



Checklist for Therapeutic Use Exemption (TUE) Application:

Sinusitis/Rhinosinusitis

Prohibited Substances: Pseudoephedrine and Glucocorticoids



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 MUST 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.

<input type="checkbox"/>	TUE Application form must include:
<input type="checkbox"/>	All sections completed in legible handwriting
<input type="checkbox"/>	All information submitted in [language(s) as per ADO preferences]
<input type="checkbox"/>	A signature from the applying physician
<input type="checkbox"/>	The Athlete's signature
<input type="checkbox"/>	Medical report should include details of:
<input type="checkbox"/>	Medical History: Accurate symptoms (must include at least two of the following: facial pain, nasal obstruction, nasal purulence/discharge, hyposmia/anosmia); intensity (including improvement or worsening); and duration of symptoms (days/weeks).
<input type="checkbox"/>	Examination findings: Congestion/obstruction, pressure pain, discharge, smell.
<input type="checkbox"/>	Diagnosis.
<input type="checkbox"/>	Dosage, frequency, and administration route of Pseudoephedrine and/or Glucocorticoids. (Note: Both are prohibited In-Competition only. Glucocorticoids are prohibited only when administered systemically. Pseudoephedrine is prohibited if the therapeutic dose exceeds 240 mg/day or if used in extended-release form.)
<input type="checkbox"/>	Explanation of why alternative non-prohibited treatments are not used or are insufficient, and the expected duration of treatment.
<input type="checkbox"/>	Diagnostic test results should include copies of:
<input type="checkbox"/>	Laboratory tests: Not mandatory (e.g., nasal culture).
<input type="checkbox"/>	Imaging results or other investigations: Confirmation by CT scan or Endoscopy is required only for chronic conditions.
<input type="checkbox"/>	Additional information (if necessary)
<input type="checkbox"/>	As per ADO specification.