

**NCAA Medical Exception Documentation Reporting Form**  
**Pre-approval for Treatment with Anabolic Agents, Anti-estrogens, or Peptide Hormones**

NCAA Medical Exception Procedures require that the use of an **\*anabolic agent, anti-estrogen, or peptide hormone must be approved by the NCAA before the student-athlete is allowed to participate in competition while taking these medications.** To submit for a medical exception for these substances:

- Complete this form;
- Attached medical documentation supporting the diagnosis and treatment (see Medical Exceptions Procedures at [www.ncaa.org/drugtesting](http://www.ncaa.org/drugtesting)).
- Fax the form and medical documentation to 317-917-6989, prior to student-athlete competing while using these banned drugs.

**To be completed by the Institution:**

Institution Name: \_\_\_\_\_

Institutional Representative Submitting Form:

Name \_\_\_\_\_

Title \_\_\_\_\_

Email \_\_\_\_\_

Phone \_\_\_\_\_

Student-Athlete Name \_\_\_\_\_

Student-Athlete Date of Birth \_\_\_\_\_

Medication for which the approval is requested \_\_\_\_\_

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**To be completed by the Student-Athlete's Physician:**

Current Treating Physician (print name): \_\_\_\_\_

Specialty: \_\_\_\_\_

Office address \_\_\_\_\_

Physician signature: \_\_\_\_\_ Date \_\_\_\_\_

Check off that documentation representing each of the items below is attached to this report

- Diagnostic evaluation, include any laboratory work supporting the diagnosis.
- Treatment history.
- Medication(s) and dosage.
- Follow-up orders.

**DISCLAIMER:** The National Collegiate Athletic Association shall not be liable or responsible, in any way, for any diagnosis or other evaluation made, or exam performed, in connection herewith, or for any subsequent action taken, in whole or in part, in reliance upon the accuracy or veracity of the information provided hereunder.