

**NCAA Banned Drugs and Medical Exceptions Policy
Guidelines Regarding Medical Reporting
for Student-Athletes with Attention Deficit Hyperactivity Disorder (ADHD)
Taking Prescribed Stimulants**

The NCAA bans classes of drugs because they can harm student-athletes and can create an unfair advantage in competition. Some legitimate medications contain NCAA banned substances, and student-athletes may need to use these medicines to support their academics and their general health. The NCAA has a procedure to review and approve legitimate use of medications that contain NCAA banned substances through a Medical Exceptions Procedure. The diagnosis of adult ADHD remains clinically based utilizing clinical interviews, symptom-rating scales, and subjective reporting from patients and others. The following guidelines will help institutions ensure adequate medical records are on file for student-athletes diagnosed with ADHD in order to request an exception in the event a student-athlete tests positive during NCAA Drug Testing.

1. General considerations. Student-athletes diagnosed with ADHD in childhood should provide records of the ADHD assessment and history of treatment. Student-athletes treated since childhood with ADHD stimulant medication but who do not have records of childhood ADHD assessment, or who are initiating treatment as an adult, must undergo a comprehensive evaluation to establish a diagnosis of ADHD. There are currently no formal guidelines or standards of care for the evaluation and management of adult ADHD. The diagnosis is based on a clinical evaluation. ADHD is a neurobiological disorder that should be assessed by an experienced clinician and managed by a physician to improve the functioning and quality of life of an individual.
 - a. Student-athletes should have access to a comprehensive continuum of care including educational, behavioral, psychosocial and pharmacological services provided by licensed practitioners who have experience in the diagnosis and management of ADHD. Student-athletes treated with ADHD stimulant medication should receive, at a minimum, annual clinical evaluations.
 - b. Mental health professionals who evaluate and prescribe medical therapy for student-athletes with ADHD should have appropriate training and experience in the diagnosis and management of ADHD and should have access to consultation and referral resources, such as appropriate medical specialists.
 - c. Primary care professionals providing mental health services (specifically the prescribing of stimulants) for student-athletes with ADHD should have experience in the diagnosis and management of ADHD and should have access to consultation and referral resources (e.g., qualified mental health professionals as well as other appropriate medical specialists).
2. Recommended ways to facilitate academic, athletics, occupational and psychosocial success in the college athlete with adult ADHD taking prescribed stimulants include:
 - a. Access to practitioners experienced in the diagnosis and management of adult ADHD.
 - b. A timely, comprehensive clinical evaluation and appropriate diagnosis using current medical standards.

- c. Access to disability services.
 - d. Appropriate medical reporting to athletics departments/sports medicine staff.
 - e. Regular mental health/general medical follow-up.
3. Student-Athlete Document Responsibility. The student-athlete's documentation from the prescribing physician to the athletics departments/ sports medicine staff should contain a minimum of the following information to help ensure that ADHD has been diagnosed and is being managed appropriately (see Attachment for physician letter criteria):
- a. Description of the evaluation process which identifies the assessment tools and procedures.
 - b. Statement of the Diagnosis, including when it was confirmed.
 - c. History of ADHD treatment (previous/ongoing).
 - d. Statement that a non-banned ADHD alternative has been **considered** if a stimulant is currently prescribed.
 - e. Statement regarding follow-up and monitoring visits.
4. Institutional Document Responsibility. The institution should note ADHD treatment in the student-athlete's medical record on file in the athletics department. In order to request a medical exception for ADHD stimulant medication use, it is important for the institution to have on file documentation that an evaluation has been conducted, the student-athlete is undergoing medical care for the condition, and the student-athlete is being treated appropriately. The institution should keep the following on confidential file:
- a. Record of the student-athlete's evaluation.
 - b. Statement of the Diagnosis, including when it was confirmed.
 - c. History of ADHD treatment (previous/ongoing).
 - d. Copy of the most recent prescription (as documented by the prescribing physician).

5. Requesting an NCAA Medical Exception:

- a. The student-athlete should report the banned medication to the institution upon matriculation or when treatment commences in order for the student-athlete to be eligible for a medical exception in the event of a positive drug test.
- b. A student-athlete's medical records or physician's letter should **not** be sent to the NCAA, unless requested by the NCAA.
- c. The use of the prescribed stimulant medication **does not** need to be reported at the time of NCAA drug testing.
- d. Documentation should be submitted by the institution in the event a student-athlete tests positive for the banned stimulant.

Note: The NCAA Committee on Competitive Safeguards and Medical Aspects of Sports may approve stimulant medication use for ADHD without a prior trial of a non-stimulant medication. Although the NCAA Medical Exception Policy requires that a non-banned medication be considered, the medical community has generally accepted that the non-stimulant medications may not be as effective in the treatment of ADHD for some in this age group.

ATTACHMENT

Attention Deficit Hyperactivity Disorder (ADHD) Guideline Attachment

Criteria for letter from prescribing Physician to provide documentation to the Athletics Department/Sports Medicine staff regarding assessment of student-athletes taking prescribed stimulants for Attention Deficit Hyperactivity Disorder (ADHD), in support of an NCAA Medical Exception request for the use of a banned substance.

The following must be included in supporting documentation:

- Student-athlete name.
- Student-athlete date of birth.
- Date of clinical evaluation.
- Clinical evaluation components including:
 - Summary of comprehensive clinical evaluation (referencing DSM-IV criteria) -- attach supporting documentation.
 - ADHD Rating Scale(s) (e.g., Connors, ASRS, CAARS) scores and report summary -- attach supporting documentation.
 - Blood pressure and pulse readings and comments.
 - Note that alternative non-banned medications have been considered, and comments.
 - Diagnosis.
 - Medication(s) and dosage.
 - Follow-up orders.

Additional ADHD evaluation components if available:

- Report ADHD symptoms by other significant individual(s).
- Psychological testing results.
- Physical exam date and results.
- Laboratory/testing results.
- Summary of previous ADHD diagnosis.
- Other comments.

Documentation from prescribing physician must also include the following:

- Physician name (Printed)
- Office address and contact information.
- Specialty.
- Physician signature and date.

DISCLAIMER: The National Collegiate Athletic Association shall not be liable or responsible, in any way, for any diagnosis or other evaluation made, or exam performed, in connection herewith, or for any subsequent action taken, in whole or in part, in reliance upon the accuracy or veracity of the information provided hereunder.

NCAA Guidelines to Document ADHD Treatment with Banned Stimulant Medications
Addendum to the January 2009 Guidelines
Q & A March 2009

1. Why is the NCAA instituting a stricter application of the medical exception policy for the use of banned stimulant medications to treat ADHD?

- The stricter application reflects a stronger stand on policy enforcement, protecting the student-athlete competing while using these stimulants, and the integrity of the sport. **This stricter application of the medical exception policy is intended to provide clearer documentation of the student-athlete's evaluation, and not intended to replace the clinician's evaluation and treatment.**

As experienced across campus, more and more college students-athletes are being treated with stimulant medications for ADHD. These stimulants are banned for use in NCAA competition for both performance and health reasons, and using them may result in a positive drug test and loss of eligibility, unless the student-athlete provides adequate documentation of a diagnostic evaluation for ADHD and appropriate monitoring of treatment. In recent years, the number of student-athletes testing positive for these stimulant medications has increased 3 fold, and in many cases there has been inadequate documentation submitted in support of the request for a medical exception to the NCAA banned drug policy.

2. Who was consulted in the development of the guidelines?

- The NCAA sought consultation from MDs, Psychiatrists, Psychologists and others in the development of the guidelines for appropriate documentation requirements; these were then reviewed and approved by the NCAA Committee on Competitive Safeguards and Medical Aspects of Sports.

3. How was the change communicated to the membership?

- Beginning in January 2008, the membership received notification of the effective date of the stricter application -- August 2009 -- in the form of NCAA News articles, notices in email communications, and the posting of a video describing the rationale and expectations of the stricter application. This 18 month period of notice would allow member institutions to inform current and incoming student-athletes to be prepared to gather the necessary documentation of the diagnosis, course of treatment and current prescription.

4. Who needs to conduct the evaluation?

- The initial evaluation may be conducted by clinicians with experience in assessing ADHD; these include school psychologists, clinical psychologists, psychiatrists, other MD's and their supervised clinicians.
5. What type of ADHD evaluation documentation needs to be submitted to support an ADHD diagnosis and treatment with banned stimulant medication? What is acceptable and what is not acceptable proof an evaluation has been conducted?
- The documentation should include a comprehensive clinical evaluation, recording observations and results from ADHD rating scales, a physical exam and any lab work, previous treatment for ADHD, and the diagnosis and recommended treatment. The physician can provide documentation of the above either with a cover letter and attachments or provide the medical record. This documentation should be kept on file in the athletics department until such time that the student-athlete tests positive for the stimulant. A simple statement from the prescribing physician that he or she is treating the student-athlete for ADHD with said medication IS NOT adequate documentation.
6. Will an assessment conducted more than three-five years ago be acceptable?
- Yes, in fact the expectation is that for many student-athletes, the evaluation and initiation of treatment likely began during grade school. Documentation of that evaluation, along with the history of treatment and current prescription, should be submitted by the student-athlete to their sports medicine staff upon matriculation.
7. What is required of a student-athlete who for years has been prescribed stimulant medication to treat ADHD but has not undergone a full assessment?
- In order to obtain a medical exception, the student-athlete must undergo a full assessment as described above. This may be conducted on campus, through a community mental health service, or by any experienced clinician.
8. Does a student-athlete need to have an updated letter from the prescribing physician on file each year of their eligibility?

- Yes, an annual follow-up with the prescribing physician is the minimum standard, and that can be reflected in a letter from the physician or a copy of the medical record, with written indication of the current treatment.
9. Do physicians have to use a certain form when performing the evaluation for ADHD?
- There is no specific form physicians need to use to perform an evaluation. The guidelines present the criteria identifying what to report, and several ADHD rating scales are listed, but it is the totality of the clinician's evaluation that should be reflected in the documentation. This evaluation should be conducted by a clinician experienced in assessing ADHD
10. Can an institution pay for the evaluation to diagnose ADHD?
- From an interpretation: Institution paying for academic performance testing
Date Issued: October 26, 1988 Date Published: October 26, 1988 (Item Ref: g).

g. Institution Paying for Academic Performance Testing: Determined that Constitution 3-1-(h)-(4)-(i) [incidental benefits -- tutoring expenses] would permit an institution to pay for tests to determine the academic performance level of enrolled student-athletes in order to identify potential academic problems, inasmuch as such a diagnostic test is considered part of the tutoring process. Recommended that this interpretation be published in LAC subsequent to review by LIC.
11. What happens if neither the school nor student-athlete can afford to pay for the testing?
- In each division, the institution can submit an incidental expense waiver. For Division I, SAOF may be used if it is approved by their conference office.
12. Some student-athletes are embarrassed and don't reveal that they are taking medication for ADHD. How does the institution address this issue?
- The institution should be proactive in communicating the importance to all student-athletes about reporting to sports medicine all medical issues and medications – in order to avoid loss of eligibility and to respond appropriately in

any medical emergency. The need for this reporting should be expressed to the student-athlete as standard operating procedure and addressed during initial medical assessments and subsequent health histories. The NCAA is preparing a poster to remind student-athletes to report all medications.

13. Does the student-athlete need to first try non-stimulant medication to treat ADHD?

- The student-athlete does not need to be put on a trial of non-stimulant medication, but the documentation must note that a non-stimulant alternative was considered and why the stimulant medication was chosen.

14. If a student-athlete received a medical exception for the use of banned stimulant medication to treat ADHD prior to August 2009, will that student-athlete be required to meet this policy application?

- There is no ‘grandfathering’ on this issue; for any positive drug test occurring from August 1, 2009, a medical exception for the use of banned stimulant medication must include the required documentation, even if a student-athlete has received a medical exception for ADHD stimulant medication prior to August 2009.

15. How will the policy address a student-athlete who tests positive for a banned stimulant prescribed by their physician but has not undergone a full assessment for an ADHD diagnosis?

- If a student-athlete has not undergone an evaluation and/or cannot produce documents at the time the positive test is confirmed with the institution, the student-athlete must be declared ineligible until 1) the documentation can be produced or 2) a drug-test appeal is heard and approved.

16. Does a student-athlete currently on stimulant medication but lacking a formal evaluation need to discontinue the medicine in order to undergo the assessment?

- If a student-athlete has been on a prescribed stimulant medication, but no evaluation documentation is available, and the student-athlete will be referred for evaluation to document the diagnosis of ADHD, they can continue the medication if helpful and they are tolerating it. Clinicians familiar with ADHD regularly see

patients who are taking ADHD medications and have no formal documentation at the time. There is no need to stop the medication and interfere with appropriate treatment of the medical condition. The evaluation is a clinical evaluation which includes taking a comprehensive history, evaluation current/past symptoms, reviewing the effects of medications (including getting information from the patient's prescription/med bottle), checklists, etc. There is no need to take the patient off the medication for evaluation especially if they are doing well.

17. How will clinical notes and testing results be secure once the institution sends these documents to the NCAA?

- The information provided by the school to the NCAA to address drug-testing issues is covered by the Student-Athlete Statement and Drug-Testing Consent compliance forms. All subsequent use of these materials by NCAA review committees follow strict NCAA confidentiality protocols

18. How will this policy be communicated to student-athletes?

- The institution is responsible to communicate to all student-athletes NCAA banned drug policies, including the medical exception policy. The medical exception policy information is available in the Drug-Testing Program handbook, on-line at NCAA.org and also included in the Drug-Education and Drug-Testing video (to be updated summer 2009). In addition, the NCAA will provide posters spring 2009 to all NCAA institutions that alert student-athletes to the need to report all medications.