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1. **Objective**

This guideline expands upon the concepts in the *International Standard for Testing* and details the recommended process for the collection of blood for doping control purposes in accordance with Article 2.1 of the *Code* (Presence) and Article 2.2 (Use), both in and out-of-competition. The guideline therefore includes information on planning and preparation, sample collection and post-test processing and administration to collect and prepare samples for transport and for the analysis of prohibited substances and methods (e.g. detection of Blood Transfusion, hGH, CERA and HBOCs) as well as for the longitudinal monitoring of Athlete biological variables in accordance with the *Athlete Biological Passport* Guidelines.

These guidelines also provide practical advice on the integration of *Athlete Biological Passport* Testing into ‘traditional’ testing activities. For detailed guidance on the implementation of an *Athlete Biological Passport* program, refer to the WADA *Athlete Biological Passport* Operating Guidelines and Compilation of Mandatory Annexes.

With the exception of those mandatory areas which are part of the World Anti-Doping Program, the processes outlined in this document are not mandatory, but are aimed at assisting *Anti-Doping Organizations* in the development of systems and protocols for Blood Sample collection in order to support intelligent and effective testing programs. The method of sample collection may vary from these recommendations in some circumstances; however, minimum standards should be applied to ensure that the integrity of the sample is maintained at all times.

When collecting blood for doping control purposes, the protection of the Athlete and Sample Collection Personnel is paramount. The process must be carried out by experienced professionals who possess qualifications in phlebotomy recognized by the relevant public authorities, and the highest standards of hygiene and safety must be maintained at all times.

2. **Scope**

This guideline begins with the arrival of Sample Collection Personnel at the Blood Collection Facility, and ends with the hand-over of the Blood Sample(s) to the courier or the WADA accredited (or WADA-approved) laboratory.

3. **Definitions**

3.1 *Defined terms from the 2009 Code*

**Anti-Doping Organization (ADO):** 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 therapeutic use exemptions, 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 non-national-level competitors without being in conflict with the Code. Thus, a country could elect to test recreational-level competitors but not require therapeutic use exemptions 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 therapeutic use exemptions 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.

[Comment: This definition makes it clear that all international and national-caliber athletes are subject to the anti-doping rules of the Code, with the precise definitions of international and national-level sport to be set forth in the anti-doping rules of the International Federations and National Anti-Doping Organizations, respectively. At the national level, anti-doping rules adopted pursuant to the Code shall apply, at a minimum, to all persons on national teams and all persons qualified to compete in any national championship in any sport. That does not mean, however, that all such Athletes must be included in a National Anti-Doping Organization’s Registered Testing Pool. The definition also allows each National Anti-Doping Organization, if it chooses to do so, to expand its anti-doping program beyond national-caliber athletes to competitors at lower levels of competition. Competitors at all levels of competition should receive the benefit of anti-doping information and education.]

### 3.2 Defined terms from the IST, ISL and/or Blood Collection Guidelines

**Athlete Biological Passport:** The method of gathering and evaluating data described in this document including the Technical Documents of the International Standards for Testing and Laboratories.

**Athlete Representative:** A person designated by the Athlete to assist with the verification of the sample collection procedure (not including the passing of the urine sample). This person may be a member of the Athlete’s support personnel, such as a coach or team doctor, a family member, or other.
**Blood Collection Facility**: The place where the Blood Sample is collected. This may differ from the doping control station where urine samples are collected, or may be a separate, dedicated area of the doping control station.

**Blood Collection Procedure**: The procedure for taking a Blood Sample from an Athlete, from the Athlete's arrival at the Blood Collection Facility to the Athlete’s departure from the Blood Collection Facility.

**Butterfly Needle**: A small needle with two plastic wings attached which are squeezed together to form a tab used to manipulate the needle. A long 6-12" plastic tubing is attached to offer better manipulation.

**Blood Collection Officer (BCO)**: An official who is qualified to and has been authorized by the ADO to collect a Blood Sample from an Athlete.

**Blood Sample**: An aliquot of whole blood, plasma or serum appropriately collected to perform one or more Laboratory tests.

**Chaperone**: An official who is trained and authorized by the ADO to carry out specific duties including notification of the Athlete selected for sample collection, accompanying and observing the Athlete until arrival at the doping control station, (or Blood Collection Facility) and/or witnessing and verifying the provision of the sample where the training qualifies him/her to do so.

**Doping Control Officer (DCO)**: An official who has been trained and authorized by the ADO with delegated responsibility for the on-site management of a Sample Collection Session.

**Laboratory(ies)**: WADA-accredited Laboratory(ies) or otherwise approved by WADA where applicable applying test methods and processes to provide evidentiary data for the detection of Prohibited Substances, Methods and Markers on the Prohibited List, and if applicable, quantification of a Threshold Substance, in urine and other biological Samples in the context of anti-doping activities.

**Sample Collection Personnel**: a collective term for qualified officials authorized by the ADO who may carry out or assist with duties during the sample collection session.

**Venipuncture**: The process of collecting a sample of blood from an Athlete’s vein.

4. **Responsibility**

4.1 **Doping Control Officer (DCO)**

(One lead/senior DCO shall take responsibility for sample collection services. A DCO may also perform the duties of a Blood Collection Officer, only if qualified to do so).
• Organize and brief Sample Collection Personnel.
• Ensure that Chaperones are trained in carrying out relevant activities.
• Liaise with sport representatives, if relevant.
• Organize equipment, including all relevant documentation.
• Assess and organize the facilities.
• Arrange or perform notification and escorting of Athletes.
• Ensure that the Athlete’s rights and responsibilities are explained.
• Explain, or arrange explanation of, the process for Blood Sample collection to Athletes and Athlete Representatives, as necessary.
• Collect and/or oversee the collection of the sample.
• Oversee the post-collection process.
• Co-ordinate collection of accompanying urine sample, if required.
• Complete, or arrange completion of, and verify the relevant documentation.
• Verify the chain of custody.
• Organize courier services, if necessary, or on-site screening of blood.

4.2 Blood Collection Officer (BCO)

• Possess qualifications in phlebotomy recognized by the relevant public authorities, have experience in sample collection, and be approved by the authorized collection agency to conduct the Blood Collection Procedure.
• Answer relevant questions from Athletes about the procedure.
• Prepare the Athlete, collect a Blood Sample and advise the Athlete on aftercare procedures.
• Dispose of the blood collection equipment in an appropriate manner.
• Carry out first aid on the Athlete if required.
• Verify the collection procedure and sign the relevant documentation.

4.3 Chaperone

• Notify the Athlete in person as instructed by the DCO.
• Escort the Athlete from notification until arrival at the Blood Collection Facility.

[4.3 Comment: A Chaperone may have additional duties for urine sample collection – the duties above relates to the collection of blood only.]

4.4 Athlete

• Request the presence of an Athlete Representative, if desired.
• Report for doping control as soon as possible, and within the specified time frame.
• Be escorted from notification to sample provision.
• Be responsible for any food or beverage consumed prior to sample provision.
• Be familiar with the sample collection process.
• Be responsible at all times for his/her sample (s) from provision to sealing.
• Observe the procedure and ensure there are no irregularities.
• Declare any blood transfusions on the doping control documentation.
• Respond to questions related to the Athlete Biological Passport such as use of hypoxic devices and training at altitude, if applicable.
• Provide a TUE certificate, if applicable.
• Make comments relating to the sample collection process on the doping control documentation, if applicable.
• Sign documentation as requested by the DCO.

4.5 Athlete Representative

(presence optional, at Athlete’s request)

• Accompany the Athlete during notification.
• Accompany the Athlete to the Blood Collection Facility.
• Be present during Blood Collection Procedures and assist in the selection of equipment and the sealing process where asked to do so by the Athlete.
• Assist the Athlete in the completion of paperwork where asked to do so by the Athlete.
• Be familiar with the sample collection process.
• Observe the sample collection process and ensure there are no irregularities.
• Sign documentation as requested by the DCO.

5. Preparation for the Blood Sample Collection Session

Procedures involving blood shall be consistent with relevant principles of internationally recognized standard precautions in health care settings.

The protocol for the Blood Sample collection session is divided into the following steps.

5.1 Prepare the necessary equipment

5.1.1 The DCQ shall ensure that equipment and supplies are adequate for the Sample Collection Session. The type of equipment may vary but, as a guideline, the following will be made available:

• Sterile needles
• Butterfly Needles
• Disposable plastic syringes
• Appropriate Vacutainer collection tubes to draw a predetermined volume of blood (these may include serum separator tubes or and/or EDTA (anti-coagulant) tubes, as required).
• Sterile disinfectant pads
• Gloves providing barrier protection
• Tourniquets
• A disposal container for bio-hazardous waste
- A bio-hazard spill kit
- Adhesive bandage and gauze
- A cool-box
- Sealed, tamper evident Sample transport kits
- Secure transport bags and seals
- Transport temperature monitoring device
- All doping control documentation, including doping control forms, Athlete notification forms, supplementary report forms, chain of custody forms, etc.

[5.1.1 Comment: Sufficient Sample Collection Equipment shall be made available to ensure that at all times an Athlete selected for Testing has a choice of at least three Blood Sample collection kits and two Sample transport kits. Furthermore sufficient Doping Control documentation should be supplied based upon the number of tests being conducted.]

5.1.2 Any sample collection equipment systems used shall meet the following minimum criteria:

- Have a unique numbering system incorporated into all containers used to identify the Sample.
- Have a sealing system that is tamper-evident.
- Ensure the identity of the Athlete is not evident from the equipment itself.
- Ensure that all equipment is clean and sealed prior to use.

5.2 Brief personnel on roles and responsibilities

5.2.1 The DCO should brief the Sample Collection Personnel on their roles and responsibilities prior to or upon arrival at the Blood Collection Facility. This will include Athlete notification, chaperoning, Blood Sample collection (including urine sample collection if applicable).

[5.2.1 Comment: See WADA Guidelines for Urine Sample Collection - Appendix 1 Chaperone Training Guidelines and Sample Collection Personnel: Recruitment, Training, Accreditation and Reaccreditation Guideline Article 7.]

5.3 Assess the facilities

5.3.1 The minimum requirements to be met to enable use of a facility as a Blood Collection Facility are privacy and cleanliness. The requirements are necessarily more stringent than for a doping control station for the purpose of urine sample collection. If the facility does not meet the minimum requirements, the DCO may decide not to proceed with testing. The reasons for such a decision must be documented.

[5.3.1 Comment: ADOs may wish to request DCOs to include a sketch of the Doping Control Station in their DCO report or provide a digital picture.]

5.3.2 The Blood Collection Facility should ideally meet the following criteria:
• Be solely reserved for Doping Control purposes;
• Maintain Athlete privacy and confidentiality;
• Provide a high standard of cleanliness;
• Be well-lit and well-ventilated;
• Be accessible only to authorized personnel;
• Be secure enough to store sample collection equipment;
• Contain a table and chairs for administration and completion of paperwork;
• Contain a comfortable chair or bed for sample provision and any after-care that may be required;
• Contain a refrigerator or cool-box;
• Be large enough to accommodate the number of Athletes, Athlete Representative and Sample Collection Personnel who will occupy the area;
• Be suitably located in relation to the field of play or other location where Athletes will be notified.

[5.3.2 Comment 1: Although the term Blood Collection Facility is used, for out-of-competition testing this facility might be an Athlete’s home or a hotel room, rather than an officially designated facility for doping control, as long as it meets the minimum criteria in 5.3.1. For In-Competition testing the Blood Collection Facility may be located adjacent to, or in the same suite of rooms as the doping control station where urine sample collection is to take place.]

5.3.3 Access to the Blood Collection Facility shall be restricted to the Athlete providing the sample, the Athlete Representative, an interpreter if required, and Sample Collection Personnel, unless otherwise agreed by the DCO. Additional personnel requesting access may include an IF representative, an ADO observer, an auditor or a WADA Independent Observer. These personnel should have adequate authorization available for the DCO to review upon arrival at the Blood Collection Facility.

5.3.4 The DCO may wish to assign a member of the Sample Collection Personnel to monitor access to the Blood Collection Facility and ensure that only authorized persons are admitted.

5.3.5 Members of the media must not be allowed to enter the Blood Collection Facility at any time.

5.4 Athlete selection

5.4.1 The DCO will select Athletes according to the selection policy indicated by the ADO. This may include one or all of the following: target testing (named Athletes or categories), finishing position and random selection.

[5.4.1 Comment: Selections/selection methods made by the ADO should be clearly communicated to the DCO. For example, detailing selections in an ADAMS mission order.]
5.4.2 Following the selection of the Athlete, the DCO shall ensure that selection decisions are disclosed on a need-to-know basis only to ensure that testing is No-Advance Notice.

6. **Athlete Notification and Chaperoning**

6.1 **Athlete notification**

6.1.1 The DCO/Chaperone shall establish the location of the selected Athlete, and plan the approach and timing of notification, taking into account any specific circumstances such as the competition/training schedule, and such that the notification will be carried out as No-Advance-Notice notification.

6.1.2 The DCO/Chaperone shall identify him/herself and shall show the Athlete the official authorization documentation that is provided by the ADO which has granted the authority to test. Additional photo identification proving affiliation to the authorized sample collection authority shall also be provided, if this authority is not the ADO which authorized the test. DCO identification documents shall include name, photograph, and the documents’ expiry date. Chaperones do not require documentation identifying them by name or photograph but as a minimum shall produce official authorization documentation that is provided by the ADO, such as an Authorization Letter.

6.1.3 The DCO/Chaperone shall, at a minimum, verbally confirm the Athlete’s identity. If the Athlete is carrying photo ID, this may be checked at this stage. An Athlete’s inability to provide photo ID shall not invalidate a test. Formal identification can be established by starting number, accreditation, third party witness, or other viable method as established by the ADO. If the Athlete’s identity is unknown and cannot be established in any manner, the DCO must contact the ADO for further instructions.

6.1.4 The DCO/Chaperone should show the Athlete the notification form (which may be part of the Doping Control form), and shall then notify the Athlete of the following:

- That the Athlete is required to undergo a Sample collection;
- The authority under which Sample collection is to be conducted (i.e. the Testing Authority);
- That the type of Sample Collection will be blood (and urine if testing is combined with urine Sample Collection) and any conditions that need to be adhered to prior to Sample collection, including the requirement for the Athlete to provide their Sample in direct observation of a DCO/Chaperone;
- The Athlete’s rights, including the right to:
- Have an **Athlete Representative** present throughout the course of the entire **Sample** collection process (other than **Sample** provision) and if available, an interpreter;
- Ask for additional information about the **Sample** collection process;
- Request a delay in reporting to the **Blood Collection Facility** for valid reasons (see 6.1.10 for what constitutes valid reasons);
- Request modifications to the **Sample** collection procedure if the **Athlete** has a disability (see Guidelines for Urine Sample Collection – Section 9);

- The **Athlete**’s responsibilities, including the requirement to:
  - Remain within direct observation of the **DCO/Chaperone** at all times from the point of notification by the **DCO/Chaperone** until the completion of the **Sample** collection process;
  - Produce appropriate and valid identification in accordance with 6.1.3.
  - Comply with the **Sample** collection procedures (and the **Athlete** should be advised of the possible consequences of Failure to Comply)
  - Report immediately for a test, unless there are valid reasons for a delay, as determined by the **DCO**;

- The location of the **Blood Collection Facility**;
- That should the **Athlete** choose to consume food or fluids prior to providing a **Sample**, he/she does so at his/her own risk.

**[6.1.4 Comment: (i) The Testing Authority is the Anti-Doping Organization that has initiated and authorized the Sample Collection Session.]**

6.1.5 The **DCO/Chaperone** should encourage the presence of a third party during the notification process where the **Athlete** is a **Minor**, it is required by an **Athlete**’s disability or in situations where an interpreter is required.

6.1.6 If a selected **Athlete** is not located based on available information, the **DCO** shall attempt to locate the **Athlete** by other means, but ensure that **No-Advance-Notice** notification is used as a notification method. The **DCO** shall notify the **ADO** for further instructions if the **Athlete** is not located.

**[6.1.6 Comment: In the event that a **DCO** is unable to locate an **Athlete** based on the available information, the **DCO** should in most cases (for e.g. for In-Competition Testing) attempt to locate the **Athlete** by other means. If the **DCO** is attempting to locate the **Athlete** for an Out-of-Competition test, during a specific 60-minute time slot as designated in the **Athlete**’s Whereabouts Filing, the **DCO** shall follow the procedures set out in the International Standard for Testing 11.4.3 (b) & (c). Under no circumstances shall the **DCO/Chaperone** make a telephone call to the **Athlete** to locate them.]**

6.1.7 The **Athlete** shall read and sign the **Athlete** notification form or doping control form as directed by the **DCO/Chaperone**.

6.1.8 If an **Athlete** copy of the official notification record exists, this will be given to the **Athlete**.

6.1.9 If the **Athlete** refuses to sign that he/she has been notified, or evades notification, the **DCO/Chaperone** shall make all reasonable attempts to
persuade the Athlete to comply, including informing the Athlete again of the consequences of refusing or failing to comply. If the Athlete continues to refuse, the DCO/Chaperone must report this to the DCO immediately, and the DCO shall attempt to notify the Athlete. If the Athlete still refuses to be notified, the DCO shall document the facts, including the reasons for refusal given by the Athlete. The DCO shall endeavor to obtain witness signatures to confirm the Athlete’s refusal, and shall contact the ADO for further instructions as soon as possible.

6.1.10 The DCO may at their discretion consider any reasonable third party requirement or any request by the Athlete for permission to delay reporting to the Doping Control Station following acknowledgment and acceptance of notification; and/or to leave the Doping Control Station temporarily after arrival. Such permission shall only be granted if the Athlete can be continuously chaperoned and kept under direct observation during the delay and if the request relates to the following activities:

For In-Competition Testing:
- Participation in a victory ceremony;
- Fulfillment of media commitments;
- Competing in further Competitions;
- Performing a warm down;
- Obtaining necessary medical treatment;
- Locating a representative and/or interpreter;
- Obtaining photo identification;
- Any other exceptional circumstances which may be justified, and which shall be documented.

For Out-of-Competition Testing:
- Locating an Athlete Representative;
- Completing a training session;
- Receiving necessary medical treatment;
- Obtaining photo identification;
- Any other exceptional circumstances which may be justified, and which shall be documented.

6.1.11 The DCO shall document any reasons for delay in reporting to the Doping Control Station and/or reasons for leaving the Doping Control Station that may require further investigation by the ADO. Any failure of the Athlete to remain under constant observation shall also be recorded.

6.2 Chaperoning the Athlete to the Blood Collection Facility.

6.2.1 The DCO/Chaperone shall ensure that the Athlete is escorted from the place of notification to the Blood Collection Facility under constant supervision.

[6.2.1 Comment: The DCO should take into consideration relevant sport-specific and venue specific factors that could affect the chaperoning process, for example sports in which]
Athletes often compete in more than one Event potentially prolonging the chaperoning process.]

6.2.2 The DCO/Chaperone cannot prevent the Athlete from eating or drinking products of their choice, but should recommend that the Athlete chooses from a selection of individually sealed, non-alcoholic beverages in order to hydrate. The DCO/Chaperone should not handle food or drink items for the Athlete.

6.2.3 The DCO/Chaperone shall escort the Athlete at all times until the sample collection procedures have been completed, or shall ensure that another DCO/Chaperone has taken over escorting the Athlete.

6.2.4 The Chaperone shall inform the DCO as soon as practical without leaving the Athlete unattended, and ensuring discretion, of any irregularities in notification and/or suspicious Athlete behavior during the observation period. Irregularities shall be documented by the DCO if relevant.

[6.2.4 Comment: The ADO is responsible for establishing guidelines for what constitutes suspicious Athlete behavior – examples might be; evading observation, ingesting an unidentified substance, a distressed call to a coach or other unusual behavior.]

6.3 Athlete arrival at the Blood Collection Facility

6.3.1 The Athlete arrives at the Blood Collection Facility with a DCO/Chaperone and, if requested, an Athlete Representative and/or interpreter. At this time, the Athlete should present photo ID to the DCO. An Athlete’s inability to provide photo ID shall not invalidate a test. Alternative methods of Athlete identification are outlined in section 6.1.3.

6.3.2 An entry and exit log should be maintained to record the names of the persons entering facility, their position, and the times of arrival and departure in instances where multiple Athletes will be tested in a short period of time.

6.3.3 A Blood Sample shall be collected from one Athlete at a time. Each Athlete’s privacy shall be ensured.

6.3.4 If the Athlete is also providing a urine Sample at the same session, the DCO may request that the Athlete provide the Blood Sample first.

6.3.5 The Athlete shall be provided with the opportunity to hydrate.

6.3.6 Irrespective of the Testing type, once the Athlete has arrived at the Blood Collection Facility/Doping Control Station he/she must be under observation at all times until sample collection is completed.
6.3.7 In order to ensure the same conditions for all, the Athlete shall remain seated and relaxed for at least 10 minutes before undergoing Venipuncture.

[6.3.7 Comment: DCOs should assign a member of the Sample Collection Personnel to the role of monitoring the 10 minute seated rest period for each Athlete where possible. This may be conducted in conjunction with maintaining an entry and exit log.]

6.3.8 The Athlete may request to leave the Blood Collection Facility for a time, for reasons defined in section 6.1.10. The Athlete must be escorted continuously at such times, and the purpose of leaving, agreed time of return, and actual time of return shall be documented by the DCO. If a Chaperone is not available, the DCO shall ask the Athlete to remain in the Blood Collection Facility. If an Athlete insists on leaving the Blood Collection Facility, the circumstances shall be documented by the DCO.

6.3.9 Before sample collection, the DCO should ask the Athlete whether they have been tested before, and whether they require an explanation of the Blood Sample collection procedure.

6.3.10 If the Athlete has not been tested before, or requests an explanation of the procedure, the DCO should explain the Blood Sample collection procedure to the Athlete.

6.3.11 As a minimum, the DCO shall ensure the Athlete is informed of the requirements of the Sample Collection Session and his/her rights and responsibilities.

7. Conducting the Blood Sample Collection Session

7.1 Venipuncture

The type of equipment used for blood collection, and the post-collection process, will differ depending on the type of analysis required. The vacutainers identified below are recommended as they have been fully validated by WADA and or WADA accredited laboratories. Alternate equipment which may meet the same criteria to those identified herein may be permissible but should be validated by WADA and/or the relevant laboratory, and consistent with the collection methodology presented herein, prior to use. In summary:

7.1.1 Collection of blood for analysis of Prohibited Substances and Methods in whole blood (e.g. detection of blood transfusion) or in plasma (e.g. HBOCs and CERA):

Number of Samples: 2 (“A” Sample and “B” Sample)
Volume required: 2 x 3mL (or as specified by relevant Laboratory)
(BD Vacutainer K2EDTA (K2) CE cat no 368856/ref US 367856)
The tube used contains EDTA as anti-coagulant. The contents must be homogenized as soon as possible after collection. E.g. tubes should be
gently inverted eight (8) to ten (10) times. The contents shall then be sent to Laboratory with no further action.

7.1.2 Collection of blood for analysis of *Prohibited Substances and Methods* in serum (e.g. detection of hGH, HBOCs and CERA):

Number of *Samples*: 2 (“A” Sample and “B” Sample)  
Volume required: 2 x 5mL (or as specified by relevant Laboratory)  
Blood is drawn into a tube that has an inert polymeric serum separator gel and a clotting activation factor (BD Vacutainer® SST II, EU ref 367955).  
The contents must be homogenized as soon as possible after collection (e.g. tubes should be gently inverted up-side down at least five (5) times). The contents shall then be sent to Laboratory with no further action.

7.1.3 Collection of blood for analysis of the variables of the *Athlete Biological Passport*:

Number of *Samples*: 1 (no “B” Sample required)  
Volume required: 1 x 3mL (or as specified by relevant Laboratory).  
The tube used contains solid EDTA as anti-coagulant. The contents must be homogenized as soon as possible after collection (e.g. tubes should be gently inverted up to ten (10) times). The contents shall then be sent to Laboratory or WADA approved laboratory with no further action.

7.1.4 After the required rest period, and the DCO/BCO explanation of procedure, the DCO shall direct the Athlete to choose the appropriate number of Blood Sample collection kits, as required by the ADO. It is recommended that there are at least three (3) Blood Sample collection kits from which to choose.

*[7.1.4 Comment: The kit will typically include the sterile needle, syringe and the relevant vacutainer tubes packaged together in a sealed bag. If kits contain only one vacutainer, and an A and B sample are required, the Athlete shall choose two Blood Sample collection kits.]*

7.1.5 The Athlete and DCO shall check that the equipment is clean and intact. If either the Athlete or DCO is not satisfied with the equipment, the Athlete should make another selection.

7.1.6 If the Athlete is not satisfied with any of the equipment, and the DCO does not agree with the Athlete’s opinion that all of the available equipment is unsatisfactory, the DCO shall instruct the Athlete to proceed with the sample collection session and the Athlete’s views must be recorded on the doping control documentation by the DCO.

7.1.7 If both the DCO and the Athlete agree that none of the equipment is satisfactory, the DCO shall terminate sample collection, and record the reasons.
7.1.8 When the Blood Sample collection kit has been selected, the Athlete and the DCO shall proceed with the selection of the sealed, tamper evident Sample transport kit. Selection will proceed in the same manner as 7.1.4 to 7.1.7.

7.1.9 If the secure transport kit includes pre-printed bar code labels, the Athlete shall remove these labels from the secure transport kit, and shall verify with the DCO that the code numbers match the transport kit numbers.

7.1.10 If the Athlete or DCO find that the numbers are not the same, the DCO shall instruct the Athlete to choose another secure transport kit, and shall document the occurrence.

7.1.11 The Athlete shall place one label longitudinally on each of the vacutainer tubes. The label shall be placed towards the top of the tube(s), near the cap. The Athlete may authorize the DCO, or the Athlete Representative to place the labels on the tubes.

7.1.12 The DCO shall record the numbers, and the Athlete and the DCO shall check the documentation to ensure that the DCO has accurately recorded the information.

7.1.13 The Athlete shall give the BCO the Blood Sample collection equipment, including the vacutainer(s). The BCO shall assemble the equipment in sight of the Athlete.

7.1.14 The BCO shall assess the most suitable arm for Venipuncture. This will always be the non-dominant arm, unless the BCO assesses the other arm to be more suitable or the Athlete requests a specific arm.

7.1.15 If the BCO believes that a Butterfly Needle is required for Venipuncture, the Athlete shall be asked to select a Butterfly Needle from a selection of sealed needles. The procedure then continues as normal.

7.1.16 If necessary, the BCO shall apply a tourniquet to the Athlete’s upper arm. If the Athlete has a skin problem, the tourniquet shall be applied over thin clothing or a paper tissue so that the skin is not pinched.

7.1.17 The skin at the puncture site shall be cleaned with a sterile disinfectant wipe or swab.

7.1.18 The needle shall be inspected visually before insertion. After the BCO has inserted the needle into the antecubital vein, the tourniquet shall be removed.

7.1.19 The BCO shall collect the amount of blood advised by the relevant Laboratory or ADO for the type of sample analysis to be conducted. The collection vessel (s) shall always be kept in full view of the Athlete.
7.1.20 In the event that the BCO is unable to draw sufficient blood from the first attempt, the procedure shall be repeated and up to three attempts in total shall be made before the DCO, in consultation with the BCO, decides to terminate collection. No more than three attempts to insert a needle into the Athlete’s body shall be made. The DCO shall record the reasons for terminating the collection attempt.

7.1.21 The blood shall be collected into one or more vessels, depending on the requirements of the ADO regarding intended analyses.

7.1.22 Blood collection equipment must be disposed of in accordance with the required standards for handling blood and the BCO’s protocol.

7.1.23 The recommended temperature recording device used to monitor the transport conditions should be turned on to ensure temperature reaches 2–8 degrees Celsius before Samples are placed inside cool-box.

7.2 Aftercare procedure

7.2.1 After withdrawing the needle from the Athlete’s arm, the BCO shall place a pad over the puncture site and instruct the Athlete to press firmly on the pad. The BCO may also choose to apply pressure to the wound.

7.2.2 If necessary, pressure shall be applied for 2–3 minutes prior to undertaking the sample sealing procedure. The BCO shall assess the wound and indicate to the Athlete and the DCO when the Athlete is ready.

7.2.3 The BCO or the DCO shall advise the Athlete not to undertake any strenuous exercise using the arm for at least 30 minutes. This minimizes any potential bruising.

7.2.4 The BCO shall be prepared to conduct first-aid if necessary.

7.3 Post collection processing for the purpose of:

7.3.1 Analysis of whole blood (or plasma)

For the analysis of whole blood or plasma, the 2 x 3mL Blood Samples, comprising of an “A” and a “B” Sample (or the Sample collected for the purposes of the Athlete Passport) should be inverted gently eight (8) to ten (10) times to mix the blood with the anti-coagulant contained in the tube in order to avoid clot formation. This step shall be taken as soon as possible. The Blood Samples then be sealed and made ready for transportation in accordance with section 7.4.
7.3.2 Analysis of serum

For the analysis of serum, the 2 x 5mL Blood Samples, comprising of an “A” and a “B” Sample should be inverted gently five (5) times to initiate clotting and remain at room temperature for the time recommended by the tube manufacturer (15 minutes for BD Vacutainer® SST II advance tubes) before being sealed and made ready for transportation in accordance with section 7.4.

[7.3.2 Comment: For Samples collected that require being left at room temperature for a pre-determined length of time (as specified by the tube manufacturer), the Athlete should be asked and encouraged to remain and observe his/her Samples for this period of time. If the Athlete declines to do so, this in no way invalidates the test. The DCO should maintain these Samples under their observation and monitor the pre-determined period of time. The ADO may wish the DCO to record details of any Athlete that does not remain to observe their Samples during this period.]

7.4 Sealing of the Blood Samples

7.4.1 The Athlete shall take the secure transport kit already selected in, or, if not yet selected, shall choose a transport kit from a selection of kits in accordance with the process outlined.

7.4.2 The DCO shall instruct the Athlete to place one Blood Sample into each of the A and B tamper evident sample transport kits. The Athlete may request the DCO or the Athlete Representative to complete this process on their behalf.

7.4.3 Both the DCO and the Athlete shall check that the kits are securely sealed. Where possible, care must also be taken so that the samples are stored upright.

7.4.4 The DCO and Athlete should ensure that the equipment code numbers are accurately recorded on the Doping Control documentation. The Athlete and DCO should initial or sign the documentation to show they are satisfied with the procedure.

7.4.5 The DCO shall ensure the Blood Sample is stored in a secure, preferably cooled (2-12 degrees Celsius), location (i.e. transport bag) until ready to proceed to section 7.7 - Transport of samples.

7.5 Paperwork

7.5.1 The DCO shall instruct the BCO to sign the form to confirm that he/she collected a Blood Sample from the Athlete in accordance with procedures.

7.5.2 The Athlete shall be provided an opportunity to document any blood transfusions over the last six months, and to indicate any medications,
including those which may affect the ability of the blood to clot, taken over the past seven days.

7.5.3 The DCO shall check all information on the form and sign to confirm that the Blood Sample collection was conducted in accordance with procedures.

7.5.4 The Athlete and the Athlete Representative, if present, shall be invited to check that all information on the form accurately reflects the details of the sample collection session. The Athlete shall be invited to complete the comments section of the form if he/she has any concerns or comments regarding the procedure. If there is insufficient space on the form, the Athlete shall be invited to complete a supplementary report form.

7.5.5 Blood-only doping control form:
- The DCO, the Athlete Representative, if present, and the Athlete shall then sign the doping control form.

7.5.6 Combined urine/blood doping control form:
- If the urine sample has already been collected, the DCO, the Athlete Representative, if present, and the Athlete shall sign the doping control form.
- If the urine sample has not yet been collected, the Athlete shall proceed to provide a urine sample before the DCO, the Athlete Representative, if present, and the Athlete shall sign the doping control form.

7.5.7 The DCO must give a full copy of the form to the Athlete.

7.5.8 The Athlete shall then proceed to provide a urine sample if required, or is free to leave the Blood Collection Facility.

7.6 Sample storage

7.6.1 The DCO is responsible for ensuring, in accordance with the ADO’s criteria for Blood Sample storage, that all samples are stored in a manner that protects their identity, integrity and security whilst in the Blood Collection Facility.

7.6.2 Samples must not be left unattended, unless they are locked away, in a refrigerator or cupboard, for example. Access shall be restricted to authorized personnel.

7.6.3 The Blood Samples must be stored in a cool location, preferably in a refrigerator or cool box. Temperature should be maintained between 2 – 12 degrees Celsius.

7.6.4 If the conditions of storage did not meet the guidelines for temperature in section 7.6, the DCO shall document this, and shall also contact the ADO.
immediately to inform them of the variation in temperature, and the length of time the samples were affected.

7.6.5 If the temperature deviates outside the recommended 2 -12 degrees for a period of time likely to affect the composition of a Blood Sample, the ADO and Laboratory shall determine whether or not analysis should proceed on the sample.

7.6.6 The DCO shall accurately complete appropriate documentation for each transport bag/container to ensure that the Laboratory can verify the contents of the bag/container.

7.6.7 The DCO shall follow the ADO’s system to ensure that analysis instructions (e.g. type of analysis to be conducted) are provided to the Laboratory.

7.6.8 The DCO shall complete the Laboratory advice form/chain of custody form. The Laboratory copy of this form and the Laboratory copy of the doping control form shall be placed in the transport bag with the samples, and sealed, preferably in the presence of a witness. Documentation identifying the Athlete shall not be included with the samples.

7.6.9 If relevant, the DCO shall record the time(s) the transport bag is opened and resealed, on the Laboratory advice form or chain of custody form.

7.6.10 The DCO shall keep the samples under his/her control until they are passed to the courier. Blood Samples should be dispatched as soon as possible after collection to arrive at the Laboratory ideally on the same day, and preferably within 36-48 hours of collection.

7.6.11 All documentation relevant to the testing session shall be forwarded to the ADO by the approved method as soon as possible after sample collection.

7.7 Transport/handover of Samples

7.7.1 The Blood Samples shall be transported to the Laboratory in a refrigerated state. No sample should be allowed to freeze, and should ideally be kept at a temperature of approximately 4 degrees. Temperature should be maintained between 2 – 12 degrees Celsius. A temperature recording device is recommended to be included with the transported samples to ensure the appropriate temperature range has been maintained during transport.

7.7.2 Samples should remain in an upright position during transportation, whenever possible.

7.7.3 Samples may be taken directly to the Laboratory by the DCO, or handed over to a third party for transportation. This third party must document the
chain of custody of the samples. If an approved courier company is used to transport the samples, the DCO shall record the waybill number.

7.7.4 Due to the more stringent temperature and analysis requirements for blood, blood and urine samples may be transported separately. The relevant paperwork linking the two samples shall be included with each shipment, however.

7.7.5 Transport of Blood Sample(s) from site of collection to Laboratory should be made as soon as possible and preferably within 36 hours of collection.

7.7.6 The Laboratory is required to document receipt and the subsequent chain of custody of samples. Samples are reviewed for evidence of tampering or damage, and stored in appropriate conditions until analysis in accordance with the International Standard for Laboratories.
**Appendix 1: Integration of Multiple Blood Testing Types**

When planning and conducting a Sample Collection Session, an ADO may wish to collect sufficient volume of blood to enable multiple types of analysis to be conducted simultaneously. Additionally, conduct of an **Athlete Biological Passport** test may reveal abnormal variables that warrant immediate analysis for prohibited substances or methods. In such cases it is prudent to have a complementary sample available in the event a “B” sample analysis is required.

Conducting multiple types of analyses however will require careful consideration, especially in relation to the **Sample** Collection equipment needed. This section seeks to offer guidance to ADOs on integrating multiple blood testing types.

**Equipment**

The following matrix details the equipment required for all blood collection and analysis types (including the **Athlete Biological Passport** tests):

<table>
<thead>
<tr>
<th>Test</th>
<th>Analysis Matrix</th>
<th>Tubes¹</th>
<th>V / tube (mL)</th>
<th># tubes</th>
<th>Tube inversion</th>
<th>Transport kit</th>
</tr>
</thead>
<tbody>
<tr>
<td>hGH / HBOCs / CERA&amp;</td>
<td>Serum</td>
<td>BD Vacutainer® SST II Plus (cat. # 367955)</td>
<td>5</td>
<td>2*</td>
<td>X5</td>
<td>BEREG-KIT small (94-1094) or similar Accessory package() (94-1096)</td>
</tr>
<tr>
<td>HBOCs / BT§ / CERA</td>
<td>Plasma / Blood§</td>
<td>BD Vacutainer® EDTA (CE #368856, US #367856)</td>
<td>3</td>
<td>2*, +</td>
<td>X8-10</td>
<td>BEREG-KIT small (94-1094) or similar Accessory package() (94-1095)</td>
</tr>
<tr>
<td><strong>Athlete Biological Passport</strong> (ABP) / HBOCs / CERA§</td>
<td>Plasma / Blood§</td>
<td>BD Vacutainer® EDTA (CE #368856, US #367856)</td>
<td>3</td>
<td>1-2*, +</td>
<td>X8-10</td>
<td>BEREG-KIT small for two tubes (94-1094) OR BEREG-KIT small single for one tube (90-1098) or similar Accessory package() (94-1095) OR (94-1093 / 94-1099) for one tube or similar</td>
</tr>
</tbody>
</table>

¹ CERA analysis can be performed in either serum or plasma; however the recommended matrix is serum;

# The vaccutainers identified below are recommended as they have been submitted to full validation by WADA. Alternate equipment which may meet the same criteria to those identified herein may be permissible but should be validated by WADA, and consistent with the collection methodology presented herein, prior to use.;

+ One tube is used for collection of the “A” sample, the other for the “B” sample, if needed;
The accessory package includes the specified collection tubes and other accessories (e.g. needle, disinfection pads, etc);

For Blood Transfusion (BT), whole non-coagulated blood is used; for HBOCs/ABP/CERA the centrifugation of the Blood Sample (on e.g. Ficoll gradient) is required to separate the plasma fraction from the cellular components;

* When testing the blood variables of the ABP only, one (1) EDTA tube is sufficient; however the collection of two (2) EDTA tubes is recommended to allow the simultaneous testing for CERA/HBOCs (for example) in cases of abnormal results for the blood variables included in the ABP.

**Possible Test combinations**

The following matrix, details the equipment requirements for possible combinations of multiple analysis types:

<table>
<thead>
<tr>
<th></th>
<th>hGH/ HBOCs / CERA (Serum)</th>
<th>BT (Whole blood) HBOCs / CERA (Plasma)</th>
<th>ABP (Plasma)</th>
</tr>
</thead>
<tbody>
<tr>
<td>hGH/ HBOCs / CERA</td>
<td>2 x serum tubes</td>
<td>2 x serum tubes</td>
<td>2x serum tubes</td>
</tr>
<tr>
<td></td>
<td>Total volume: 10mL</td>
<td>2 x EDTA tubes</td>
<td>1-2x EDTA tubes</td>
</tr>
<tr>
<td>(Serum)</td>
<td></td>
<td>Total volume: 16mL</td>
<td>Total volume: 13-16mL</td>
</tr>
<tr>
<td>BT (Whole blood)</td>
<td>2 x serum tubes</td>
<td>2 x EDTA tubes</td>
<td>2-3 x EDTA tubes</td>
</tr>
<tr>
<td>HBOCs / CERA</td>
<td>1-2 x EDTA tubes</td>
<td>Total volume: 6mL</td>
<td>Total volume: 6-9 mL</td>
</tr>
<tr>
<td>(Plasma)</td>
<td>Total volume: 13-16mL</td>
<td></td>
<td></td>
</tr>
<tr>
<td>ABP (Plasma)</td>
<td>2x serum tubes</td>
<td>2-3 x EDTA tubes</td>
<td>1 EDTA tube</td>
</tr>
<tr>
<td></td>
<td>1-2x EDTA tubes</td>
<td>Total volume: 13-16mL</td>
<td>Total volume: 3mL</td>
</tr>
<tr>
<td>All analysis types</td>
<td>2 x serum tubes</td>
<td>2-3 x EDTA tubes</td>
<td>1 EDTA tube</td>
</tr>
<tr>
<td></td>
<td>Total volume: 16-19 mL</td>
<td></td>
<td>Total volume: 3mL</td>
</tr>
</tbody>
</table>

[Comment: The analysis of HBOCs and CERA can be conducted in either serum or plasma. The analytical matrix used in the assay will vary depending on the Laboratory. Please contact the Laboratory that is to conduct the analysis to determine this information.]

[Comment: When using both types of tubes for multiple test types, the specific procedures followed for each type of tube – for example number of inversions – should still be followed].

[Comment: These specifications should serve for general guidance only. When wishing to collect blood to test for different prohibited Substances and/or Methods at the same Sample Collection Session, it is recommended that the ADO in charge of sample collection contact the Laboratory that is to conduct the analyses to ascertain the type and total number of tubes and total volume of blood to collect].