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# UEFA doping control procedure: a step-by-step guide

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## 1. PLAYER SELECTION

- a) Players are selected for doping control either via a random draw conducted by the UEFA Doping Control Officer (DCO), witnessed by team representatives, or according to selection criteria determined in advance by UEFA, including target testing.
- b) Any player may be selected for doping control by the DCO in addition to the players chosen in the selection draw. This includes players who are replaced after sustaining an injury in the warm-up.
- c) Teams are notified of which players will be tested fifteen minutes before the end of the match.



- d) During the doping control a player may have to provide:
  - i. Only a urine sample
  - ii. Only a blood sample
  - iii. Both urine and blood samples

If both urine and blood samples are to be collected from the players, there will be two DCOs – one to collect the urine samples and one to collect the blood.

## 2. NOTIFICATION OF DOPING CONTROL

- a) At the end of the match when leaving the pitch, the selected players will be notified that they have to undergo a doping control. The team doctor will usually do this but sometimes it will be the DCO or an official chaperone. The players must sign the notification section of the doping control (D2) form to acknowledge that they have been notified of their obligation to undergo a doping control.
- b) After notification, players must report directly to the doping control station. They are permitted to give flash interviews in the tunnel area but may **not** return to their dressing room. If a player needs personal belongings or a change of kit, the team doctor or other team representative can bring these to the doping control station.
- c) Once in the doping control station, a player may not leave without the express permission of the DCO. If permitted to leave, the player will be escorted at all times by a chaperone or by a UEFA official.
- d) In all cases the club or association is responsible for ensuring that their selected players report **directly and without delay** to the doping control station as soon as the match has ended.

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### 3. IN THE DOPING CONTROL STATION

- a) In the doping control station, the players may be asked by the DCO to identify themselves by means of their passport or other photo ID.
- b) The DCO explains the doping control procedure to the players and, if necessary, their team doctors. If a player refuses to give a sample, of either blood or urine, they can be suspended from football for four years.
- c) The team doctor must complete the declaration of medication section of the D2 form for each player upon arrival in the doping control station (see section 9).



- d) The players remain in the waiting area of the doping control station until they are ready to provide a sample. Sealed caffeine-free and alcohol-free drinks are provided for the players, although they may also consume, at their own risk, their own drinks or food brought to the doping control station. Alcohol is not permitted in the doping control station.
- e) Players may use mobile devices in the waiting area of the doping control station but are not permitted to take any photographs.
- f) Smoking is not permitted in the doping control station.

### 4. BLOOD SAMPLES

- a) If players are required to provide urine and blood samples, they would normally give the blood samples first.
- b) Players must remain seated and relaxed for at least ten minutes before providing a blood sample.
- c) When the UEFA Blood Collection Officer (BCO) indicates it is time for the player to give a sample, the player chooses the sample collection kit and checks that it is clean and intact. The BCO then assembles the kit in sight of the player.

- d) The BCO assesses the most suitable arm from which to collect blood; this will usually be the player's non-dominant arm. If necessary, the BCO places a tourniquet around the arm.



- e) The skin at the puncture site is cleaned with a sterile swab before the BCO inserts the needle into the vein and draws the required amount of blood.
- f) The BCO removes the needle from the player's arm and places a pad over the puncture site. The player presses firmly on the pad.
- g) The player then chooses a sample container kit from the selection available and checks that it is intact and that the numbers on both containers (A and B) are the same.
- h) The BCO places a blood sample into each of the sample containers. The BCO then closes the containers tightly before both the player and BCO check that they are properly sealed.



- i) The sealed sample containers are kept at room temperature until all players have been tested, when they are then placed in a secure cool box for transportation to the laboratory.
- j) If, for any reason, the BCO is unable to draw sufficient blood from his first attempt, he tries again and makes a maximum of three attempts to collect the required sample. No more than three attempts to insert a needle into a player's arm shall be made. If, after three attempts, the BCO has still not drawn the required blood he shall terminate the blood sample collection.

## 5. URINE SAMPLES: SAMPLE PROVISION

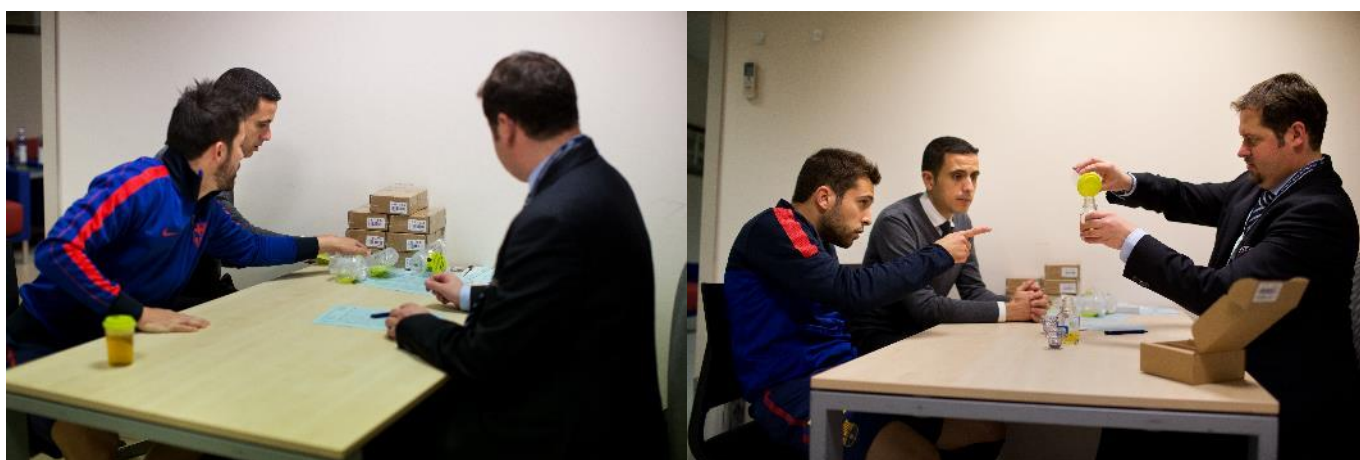
- a) When the player is ready to provide a urine sample, the DCO instructs them to rinse their hands under a tap.



- b) The player then selects a sealed collection beaker, and provides a urine sample in the toilet cubicle under the constant observation of the DCO. All UEFA DCOs are medical doctors.
- c) A minimum volume of 90ml is required. If the player provides less, the partial sample procedure which is described in step 10 must be followed.

## 6. URINE SAMPLES: SELECTION OF BOTTLES

- a) Having provided a sample of at least 90ml, the player selects a sealed bottle container with individual code numbers. The container's plastic seal must be intact; if it is not, an alternative container must be used.
- b) The player breaks the seal on the bottle container to obtain the two bottles – A and B.
- c) Both the player and the DCO should check that the bottles are in proper condition and intact, and that all the numbers of each kit component are identical.



## 7. URINE SAMPLES: DIVIDING THE SAMPLE

- a) 60ml of the urine is poured into the A bottle, and 30 ml into the B bottle. The player can pour this themselves or ask the DCO to do it on their behalf.

- b) A sufficient volume of urine should be left in the collection beaker to allow the DCO to test the specific gravity (density) of the sample.
- c) The bottles are closed. When the lids cannot be tightened further, the player checks that no urine can leak out by tipping the bottles upside down.
- d) The player should make a final check to be sure that the code numbers on the bottles and the bottle caps match those recorded on the doping control (D2) form.
- e) The DCO seals each bottle inside a plastic bag and places them back into the cardboard container.

## 8. URINE SAMPLES: MEASUREMENT OF SPECIFIC GRAVITY (S/G)

- a) The DCO uses a refractometer to measure the specific gravity (density) of the sample. If the specific gravity of the sample is lower than 1.005, the player will have to continue to give samples until a suitable specific gravity is reached.



## 9. PAPERWORK – DOPING CONTROL (D2) FORM

All the details of the doping control, both blood and urine samples, are recorded on a single form made up of several sections, each of which must be completed:

### SECTION 1. PLAYER INFORMATION

- a) This section is completed by the DCO before the doping control starts. The details must be checked by the player.

### SECTION 2. PLAYER NOTIFICATION

- a) The DCO, team representative and the player must sign this notification. In signing, the player indicates that they are aware they must provide a sample and that they know the consequences of refusing to provide one.

### SECTION 3a. INFORMATION FOR ANALYSIS

- a) This section is completed by the DCO, and contains the identification numbers of the sample collection bottles. In case of a urine partial sample, the number of the security bag is also recorded here.

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## SECTION 3b. DECLARATION OF MEDICATION

- a) The doctor must list any medication or supplements the player has taken in the seven days prior to the doping control. If the player is undergoing a blood test the doctor must also list any blood transfusions received by the player in the previous three months.

## CHECKING AND SIGNING THE DOPING CONTROL FORM

- a) At the end of the doping control, the player and the DCO should check that the doping control form has been correctly filled in. The DCO, the team doctor and the player then sign the form.
- b) The player receives their personal copy (the pink part) of the D2 form.

## 10. URINE SAMPLES: PARTIAL SAMPLE PROCEDURE

- a) If the urine sample provided by the player is less than 90ml, the player or the DCO pours the partial sample into the A bottle and closes this bottle with the interim sealing device before replacing the lid. The bottle is then placed back in the cardboard container, and sealed inside the plastic security bag.
- b) The number of the security bag and the quantity of urine collected is written on the doping control (D2) form, which the player then initials.
- c) When ready to provide more urine, the player identifies their initial sample by checking the code number on the security bag against the number on the doping control (D2) form. The player then urinates again into a clean, unused beaker.
- d) The player then selects another new, unused, collection beaker and pours the partial sample from the A bottle into the new collection beaker. The second sample is then added to this until there is a maximum of 100ml in the new beaker.
- e) Once the required volume of at least 90ml is obtained, the testing can continue as from section 7.

## 11. INJURED PLAYERS; RED CARD; PLAYERS REFUSING TO UNDERGO A DOPING CONTROL

- a) If a selected player is injured during a match, they are examined by the DCO who determines whether they are fit to complete a doping control. If the DCO considers that the player is not capable, they are replaced with the first selected reserve player. Note that as a general rule, if the player does not need to leave the stadium for immediate medical treatment, they will be required to complete the doping control.
- b) If a player is shown a red card at any time during the match, the player must remain available to undergo a doping control after the match. The player should therefore not leave the stadium before the end of the match.
- c) Refusal to undergo a doping control is a serious doping offence and can lead to a player being banned for four years.





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