

SUBJECT/TITLE: University of Iowa Department of Athletics Drug Testing Program

PURPOSE: To describe the substance use prevention and treatment program of the UI Department of Athletics, which is complementary to the program administered by the NCAA. The use of drugs illegal in any jurisdiction, misuse of legal drugs and dietary supplements, use of performance-enhancing substances, and use or abuse of alcohol can pose risks to the student-athlete and their teammates' health and negatively affect academic and athletic performance. It can also compromise the integrity of athletic competition.

SCOPE: UI Department of Athletics

POLICY:

- A. The purpose of the University of Iowa Department of Athletics Drug Testing Program (the Program) is to promote good health, safety, and excellent academic and athletic performance of student-athletes. The institutional in-house Program complements and supplements the NCAA year-round testing program, which is governed by the NCAA drug-testing manual.
- B. The following are the components of the Program:
 - 1. Provide annual education to student-athletes and coaches regarding the negative effects of drug and/or alcohol misuse and abuse.
 - 2. Provide a testing program.
 - 3. Allow for student-athlete self-disclosure.
 - 4. Provide medically appropriate counseling and treatment plans for individuals with identified confirmed positive results.
 - 5. Outline minimum consequences in the Athletics Department for individuals identified with confirmed positive results.
- C. All student-athletes who participate in UI intercollegiate athletics are subject to unannounced drug screening examinations.
- D. Drug testing will be performed by a laboratory accredited by the U.S. Department of Health and Human Services Substance Use and Mental Health Services Administration (SAMHSA).

PROCEDURES:

- A. Testing
 - 1. The Program will test for the presence of controlled substances, illegal substances, steroids, and other performance-enhancing substances. See Appendix E for a reprint of NCAA banned drug classes, which is also available at NCAA.org.
 - a) UI tests urine samples for the presence of THC.

- b) The Program recognizes some banned substances may be used for legitimate medical purposes with valid prescriptions. All prescription and over-the-counter medications being used by the student-athlete must be filed by the student-athlete with the Head Team Physician for their respective sport.
 - 1) If a drug test result is returned as non-negative due to the student-athlete not filing all prescription and over-the-counter medications, the test result will be considered a confirmed positive test result.
- 2. Any attempt to substitute, manipulate, adulterate, or dilute a specimen will be considered a confirmed positive test and may otherwise be subject to the Student-Athlete Code of Conduct.
- 3. Suspicion Testing:
 - a) Coaches and other UI athletic officials with direct student-athlete contact may request a drug test of a student-athlete for suspicion. Suspicion testing may be based on behavioral and/or physiologic criteria, including post-incident, e.g., DUI, PAULA.
 - b) The requester must fill out the Suspicion Testing Request Form (Appendix C) and submit to the student-athlete's Sport Administrator.
 - c) The Sport Administrator will review the form and forward the request to the Head Team Physician and the Medical Director.
 - d) The Medical Director may consult with the Director of Sport Performance, Head Coach, and/or the Director of Athletics or their designee prior to making a final decision to approve any request. The request must be approved by the Medical Director prior to testing.
- 4. Notification to Report for Testing:
 - a) The student-athlete will be notified of and scheduled for testing by the Athletics Department in person or by direct telephone communication (no voicemail messages, no text messages, no emails).
 - b) A student-athlete who refuses or is unable to provide an adequate sample within 4 hours of check-in for testing or fails to show up at the designated time may be deemed to be in violation of this policy.

B. Voluntary Disclosure:

- 1. Any student-athlete may refer themselves for voluntary evaluation and treatment on a one-time basis during their participation in UI intercollegiate athletics without being subject to consequences under this policy, so long as such disclosure occurs prior to the following:
 - a) any involvement in an alleged reported drug or alcohol incident, and
 - b) being notified of their selection for drug testing under another provision of this policy.
- 2. A student-athlete who wishes to self-refer should disclose this information to the Head Team Physician.
- 3. The Head Team Physician will make appropriate referrals for continuing treatment and care associated with the student-athlete's voluntary disclosure.
- 4. Voluntary disclosure within the UI Department of Athletics will not negate any test results or consequences due to NCAA testing, which carries separate consequences under NCAA rules.

C. Consent Forms:

- 1. At the beginning of each academic year, each UI student-athlete (both scholarship and non-scholarship) will be asked to sign forms that:

- a) Acknowledge receipt of informational material and understanding of the Program and potential consequences (Appendix A).
 - b) Consent to undergo testing for drugs by urinalysis or alternative matrix testing as a requirement of involvement with the athletics program (Appendix A).
 - c) Consent to releases of results of a confirmed positive drug test and any related protected health information to the Medical Director and Director of Athletics or their designee (Appendix B).
 - d) Consent to the release of drug testing results and any other related protected health information to parents and/or legal guardians (Appendix B).
2. The student-athlete will be ineligible to participate in UI intercollegiate athletics if they do not to complete or sign the acknowledgement and consent forms (Appendices A and B).

D. Results:

1. All confirmed positive results will be reviewed by the Medical Director prior to release to the student-athlete and other appropriate professional of the student's choice.
2. The Medical Director will notify the Director of Athletics (or designee). Additional notifications in the Department of Athletics may include the head coach of the sport in which the student-athlete participates and the respective sport administrator.
3. The student-athlete may be notified verbally by a Department representative.

E. Treatment:

1. The Medical Director will be responsible for all final decisions related to testing and treatment referrals. The scope of each student-athlete's treatment plan will be based on consultation between the Medical Director and those professionals designated by the student-athlete.
2. A treatment plan may be developed by the Medical Director. Options for treatment may include any combination of the following or any other medically necessary treatment plan options:
 - a) Referrals for counseling/education
 - b) Follow-up drug testing
 - c) Medication
 - d) Referrals for extensive outpatient treatment
 - e) Referrals for inpatient treatment
3. When the Medical Director deems a student-athlete able to participate in the UI intercollegiate athletics program, they may be subject to on-going, individual, unannounced drug testing with their consent as part of their treatment throughout the remainder of that academic and/or summer term.
4. Failure to comply with the recommended treatment plan or refusal of treatment will result in notification to the athletics program, and suspension from participation in intercollegiate athletics at the University of Iowa may result.

F. Confidentiality and Privacy

1. All persons having information related to drug testing and/or treatment will keep this information confidential.
2. Personnel in the Athletics Department and other medical care providers are subject to applicable privacy laws.
3. Student-athlete records will not be available to anyone other than persons providing treatment unless those individuals have the student-athlete's consent.

4. All written and electronic records for the Program will be maintained in a secure manner.

G. Consequences

1. Minimum consequences are determined according to the Minimum Substance Use Department-Level Consequences (Appendix D). Additional consequences may be imposed by the Department and/or the student-athlete's Team Rules. Such consequences may include, but are not limited to, suspension from participation in UI intercollegiate athletics and possible reduction or cancellation of any scholarship(s) or other funding received.
2. If a drug screening test is confirmed positive for exogenous steroids, the student-athlete may be subject to removal from any practice, competition, or other team event until they test negative. If any student-athlete has a second positive test related to steroids or a second increase of the steroid level during follow-up testing, which is consistent with continued steroid use as determined by the Medical Director, the student-athlete may be subject to consequences as outlined in the Department of Athletics Drug Testing Program policy (Appendix D) and any applicable Team Rules.

H. Appeals

1. Student-athletes are entitled to appeal consequences or suspensions utilizing procedures described in the Department of Athletics Student-Athlete Handbook.
2. Student-athletes who have a confirmed positive test may, within 72 hours following receipt of notice of the confirmed positive test, contest the finding.
3. Upon the student-athlete's request for additional testing of the sample, the Program Administrator will formally request the SAMHSA certified laboratory to re-analyze the original positive finding.
 - a) The student-athlete may choose to be present (traveling at their own expense) for the re-analysis at the laboratory or request the re-analysis be completed at a different SAMHSA certified laboratory (the cost of the analysis will be incurred by the student-athlete).
 - b) If the student-athlete does not wish to be present, but desires to be represented, arrangements may be made for a surrogate to attend at student-athlete expense.
 - 1) The student-athlete or surrogate will attest to the sample number prior to the laboratory conducting the re-analysis.
 - 2) The student-athlete or surrogate will not be involved with any other aspect of the analysis of the specimen (bottle B).
 - c) Re-analysis findings are final. If the re-analysis test result is negative, the first drug test will be considered negative.

APPENDIX A
**The University of Iowa Department of Athletics Consent to Drug
Testing and Acknowledgement of Potential Consequences**

Student Name: _____

I, _____ hereby consent to provide a specimen for the purpose of testing for the presence of prohibited drugs. I understand that the test results will be sent to the Director of Athletics or designated representative who is responsible for the University of Iowa Department of Athletics Drug Testing Program. I understand and consent that no specific time period is required for notification of student-athletes prior to the administration of any drug tests. I understand that refusing to provide or tampering with a specimen or providing false information on a specimen's chain of custody, may result in consequences.

I understand that a confirmed positive test result may have serious consequences, including, but not limited to, those minimum consequences outlined in University of Iowa Minimum Department-Level Consequences for Student Athletes as well as additional consequences imposed by the Department or under any applicable Team Rules. I acknowledge that I could lose my UI intercollegiate athletics eligibility and any scholarship(s) or other funding received as a result of a confirmed positive test result.

I also understand a documented chain of specimen custody exists to ensure the identity and integrity of my specimens throughout this collection and testing process.

I understand that if I refuse to undergo testing at any time or refuse to sign this consent form, I will be ineligible to participate in intercollegiate athletics at the University of Iowa and my scholarship(s) or other funding may be terminated as applicable. I also understand that the university is not responsible for any consequences that I may experience associated with my confirmed positive test result.

I consent freely and voluntarily to the Department of Athletics request for a specimen. I hereby release and hold harmless the University of Iowa from any liability whatsoever arising from this request to furnish my specimens and the testing of my specimens.

I may revoke this consent at any time by contacting the Associate Athletics Director for Compliance in writing. If this consent is revoked, I understand that information released prior to the revocation of my consent would not be considered a breach of any duties owed to me by the university.

I understand that this consent will expire one year from the date of signature.

Signature _____

Date _____

APPENDIX B
CONSENT TO RELEASE OF INFORMATION AND RIGHT OF ACCESS REQUEST

Patient legal name: _____ **Birth date:** _____

Complete mailing address: _____

List any previous names (maiden, married, legal changes): _____

Send information to: _____

Name and/or facility: _____

Complete mailing address: _____

Format of information to be released:

Electronic (circle): CD / USB drive / Verbal To file only Paper

Fax: _____ Email: _____
(Email is not a secure means of communication)

Information to be released:

_____ Test results:

_____ Other:

Date(s): _____ **to** _____ **and/or Department/Provider:** _____

Reason for release: _____

This consent is voluntary. I am giving my consent voluntarily. I know that I do not have to complete this form in order to receive treatment. I also have the right to revoke or cancel this authorization in writing by contacting _____ at _____. Cancellation will take effect when the program receives my written revocation, except to the extent action has already been taken based on my authorization. I may revoke consent orally for federally assisted drug and alcohol use programs. I understand that I may inspect or copy the information to be used or disclosed, unless access is restricted by law. Information regarding my health care, including payment for health care, is protected by federal laws and regulations, including the Health Insurance Portability and Accountability Act of 1996 ("HIPAA"), and the Confidentiality of Alcohol and Drug Use Patient Records (42 C.F.R. Part 2). Persons and programs are not allowed to re-disclose alcohol and drug use treatment information without my written consent unless permitted to do so by law. Iowa Code Chapter 228 and other laws prohibit re-disclosure of mental health, alcohol and drug use treatment, HIV/AIDS and other confidential information without my written consent except in certain circumstances. I understand that not every organization that may receive a record is required to follow the rules governing use and disclosure of confidential information; in that circumstance, the information will no longer be protected by law and may be re-disclosed without my consent. This authorization will expire one (1) year from the date it is signed, unless I revoke it in writing.

Signature: _____ **Date:** _____
(Patient or person legally authorized to consent for patient)

(Printed name of legally authorized person signing)

(Relationship of legally authorized person)

APPENDIX C
Request for Drug Testing
Reasonable Suspicion

Reasonable suspicion can be based on the observation of behavior or conduct, or the presence of certain physical and emotional characteristics or patterns, which are indicative of the use of illegal or otherwise prohibited substances.

Staff Member Making the Request: _____

Student-Athlete to be Tested: _____ Sport: _____

Please check all characteristics that may contribute to your request for reasonable suspicion testing:

Changes in athlete's personal life:

- | | |
|--------------------------|--|
| ☐ | Relationship problems |
| ☐ | Isolating self from family and friends |
| ☐ | Difficulty maintaining relationships |
| ☐ | Withdrawing from activities |
| ☐ | Alcohol-related arrests |

Changes in athlete's health:

- | | |
|--------------------------|---|
| ☐ | Deterioration in personal hygiene |
| ☐ | Noticeable weight loss |
| ☐ | Slurred speech |
| ☐ | Unsteady gait |
| ☐ | Frequently sick leave for minor illnesses with vague symptoms |

Changes in athlete's behavior:

- | | |
|--------------------------|---|
| ☐ | Late to practice, leaving early |
| ☐ | Aggressive behavior towards others |
| ☐ | Mood swings, erratic behavior |
| ☐ | Falling asleep during practice |
| ☐ | Isolating from others |
| ☐ | Arriving at practice early, staying late, skipping breaks and lunch |
| ☐ | Unexplained absences |
| ☐ | Evidence of tampering of sample(s) submitted for testing (current or previous testing events) |

- | | |
|--------------------------|---|
| ☐ | Decrease in quality of performance |
| ☐ | Failing to meet deadlines or schedules |
| ☐ | Increase in complaints from others |
| ☐ | Not carrying share of workload |
| ☐ | Alcohol on breath |
| ☐ | Elaborate excuses for behavior that change with retelling |
| ☐ | Direct observation of prohibited use |

Staff Signature: _____ Date: _____

Sport Administrator: _____ Date: _____

Approval

Team Physician: _____ Date: _____

Medical Director: _____ Date: _____

If this request is supported by the Sport Administrator, and the Team Physician and Medical Director determine that reasonable suspicion exists, the Medical Director will notify the Program Manager to notify the student-athlete of the need to report to a collection site and provide a sample. Failure to report to the site at the predetermined time will be treated as a confirmed positive test result.

APPENDIX D
Substance Use
Minimum Department-Level Consequences for Student-Athletes
(Updated July 2020)

This document delineates the minimum Department-level consequences or actions for a student-athlete who tests positive for a banned drug class substance under the University of Iowa Department of Athletics Drug Testing Program or who is found to have committed drug or alcohol offenses. Drug or alcohol offenses include, but are not limited to: OWI, Public Intoxication, illegal drug substance charge, or a 2nd PAULA.

These consequences will be administered by the Director of Athletics (or designee). A student-athlete may be subject to additional and harsher consequences by the Department or as described in Team Rules.

Student-athletes have the right to appeal any consequences or actions under the Student-Athlete Code of Conduct.

1. First Substance Use Violation:

- Required administrative meeting with Director of Athletics (or designee), and Sports Medicine and/or sport coach/representative of student-athlete's choice
- Referrals to medical care and treatment as determined by Medical Director
- Additional drug testing
- Team Rules as directed by coaches

2. Second Substance Use Violation:

- Required administrative meeting with Director of Athletics (or designee), and Sports Medicine and/or sport coach/representative of student-athlete's choice
- Referrals to medical care and treatment as determined by Medical Director
- 20 Hours of community service at the discretion of the Athletics Director (or designee)
- Student-athlete is subject to a minimum of 10% regular and/or post season competition suspension
- Team Rules as directed by coaches

3. Third Substance Use Violation: (applies to all third and subsequent positives)

- Required administrative meeting with Director of Athletics (or designee), and Sports Medicine and/or sport coach/representative of student-athlete's choice
- Referrals to medical care and treatment as determined by Medical Director
- On-going participation in athletically related activities and continuing participation in the intercollege athletics team will be determined in consultation with the Medical Director and Director of Athletics (or designee)

The Director of Athletics, in consultation with the Medical Director, may make exceptions where such exceptions are in the best interest of the student-athlete.



2026-27 NCAA Banned Substances

NCAA legislation requires that schools provide drug education to all student-athletes. The athletics director or athletics director's designee shall disseminate the list of banned-drug classes to all student-athletes and educate them about products that might contain banned substances. All student-athletes should be notified that the list may change during the academic year and that updates may be found on the NCAA website ([ncaa.org/drugtesting](https://www.ncaa.org/drugtesting)). They should also be informed of the appropriate athletics department procedures for disseminating updates to the list. Student-athletes should report use of all medications (e.g., prescribed, over the counter) to their primary athletics health care provider. It is the student-athlete's responsibility to check with the appropriate or designated athletics staff before using any substance, including supplements and medications.

The NCAA bans the following drug classes:

1. Stimulants.
2. Anabolic agents.
3. Beta blockers (banned for golf and rifle).
4. Diuretics and masking agents.
5. Narcotics.
6. Peptide hormones, growth factors, related substances and mimetics.
7. Hormone and metabolic modulators.
8. Beta-2 agonists.

Note: This is neither a complete nor exhaustive list. Any substance chemically/pharmacologically related to these classes is also banned. The school and the student-athlete shall be held accountable for all substances within the banned-drug class regardless of whether they have been specifically identified. Furthermore, schools should discuss and review student-athlete use of prescribed and over the counter medications. Examples of substances under each class can be found at [ncaa.org/drugtesting](https://www.ncaa.org/drugtesting). There is no complete list of banned substances.

Substances and Methods Subject to Restrictions:

1. Blood and gene doping.
2. Local anesthetics (permitted under some conditions).
3. Manipulation of urine samples.
4. Tampering of urine samples.
5. Beta-2 agonists (permitted only by inhalation with prescription).

Nutritional/Dietary Supplement and Medication Warning:

Before a student-athlete consumes any nutritional/dietary supplement or uses any medication, they should review the product and/or medication label with the appropriate athletics department staff.

1. There are no NCAA-approved nutritional or dietary supplements.
2. Nutritional/dietary supplements, including vitamins and minerals, are not well regulated and may cause a positive drug test.
3. Student-athletes have tested positive and lost their eligibility using nutritional/dietary supplements.
4. Nutritional/dietary supplements may be contaminated with banned substances not listed on the label.
5. While third-party tested and low-level risk products may be options, complete elimination of risk is impossible.

6. All nutritional/dietary supplements are taken at the student-athlete's own risk.

Athletics department staff should provide guidance to student-athletes about supplement use, including a directive to have any product checked by appropriate athletics department staff before consuming. The NCAA subscribes only to Drug Free Sport AXIS™ for authoritative review of label ingredients in medications and nutritional/dietary supplements. Contact AXIS at 816-474-7321 or axis.drugfreesport.com (access code: ncaa1, ncaa2 or ncaa3).

**THERE IS NO COMPLETE LIST OF BANNED SUBSTANCES.
DO NOT RELY ON THIS LIST TO RULE OUT ANY LABEL INGREDIENT.**

Many nutritional/dietary supplements may be contaminated with banned substances not listed on the label. It is the student-athlete's responsibility to check with the appropriate athletics staff before using any substance.

Drug Classes	Some Examples of Substances in Each Class	
Stimulants	Amphetamine (Adderall) Caffeine and sources of caffeine* Cocaine Dimethylbutylamine (DMBA; AMP) Dimethylhexylamine (DMHA; Octodrine) Ephedrine Heptaminol Hordenine Lisdexamfetamine (Vyvanse) *Sources of caffeine (e.g., Green tea extract, Guarana, Yerba Mate, etc.) <i>Exceptions: Phenylephrine, Pseudoephedrine and Oxymetazoline (excluding the oral route) are not banned.</i>	Mephedrone (bath salts) Methamphetamine Methylhexanamine (DMAA; Forthane) Methylphenidate (Ritalin) Modafinil Octopamine Phenethylamine (PEA) and its derivatives Phentermine Synephrine (bitter orange)
Anabolic Agents	Androstenedione Boldenone Clenbuterol Clostebol DHCMT (Oral Turinabol) DHEA Drostanolone Epitrenbolone Etiocholanolone	Methandienone Methasterone Nandrolone (19-nortestosterone) Oxandrolone SARMS [Ligandrol (LGD-4033); Ostarine; RAD140; S-23] Stanozolol Stenbolone Testosterone Trenbolone
Beta Blockers (banned for golf and rifle)	Atenolol Metoprolol Nadolol	Pindolol Propranolol Timolol
Diuretics and Masking Agents	Bumetanide Canrenone (Spironolactone) Chlorothiazide Furosemide <i>Exceptions: Finasteride is not banned.</i>	Hydrochlorothiazide Probenecid Triamterene Trichlormethiazide
Narcotics	Buprenorphine Dextromoramide Diamorphine (heroin) Fentanyl and its derivatives Hydrocodone Hydromorphone Meperidine	Methadone Morphine Nicomorphine Oxycodone Oxymorphone Pentazocine Tramadol
Peptide hormones, growth factors, related substances and mimetics	BPC-157 Erythropoietin (EPO) Growth hormone (hGH)	Human Chorionic Gonadotropin (hCG) Ibutamoren (MK-677) IGF-1 (colostrum; deer antler velvet) TB-500 <i>Exceptions: Insulin, Synthroid and Forteo are not banned.</i>
Hormone and Metabolic Modulators	Anti-Estrogen (Elacestrant, Fulvestrant) Aromatase Inhibitors [Anastrozole (Arimidex); ATD (androstatrienedione); Formestane; Letrozole] PPAR-d [GW1516 (Cardarine); GW0742] SERMS [Clomiphene (Clomid); Raloxifene (Evista); Tamoxifen (Nolvadex)]	
Beta-2 Agonists	Albuterol Formoterol Higenamine	Salbutamol Salmeterol Vilanterol

Any substance that is chemically/pharmacologically related to one of the above drug classes, even if it is not listed as an example, is also banned.

Information about ingredients in medications and nutritional/dietary supplements can be obtained by contacting AXIS at 816-474-7321 or axis.drugfreesport.com (access code: ncaa1, ncaa2 or ncaa3).