





PFL PROHIBITED LIST Effective January 1, 2025

PART 1.

Except as provided otherwise in PART 2 below, the *PFL Prohibited List* shall incorporate the most current prohibited list published by *WADA*, as well as any *WADA Technical Documents* establishing Decision Limits or Minimum Reporting Levels (MRL), and, unless otherwise modified by the *PFL Prohibited List* or the *PFL Anti-Doping Policy* ("*PFL ADP"*), *Prohibited Substances*, *Prohibited Methods*, *Specified or Non-Specified Substances* and *Specified* or *Non-Specified Methods* shall be as identified as such on the *WADA* Prohibited List or *WADA Technical Documents*.

PART 2.

Notwithstanding the WADA prohibited list and any otherwise applicable WADA Technical Documents, the following Guide to the PFL Prohibited List contains additional examples that have the full force and effect as if set forth in the WADA prohibited list, and the following additional modifications to the WADA prohibited list shall be in full force and effect:

- 1. Decision Concentration Levels. Adverse Analytical Findings (AAFs) reported at an estimated concentration below the following Decision Concentration Levels ("DCLs"), as reported by a WADA-accredited laboratory1 shall be managed by USADA as Atypical Findings under Article 7.1.9 of the PFL ADP. Atypical Findings reported in accordance with WADA Technical Documents and/or letters regarding diuretics and growth promoters, but not otherwise listed below, shall be managed by USADA as Atypical Findings under Article 7.1.9 of the PFL ADP.
 - Cannabinoids: natural or synthetic delta-9-tetrahydrocannabinol (THC), delta-8-tetrahydrocannabinol (THC), or Cannabimimetics (e.g., "Spice," JWH-018, JWH-073, HU-210); any level
 - Clomiphene/clomifene: 0.10 ng/mL²
 - Dehydrochloromethyltestosterone (DHCMT) long-term metabolite (M3): 0.10 ng/mL
 - Selective Androgen Receptor Modulators (SARMs): 0.10 ng/mL³
 - GW-1516 (GW-501516) metabolites: 0.10 ng/mL
 - Epitrenbolone (Trenbolone metabolite): 0.20 ng/mL
- **2. SARMs/GW-1516:** *Adverse Analytical Findings* reported at a concentration at or above the applicable *Decision Concentration Level* but under 1 ng/mL shall be managed by *USADA* as *Specified Substances*.
- **3. Higenamine:** Higenamine shall be a *Prohibited Substance* under the *PFL* ADP only *In-Competition* (and not *Out-of-Competition*). The MRL for Higenamine shall be the MRL established for Higenamine by the *WADA Technical Document* TDMRPL.
- 4. Intravenous (IV) infusions/injections: The provision prohibiting the use of certain IV infusions set forth in the WADA prohibited list is modified as follows: Intravenous infusions and/or injections of more than a total of 100 mL per 12-hour period are prohibited at all times, both In-Competition and Out-of-Competition, except for those legitimately received In-Competition or Out-of-Competition in the course of hospital treatments, surgical procedures, clinical diagnostic investigations, and/or those received In-Competition or Out-of-Competition that are determined to be medically-justified and within the standard of care by a licensed physician and administered by a licensed medical professional. IV infusions/injections shall be considered a Specified Method; provided, however, that, for IV infusions/injections, other than those permitted by the foregoing sentence, the maximum period of Ineligibility shall be six months, unless USADA can establish that such Use and/or Attempted Use was in conjunction with the Use and/or Attempted Use of other Prohibited Substances or Prohibited Methods, was intended to manipulate the Athlete's biological Markers to circumvent the rules of the PFL ADP or interfere with Sample analysis, or was otherwise intended to tamper or interfere with Doping Control, including the interpretation of the results of the Athlete's Sample or Athlete Biological Passport, in which case the Athlete may be sanctioned for Tampering and/or Attempted Tampering and/or the Use and/or Attempted Use of a Prohibited Method in accordance with the PFL ADP.
- 5. Substances of Abuse: The following Prohibited Substances shall be considered Substances of Abuse:
 - CANNABINOIDS: Natural or synthetic delta-9-tetrahydrocannabinol (delta-9-THC), delta-8-tetrahydrocannabinol (delta-8-THC), and Cannabimimetics (e.g., "Spice," JWH-018, JWH-073, HU-210).
 - NARCOTICS: Buprenorphine, Dextromoramide, Diamorphine (heroine), Fentanyl and its derivatives, Hydromophone, Methadone, Morphine, Nicomorphine, Oxycodone, Oxymorphone, Tramadol, Pentazocine, Pethidine.
 - **STIMULANTS:** Cocaine, methylenedioxymethamphetamine (MDMA, "ecstasy"), dimethylamphetamine (DMA), benzylpiperazine (BZP), methamfetamine(d-), p-methylamfetamine, methylenedioxyamphetamine (MDA).
- **6. Glucocorticoids:** As per S9, glucocorticoids by certain routes of administration are prohibited *In-Competition* except for those legitimately prescribed by a licensed physician, received for a medically-justified purpose within the standard of care, and administered by a licensed medical professional.
- 7. Stimulants: All stimulants shall be Specified Substances.





PART 3.

Certified Supplements. Any supplement certified by (a) NSF Certified For Sport, (b) Kolner Liste, (c) Informed Sport Trusted by Sport, (d) Informed Choice, (e) HASTA (Human and Supplement Testing Australia), or (f) Banned Substance Control Group (BSCG); or any supplement certified by any other supplement certification organization that has been endorsed and/or approved by a NADO (National Anti-Doping Organization) and mutually agreed to by *PFL* and *USADA* and announced to Athletes.

¹The WADA-accredited laboratory should use a method for semi-quantitative estimation for concentrations of Prohibited Substances in Samples. This shall be guided by the WADA TD MRPL and WADATD IDCR and when possible, should be reported to the same number of significant digits as the DCL. This semi-quantitative method performed by the laboratory is sufficient for determining whether an estimated concentration equals, exceeds, or is below an applicable DCL and no quantitative concentration determination is necessary.

^{2,3} If only clomiphene/clomifene or SARM metabolite(s) are reported, in the absence of any parent compound or with the parent compound below the DCL, the report shall be managed by USADA as an Atypical Finding.



TABLE OF CONTENTS

Please note that the list of examples of medical conditions below is not inclusive.

of e.g. allergy, anaphylaxis, asthma, inflammatory bowel disease.

S0	Non-approved substances
S1	Anabolic agents
	Some of these substance(s) may be found, without limitation, in medications used for the treatment of e.g. male hypogonadism.
S2	Peptide hormones, growth factors, related substances, and mimetics
	Some of these substance(s) may be found, without limitation, in medications used for the treatment of e.g. anaemia, male hypogonadism, growth hormone deficiency.
S3	Beta-2 agonists
	Some of these substance(s) may be found, without limitation, in medications used for the treatment of e.g. asthma and other respiratory disorders.
S4	Hormone and metabolic modulators
	Some of these substance(s) may be found, without limitation, in medications used for the treatment of e.g. breast cancer, diabetes, infertility (female), polycystic ovarian syndrome.
S5	Diuretics and masking agents
	Some of these substance(s) may be found, without limitation, in medications used for the treatment of e.g. heart failure, hypertension.
M1	- M2 - M3 Prohibited Methods6
SUI	BSTANCES & METHODS PROHIBITED IN-COMPETITION
-	Stimulants
	Some of these substance(s) may be found, without limitation, in medications used for the treatment of e.g. anaphylaxis, attention deficit hyperactivity disorders (ADHD), cold and influenza symptoms.
S7	Narcotics
	Some of these substance(s) may be found, without limitation, in medications used for the treatment of e.g. pain, including from musculoskeletal injuries.
S 8	Cannabinoids
S9	Glucocorticoids
	Some of these substance(s) may be found, without limitation, in medications used for the treatment



For the purposes of the application of Article 10 of the PFL Anti-Doping Policy, the PFL Prohibited List identifies which Prohibited Substances are Specified or Non-Specified Substances and which Prohibited Methods are Specified or Non-Specified Methods. If not otherwise specifically identified on the PFL Prohibited List, the identification of a Prohibited Substance or Prohibited Method as a Specified or Non-Specified Substance or Method in the WADA Prohibited List or Code shall apply.

All Prohibited Substances shall be considered as "Specified Substances" except substances in classes S1, S2, S4.3, S4.4, and Prohibited Methods M1, M2.1, and M3.

SO NON-APPROVED SUBSTANCES

PROHIBITED AT ALL TIMES (IN- AND OUT-OF-COMPETITION)

All prohibited substances in this class are Specified Substances.

Any pharmacological substance which is not addressed by any of the subsequent sections of the List and with no current approval by any governmental regulatory health authority for human therapeutic use (e.g., drugs under pre-clinical or clinical development or discontinued, designer drugs, substances approved only for veterinary use) is prohibited at all times. This class covers many different substances, including but not limited to, BPC-157, 2,4-dinitrophenol (DNP), Adipotide, ryanodine receptor-1-calstablin complex stabilizers [e.g. S-107, S48168 (ARM210), S44121 (ARM036)], Sirtuins (SRT2104), troponin activators (e.g. reldesemtiv and tirasemtiv), and AdipoRon.

S1 ANABOLIC AGENTS

PROHIBITED AT ALL TIMES (IN- AND OUT-OF-COMPETITION)

All prohibited substances in this class are Non-Specified Substances.

Anabolic agents are prohibited.

S1.1 ANABOLIC ANDROGENIC STEROIDS (AAS)

When administered exogenously, including but not limited to:

- 1-Androstenediol (5α-androst-1-ene-3β, 17β-diol)
- 1-Androstenedione (5a-androst-1-ene-3,17-dione)
- 1-Androsterone (3a-hydroxy-5a-androst-1-ene-17-one)
- 1-Epiandrosterone (3β-hydroxy-5α-androst-1-ene-17-one)
- 1-Testosterone (17β-hydroxy-5α-androst-1-en-3-one)
- 4-Androstenediol (androst-4-ene-3β,17β-diol)
- 4-Hydroxytestosterone (4,17β-dihydroxyandrost-4-en-3-one)
- 5-Androstenedione (androst-5-ene-3,17-dione)
- 7a-hydroxy-DHEA
- 7β-hydroxy-DHEA
- 7-Keto-DHEA
- 11β-methyl-19 nortestosterone
- 17a-methylepithiostanol (epistane)
- 19-Norandrostenediol (estr-4-ene-3,17-diol)
- 19-Norandrostenedione (estr-4-ene-3,17-dione)
- Androst-4-ene-3,11,17- trione (11-ketoandrostenedione, adrenosterone)
- Androstenediol (androst-5-ene-3β,17β-diol)
- Androstenedione (androst-4-ene-3,17-dione)

- Bolasterone
- Boldenone
- Boldione (androsta-1,4-diene-3,17-dione)
- Calusterone
- Clostebol
- Danazol ([1,2]oxazolo[4',5':2,3]pregna-4-en-20yn-17a-ol)
- Dehydrochlormethyltestosterone (4-chloro-17β-hydroxy-17α-methylandrosta-1,4-dien-3-one)
- Desoxymethyltestosterone (17α-methyl-5α-androst-2-en-17βol and 17α-methyl-5α-androst-3-en-17β-ol)
- Dimethandrolone (7a,11β-Dimethyl19-nortestosterone)
- Drostanolone
- Epiandrosterone (3β-hydroxy-5α-androstan-17-one)
- Epi-dihydrotestosterone (17β-hydroxy-5α-androstan-3-one)
- Epitestosterone
- Ethylestrenol (19-norpregna-4-en-17a-ol)
- Fluoxymesterone
- Formebolone



S1.1 ANABOLIC ANDROGENIC STEROIDS (AAS) continued

- Furazabol (17α-methyl [1,2,5] oxadiazolo[3',4':2,3]-5α-androstan-17β-ol)
- Gestrinone
- Mestanolone
- Mesterolone
- Metandienone (17β-hydroxy-17α-methylandrosta-1,4-dien-3one)
- Metenolone
- Methandriol
- Methasterone (17β-hydroxy-2a, 17α-dimethyl-5-androstan-3-one)
- Methyl-1-testosterone (17β-hydroxy-17a-methyl-5a-androst-1en-3-one)
- Methylclostebol
- Methyldienolone (17β-hydroxy-17a-methylestra-4,9-dien-3one)
- Methylnortestosterone (17β-hydroxy-17a-methylestr-4-en-3one)
- Methyltestosterone
- Metribolone (methyltrienolone, 17β-hydroxy-17αmethylestra-4,9,11-trien-3-one)
- Mibolerone

- Nandrolone (19-nortestosterone)
- Norboletone
- Norclostebol (4-chloro-17β-ol-estr-4-en-3-one)
- Norethandrolone
- Oxabolone
- Oxandrolone
- Oxymesterone
- Oxymetholone
- Prasterone (dehydroepiandrosterone, DHEA, 3β-hydroxyandrost-5-en-17-one)
- Prostanozol (17β-[(tetrahydropyran-2-yl) oxy]-1'Hpyrazolo[3,4:2,3]-5α-androstane)
- Quinbolone
- Stanozolol
- Stenbolone
- Testosterone
- Tetrahydrogestrinone (17-hydroxy-18a- homo-19-nor-17apregna-4,9,11-trien-3-one)
- Tibolone
- Trenbolone (17β-hydroxyestr-4,9,11-trien-3-one)
- Trestolone (7a-methyl-19-nortestosterone, MENT)

and other substances with a similar chemical structure or similar biological effect(s).

S1.2 OTHER ANABOLIC AGENTS

Including, but not limited to:

Clenbuterol, ractopamine, selective androgen receptor modulators [SARMs, e.g. andarine, LGD-4033 (ligandrol), enobosarm (ostarine), RAD140, S-23, and YK-11], osilodrostat, zeranol and zilpaterol.





\$2 PEPTIDE HORMONES, GROWTH FACTORS, RELATED SUBSTANCES, AND MIMETICS

PROHIBITED AT ALL TIMES (IN- AND OUT-OF-COMPETITION)

All prohibited substances in this class are Non-Specified Substances.

The following substances, and other substances with similar chemical structure or similar biological effect(s), are prohibited.

S2.1 ERYTHROPOIETINS (EPO) AND AGENTS AFFECTING ERYTHROPOIESIS

Including, but not limited to:

- **2.1.1** Erythropoietin receptor agonists, e.g. darbepoetins (dEPO); erythropoietins (EPO); EPO-based constructs [e.g. EPO-Fc, methoxy polyethylene glycol-epoetin beta (CERA)]; EPO-mimetic agents and their constructs (e.g. CNTO-530, peginesatide).
- **2.1.2** Hypoxia-inducible factor (HIF) activating agents, e.g. cobalt; daprodustat (GSK1278863); IOX2; molidustat (BAY 85-3934); roxadustat (FG-4592); vadadustat (AKB-6548); xenon.
- **2.1.3** GATA inhibitors, e.g. K-11706.
- **2.1.4** Transforming growth factor beta (TGF-β) signalling inhibitors, e.g. luspatercept; sotatercept.
- **2.1.5** Innate repair receptor agonists, e.g. asialo EPO; carbamylated EPO (CEPO).

S2.2 PEPTIDE HORMONES AND THEIR RELEASING FACTORS

- **2.2.1** Testosterone stimulating peptides in males including, but not limited to,
 - Chorionic gonadotrophin (CG)
 - luteinizing hormone (LH)
 - Gonadotrphin-releasing hormone (GnRH,gonadorelin) and its agonist analogues, e.g. buserelin, deslorelin, goserelin, histrelin, leuprorelin, nafarelin and triptorelin.
 - · Kisspeptin and its agonist analogues
- 2.2.2 Corticotrophins and their releasing factors, e.g. corticorelin and tetracosactide (ACTH 1-24).
- **2.2.3** Growth hormone (GH), its analogues and fragments and releasing factors, including, but not limited to: growth hormone analogues, e.g., lonapegsomatropin, somapacitan and somatrogon; growth hormone fragments, e.g., AOD-9604 and hGH 176-191.
- **2.2.4** Growth hormone releasing factors, including, but not limited to: growth hormone-releasing hormone (GNRH) and its analogues, e.g., CJC-1293, CJC-1295, sermorelin and tesamorelin; growth hormone secretagogues (GHS) and its mimetics, e.g., lenomorelin (ghrelin), anamorelin, capromorelin ibutamoren (MK-677), ipamorelin, macimorelin and tabimorelin; GH-releasing peptides (GHRPs), e.g., alexamorelin, GHRP-1, GHRP-2 (pralmorelin), GHRP-3, GHRP-4, GHRP-5, GHRP-6, and examorelin (hexarelin).

S2.3 GROWTH FACTORS AND GROWTH FACTOR MODULATORS

Including, but not limited to:

- Fibroblast growth factors (FGFs)
- Hepatocyte growth factor (HGF)
- Insulin-like growth factor 1 (IGF-1, mecasermin) and its analogues
- Mechano growth factors (MGFs)
- Platelet-derived growth factor (PDGF)
- Thymosin-β4 and its derivatives e.g. TB-500
- Vascular endothelial growth factor (VEGF)

and other growth factors or growth factor modulators affecting muscle, tendon or ligament protein synthesis/degradation, vascularisation, energy utilization, regenerative capacity or fibre type switching.





S3 BETA-2 AGONISTS

PROHIBITED AT ALL TIMES (IN- AND OUT-OF-COMPETITION)

All prohibited substances in this class are Specified Substances.

All selective and non-selective beta-2 agonists, including all optical isomers, are prohibited. Including, but not limited to:

- Arformoterol
- Indacaterol
- Fenoterol
- Levosalbutamol
- Formoterol
- Higenamine (Prohibited In-Competition only)
- Olodaterol
- Procaterol
- Reproterol
- Salbutamol
- Salmeterol Terbutaline
- Tretoguinol (trimetoquinol)
- Tulobuterol
- Vilanterol

EXCEPTIONS:

- Inhaled salbutamol (albuterol): maximum 1600 micrograms over 24 hours in divided doses not to exceed 600 micrograms over 8 hours starting from any dose.
- Inhaled formoterol: maximum delivered dose of 54 micrograms over 24 hours in divided doses not to exceed 36 micrograms over 12 hours starting from any dose.
- Inhaled salmeterol: maximum 200 micrograms over 24 hours.
- Inhaled vilanterol: maximum 25 micrograms over 24 hours.

A Therapeutic Use Exemption (TUE) should be sought for doses in excess of these limits or when using with a diuretic.

NOTE: The presence in urine of salbutamol in excess of 1000 ng/mL or formoterol in excess of 40 ng/mL is not consistent with therapeutic use of the substance and will be considered as an Adverse Analytical Finding (AAF) unless the Athlete proves, through a controlled pharmacokinetic study, that the abnormal result was the consequence of a therapeutic dose (by inhalation) up to the maximum dose indicated above.

S4 HORMONE AND METABOLIC MODULATORS

PROHIBITED AT ALL TIMES (IN- AND OUT-OF-COMPETITION)

Prohibited substances in classes S4.1 and S4.2 are Specified Substances. Those in classes S4.3 and S4.4 are Non-Specified Substances.

The following hormone and metabolic modulators are prohibited.

S4.1. AROMATASE INHIBITORS

Including, but not limited to:

- 2-Androstenol (5a-androst-2-en-17-ol)
- 2-Androstenone (5g-androst-2-en-17-one)
- 3-Androstenol (5a-androst-3-en-17-ol)
- 3-Androstenone (5a-androst-3-en-17-one)
- 4-Androstene-3,6,17 trione (6-oxo)
- Aminoglutethimide
- Anastrozole

- Androsta-1,4,6-triene-3,17-dione (androstatrienedione)
- Androsta-3,5-diene-7,17-dione (arimistane)
- Exemestane
- Formestane
- Letrozole
- Testolactone





S4.2. ANTI-ESTROGENIC SUBSTANCES [ANTI-ESTROGENS AND SELECTIVE ESTROGEN RECEPTOR MODULATORS (SERMS)]

Including, but not limited to:

- Bazedoxifene
- Clomiphene/Clomifene
- Cyclofenil
- Elacestrant
- Fulvestrant

- Ospemifene
- Raloxifene
- Tamoxifen
- Toremifene

S4.3. AGENTS PREVENTING ACTIVIN RECEPTOR IIB ACTIVATION

Including, but not limited to:

- Activin A-neutralizing antibodies
- Activin receptor IIB competitors such as:
 - Decoy activin receptors (e.g. ACE-031)
- Anti-activin receptor IIB antibodies (e.g. bimagrumab)

- Myostatin inhibitors such as:
 - Agents reducing or ablating myostatin expression
 - Myostatin-binding proteins
 (e.g. follistatin, myostatin propeptide)
 - Myostatin or precursor-neutralizing antibodies (e.g. apitegromab, domagrozumab, landogrozumab, stamulumab)

S4.4. METABOLIC MODULATORS

- **4.1** Activators of the AMP-activated protein kinase (AMPK), e.g. AICAR, MOTS-c; and peroxisome proliferator-activated receptor delta (PPARβ) agonists, e.g., 2-(2-methyl-4-((4-methyl-2-(4-(trifluoromethyl)phenyl)thiazol-5-yl)methylthio)phenoxy) acetic acid (GW1516, GW501516) and Rev-erb alpha agonists e.g. SR9009, SR9011.
- **4.2** Insulins and insulin-mimetics, e.g. S519, S597
- **4.3** Meldonium
- **4.4** Trimetazidine (TMZ)

\$5 DIURETICS AND MASKING AGENTS

PROHIBITED AT ALL TIMES (IN- AND OUT-OF-COMPETITION)

All prohibited substances in this class are Specified Substances.

All diuretics and masking agents, including optical isomers, e.g. d- and l- where relevant, are prohibited.

Including, but not limited to:

- Diuretics such as Acetazolamide; amiloride; bumetanide; canrenone; chlortalidone; etacrynic acid; furosemide; indapamide; metolazone; spironolactone; thiazides (e.g. bendroflumethiazide, chlorothiazide and hydrochlorothiazide); torasemide; triamterene; xipamide.
- vaptans (e.g. conivaptan, mozavaptan, tolvaptan).
- Plasma expanders by intravenous administration such as albumin, dextran, hydroxyethyl starch and mannitol
- Desmopressin
- Probenecid

and other substances with a similar chemical structure or similar biological effect(s).

EXCEPTIONS:

- Drospirenone; pamabrom; and topical ophthalmic administration of carbonic anhydrase inhibitors (e.g. dorzolamide, brinzolamide);
- Local administration of felypressin in dental anaesthesia.





NOTE: The detection in an Athlete's Sample at all times or In-Competition, as applicable, of any quantity of the following substances subject to threshold limits: formoterol, salbutamol, cathine, ephedrine, methylephedrine and pseudoephedrine, in conjunction with a diuretic or masking agent (except topical ophthalmic administration of a carbonic anhydrase inhibitor or local administration of felypressin in dental anesthesia), will be considered as an Adverse Analytical Finding (AAF) unless the Athlete has an approved Therapeutic Use Exemption (TUE) for that substance in addition to the one granted for the diuretic or masking agent.

PROHIBITED METHODS

PROHIBITED AT ALL TIMES (IN- AND OUT-OF-COMPETITION)

All prohibited methods in this class are Non-Specified except methods in M2.2. which are Specified Methods.

M1. MANIPULATION OF BLOOD AND BLOOD COMPONENTS

The following are prohibited:

- 1. The Administration or reintroduction of any quantity of autologous, allogenic (homologous) or heterologous blood, or red blood cell products of any origin into the circulatory system. Donation of blood or blood components, including by apheresis, is not prohibited when performed in a collection center accredited by the relevant regulatory authority of the country in which it operates.
- 2. Artificially enhancing the uptake, transport or delivery of oxygen. Including, but not limited to: Perfluorochemicals; efaproxiral (RSR13); voxelotor and modified haemoglobin products, e.g. haemoglobin-based blood substitutes and microencapsulated haemoglobin products, excluding supplemental oxygen by inhalation.
- 3. Any form of intravascular manipulation of the blood or blood components by physical or chemical means.

M2. CHEMICAL AND PHYSICAL MANIPULATION

The following are prohibited:

- **1.** Tampering, or Attempting to Tamper, to alter the integrity and validity of Samples collected during Doping Control. Including, but not limited to:
 - Sample substitution and/or adulteration, e.g. addition of proteases to Sample.
- 2. Intravenous infusions and/or injections of more than a total of 100 mL per 12-hour period except for those legitimately received in the course of hospital treatments, surgical procedures, clinical diagnostic investigations, and/or those that are determined to be medically justified and within the standard of care by a licensed physician and administered by a licensed medical professional.

M3. GENE AND CELL DOPING

The following, with the potential to enhance sport performance, are prohibited:

- 1. The use of nucleic acids or nucleic acid analogues that may alter genome sequences and/or gene expression by any mechanism. This includes but is not limited to gene editing, gene silencing and gene transfer technologies.
- **2.** The use of normal or genetically modified cells.



S6 STIMULANTS

PROHIBITED IN-COMPETITION

All prohibited substances in this class are *Specified Substances*. *Substances of Abuse* in this section: cocaine, methylenedioxymethamphetamine (MDMA, "ectasy"), dimethylamphetamine (DMA), benzylpiperazine (BZP), metamfetamine(*d*-), p-methylamfetamine, methylenedioxyamphetamine (MDA).

All stimulants, including all optical isomers, e.g., d- and l- where relevant, are prohibited. Stimulants include:

- 2-phenylpropan-1-amine (β-methylphenylethylamine, BMPEA)
- 3-Methylhexan-2-amine (1,2-dimethylpentylamine)
- 4-fluoromethylphenidate
- 4-Methylhexan-2-amine (methylhexaneamine, 1,3-dimethylamylamine, 1,3-DMAA)
- 4-Methylpentan-2-amine (1,3-dimethylbutylamine)
- 5-Methylhexan-2-amine
 (1,4-dimethylpentylamine,
 1,4-dimethylamylamine, 1,4-DMAA)
- Adrafinil
- Amfepramone
- Amfetamine
- Amfetaminil
- Amiphenazole
- Benfluorex
- Benzfetamine
- Benzylpiperazine
- Bromantan
- Cathine**
- Cathinone and its analogues, e.g. mephedrone, methedrone, and a-pyrrolidinovalerophenone
- Clobenzorex
- Cocaine
- Cropropamide
- Crotetamide
- Dimetamfetamine (dimethylamphetamine)
- Ephedrine***

- Epinephrine**** (adrenaline)
- Etamivan
- Ethylphenidate
- Etilamfetamine
- Etilefrine
- Famprofazone
- Fenbutrazate
- Fencamfamin
- Fencamine
- Fenetylline
- Fenfluramine
- Fenproporex
- Fonturacetam [4-phenylpiracetam (carphedon)]
- Furfenorex
- Heptaminol
- Hydrafinil (fluorenol)
- Hydroxyamfetamine (parahydroxyamphetamine)
- Isometheptene
- Levmetamfetamine
- Lisdexamfetamine
- Meclofenoxate
- Mefenorex
- Mephentermine
- Mesocarb
- Metamfetamine(d-)
- Methylenedioxyamphetamine
- Methylenedioxymethamphetamine
- Methylephedrine***

- Methylnaphthidate ((±)-methyl-2-(naphthalen-2-yl)-2-(piperidin-2-yl)acetate)
- p-methylamfetamine
- Methylphenidate
- Midrodrine
- Modafinil
- Nikethamide
- Norfenefrine
- Norfenfluramine
- Octodrine (1,5-dimethylhexylamine)
- Octopamine
- Oxilofrine (methylsynephrine)
- Pemoline
- Pentetrazol
- Phendimetrazine
- Phenethylamine and its derivatives
- Phenmetrazine
- Phenpromethamine
- Phentermine
- Prenylamine
- Prolintane
- Propylhexedrine
- Pseudoephedrine*****
- Selegiline
- Sibutramine
- Solriamfetol
- Strychnine
- Tenamfetamine (methylenedioxyamphetamine)
- Tesofensine
- Tuaminoheptane

and other substances with a similar chemical structure or similar biological effect(s).





EXCEPTIONS:

- Clonidine, Guanfacine;
- Imidazoline derivatives for dermatological, nasal or ophthalmic use (e.g. brimonidine, clonazoline, fenoxazoline, indanazoline, naphazoline, oxymetazoline, tetryzoline, tramazoline, xylometazoline) and those stimulants included in the 2025 Monitoring Program*.
 - * Bupropion, caffeine, nicotine, phenylephrine, phenylpropanolamine, pipradrol, and synephrine: These substances are included in the 2025 Monitoring Program and are not considered Prohibited Substances.
 - ** Cathine (d-norpseudoephedrine) and its l-isomer: Prohibited when its concentration in urine is greater than 5 micrograms per millilitre.
 - *** Ephedrine and methylephedrine: Prohibited when the concentration of either in urine is greater than 10 micrograms per millilitre.
 - **** Epinephrine (adrenaline): Not prohibited in local administration, e.g. nasal, ophthalmologic, or co-administration with local anaesthetic agents.
 - ***** Pseudoephedrine: Prohibited when its concentration in urine is greater than 150 micrograms per millilitre.

S7 NARCOTICS

PROHIBITED IN-COMPETITION

All substances in this class are Specified Substances and are considered Substances of Abuse.

The following narcotics, including all optical isomers, e.g. d- and l- where relevant, are prohibited.

- Buprenorphine
- Dextromoramide
- Diamorphine (heroin)
- Fentanyl and its derivatives
- Hydromorphone

- Methadone
- Morphine
- Nicomorphine
- Oxycodone
- Oxymorphone

- Pentazocine
- Pethidine
- Tramadol

S8 CANNABINOIDS

PROHIBITED IN-COMPETITION

All substances in this class are Specified Substances and are considered Substances of Abuse.

 Cannabinoids: natural or synthetic delta-9-tetrahydrocannabinol (THC), delta-8-tetrahydrocannabinol (delta-8-THC), or Cannabimimetics (e.g., "Spice," JWH-018, JWH-073, HU-210)

Except: Cannabidiol (CBD).





S9 GLUCOCORTICOIDS

PROHIBITED IN-COMPETITION

All prohibited substances in this class are Specified Substances.

All glucocorticoids are prohibited in-competition when administered by any injectable (including intravenous, intramuscular, and intra-articular), oral (including oromucosal (e.g., buccal, gingival, sublingual)), or rectal route except for those legitimately prescribed by a licensed physician, received for a medically-justified purpose within the standard of care, and administered by a licensed medical professional.

Examples of glucocorticoids include, but are not limited to:

- Beclometasone
- Betamethasone
- Budesonide
- Ciclesonide
- Cortisone
- Deflazacort

- Dexamethasone
- Flucortolone
- Flunisolide
- Fluticasone
- Hydrocortisone
- Methylprednisolone

- Mometasone
- Prednisolone
- Prednisone
- Triamcinolone acetonide

Other routes of administration (including inhaled and topical: dental-intracanal, dermal, intranasal, ophthalmological, otic, and perianal) are not prohibited when used within the manufacturer's licensed doses and therapeutic indications.