

The use of inhaled Beta-2 Agonists:

- Athletes using formoterol, salbutamol, salmeterol, terbutaline by inhalation must have a medical file justifying this *Use* and meeting the minimum requirements outlined below.

ANNEX 1:

Minimal requirements for the medical file to be used for the TUE process in the case of asthma and its clinical variants

The file must reflect current best medical practice to include:

1. A complete medical history i.e. a history of asthma may include a family history of allergies, hay fever or eczema. Individuals may also describe a personal history of childhood respiratory problems, rhinitis, allergic conjunctivitis or dermatitis. In these cases, the development of asthma may be part of an atopic predisposition; however asthma might also develop in otherwise healthy individuals. There may also be a history of persisting cough following a respiratory tract influence "colds" without fever, or specific seasonal influences and intermittent nocturnal symptoms. Alternatively, symptoms may be entirely activity induced.

In sport, examples of potential provocation include variations in ambient temperature, endurance training and exposure to swimming pool chemicals.

2. A comprehensive report of the clinical examination with specific focus on the respiratory system
3. A report of spirometry with the measure of the Forced Expiratory Volume in 1 second (FEV1).
4. If airway obstruction is present, the spirometry will be repeated after inhalation of a short acting Beta-2 Agonists to demonstrate the reversibility of bronchoconstriction
5. In the absence of reversible airway obstruction, a bronchial provocation test is required to establish the presence of airway hyper-responsiveness
6. Exact name, specialty, address (including telephone, email, fax) of examining physician.