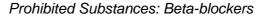


## Checklist for Therapeutic Use Exemption (TUE) Application:

## **Cardiovascular Conditions**





This Checklist is to guide the athlete and their physician on the requirements for a TUE application that will allow the TUE Committee to assess whether the relevant ISTUE Criteria are met.

Please note that the completed TUE application form alone is not sufficient; supporting documents <u>MUST</u> be provided. A completed application and checklist DO NOT guarantee the granting of a TUE. Conversely, in some situations a legitimate application may not include every element on the checklist.

TUE Application form must include;		
	All sections completed in legible handwriting	
	All information submitted in English/Italian	
	A signature from the applying physician	
	The Athlete's signature	
Med	Medical report should include details of;	
	Medical history: family history or the disease, symptoms, presentation at first manifestation, course of disease, start of treatment	
	Findings on examination: pulse quality, auscultation, any signs of heart failure	
	Interpretation of symptoms, signs and test results by a specialist physician; i.e. cardiologist	
	Diagnosis (stable angina pectoris; secondary prevention after myocardial infarction; symptomatic heart failure II-IV); supraventricular and ventricular arrhythmias; Long QT syndrome; acute coronary syndrome; hypertension without other risk factors)	
	Medication prescribed (beta-blockers are prohibited in specific sports only) including dosage, frequency, administration route	
	Trial of use of non-prohibited treatment and outcome: important to show that alternatives are either not effective or not available	
	Consequences to the athlete if beta-blocker treatment was withheld.	
Dia	Diagnostic test results should include copies of;	
	Laboratory tests: biomarkers as applicable (creatine kinase, troponin I and T, myoglobin, BNP and NT-proBNP)	
	Resting ECG, stress ECG, Holter monitoring blood pressure readings as applicable	
	Imaging findings: chest radiograph, magnetic resonance imaging, repeated measures of ejection fraction and structural remodeling, radionuclide ventriculography and nuclear imaging (myocardial scintigraphy), coronary CT, echocardiography and coronary angiography as applicable	
Additional information included		
	As per ADO specification (e.g., performance results before and under treatment)	