When such further investigation is required the result shall be reported by the laboratory as atypical and not as adverse. If a laboratory reports, using an additional reliable analytical method (e.g. IRMS), that the *Prohibited Substance* is of exogenous origin, no further investigation is necessary, and the *Sample* will be deemed to contain such *Prohibited Substance*.

When an additional reliable analytical method (e.g. IRMS) has not been applied, and the minimum of three previous test results are not available, a longitudinal profile of the *Athlete* shall be established by performing three no advance notice tests in a period of three months by the relevant *Anti-Doping Organization*. The result that triggered this longitudinal study shall be reported as atypical. If the longitudinal profile of the *Athlete* established by the subsequent tests is not physiologically normal, the result shall then be reported as an *Adverse Analytical Finding*.

In extremely rare individual cases, boldenone of endogenous origin can be consistently found at very low nanograms per milliliter (ng/mL) levels in urine. When such a very low concentration of boldenone is reported by a laboratory and the application of any reliable analytical method (e.g. IRMS) has not determined the exogenous origin of the substance, further investigation may be conducted by subsequent test(s).

For 19-norandrosterone, an Adverse Analytical Finding reported by a laboratory is considered to be scientific and valid proof of exogenous origin of the Prohibited Substance. In such case, no further investigation is necessary.

Should an Athlete fail to cooperate in the investigations, the Athlete's Sample shall be deemed to contain a Prohibited Substance.]

For purposes of this section:

* "exogenous" refers to a substance which is not ordinarily capable of being produced by the body naturally.

** "endogenous" refers to a substance which is capable of being produced by the body naturally.

S1.2. Other Anabolic Agents, including but not limited to:

Clenbuterol, selective androgen receptor modulators (SARMs), tibolone, zeranol, zilpaterol.