERS ARE USING

- a) Ankle braces are acceptable
- b) All taping is acceptable, but it is recommended to have one colour, i.e. white. Hand taping is acceptable.
- c) Knee pads and elbow pads are acceptable.
- d) Compression pads are approved but require to be of the same colour design of the uniform.
- e) Gloves are not accepted, except in case of medical necessity especially in the case of skin disease.

J. FIVB Sport Science Award

1. **AIM**

This award was established by the FIVB to recognize significant career contributions to the field of volleyball sports medicine and science. In general, the recipient will have established a history of contributions to the field but, in rare cases, the recipient will have established a single work that is truly groundbreaking and of exceptional significance or elegance.

2. **SELECTION**

A five-person selection committee - which shall consist of two members from the Medical Commission (including the President, who shall chair the committee), and one member from each of the following FIVB Commissions: Coaching, Technical, and Development – shall select from the received nominations. In cases where a vote ends in a tie, the President of the FIVB shall cast the deciding vote.

3. **AWARDING CEREMONY**

The winner shall be invited to make a presentation to the Medical Commission during a dinner ceremony, where the recipient will receive a prize in the amount of \$5,000 in addition to an FIVB medal.

K. APPENDICES

APPENDIX 1 - DEFINITIONS

Adverse Analytical Finding. A report from a laboratory or other approved *Testing* entity that identifies in a *Sample* the presence of a *Prohibited Substance* or its *Metabolites* or *Markers* (including elevated quantities of endogenous substances) or evidence of the *Use of a Prohibited Method*.

Anti-Doping Organization. A *Signatory* that is responsible for adopting rules for initiating, implementing or enforcing any part of the *Doping Control* process. This includes, for example, the International Olympic Committee, the International Paralympic Committee, other *Major Event Organizations* that conduct *Testing* at their *Events*, WADA, International Federations, and *National Anti-Doping Organizations*.

Athlete. Any *Person* who participates in sport at the international level (as defined by each International Federation), the national level (as defined by each *National Anti-Doping Organization*, including but not limited to, those *Persons* in its *Registered Testing Pool*), and any other competitor in sport who is otherwise subject to the jurisdiction of any *Signatory* or other sports organization accepting the *Code*. All provisions of the *Code*, including, for example, *Testing*, and *TUE's* must be applied to international and national-level competitors. Some *National Anti-Doping Organizations* may elect to test and apply anti-doping rules to recreational-level or masters competitors who are not current or potential national-caliber competitors. *National Anti-Doping Organizations* are not required, however, to apply all aspects of the *Code* to such *Persons*. Specific national rules may be established for *Doping Control* for non-international-level or national-level competitors without being in conflict with the *Code*. Thus, a country could elect to test recreational-level competitors but not require *TUEs* or whereabouts information. In the same manner, a *Major Event Organization* holding an *Event* only for masters-level competitors could elect to test the competitors but not require advance *TUE* or whereabouts information. For purposes of Article 2.8 (Administration or *Attempted Administration*) and for purposes of anti-doping information and education, any *Person* who participates in sport under the authority of any *Signatory*, government, or other sports organization accepting the *Code* is an *Athlete*.

Athlete Support Personnel. Any coach, trainer, manager, agent, team staff, official, medical, paramedical personnel, parent or any other *Person* working with, treating or assisting an *Athlete* participating in or preparing for sports *Competition*.

Attempt. Purposely engaging in conduct that constitutes a substantial step in a course of conduct planned to culminate in the commission of an anti-doping rule violation. Provided, however, there shall be no anti-doping rule violation based solely on an *Attempt* to commit a violation if the *Person* renounces the attempt prior to it being discovered by a third party not involved in the *Attempt*.

Atypical Finding. A report from a laboratory or other WADA-approved entity which requires further investigation as provided by the *International Standard* for Laboratories or related Technical Documents prior to the determination of an *Adverse Analytical Finding*.

CAS. The Court of Arbitration for Sport.

Code. The World Anti-Doping *Code*.

Competition. A single volleyball or beach volleyball match.

Consequences of anti-doping rule violations. An *Athlete's* or other *Person's* violation of an anti-doping rule may result in one or more of the following: (a) *Disqualification* means the *Athlete's*

results in a particular *Competition* or *Event* are invalidated, with all resulting consequences including forfeiture of any medals, points and prizes; (b) *Ineligibility* means the *Athlete* or other *Person* is barred for a specified period of time from participating in any *Competition* or other activity or funding as provided in Article 10.9; and (c) *Provisional Suspension* means the *Athlete* or other *Person* is barred temporarily from participating in any *Competition* prior to the final decision at a hearing conducted under Article 8 (Right to a Fair Hearing).

Disqualification. See *Consequences of anti-doping rule violations, above.*

Doping Control. All steps and processes from test distribution planning through to ultimate disposition of any appeal including all steps and processes in between such as provision of whereabouts information, sample collection and handling, laboratory analysis, *TUEs*, results management, and hearings.

Event. A series of individual *Competitions* conducted together under one ruling body (e.g., the Olympic Games, FIVB World Championships, or Pan American Games).

Event Period. The time between the beginning and end of an *Event*, as established by the ruling body of the *Event*.

In-Competition. Unless provided otherwise in the rules of an International Federation or other relevant *Anti-Doping Organization*, "*In-Competition*" means the period commencing twelve hours before a *Competition* in which the *Athlete* is scheduled to participate through the end of such *Competition* and the *Sample* collection process related to said *Competition*.

Independent Observer Program. A team of observers, under the supervision of *WADA*, who observe and may provide guidance on the *Doping Control* process at certain *Events* and report on their observations.

Individual Sport. Any sport that is not a *Team Sport*.

Ineligibility. See *Consequences of Anti-Doping Rule Violations above.*

International Event. An *Event* where the International Olympic Committee, the International Paralympic Committee, an International Federation, a *Major Event Organization*, or another international sport organization is the ruling body for the *Event* or appoints the technical officials for the *Event*.

International-Level Athlete. *Athletes* designated by one or more International Federations as being within the *Registered Testing Pool* for an International Federation.

International Standard. A standard adopted by *WADA* in support of the *Code*. Compliance with an *International Standard* (as opposed to another alternative standard, practice or procedure) shall be sufficient to conclude that the procedures addressed by the *International Standard* were performed properly. *International Standards* shall include any Technical Documents issued pursuant to the *International Standard*.

Major Event Organizations. The continental associations of *National Olympic Committees* and other international multi-sport organizations that function as the ruling body for any continental, regional or other *International Event*.

Marker. A compound, group of compounds or biological parameter(s) that indicates the *Use* of a *Prohibited Substance* or *Prohibited Method*.

Metabolite. Any substance produced by a biotransformation process.

Minor. A natural *Person* who has not reached the age of majority as established by the applicable laws of his or her country of residence.

National Anti-Doping Organization. The entity(ies) designated by each country as possessing the primary authority and responsibility to adopt and implement anti-doping rules, direct the collection of *Samples*, the management of test results, and the conduct of hearings, all at the national level. This includes an entity which may be designated by multiple countries to serve as regional *Anti-Doping Organization* for such countries. If this designation has not been made by the competent public authority(ies), the entity shall be the country's *National Olympic Committee* or its designee.

National Event. A sport *Event* involving international or national-level *Athletes* that is not an *International Event*.

National Federation. A national or regional entity which is a member of or is recognized by FIVB as the entity governing the FIVB's sport in that nation or region.

National Olympic Committee. The organization recognized by the International Olympic Committee. The term *National Olympic Committee* shall also include the National Sport Confederation in those countries where the National Sport Confederation assumes typical *National Olympic Committee* responsibilities in the anti-doping area.

No Advance Notice. A *Doping Control* which takes place with no advance warning to the *Athlete* and where the *Athlete* is continuously chaperoned from the moment of notification through *Sample* provision.

No Fault or Negligence. The *Athlete's* establishing that he or she did not know or suspect, and could not reasonably have known or suspected even with the exercise of utmost caution, that he or she had *Used* or been administered the *Prohibited Substance* or *Prohibited Method*.

No Significant Fault or Negligence. The *Athlete's* establishing that his or her fault or negligence, when viewed in the totality of the circumstances and taking into account the criteria for *No Fault or Negligence*, was not significant in relationship to the anti-doping rule violation.

Out-of-Competition. Any *Doping Control* which is not *In-Competition*.

Participant. Any *Athlete* or *Athlete Support Personnel*.

Person. A natural *Person* or an organization or other entity.

Possession. The actual, physical possession, or the constructive possession (which shall be found only if the person has exclusive control over the *Prohibited Substance/Method* or the premises in which a *Prohibited Substance/Method* exists); provided, however, that if the person does not have exclusive control over the *Prohibited Substance/Method* or the premises in which a *Prohibited Substance/Method* exists, constructive possession shall only be found if the person knew about the presence of the *Prohibited Substance/Method* and intended to exercise control over it. Provided, however, there shall be no anti-doping rule violation based solely on possession if, prior to receiving notification of any kind that the *Person* has committed an anti-doping rule violation, the *Person* has taken concrete action demonstrating that the *Person* never intended to have possession and has renounced possession by explicitly declaring it to an *Anti-Doping Organization*. Notwithstanding anything to the contrary in this definition, the purchase (including by any electronic or other means) of a *Prohibited Substance* or *Prohibited Method* constitutes possession by the *Person* who makes the purchase.

Prohibited List. The List identifying the *Prohibited Substances* and *Prohibited Methods*.

Prohibited Method. Any method so described on the *Prohibited List*.

Prohibited Substance. Any substance so described on the *Prohibited List*.

Provisional Hearing. For purposes of Article 8.6, an expedited abbreviated hearing occurring prior to a hearing under Article 8 (Right to a Fair Hearing) that provides the *Athlete* with notice and an opportunity to be heard in either written or oral form.

Provisional Suspension. See *Consequences above*.

Publicly Disclose or Publicly Report. To disseminate or distribute information to the general public or persons beyond those persons entitled to earlier notification in accordance with Article 14.

Registered Testing Pool. The pool of top level *Athletes* established separately by each International Federation and *National Anti-Doping Organization* who are subject to both *In-Competition* and *Out-of-Competition Testing* as part of that International Federation's or National Anti-Doping Organization's test distribution plan.

Retroactive TUE. As defined in the *International Standard for Therapeutic Use Exemptions*.

Sample. Any biological material collected for the purposes of *Doping Control*.

Signatories. Those entities signing the *Code* and agreeing to comply with the *Code*, including the International Olympic Committee, International Federations, International Paralympic Committee, *National Olympic Committees*, National Paralympic Committees, *Major Event Organizations*, *National Anti-Doping Organizations*, and WADA.

Specified Substances. As defined in Article 4.2.2.

Substantial Assistance. For purposes of Article 10.5.3, a *Person* providing *Substantial Assistance* must: (1) fully disclose in a signed written statement all information he or she possesses in relation to anti-doping rule violations, and (2) fully cooperate with the investigation and adjudication of any case related to that information, including, for example, presenting testimony at a hearing if requested to do so by an *Anti-Doping Organization* or hearing panel. Furthermore, the information provided must be credible and must comprise an important part of any case which is initiated or, if no case is initiated, must have provided a sufficient basis on which a case could have been brought.

Tampering. Altering for an improper purpose or in an improper way; bringing improper influence to bear; interfering improperly; obstructing, misleading or engaging in any fraudulent conduct to alter results or prevent normal procedures from occurring; or providing fraudulent information to an *Anti-Doping Organization*.

Target Testing. Selection of *Athletes* for *Testing* where specific *Athletes* or groups of *Athletes* are selected on a non-random basis for *Testing* at a specified time.

Team Sport. For the purposes of these rules, volleyball and beach volleyball are both considered as team sports.

Testing. The parts of the *Doping Control* process involving test distribution planning, *Sample* collection, *Sample* handling, and *Sample* transport to the laboratory.

Trafficking. Selling, giving, transporting, sending, delivering or distributing a *Prohibited Substance* or *Prohibited Method* (either physically or by any electronic or other means) by an *Athlete*, *Athlete Support Personnel* or any other *Person* subject to the jurisdiction of an *Anti-Doping Organization* to any third party; provided, however, this definition shall not include the actions of bona fide medical personnel involving a *Prohibited Substance* used for genuine and legal therapeutic purposes or other acceptable justification, and shall not include actions involving *Prohibited Substances* which

are not prohibited in *Out-of-Competition Testing* unless the circumstances as a whole demonstrate such *Prohibited Substances* are not intended for genuine and legal therapeutic purposes.

TUE. As defined in Article 2.6.1.

TUE Panel. As defined in Article 4.4.3.

UNESCO Convention. The International Convention against Doping in Sport adopted by the 33rd session of the UNESCO General Conference on 19 October 2005 including any and all amendments adopted by the States Parties to the Convention and the Conference of Parties to the International Convention against Doping in Sport.

Use. The utilization, application, ingestion, injection or consumption by any means whatsoever of any *Prohibited Substance* or *Prohibited Method*.

WADA. The World Anti-Doping Agency.

APPENDIX 2 - LIST OF PROHIBITED SUBSTANCES

The List of *Prohibited Substances* is published on an annual basis by *WADA*. Note that this list is not exhaustive and is intended to serve only as an example of the types of substances and methods that are restricted. Any modification brought to this list by *WADA* after its publication in the FIVB Medical & Anti-Doping Regulations shall become effective for all FIVB purposes three months after the publication of the *Prohibited List* by *WADA* without requiring any further action by the FIVB. The *Prohibited List* in force is available online at the *WADA* website (www.wada-ama.org) and on the FIVB website (www.fivb.org/EN/Medical)