

Self-Injection Guideline



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QAS Self-Injection Guideline

Revision History

Version	Reviewed by	Changes made
1.0	QAS Chief Medical Officer - Dr Sharon Stay QAS Head of Health – Kate Waston <u>Original Acknowledgement</u> Dr David Hughes Chief Medical Officer Australian Institute of Sport (2018)	
1.1	QAS Chief Medical Officer - Dr Neil Stevenson QAS Head of Health – Kate Waston	Reviewed by QAS Chief Medical Officer - Dr Neil Stevenson QAS Head of Health - Kate Watson No amendments made

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Executive Summary

In the first instance all athletes and health professionals must refer to their National Sporting Organisation (NSO) for any sport specific policy on self-injection. In the absence of a policy, the Queensland Academy of Sport (QAS) has prepared the following guidelines.

Guideline

A QAS athlete is only permitted to self-inject when a medical need has been established by a recognised QAS Medical provider and the processes of both World Anti-Doping Agency (WADA) and QAS have been followed. A written document must be provided by the medical provider to confirm the medical need, listing the relevant information below and uploaded into Athlete Management System (AMS) as part of a medical consultation with the athlete.

In the event the medical provider is outside of the immediate QAS network, it is the responsibility of the athlete to inform any medical provider that they are a competing athlete who must abide by the WADA code. The athlete should provide details of their QAS Medical provider (or QAS Performance Health Coordinator) to any external medical provider to assist with this process. The athlete is also responsible for contacting their designated QAS Medical provider or the QAS Performance Health Coordinator following a specialist consult, to enable a record and details of such a consult to be reflected in AMS.

QAS Medical providers must operate within WADA guidelines at all times and follow QAS process. There is no role for the injection of substances as a routine part of any supplement program.

- QAS prohibit individuals other than registered medical practitioners from administering injections to an athlete, with such injections only permitted in the treatment of a documented medical condition, or
- For vaccination purposes, or
- For research purposes with the prior approval of a Human Research Ethics Committee registered with the National Health and Medical Research Council.
- QAS prohibit athletes from self-injecting, unless authorised in writing to do so by a registered QAS approved medical practitioner for the treatment of a documented medical condition (for example, diabetes, anaphylaxis-risk). This should be recorded in AMS by the QAS medical practitioner following consultation with the athlete, and permitted only once WADA process has been followed.
- Medical consultations will be recorded within AMS by the QAS approved Dr in consultation with the athlete, and the injectable substance recorded under the medication register. A record of the following must be made:
 - o Product Name
 - o Dose
 - o Quantity
 - o Dosing instructions
 - o Dispense status
 - o Date dispensed
 - o Prescriber
 - o Note if it is regular medication
 - o Who it was dispensed by
 - o Any comments – including the purpose, associated communications and TUE approvals (if required) should be attached in AMS within medical attachments.

QAS prohibit individuals from possessing any hypodermic needles, except registered medical practitioners or individuals authorised by a registered medical practitioner for the treatment of a documented medical condition. A record of such authorisation must be made within AMS by the medical provider following consultation with the athlete. The athlete should also take a copy of authorisation for their own records.

When required, a QAS Dr will assist the athlete in applying for a therapeutic exemption (TUE), prior to any self-injecting. The exception is in an emergency which allows for immediate use (within WADA guidelines) and for which a retro-active TUE can be applied for.

The need for ongoing self-injection is to be reviewed yearly or as per WADA TUE requirements.

The Injection Policy does not apply or prohibit dry needling or acupuncture needles. Dry needles and acupuncture needles are solid needles used for treatment of soft tissue injuries and are not used for injection of substances.