I. INTRODUCTION

The Department of Athletics at The Ohio State University (“OSU”) advocates the development of healthy and responsible lifestyles for student-athletes during their years of eligibility as a long term enrichment and enhancement of their lives. In addition, this policy underscores the importance of the role our student-athletes serve as University representatives and role models to the many youth who admire them.

Substance abuse and dependence, and crimes and other situations which occur while under the influence of mood-altering substances are a major health and safety hazard in our society. The use of illegal substances and drugs is a crime and will not be condoned. The use of performance enhancing drugs is detrimental to student health and as a form of cheating, constitutes unacceptable behavior. Alcohol use by student-athletes who are under the legal drinking age in Ohio is against the law; for those student-athletes who are of legal drinking age in Ohio, excessive alcohol use is ill-advised and is strongly discouraged.

The OSU Department of Athletics Drug and Alcohol Program (“DA program”) includes:

- education of student-athletes and staff about mood and body altering substances and the DA program
- drug testing
- evaluation / assessment
- treatment / counseling
- discipline / consequences
- monitoring of the student-athletes in the DA program by the management team, consisting of the medical review officer, drug testing coordinator, coaching staff representative, team sport administrator, and intervention coordinator

A. Mood-Altering Substances

1. Alcohol

Alcohol is a drug that presents a unique situation since its use is legal in Ohio for those twenty-one years of age and older. Alcohol is a part of our culture and is present at many social functions throughout society; however, it is a mood-altering substance and constitutes the greatest drug problem in society and among college students. Therefore, the DA program related to alcohol is:

a. Alcohol consumption is illegal and unacceptable for student-athletes under the age of twenty-one.

b. High risk alcohol consumption is not recommended and ill-advised for any student athlete regardless of age. High-risk alcohol use is defined as four or more drinks in one sitting for women and five or more drinks in one sitting for men.

c. Alcohol-related offenses (e.g., DUI, public intoxication, assaults while under the influence of alcohol, underage possession of alcohol) constitute a first offense of this policy.

2. Illicit Substances

Student-athletes are under an increased amount of pressure compared to the general student body. These pressures can result in stress and anxiety which can predispose the student-athlete to the use of mood-altering substances. The DA program will:
a. Educate student-athletes about mood-altering substances and the dangers associated with their use, as well as the negative effects on athletic performance.

b. Deter the use of these substances through a comprehensive drug testing program.

c. Identify student-athletes with substance abuse/dependence and other problems for which substance use may be an indicator early in the course of the disease or problem, so treatment can be instituted in a timely manner.

B. Performance Enhancing Drugs

Student-athletes perform in a highly competitive environment, one which sometimes favors a "win at all costs" philosophy. The student-athletes’ desire to be successful can lead to the use of performance enhancing drugs to attain their goals. Such drugs give a student-athlete an unfair advantage and their use constitutes cheating. Additionally, these drugs have adverse side effects which could be harmful to the health of student-athletes, particularly in the long term. The DA program will:

1. Educate student-athletes about drugs that are purported to be performance enhancing, their effects and dangers and safer alternatives for improving sport performance.
2. Deter the use of these substances through a comprehensive drug testing program.
3. Identify student-athletes who use these substances and address issues and problems surrounding their use.

C. Program Evaluation

The DA program will be annually reviewed by an oversight committee composed of the testing and intervention coordinators, medical review officer, head team physician, assistant athletic director for sports performance and associate athletic directors in sports administration.

II. DRUG AND ALCOHOL EDUCATION PROGRAM

A. Rationale

The NCAA Life Skills Program promotes value development, moral reasoning and ethical conduct in intercollegiate athletes. The focus of the program is on the individual as a "whole person" and addresses the changing needs and skills necessary to meet the demands facing today’s student-athletes. The DA program addresses these special considerations of the individual student-athlete. All students with an official association are strongly encouraged and welcomed to participate in the educational component of the DA program. The educational component of the DA program centers on the health and physical development portion of the Life Skills Program recommended by the NCAA. Special attention will be given to personal health, leadership skills, alcohol/drug education and community involvement. The Department of Athletics is responsible for initiating and maintaining substance abuse education programs, including the administration, education and monitoring of medical staff and Life Skills / SASSO staff.

B. Goals

To provide each student-athlete with an opportunity to:

1. Gain knowledge and a foundation about alcohol and other drug use and related issues through the use of empirically validated educational approaches
2. Teach and encourage responsible behavior.
3. Network with those who have personally and successfully addressed substance abuse problems.

C. Oversight and Evaluation

The educational component to the DA program will be annually approved by the administration and the Student-Athlete Advisory Board.
III. DRUG AND ALCOHOL TESTING

Tests will be conducted for mood-altering and performance enhancing substances. Drug testing is mandatory for all student-athletes and may include cheerleaders. As a condition for any student to be a member of a varsity intercollegiate athletic team, the student-athlete must annually agree to participate in the Department of Athletics’ Drug Testing Program. Such monitoring is considered an extension of the ongoing physical examination of the student-athlete and is in the best interests of the student-athlete and OSU. In addition to OSU’s drug testing program, student-athletes are also subject to drug testing by the Big Ten Conference and NCAA. All positive test results are cumulative for the duration of the student-athlete’s career at OSU.

The Department of Athletics will make every effort to keep test results confidential except as provided to the management team and oppose disclosure to any other persons within or outside the University. If confidential information concerning a positive test is communicated to any one outside of the management team, then the responsible party will be excluded from future steps in alcohol and drug-related occurrences.

Any student-athlete found guilty of selling or providing an illegal drug or illegally providing alcohol or other drugs to another person is subject to termination from the team and cancellation of athletic aid.

A. Types of Drug Testing

1. OSU Testing – In all types of testing conducted by OSU, no advance notice of testing will be given.

   a. Random Testing
      Periodic testing of a portion of the total student-athlete population will occur at regular intervals. This list will be randomly generated by computer by the testing laboratory from the team’s roster.. All student-athletes are eligible for every test.

   b. Total Team Testing
      Total teams may be tested at any time or at the request of any appropriate individual.

   c. Just Cause Testing
      Student-athletes may be tested individually or as a part of a regularly scheduled test. This test will be used for student-athletes who demonstrate symptoms or behaviors which are indicative of substance abuse.

   d. Reasonable Cause Testing
      Student-athletes who have previous violations of the DA program will be tested individually or as part of a regularly scheduled test.

2. NCAA Testing

   Student-athletes may be tested while participating in a championship event, a post season football game or during a regularly scheduled on-site NCAA test. Student-athletes who will be tested will be selected from NCAA squad lists.

3. Big Ten Testing

   The Big Ten conference has a conference wide performance enhancement drug testing program including year round on campus, summer testing (both on and off campus), and at selected Big Ten championships and tournaments. Student athletes from all varsity intercollegiate sports may be subject to testing.
IMPORTANT NOTE: Failure to appear for a scheduled drug test or refusing to give a specimen will be cause for immediate suspension of the student-athlete from competition and/or practice and provides a basis for reasonable cause testing. This suspension will be in effect until reinstated by the Management Team.

B. OSU Drug Testing Guidelines

These are the guidelines for all testing.

1. Upon the direction of the Director of Athletics or his/her designee and the testing coordinator, a testing date, site and time will be determined.

2. A list of student-athletes to be tested will be generated from the SAMS drug testing database with random selection occurring by computer generation of identification numbers. This list may include 5th year students with no remaining eligibility and medical non-counters.

3. The names of student-athletes not reporting to the scheduled test will be reported to the Director of Athletics or his/her designee.

C. OSU Drug Testing Procedures

These are the procedures for all testing.

1. Zero notification is the norm for the majority of drug tests that are performed for individual teams. Most drug tests are scheduled to occur either pre or post practice for the scheduled date. If the student-athlete is not at practice or is out of town, during the scheduled test, the student-athlete will report to location for collection on the date determined by drug testing coordinator. Also, total team testing may be performed with the student-athletes being informed of drug test during the team practice session with the testing to follow practice.

2. The student-athletes must report to the designated testing site at the requested time. Typically, two hours will be allocated for collection, and the student athlete is required to produce a usable specimen within that period of time. If the athlete is unable to produce a specimen in this time frame, this may be viewed as a refusal to test which constitutes a positive test.

3. The student athlete will be identified by an athletic department designee.

4. The student athlete may receive an ID band with name and identification number printed on the band to assist both the collectors and athletic department personnel during the collection process. Once the athlete has produced a usable specimen, the ID band will be removed. The student athlete will receive a chain of custody form with his/her assigned donor ID number included. The student athlete will select a specimen container.

5. The student athlete will have to remain in visual contact with the collector and/or athletic department designee once he/she has checked in. The student athlete may not leave the testing area until a specimen is produced.

6. The collector will visually observe while the student-athlete provides the sample. Visual observation for male student athletes requires their shirt to be off before entering the restroom with shorts to the knees while producing specimen. Female student athletes will be asked to have jog bra and shorts with shorts to knees while producing specimen. Pre-determined volumes and temperature guidelines for sample acceptance will be followed.
7. If the student athlete is unable to produce sufficient amount, the first specimen will be discarded. He/she will be asked to remain in visual contact of testing personnel within the testing area until he/she is able to produce additional specimen of usable volume.

8. Post-collection, the general accepted chain of custody standards will be followed.

9. Every attempt will be made to keep the collection area limited to only those who are scheduled to participate in the drug testing collection to assist the collectors in controlling the testing area.

10. The student-athlete may leave when they have produced a usable specimen and the ID band is removed.

D. OSU Drug Testing Post Collection Procedures

1. Testing personnel will check the roster of scheduled student-athletes and submit the names of student-athletes who did not report to the Director of Athletics or his/her designee and the head coach of the team.

2. Samples are sent via overnight express to the clinical laboratory for analysis.

3. The samples are analyzed by the certified laboratory with the Medical Review Officer (MRO) and/or drug testing coordinator being notified of all results.

4. Medical Review Process
   a. The MRO will provide administrative review of all documents.
   b. When a confirmed positive, adulterated substituted or invalid test is received from the laboratory. The MRO must contact the athlete directly through face to face contact or by phone to conduct a medical review.
   c. MRO must determine whether there is a legitimate alternative medical explanation for a confirmed positive, adulterated, substituted, or invalid test result.
   d. MRO may direct the split specimen (B bottle) be sent to a separate certified laboratory at the request of the donor. Split specimens are tested using only the confirmatory test(s) needed to reconfirm the primary specimen result(s).
   e. MRO may consult with the certifying scientist when assistance is needed on problem test results.
   f. MRO will review and interpret confirmed positive drug test results.
   g. The MRO will document on the Chain of Custody form, verified results of the drug test(s).
   h. MRO will report all verified results to the Drug Testing Coordinator.

E. Medical Exceptions

The Department of Athletics recognizes that some banned drugs as well as some drugs tested in our drugs of abuse panel are used for legitimate medical purposes. Accordingly, OSU does allow for exception if there is a documented medical history demonstrating need for regular use of the drug as well as documentation of the prescription information. Medical exceptions will be reviewed on an individual basis but will not be granted unless previously mentioned supporting documentation is received by the medical review officer. [Once a student-athlete tests positive for a drug on the drugs of abuse panel, strict guidelines may be implemented regarding future use of drug requiring advance notification and supporting contemporaneous documentation to the drug testing coordinator. If a student-athlete has subsequent positive test for drug and advance notification has not been received, this would constitute a positive test.]
IV. PROCEDURES FOLLOWING A POSITIVE DRUG TEST FOR DRUGS OF ABUSE AND/OR SUBSTANCE ABUSE OCCURRENCE

A. First Positive

1. The management team consists of the Associate Athletic Director for the assigned sport, medical review officer, drug testing coordinator, intervention coordinator and head coach or his/her designee. The management team will be informed of a positive drug positive test and/or alcohol/substance abuse related offense (e.g., DUI, alcohol related assault, underage possession of alcohol).

2. The student-athlete will be evaluated by the intervention coordinator and a substance abuse counselor approved by the Department of Athletics.

3. The management team will determine a management plan for the student-athlete and will meet with the student-athlete in the program at least once a year to oversee their compliance and monitor their progress.

4. The intervention coordinator will send a quarterly update to the management team about the status of the student-athlete.

5. The student-athlete will be subject to reasonable cause testing as determined by the management team's recommendation.

6. The student athlete who has an alcohol/substance abuse occurrence (DUI, underage possession, etc.) will be subject to more stringent alcohol testing as part of their management plan. Any positive test for alcohol in these student athletes who are under 21 will be deemed a second positive in the program.

B. Second Positive

1. The management team will be informed of the second positive drug test and/or substance abuse occurrence.

2. The student-athlete will be re-evaluated by the intervention coordinator and a substance abuse counselor approved by the Department of Athletics to determine subsequent treatment options.

3. The student-athlete will meet with the management team to discuss any recommended changes to the previous plan that was in place.

4. The student-athlete will be subject to a two-week suspension from all competition at the earliest available time. If the student athlete competes in multiple sports, the suspension will be served in the sport that the positive tests occurred. If the positive tests occurred in more than one sport, the suspension will be served at the earliest available time.

5. Re-instatement to the team will be considered by the Athletic Director or his/her designee in consultation with the management team.

6. The student-athlete will be subject to reasonable cause testing.

C. Third Positive

1. The management team will be informed of the third positive drug test and/or substance abuse occurrence.
2. The student-athlete will be re-evaluated by the intervention coordinator and a substance abuse counselor approved by the Department of Athletics.

3. The student-athlete will meet with the management team for further modification of the management plan.

4. The student athlete who has a 3rd positive test for alcohol will be subject to a 2 week competitive season suspension as well as mandatory enrollment in an alcohol education treatment program as determined by the intervention coordinator in Athletics and the substance abuse counselor approved by the Department of Athletics. Any additional positive tests after this point will result in the same sanction as illicit drugs- one calendar year suspension.

5. The student-athlete who has a 3rd positive test from illicit drugs or an additional substance abuse occurrence will be suspended from all Department of Athletics functions for a minimum of one calendar year. Athletic aid may be cancelled. Re-instatement to the team will be considered by the Athletic Director or his/her designee in consultation with the management team.

6. The student-athlete will be subject to reasonable cause testing.

IMPORTANT NOTE: Failure to comply with the recommendations of the assessment and/or management plan will result in immediate suspension from all team activities and functions and will require meeting with management team to discuss future options. Please note that individual teams may have stricter penalties than OSUDA policy. Each student athlete will be informed of the penalties and sign a form that they understand the penalties associated for positives with their specific team if different than OSUDA policy.

V. PENALTIES FOR A POSITIVE DRUG TEST FOR PERFORMANCE ENHANCING DRUGS OR ANABOLIC STEROIDS

A. First Positive
   1. The management team as listed above will be notified of a positive drug test for performance enhancing drugs or anabolic steroids.
   2. The student athlete will be suspended for the next 25% of competitive season play.
   3. The student athlete will be evaluated by the intervention coordinator and drug and substance abuse counselor identified by the Department of Athletics as needed.
   4. The management team will determine a management plan for the student athlete and will meet with the student athlete in the program at least once a year to monitor their progress.
   5. The student athlete will be subject to reasonable cause testing as determined by the management team’s recommendations.

B. Second Positive
   1. The management team as listed above will be notified of a positive drug test for performance enhancing drugs or anabolic steroids.
   2. The student athlete will lose all remaining eligibility and loss of athletic grant-in-aid.

V. DRUG TESTING APPEAL PROCESS

A. A student-athlete may appeal either the finding of the presence of a prohibited substance or the sanction imposed as a result of a positive finding.
B. The appeal of the positive test results must be based upon one of the following:

1. Evidence of procedural error.
2. Evidence which refutes the positive finding or a medical exemption per NCAA guidelines.

C. The appeal of the sanction imposed as a result of a positive finding must be based on one of the following:

1. Evidence of procedural error.
2. Evidence which refutes the positive finding.
3. Evidence that the sanction imposed is unreasonable, harsh or inappropriate.

D. To appeal either a positive finding or the sanction imposed, the student-athlete must file a written appeal accompanied by all supporting evidence. The appeal must be filed within seven days of notification.

A student-athlete's appeal will be reviewed by an appeal panel. The current panel consists of: John Bruno, Faculty Athletic Representative; Dennis Ehrie, Administrative Director OSU East, Associate Legal Counsel OSU East, and past Administrator for Addiction Medicine at OSU East; and Dennis Alexander PhD, Psychologist, Campus Counseling and Consultation Services. The composition of the panel will be reviewed on a yearly basis. At the appeal, the student-athlete has the right to present their case and present witnesses on their behalf.

The appeal hearing will be conducted within seven working days of receipt of the appeal. The appeal hearing will consist of a review of all available evidence related to the initial finding as well as new evidence or documentation provided by the student-athlete.

The Appeal Panel may:
1. Affirm the initial finding or sanction;
2. Reverse the initial finding or sanction;
3. Recommend retesting or recommend an alternative sanction. The alternative sanction recommended by the Appeals Panel may not be harsher than the initial sanction.

A written copy of the appeal decision will be provided to the student-athlete and the Athletic Director or his/her designee within five working days following the hearing.

VI. ASSESSMENT AND TREATMENT

A. Philosophy

The referral or self-referral of a student-athlete for assessment and/or treatment relating to substance abuse/dependence and related issues stems from an intense concern for the overall health, welfare and development of our student-athletes. Assessment and treatment relating to possible substance abuse/dependence is not intended, and should not be construed as a punitive action. Assessment and treatment of our student-athletes is provided by duly licensed and credentialed health-care professionals, and is regarded as STRICTLY CONFIDENTIAL. Our physicians and other health care consultants work cooperatively in the areas of assessment, treatment, referral and aftercare.

B. Assessment

Assessment of the student-athlete who presents with an alcohol and/or drug abuse/dependence issues will be coordinated by the intervention coordinator. A behavioral plan, which includes expected behaviors, treatment goals and potential consequences, will be developed for each student-athlete. An additional assessment may be completed by a recognized substance abuse treatment facility with results
There are three circumstances by which a student-athlete will be seen by physicians and other health care consultants for assessment of possible substance dependence (or related concerns). These are:

a. Referral by the medical review officer or the Director of Athletics or his/her designee following a positive drug test or other documented substance abuse related occurrences; (see section IV - Procedures Following a Positive Drug Test).

b. Self-referral: Any student-athlete may refer him/herself for evaluation or counseling by contacting a coach, athletic trainer, team physician, or intervention coordinator. This arrangement is strictly confidential and no team or administrative sanctions are imposed upon the student-athlete who has made a personal decision to seek professional assistance.

A treatment plan will be put into place and the student-athlete will not be sanctioned for self-referral, but a student-athlete testing positive after self-referral will be subject to the sanctions outlined in the DA program.

c. The team physician, coaching staff, athletic training staff or other staff may refer student-athletes for assessment and counseling as a result of observing specific behaviors or becoming aware of information suggesting the student-athlete may be experiencing difficulty or be at risk for developing an alcohol or substance abuse problem.

2. Student-athletes are referred to the intervention coordinator for case management relating to alcohol and/or drug abuse/dependency issues. Based upon results of the initial assessment, the intervention coordinator working in consultation with the team physician will then make appropriate recommendations with regard to the need for further evaluation, counseling and/or treatment. The student-athlete (and as appropriate, his or her parents or guardians) will be included in each phase of the assessment process.

C. Treatment
The management plan is based upon the assessed needs of the student-athlete. The plan will take into account the circumstances surrounding the referral, severity and duration of the presenting and accompanying problem(s), as well as overall (i.e., personal, social, academic, and athletic) functioning. The assessment may be completed by a recognized substance abuse treatment facility. Taking into account these factors, treatment recommendations may involve, but are not limited to, one or more of the following:

1. PERSONAL COUNSELING (including elements of alcohol/drug education) provided through the intervention coordinator, and/or referral to other resource(s) when appropriate. The student-athlete’s parents or guardians MAY be included in each phase of the evaluation process.

2. PERSONAL COUNSELING with a mental health professional at a community treatment facility.

2. Referral for treatment/counseling and after care planning to a community based INTENSIVE OUT-PATIENT program. Typically, these programs involve both individual and group counseling, and may include a component of family counseling. Aftercare, an essential component of this treatment program, is coordinated by the intervention coordinator in cooperation with the medical officer and drug testing coordinator.

3. Referral for treatment and aftercare planning to a community based IN-PATIENT
TREATMENT facility. Typically, these programs involve intensive individual and group counseling in a residential setting. Additionally, every effort is made to include a component of family counseling in the overall treatment program. While the Department of Athletics has identified several excellent residential treatment programs in the Columbus area, we will work cooperatively with the student-athlete and his/her family in locating and making a referral to a treatment facility closer to the student-athlete's hometown if desired. Aftercare, an essential component of this treatment program, is coordinated through the intervention coordinator in cooperation with the medical officer and drug testing coordinator.

NOTE: If a student-athlete is referred to an IN-PATIENT treatment setting while he/she is enrolled and attending classes, a medical withdrawal can be facilitated on behalf of the student-athlete.
Drugs which are banned by the OSU DA Policy include the drugs listed below and the drugs listed on the previous pages banned by the NCAA.

Mood-Altering Substances

1) Depressants
   - marijuana
   - synthetic cannabinoids
   - alcohol (as written in policy)
   - barbiturates (unless physician prescribed)
   - tranquilizers (unless physician prescribed)
2) Stimulants
   - amphetamines
   - cocaine
3) Opiates
   - heroin
   - morphine (unless physician prescribed)
4) Hallucinogens
   - LSD
   - psilocybin
   - mescaline

Performance Enhancers

1) Anabolic Agents
   - testosterone
   - synthetic anabolic steroids
   - growth hormone
   - clenbuterol
   - human chorionic gonadotropin
   - insulin growth factor - 1
2) Stimulants
   - amphetamines
   - alpha sympathominmectics (unless physician prescribed)
      - ephedrine, pseudephedrine, phenylpropanalamine
3) Enhancers of Oxygenation
   - erythropoieten
4) Masking Agents
   - diuretics/water pills (unless physician prescribed)
   - probenecid (unless physician prescribed)