

2. **Medical information** (continue on separate sheet if necessary)

Diagnosis: <hr/> If a permitted medication can be used to treat the medical condition, please provide clinical justification for the requested use of the prohibited medication <hr/> <hr/> <hr/>
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**Comment:**

*Evidence confirming the diagnosis shall be attached and forwarded with this application. The medical information must include a comprehensive medical history and the results of all relevant examinations, laboratory investigations and imaging studies. Copies of the original reports or letters should be included when possible. Evidence should be as objective as possible in the clinical circumstances. In the case of non-demonstrable conditions, independent supporting medical opinion will assist this application.*

*WADA maintains a series of guidelines to assist physicians in the preparation of complete and thorough TUE applications. These TUE Physician Guidelines can be accessed by entering the search term "Medical Information" on the WADA website: <https://www.wada-ama.org>. The guidelines address the diagnosis and treatment of a number of medical conditions commonly affecting athletes, and requiring treatment with prohibited substances.*

3. **Medication details**

<b>Prohibited Substance(s): Generic name</b>	<b>Dose</b>	<b>Route of Administration</b>	<b>Frequency</b>	<b>Duration of Treatment</b>
1.				
2.				
3.				