

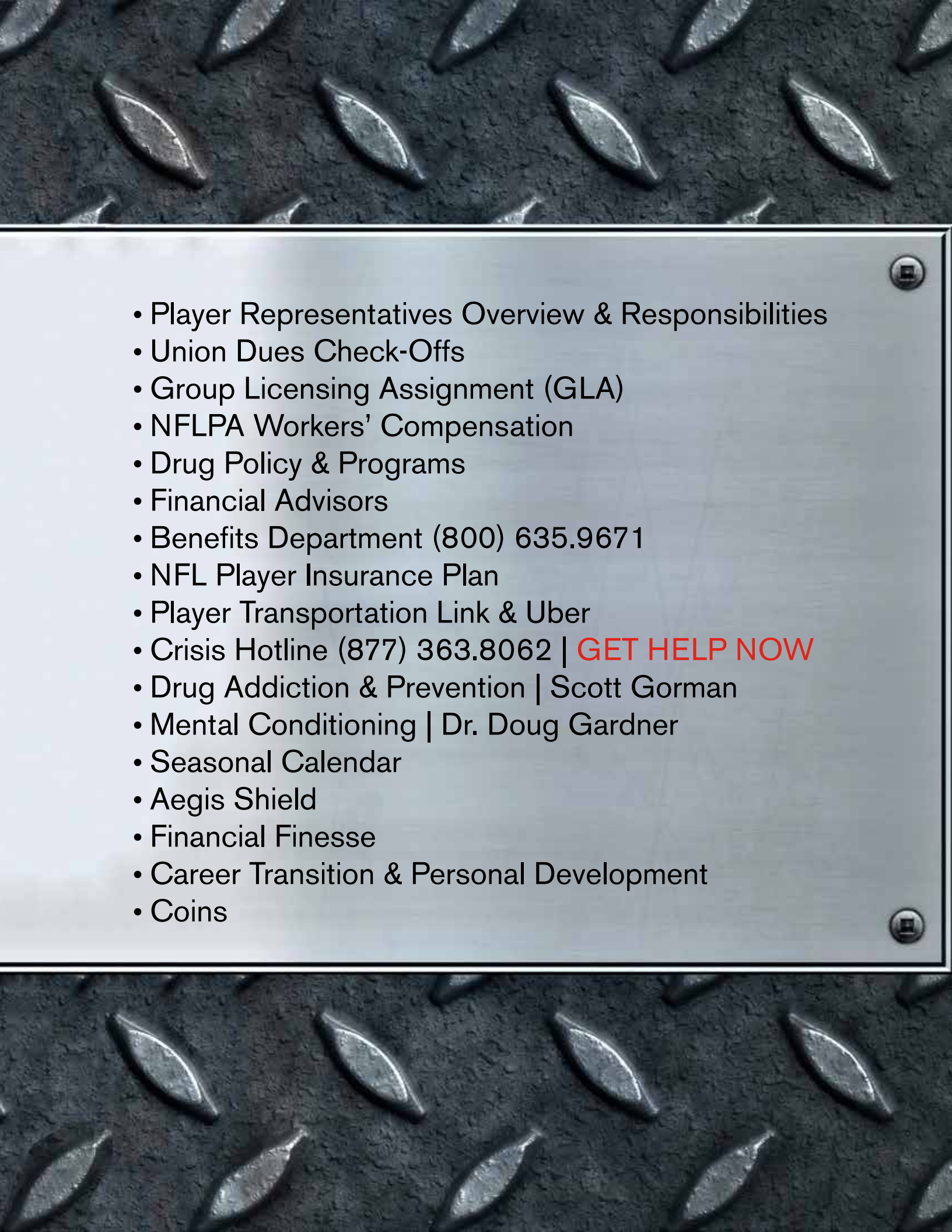


# **NFLPA** **PLAYERS** **TOOLKIT**



# TOOLKIT



- 
- Player Representatives Overview & Responsibilities
  - Union Dues Check-Offs
  - Group Licensing Assignment (GLA)
  - NFLPA Workers' Compensation
  - Drug Policy & Programs
  - Financial Advisors
  - Benefits Department (800) 635.9671
  - NFL Player Insurance Plan
  - Player Transportation Link & Uber
  - Crisis Hotline (877) 363.8062 | **GET HELP NOW**
  - Drug Addiction & Prevention | Scott Gorman
  - Mental Conditioning | Dr. Doug Gardner
  - Seasonal Calendar
  - Aegis Shield
  - Financial Finesse
  - Career Transition & Personal Development
  - Coins

# PLAYER REPS' RESPONSIBILITIES

Player Representatives are elected by their teammates and assume the important responsibility of connecting the player membership to union resources, services and staff. Player Reps' primary responsibilities include assisting in collective bargaining, dues check-offs as well as informing players of grievance and workers' compensation procedures.

Player Advocates are the primary point of union contact for Player Reps. Advocates assist Reps in the promotion and operation of NFLPA programs. Since all Player Advocates were previous Player Reps, they have already been an integral part of the advancement of various policies and interests of the NFLPA. This experience equips them to be outstanding resources for Player Reps. Communication between the Reps and the Advocates is required and should be frequent. It's imperative that Player Reps participate in meetings and conference calls. It is equally imperative that they honor their vow to keep NFLPA matters confidential.





# DUES CHECK-OFFS

A player's dues for the 2013 season is \$10,000, which is non-refundable. Players on the 53 man roster and reserve/injured list pay weekly dues in the amount of \$587.13. A practice squad player's dues is \$1,000, prorated weekly, and refunded in the offseason.

Rookies should sign a dues check-off before the start of the season. This guarantees that dues will be deducted evenly over the 17 weeks, without a large lump sum payment at the end of the season.

The number of dues paying members on a team becomes important in the Union voting process. In a tie or close votes, a team's vote is weighted by the number of dues paying members on that team.



## *1. What do I get for paying dues?*

A strong union! Player dues provide union security and help to advance the wages, hours and working conditions for players. Union dues protect our ability to collectively bargain with NFL owners. Players also get representation in disciplinary appeals for fines and suspensions. They also get representation in injury and non-injury grievances. NFLPA player programs are predicated on union security.

## *2. Who determines the dues amount?*

The Board of Player Reps at the annual Board of Player Representatives meeting sets the annual dues and approves the NFLPA budget.

## *3. Are player dues refundable?*

Active player dues are non-refundable which is determined by the Board of Player Representatives. Player dues have not been refunded since 2005.

# GROUP LICENSING ASSIGNMENT

NFL Players Inc. is the NFLPA's for-profit licensing subsidiary. The Group Licensing Assignment ("GLA"), authorizes NFL Players Inc. to license and market the use of six or more players' images and likenesses for commercial uses, including on Nike jerseys, EA's Madden game, and football trading cards. The six-player trigger number can be reached by using players simultaneously or individually. NFL Players Inc. revenue covers the operating costs for both the union and NFL Players Inc., as well as provides payments to players. NFL Players Inc. profits are split as follows: 40% go to the union, 37% to the players in the form of an equal share royalty, and 23% to NFL Players Inc.

## FAQS

### *1. Why do I sign a GLA?*

A GLA allows players to support each other and their union. Doing so also helps players control and authenticate their images and likenesses in the commercial realm. Every NFL contract, for administrative convenience and benefit of players and NFL Players Inc., also includes the GLA protection in Paragraph 4(b).

### *2. Does a GLA prevent me from doing individual marketing deals?*

Not at all. Players remain free to pursue individual marketing, commercials, car deals etc. NFL Players Inc. also helps facilitate individual marketing deals.

### *3. How much are equal share royalty checks?*

Royalty checks usually are in the range of between \$8,500 and \$10,000 per year. Each season's revenue and the number of qualifying active players are used to determine the amount of the equal share royalty checks. These checks are distributed in the fall.

### *4. Do rookies get a royalty check?*

Rookies do not get an equal share royalty check in their rookie season, since they were not a part of the previous season's group licensing program. Rookies are paid the following year, should they qualify for the equal share payment.

### *5. How much does NFL Players Inc make a year?*

The NFL Sponsorship Agreement pays NFL Players Inc an average of \$50 million dollars a year during the duration of the CBA. There are other licensing agreements that provide ancillary income, but the overwhelmingly majority of revenue comes from the NFL Sponsorship Agreement.

To: Paul  
All the Best to you and  
/ only family





# WORKERS' COMPENSATION BENEFITS

Workers' Compensation benefits may provide players with disability and medical benefits. Disability benefits compensate players for a work injury with money for time out of work and/or money for the injury suffered. Medical benefits cover medical expenses for injuries sustained at work. Workers' Compensation claims must be filed within specific time periods called Statutes of Limitations (SOL). The SOL's are different in each state. Therefore, it is imperative that injured players contact the Workers' Compensation Panel Attorney for their team.

Ned Ehrlich, NFLPA Associate General Counsel, oversees the NFLPA's Panel of Workers' Compensation Attorneys. Ned, along with your Player Advocate, can assist players in connecting with the correct panel member.

## FAQS

*1. Should I wait to file workers' comp until after I retire?*

No. It is recommended that players contact the Workers' Compensation Panel Attorney after a serious injury and after each season in which they are injured. The attorney will discuss each individual player's options.

*2. What should I know about workers' compensation to protect my benefits?*

Recognize that workers' compensation equals valuable medical benefits and money for a work injury. Recognize that Statutes of Limitations are unbeatable; if they expire a player will not have access to workers' compensation benefits.

# NFLPA WORKERS' COMPENSATION PANEL ATTORNEYS

STATE	CONTACTS	PHONE	EMAIL
AZ: Arizona	J. Wayne Turley	480-246-6505	wayneturley@gmail.com
	Walt Ulman, Esq.	602-230-2144	waltulman@eburlaw.com
CA: SF/Oakland	Michael Gerson, Esq.	510-835-8870	mgerson@boxerlaw.com
CA: SD/Oakland	Modesto "Doc" Diaz, Esq.	714-835-1404	mdiaz@ldglaw.com
	Chris Ginocchio, Esq.	714-835-1404	cginocchio@ldglaw.com
	George Hill, Esq.	714-835-1404	georgehilllaw@sbcglobal.net
	Jordan M. Cohen, Esq.	510-343-6273	jcohen@thecohenlawfirm.net
CO: Denver	Douglas M. Dumler, Esq.	970-482-0808	dmd@csdlawoffice.com
	Michael H. Kaplan, Esq.	303-780-7329	michael@kaplanmorrell.com
FL: Miami/Tampa	Richard A. Sicking, Esq.	305-446-3700	sickingpa@aol.com
FL: Miami/ Jacksonville	Richard L. Wagenheim, Esq.	954-564-4800	richw@sportsinjurylaw.com
	Barbara B. Wagner, Esq.	954-564-4800	barbw@sportsinjurylaw.com
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IL: Chicago	Richard Gordon, Esq.	312-727-0403	rrg@grmlawfirm.com
	Ken Wolfe, Esq.	312-727-0403	ken@wolfelawpc.com
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LA: New Orleans	Frank A. Bruno, Esq.	504-523-3593	frank@fabruno.com
MD: Baltimore/ Washington	Gerald Herz, Esq.	301-220-0050	gherz@chassenboscolo.com
	Benjamin Boscolo, Esq.	301-220-0050	bboscolo@chassenboscolo.com
	Barry Chasen, Esq.	301-220-0050	bchasen@chassenboscolo.com
MA: New England	Gerard B. Carney, Esq.	617-426-9797	gcarney@carnlaw.com
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	Walter J. Korzeniowski, Esq.	508-238-6200	walter@walterklaw.com
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	Tom Wynn, Esq.	508-823-4567	twynn@wynnandwynn.com
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MN: Minnesota	Randal W. LeNeave, Esq.	612-339-4511	rleneave@hlklaw.com

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NJ: Giants	Andrew Topazio, Esq.	908-994-0161	mtlaw@verizon.net
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	Glenn A. Farrell, Esq.	973-731-3400	glennfarrell@smfglaw.com
NJ: Jets	Eric I. Fogelgaren, Esq.	212-962-1200	fofoberg@aol.com
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	Jonathan Forman, Esq.	212-962-1200	fofoberg@aol.com
NY: Buffalo	Robert Villarini, Esq.	716-648-0510	bert@villariniandhenry.com
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	Gina Cammarano, Esq.	919-833-1283	gec@jernlaw.com
	James Lore, Esq.	919-469-9103	lorej@mindspring.com
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	Ron Bella, Esq.	513-842-9029	rtb@oal-law.com
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VA: Washington	Gerald Herz, Esq.	301-220-0050	gherz@chassenboscolo.com
	Benjamin Boscolo, Esq.	301-220-0050	bboscolo@chassenboscolo.com
	Barry Chasen, Esq.	301-220-0050	bchasen@chassenboscolo.com
WA: Seattle	William D. Hochberg, Esq.	425-744-1220	bill@hochberglaw.net
WI: Green Bay	John Earl Drana, Esq.	414-347-9292	john@dranagroup.com





# NFLPA BENEFITS DEPARTMENT

The NFLPA Benefits Department can assist players with general benefits questions and health insurance questions, too. Players can contact the NFLPA Benefits Department by calling the NFLPA main office line (800) 372.2000. Player Benefits assistance is also available by contacting the NFL Benefit Plan Office at (800) 638.3186. In an effort to make accessing and understanding benefits easier, [www.mygoalline.com](http://www.mygoalline.com) was established. Every player should site this site. Mygoalline.com houses all of a player's benefit information as well as useful forms, helpful links and FAQs. First time users will need to verify their identity and set up their personal password. If a player needs help setting up his mygoalline.com account, call the NFLPA Benefits Department at (800) 327.2000.

## FAMILY HEALTH INSURANCE

The Player Insurance Plan (PIP) provides robust health, medical and dental coverage for players and their dependents. Players have multiple ways to access the plan information through [www.myCigna.com](http://www.myCigna.com) or by calling (800) 635.9671. The NFLPA Benefits Department will assist players with PIP questions. Adora Williams, Senior Manager of Benefits, can answer Player Representatives questions and present information to players and wives at meetings upon request. To contact Adora, call the NFLPA main line (800) 372.2000.

Each year the NFL & NFLPA provide players with a detailed information booklet on the NFL Player Insurance Plan. Player Representatives should keep the booklet in their locker for convenience to answer teammates' questions.



## NFL PLAYER INSURANCE PLAN HIGHLIGHTS

- Five (5) years health care coverage for vested players after retirement
- Healthy Babies Program
- Cigna 24-hour nurse line
- Enhanced Counseling Benefit
- Healthy Rewards
- Option to purchase continuing coverage

# FINANCIAL PROGRAMS

## FINANCIAL ADVISOR REGISTRATION PROGRAM

Players may access a list of registered financial advisors at [www.nflplayers.com](http://www.nflplayers.com) under the member section.

Current and former players are provided access to a diverse group of financial advisors who have met the published eligibility requirements and have been subject to an extensive background investigation. The NFLPA monitors the advisors' civil and regulatory history and will discipline any advisor who violates the Regulations. Discipline may include termination of registration and privileges of the program.

## FINANCIAL EDUCATION PROGRAM

The Financial Learning Center can be accessed at [flc.im/nflpa](http://flc.im/nflpa).

The NFLPA has partnered with Financial Finesse to provide the player membership with financial education resources and tools. This educational platform provides players with ongoing support which aids in implementing smart savings and financial planning strategies to help achieve short and long-term goals.

## PERSONAL FINANCIAL COACHING

(877) 258.2129/ Access Code: NFLPA

Hours of Operation: Monday – Friday, 9:00 a.m. – 8:00 p.m. Eastern Time

All calls are confidential.

The toll-free financial helpline service provides players with ongoing financial coaching and guidance from unbiased CERTIFIED FINANCIAL PLANNER™ professionals.













# PERSONAL & PROFESSIONAL DEVELOPMENT

Make good use of the offseason (or free time) to expand your skill set, explore other careers, and make plans for the future. Investing in your development off-the-field will be valuable to you regardless of when your career ends.

To stay sharp, remain relevant, and increase your marketability in the business world:

- Shadow or Intern
- Continue your education
- Take a Kaplan Course
- Network
- Create a LinkedIn profile
- Volunteer
- Take a career assessment test
- Develop a resume
- Attend the NFLPA Coaching Symposium & Networking Event

January 12-14, 2014 (Indianapolis, IN)

## FOR QUESTIONS OR ASSISTANCE, CONTACT:

***Leslie M. Satchell***

NFLPA Player Affairs & Development

Call | (202) 756.9173

Text | (202) 255.0688

Email | [leslie.satchell@nflplayers.com](mailto:leslie.satchell@nflplayers.com)





# PLAYER TRANSPORTATION SERVICES

The NFLPA player transportation services provide players with the ability to prevent DUIs and to avoid the unnecessary and unfortunate consequences. The NFLPA has partnered with two transportation companies, Player Transportation Link, operated by Corporate Security Solutions Inc., and Uber. The Player Transportation Link (PTL) offers pre-arranged and unplanned rides for \$90.00 per hour. Unplanned emergency rides have a wait time for pick up. PTL has been a valued partner for four years, servicing close to 1,000 secure rides for players. The NFLPA's newest transportation partner, Uber is an App-based driving service. It is available in 20 NFL cities and is already recognized and used by NFL players. The new partnership provides each player with four \$200.00 gift cards. Players can access Uber by downloading the app on their smart phones.

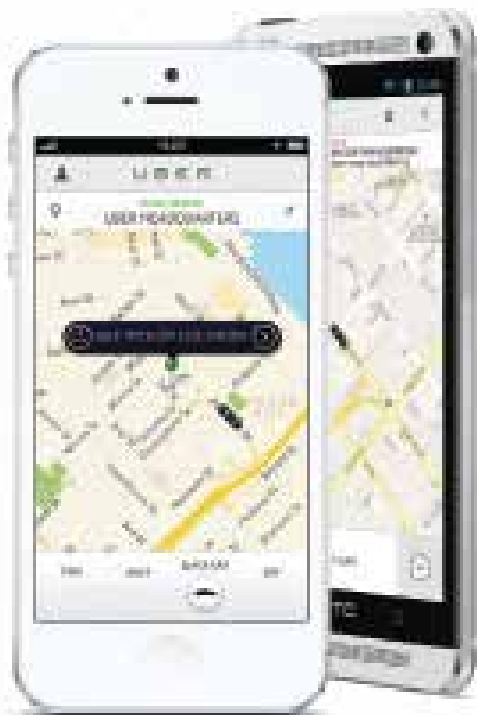
**PLAYER TRANSPORTATION LINK | (800) 203.4731**



# LET UBER KICK OFF YOUR NEXT DRIVE

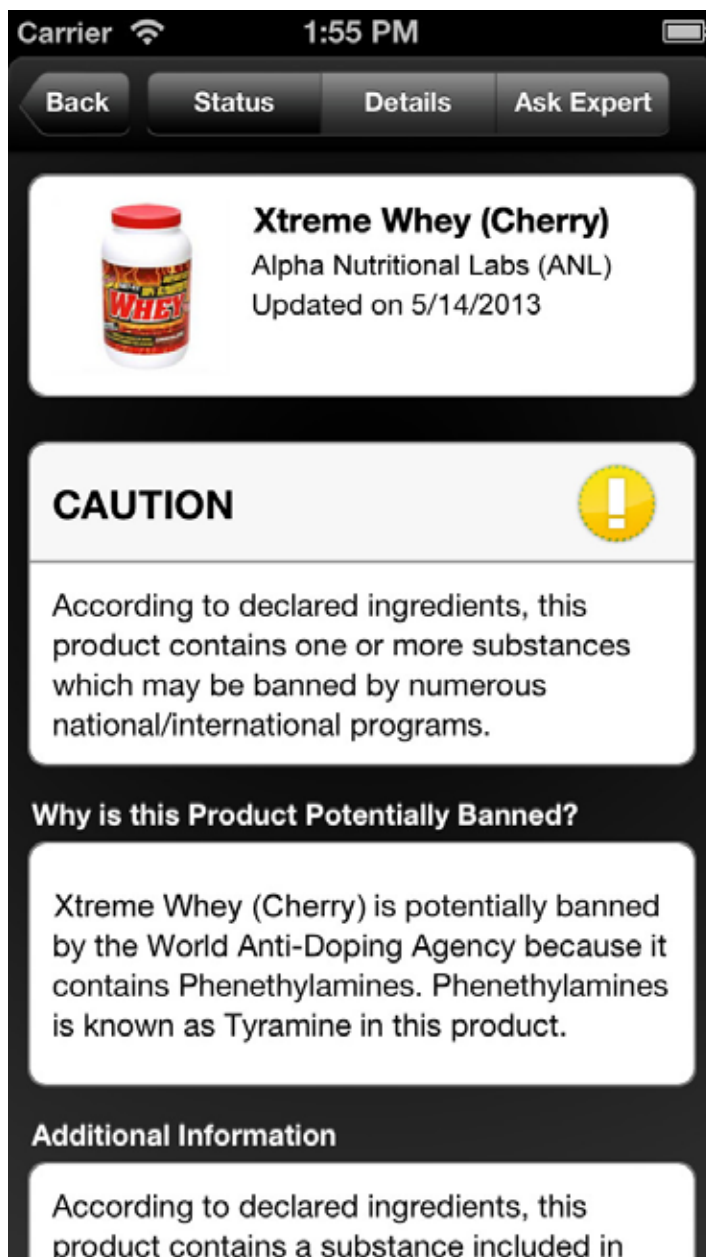
Uber is a mobile app that connects you with a professional driver at the tap of a button. The NFLPA has partnered with this safe, confidential service to help players get around.

Uber has provided players with \$200 of credit towards rides booked through the Uber mobile app, \$100 worth of rides to give to friends and family, and the opportunity to earn additional Uber credit through the Uber Athlete Influencer Program.



# DRUG ADDICTION & PREVENTION

For more than 19 years Scott Gorman has specialized in the treatment of high profile clientele including entertainers, athletes and business leaders in a professional, ethical, and confidential manner. He worked in the NFL as Chief Aide to the Owner of the Indianapolis Colts for nine seasons, where he earned a Super Bowl ring in 2006. Scott has a deep understanding of the unique challenges facing players within the NFL culture. Scott is leveraging his expertise to help current and former players effectively manage the complex and challenging process that leads to healing and recovery. He approaches his work with a quiet compassion and has created a network of respect and trust within the NFL community. Scott is also currently a consultant for the National Association of Drug Court Professionals.



## AEGIS SHIELD

Aegis Shield has built the most extensive, timely and trustworthy supplement database in the market. Once a player scans a product, the Aegis Shield app checks the product's declared ingredients found on the label and assigns a status (banned, caution, ok) based on the NFL Banned Substances list. The app is supported by Android, iPhone and Windows operating systems and can be downloaded from your phone's app store. Players can contact June Rogers, NFLPA Director of Drug Policies & Programs should they have any concerns about Aegis or nutritional supplements. Players are ultimately responsible for their nutritional supplement choices.

### *June Rogers*

NFLPA Director of Drug Policies & Programs

Call | (202) 756.9172







# NFLPA GET HELP HOTLINE

The NFLPA is proud to introduce the new **NFLPA GET HELP HOTLINE (877) 363.8062**.

This new hotline is designed to give current and former players the opportunity to get any help and/or information they may need. When the hotline is called, players will listen to short message followed by four options. The four available options are: an option for suicide emergencies where player will be put in direct contact with the National Suicide Hotline, an option to speak with someone live 24 hours a day 7 days a week, a third option to receive information on the NFLPA's partnership with the University of Michigan Depression Center, and a forth option is available for the player to access information on the Player Assistance Trust Fund (PAT), where they will be given the option to leave a message for a member of the NFLPA to contact. Don't hesitate to call the new NFLPA GET HELP HOTLINE today at (877) 363.8062.



# COORDINATOR OF MENTAL TRAINING SERVICES

Dr. Doug Gardner is the Co-Coordinator of Mental Training Services for the NFL Players Association. In his role, Dr. Gardner works directly with NFLPA Leadership and with scholastic stars identified by the NFLPA and Signingday.com on the multitude of issues related to the mental aspects of preparation and performance.

Dr. Gardner has a proven track-record of success in aiding in the successful transition of athletes from level to level and in teaching individuals the tools and skills that allow for them to take ownership over their lives inside and outside of sport and other performance environments.

Dr. Gardner is a certified Sport Psychology Professional through the Association of Applied Sport Psychology and his work is built on a theory-to-practice approach, the cornerstone of which is based on the foundation of teaching athletes how to think, take-in information, process this information and make decisions in real time.

***Dr. Doug Gardner, Ed.D., CC-AASP***

Co-Coordinator of Mental Training Services  
NFL Players Association

Phone | (925) 284.7506

Cell | (925) 788.5413

E-mail | [dg@thinksport.com](mailto:dg@thinksport.com)

Linkedin | [http://www.linkedin.com/profile/view?id=16379366&trk=tab\\_pro](http://www.linkedin.com/profile/view?id=16379366&trk=tab_pro)

Web | [www.thinksport.com](http://www.thinksport.com)

Twitter | @thinksport





# NFLPA

## PLAYER SAFETY AND SECURITY CHECKLIST

**SECURITY | Tim Christine | 202.756.9102 | [tim.christine@nflplayers.com](mailto:tim.christine@nflplayers.com)**

### MOTOR VEHICLES

Note: Most States require you change your Vehicle Registration and DL w/ in 30 days of relocation.

- ☐ Is your Registration valid w/ home address?
- ☐ Is your Driver's License valid w/ home address?
- ☐ Check Insurance expiration date and ensure your DL, vehicle registration(s) and insurance cards address match.
- ☐ Proof of insurance card in glove box?

### DUI PREVENTION

NFLPA Player Transportation Link (PTL) 24/7/365

- ☐ Ensure you load the PTL toll free number in your phone. 800-203-4731

**PASSPORT | NFLPA Member Portal | <http://us.cibt.com/about-us.php> | 800.929.2428**

- ☐ Do you possess a VALID Passport?
- ☐ Carry your passport with your travel bag. A passport will allow you to fly should you lose your DL. A passport is also required if you travel anywhere outside the USA including Canada and the UK.

**HOME SECURITY ADT/NFLPA | Tim McKinney | 617.875.8097 | [tmckinney@adt.com](mailto:tmckinney@adt.com)**

- ☐ Do you have a Home Security System w/ real time video linked to your smart phone?

**FIREARM AND HANDGUN SAFETY | Tim Christine | 202.756.9102 | [tim.christine@nflplayers.com](mailto:tim.christine@nflplayers.com)**

- ☐ Do you possess a copy of the NFL League Firearms Policy?
- ☐ Do you possess a VALID Carry Concealed Permit for the State where you reside?
- ☐ Schedule to attend FREE NFLPA (2) day firearms training w/ the Sig Sauer Academy.

**DUE DILIGENCE | Tim Christine | 202.756.9102 | [tim.christine@nflplayers.com](mailto:tim.christine@nflplayers.com)**

- ☐ Contact NFLPA to determine if your Contract Advisor has any disciplinary record (s) on file.
- ☐ Contact the NFLPA to determine if your Financial Advisor is Registered and in good standing.
- ☐ Conduct background checks on all persons you do business with and for all persons you employ. Contact CSSI @ 800-203-4731.
- ☐ Subscribe to a credit monitoring Service? Identity Guard is free for all active players for the first year. Subscribe @ [www.identityguard.com/nflpa](http://www.identityguard.com/nflpa).

# DON'T TAKE UNLESS YOU WANT A FOUR GAME BREAK

Some supplements, over-the-counter medications and prescription drugs are prohibited under the NFL's Policy on Anabolic Steroids and Related Substances. The penalty for a 1<sup>st</sup> time violation is a 4 game suspension **without pay**. If you don't know, ask someone who does.

FOR MORE INFO CONTACT:

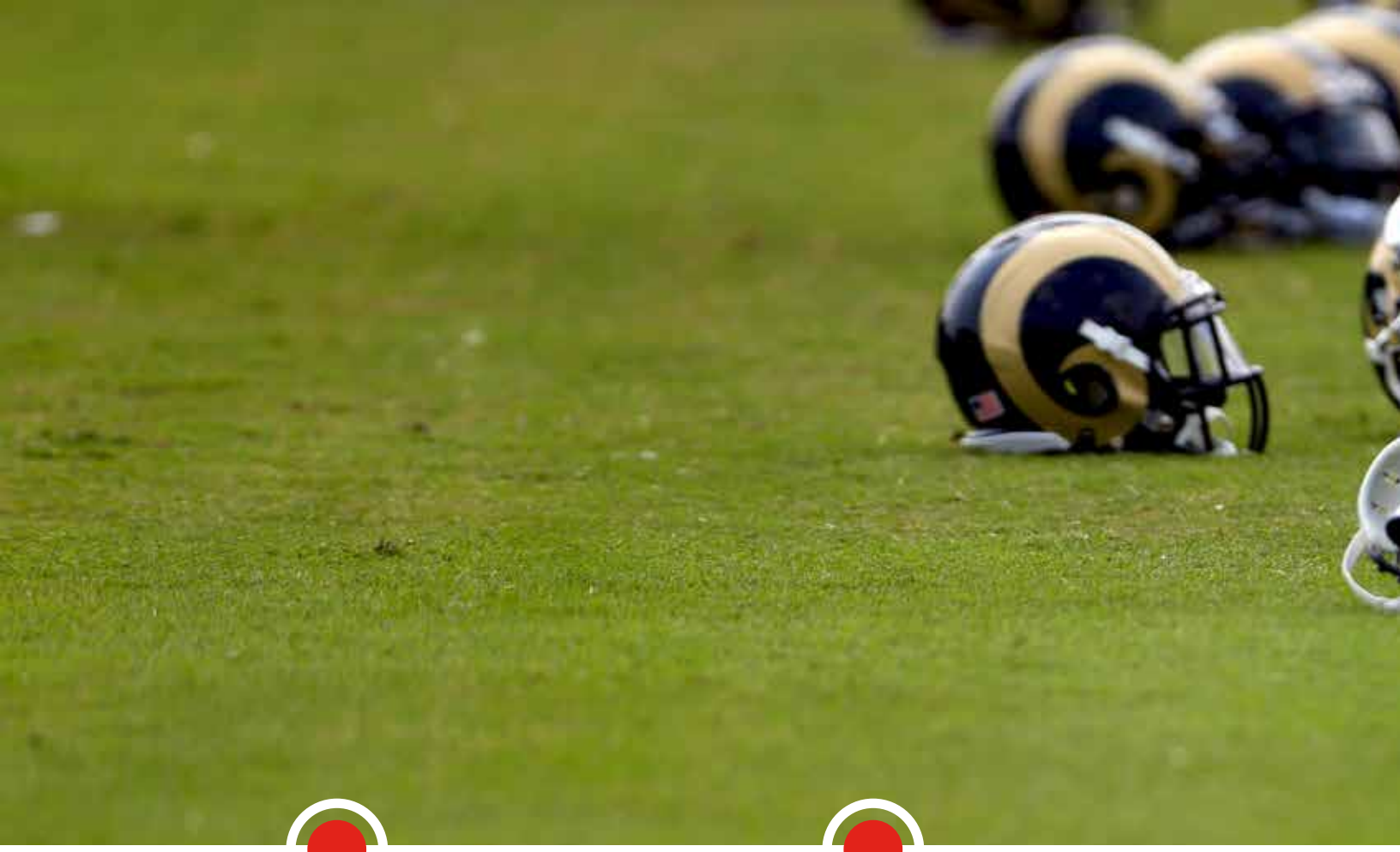
**JUNÉ M. ROGERS**

**DIRECTOR OF DRUG PROGRAMS AND POLICIES// 202.756.9172**

**WWW.NFLPLAYERS.COM**



**NFLPA**



## JANUARY – MARCH

Poll teammates regarding topics and concerns for the NFLPA to address

Attend Annual Board of Player Reps Meeting



## APRIL – JUNE

Inform teammates of offseason workout rules and restrictions  
(see *Offseason Workout Rules*)

Alert your Player Advocate to any CBA violations or concerns

Participate in monthly conference calls

# SEASONAL CALENDAR AND DUTIES





## JULY – SEPTEMBER

Inform teammates of training camp rules and restrictions  
(see *Offseason Workout Rules*)

Alert your Player Advocate to any CBA violations or concerns

Inform teammates of the 25 day time limit to filing Injury Grievances

Participate in monthly conference calls



## SEPTEMBER – DECEMBER

Inform teammates of in season practice rules

Alert your Player Advocate to any CBA violations or concerns

Collect dues check-offs

Assist in NFLPA team meetings

Participate in monthly conference calls







# TRAINING CAMP GUIDE

## PRESEASON PAY 2013-2014

**VETERANS** (1 credited season) \$1700/wk

**1ST YEAR PLAYERS** (Rookies and 0 credited seasons) \$925/wk

## SCHEDULE

DAY 1: Physicals, Testing, Meetings (no on-field activities except running and conditioning)

DAY 2: No pads and no contact

DAY 3: No pads and no contact

DAY 4 THROUGH END OF CAMP:

- 1 padded practice for no more than 3 hours + 1 walk-through
- 3 hours between practices
- 4 hours total on the field
- A padded practice that goes more than 60 minutes and is then cancelled counts as a full practice
- Mandatory days off: 1 in every 7 days, at least 5 days off during camp

## DEFINITION OF WALK-THROUGH

*(Article 23 sec. 6)*

The second practice on the same day may only be for a maximum of the remaining available on-field time, and shall be limited to only “walk-through” instruction (i.e., no helmets, full-speed pre-snap, and walking pace after the snap).



# REGULAR SEASON PRACTICE RULES

- A total of 14 padded practice days are allowed, 11 must be held in the first 11 weeks of the season, 3 must be held in the last 6 weeks of the season. Only once in the first 11 weeks can a team hold 2 padded practices in the same week.
- Max 3 hours on the field including warm up. A period of up to 30 minutes outside of the 3 hour limit pre or post practice is allowed with position coaches.
- Walk-through does not count against the 3 hour limit.

## BYE WEEK

- Players must be given 4 consecutive days off including a Saturday and Sunday unless a Thursday night game follows a bye week.

## DAYS OFF

- Mandatory 4 days off a month (excluding bye week).
- Injured players can be required to report on days off.















# INJURY GRIEVANCE PROCEDURE

The NFL Player Contract provides that if a player is injured and unable to perform the services required of him by that contract because of an injury incurred while performing services for his club, and promptly reports the injury, he is entitled to:

1. Receive his salary for the season of injury for so long as he remains physically unable to play during that season; and,
2. Receive necessary treatment, rehabilitation, medical and hospital care.

- **FILING:** Any player who is released by his club in 2013 while still injured and unable to play due to an injury suffered in 2013, **MUST FILE AN INJURY GRIEVANCE WITHIN 25 DAYS** after his release by the club to enforce his rights under his player contract.

- **NEUTRAL PHYSICIAN EXAMINATION:** The player must be examined by a neutral physician within twenty (20) days from the filing date of the grievance.

- **ARBITRATION HEARING:** If the neutral physician finds that the player is still injured and if the club still refuses to pay him, he will be given a hearing before an arbitrator who will decide the case. An NFLPA attorney will represent the player free of charge, and all hearing expenses will be paid by the NFLPA.

## NON-INJURY GRIEVANCE PROCEDURE

- **FILING:** A non-injury grievance must be filed within fifty (50) days from the date of the occurrence or non-occurrence upon which the grievance is based, or within fifty (50) days from the date on which the facts of the matter became known or reasonably should have been known to the party initiating the grievance, whichever is later.

Types of non-injury grievances include: Club fines, non-payment of a bonus or guarantee, and other issues pertaining to the CBA and NFL player contracts.









# INJURY GRIEVANCE PROCEDURE

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- **FILING:** Any player who is released by his club in 2013 while still injured and unable to play due to an injury suffered in 2013, **MUST FILE AN INJURY GRIEVANCE WITHIN 25 DAYS** after his release by the club to enforce his rights under his player contract.

- **NEUTRAL PHYSICIAN EXAMINATION:** The player must be examined by a neutral physician within twenty (20) days from the filing date of the grievance.

- **ARBITRATION HEARING:** If the neutral physician finds that the player is still injured and if the club still refuses to pay him, he will be given a hearing before an arbitrator who will decide the case. An NFLPA attorney will represent the player free of charge, and all hearing expenses will be paid by the NFLPA.

## NON-INJURY GRIEVANCE PROCEDURE

- **FILING:** A non-injury grievance must be filed within fifty (50) days from the date of the occurrence or non-occurrence upon which the grievance is based, or within fifty (50) days from the date on which the facts of the matter became known or reasonably should have been known to the party initiating the grievance, whichever is later.

Types of non-injury grievances include: Club fines, non-payment of a bonus or guarantee, and other issues pertaining to the CBA and NFL player contracts.



# PLAYER CHALLENGE



# COIN RECOGNITION



## ROOKIE PLAYER

Getting drafted is a huge accomplishment, but it doesn't come with a guarantee that a player will play in a regular season game or even make a club's 53 man roster or practice squad. Determination for the Rookie coin will be for a player who is on a team's regular season roster.

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## **COMMUNITY SERVICE**

Acts of kindness by players, their families or their foundations may go unnoticed. The community service coin will acknowledge these small or large acts (e.g. players football camps, One Team For Haiti), etc.

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## **VESTED PLAYER**

The vesting coin identifies that a player will have post-career benefits signifying his career will reward him long after retirement.

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## NFLPA STAFF

The NFLPA Staff coin will reflect a staff member's tenure or efforts that bring favorable results to players and the organization.

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stone 1.5mm



## EXECUTIVE COMMITTEE

Being selected to the Executive Committee is the highest honor a player can receive as a member in the union.

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## DECADE PLAYER

Players' careers are shorter now than ever. Less than 3% of teams have players with 10 or more seasons. Getting to double digits is a huge accomplishment, signifying durability, longevity, and professionalism.

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## PLAYER LEADERSHIP

The Player Leadership coin recognizes leadership among the player rank and file; elected or not.

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## DEGREE COMPLETION

It is reported that 50% of players enter the league without a degree. Going to school while playing takes a lot of commitment and sacrifice. A Degree Completion coin may be the most important for a player to attain.

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## PAST, PRESENT, FUTURE

The PPF coin will be a thank you to players from the NFLPA. The coins are a gift from the NFLPA representing the betterment of future generations of football.

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**NFLPA**

## DRAFT ELIGIBLE PLAYERS

**PROHIBITED PRESCRIPTION  
DRUGS AND THERAPEUTIC  
USE EXEMPTIONS**

**[WWW.NFLPLAYERS.COM](http://WWW.NFLPLAYERS.COM)**



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# FORWARD

**“A good reputation is better kept than repaired”**

The NFL and NFLPA recognize that within the list of prohibited substances there are medications that are appropriate for the treatment of specific medical conditions. For athletes who require the use of a prohibited substance to treat an appropriately diagnosed medical condition, a **Therapeutic Use Exemption (TUE) must be requested.**

Please review the contents of this booklet and follow the instructions within to obtain a TUE. Be sure to mention any prescribed substances you previously took but may no longer be taking; as some prescription drugs stay in your system for an extended period of time and may cause a positive test **EVEN IF** you are no longer taking.

As future NFL players, a constant threat to your reputation and career will be testing positive for a prohibited (banned) substance. Unintentional violations carry the same stigma and discipline as intentional violations. In short, you are responsible for what is in your body.

Sincerely,

A handwritten signature in black ink, appearing to read 'JR', with a stylized flourish extending to the right.

**Juné M. Rogers**  
NFL Players Association  
Director of Drug Programs and Policies  
Player Affairs & Development



# Draft Eligible Players

For all draft eligible players who are being treated for a medical condition with a medication which is prohibited by the NFL Policy for Anabolic Steroids and Related Substances for treatment of a medical problem, e.g. amphetamine or methylphenidate for ADHD, a therapeutic use exemption must be obtained.

The information that is required includes:

1. Full medical evaluation upon which the diagnosis requiring treatment was determined;
2. Complete medical notes from the prescribing physician;
3. Latest prescription for the medication (prescription should be within last 30 days).

All draft eligible players should review their medication to determine if any medications contain prohibited substances.

**FOR DRAFT ELIGIBLE PLAYERS A TUE CAN BE OBTAINED RETROACTIVELY AFTER A POSITIVE TEST.** The required information may also be submitted prior to the Combine to Dr. John Lombardo, Independent Administrator for the NFL Policy for Anabolic Steroids and Related Substances via fax (614-442-0107) or e-mail (johnalomba@aol.com).

The criteria for granting a therapeutic use exemption (TUE) once the player is signed is more stringent and information that will allow usage of medication containing prohibited substances for the Combine does not constitute a TUE when signed to an NFL contract.

If you have any questions concerning therapeutic use exemptions and draft eligible players, please contact Dr. John Lombardo.

**John A. Lombardo, MD**

Independent Administrator of the NFL Policy and Procedures  
for Anabolic Steroids and Related Substances  
p. 614-442-0106  
f. 614-442-0107  
e. johnalomba@aol.com



# TUE Request Review

In reviewing a TUE request, the Independent Administrator of the NFL Policy on Performance-Enhancing Substances and the Medical Advisor for the Policy and Program on Substances of Abuse, respectively, have sole discretion to require medical evidence beyond that normally necessary to initiate treatment by the medical community.

TUEs may be granted by the Independent Administrator and/or Medical Advisor after review of a player's TUE application. The TUE application should be filled out and submitted by the player's treating physician and should include all pertinent medical records documenting the diagnosis. After review of each case, the advisors may require further diagnostic testing or previous medical records, and/or may utilize the services of expert consultants. The advisors will have the final decision whether to grant a TUE.

The following general requirements apply to all TUE requests:

1. The medication must be necessary and indicated in the treatment of the specific medical problem for which it has been requested;
2. Acceptable alternative treatments with medications that are not prohibited have been attempted and failed, or reasons for not prescribing these alternative treatments have been presented;
3. Appropriate evaluation has been completed and all medical records documenting the diagnosis have been submitted for review; and

Effective immediately, a TUE may be granted retroactively only if emergency use of the prohibited substance is necessary to avoid morbidity or mortality of disease or disorder. TUEs for draft-eligible players will continue to be reviewed and granted following pre-employment tests at Combine or during visits to individual team facilities.

In addition, specific requirements have been established and must be satisfied in order to obtain a TUE for the following conditions: ADD/ADHD, male pattern

baldness, hypertension and hormonal deficiency due to either primary or secondary hypogonadism and/or hypopituitarism.

**Any player who seeks to be treated by a physician with a prohibited substance for any condition must have that physician file a TUE application with the Independent Administrator. If a player tests positive for a prohibited substance without having been granted a TUE, this constitutes a positive test and will be referred for administrative action.**

# Attention Deficit and Attention Deficit Hyperactivity Disorders (ADD/ADHD)

ADD and ADHD are neurobehavioral disorders characterized by a persistent pattern of inattention and/or hyperactivity. To determine the diagnosis of ADD or ADHD, the medical evaluation must include:

1. Complete history, including interviews with player and preferably with family, associates, teachers or supervisors to establish behaviors;
2. Evaluation for co-morbidities, including laboratory tests, neurocognitive testing and appropriate screening tests (there is no one specific test which is diagnostic for ADD or ADHD) to determine the diagnosis and treatment plan; and
3. Establishment of DSM-IV criteria met by player for the diagnosis of ADD or ADHD through use of a validated ADHD scale (see below).

## Initial TUE Application

As a reminder, all TUE applications must be sent to the Independent Administrator **prior to the initiation of treatment.**

The following specific requirements must be satisfied in order to grant a TUE for ADD or ADHD:

1. Evaluation within the last 3 years by a psychiatrist, other physician who has specialized in the treatment of ADD and ADHD or a knowledgeable physician working with a psychologist who works in this area;
2. Pertinent and current history, physical examination and testing, including:
  - a. Complete history and physical examination, including a thorough neurological evaluation, with special attention to head injuries, brain imaging if indicated and any neuropsychological testing performed;
  - b. Any evaluation or testing for medical and mental health co-morbidities (hypothyroidism, depression, etc.), including laboratory tests, imaging studies or neuropsychological testing;
  - c. ADD/ADHD comprehensive diagnostic scale assessing symptoms and impairment used to support the diagnosis of ADD or ADHD, including:
    - i. Conners Adult ADHD diagnostic inventory (CAADID); or
    - ii. Adult ADHD Clinician Diagnostic Scale (ACDS) v1.2; or
    - iii. Other validated rating scales with supporting documentation of validity; and
  - d. Additional testing as indicated by clinical evaluation.

## Attention Deficit and Attention Deficit Hyperactivity Disorders (ADD/ADHD)

Cont'd



3. All available records from previous evaluations that document diagnosis, including any previous test results, previous treatments that have been attempted (include doses and duration of treatment) and the results of such treatment trials;
4. Specification of the DSM-IV criteria that are present to diagnose ADD/ADHD; and
5. Management plan, to include:
  - a. Medication prescribed, including dosage and frequency of medication;
  - b. Mechanism to be used to document treatment effectiveness (e.g., the use of rating scales);
  - c. Further testing or treatment of co-morbidities; and
  - d. Plans for follow-up visits.





## Attention Deficit and Attention Deficit Hyperactivity Disorders (ADD/ADHD)

Cont'd



Additionally, it is strongly suggested that the initial TUE application include the following:

1. Neurocognitive testing for learning disabilities, including:
  - i. Wechsler Adult Intelligence Scale-III;
  - ii. Wechsler Individual Achievement Test-II or Woodcock Johnson Tests of Cognitive Abilities – III;
  - iii. Specific tests of executive function and impulse control; and
  - iv. Appropriate testing to assess learning disabilities as indicated in clinical history.
2. Verification of the symptoms and behaviors by another person, e.g., a family member, coach, teacher, supervisor or school records. An evaluation by a second expert clinician would also suffice.

### Annual Renewal

All TUEs for ADD/ADHD require an annual renewal. The following must be submitted annually prior to May 1:

1. Documentation of all follow-up visits (minimum of 2), including symptoms, efficacy of treatment and treatment of co-morbid conditions. The most recent follow-up visit must take place within 60 days of the TUE renewal application;
2. Results of any pertinent testing that was completed during the previous year, including the mechanism used to document treatment effectiveness (e.g., rating scales); and
3. Treatment plan for the coming year, including medication(s) prescribed, tests ordered and plans for follow-up visits.

A full evaluation must be performed every 3 years.

# Diuretics in the Treatment of Hypertension

Systemic hypertension is the most common cardiovascular condition observed in competitive athletes and is defined as having a blood pressure measurement above 140/90 on two separate occasions. There are many factors or conditions which affect blood pressure, including excess body weight, excess sodium intake, renal disease and sleep apnea. In addition, certain medications and foods can cause elevated blood pressure, including non-steroidal anti-inflammatory medication, stimulants, corticosteroids, anti-depressant medication and alcohol. Lifestyle, medications and presence of causative diseases should be included in the evaluation and treatment of an individual with hypertension. The use of diuretics as part of the treatment of NFL players with hypertension requires a TUE.

## Initial TUE Application

As a reminder, all TUE applications must be sent to the Independent Administrator prior to the initiation of treatment.

The following specific requirements must be satisfied in order to grant a TUE for the use of diuretics for hypertension:

1. History and physical examination with blood pressure measured on at least two independent occasions with an adequate sized cuff;
2. Laboratory testing that includes:
  - a. 12 lead electrocardiogram
  - b. Urinalysis
  - c. Electrolytes including Calcium
  - d. BUN/Creatinine
  - e. BUN/Creatinine
3. Laboratory testing that includes:
  - a. 24-hour urine for protein and creatinine
  - b. Renal imaging
  - c. Echocardiography
  - d. EKG stress testing



## Diuretics in the Treatment of Hypertension

Cont'd



#### 4. Management plan, including:

- a. Treatments previously attempted, including lifestyle modification and medication (including dose, frequency and duration of trial of treatment). Trial with a non-prohibited substance (e.g., ACE-I, ARB, calcium channel blocker, etc.) is required before use of a diuretic will be approved.
- b. Medication suggested with dose, route and frequency.
- c. Plan for monitoring, including frequency of visits and follow-up testing.

### Annual Renewal

All TUEs for hypertension require annual renewal. The following must be submitted annually prior to May 1:

1. Documentation of all follow-up visits, including effect of treatment, adverse effects and results of all laboratory tests. The latest visit should be within 60 days of renewal; and
2. Management plan for the year, including:
  - a. Medication suggested with dose, route and frequency.
  - b. Plan for monitoring, including frequency of visits and follow-up testing.

# Androgenetic Alopecia (Male Pattern Baldness)

Male pattern baldness, or androgenetic alopecia, is a heritable form of hair loss which affects 50% of middle-aged males and a significant number of younger males. Testosterone and DHT levels and the androgen receptor gene are major factors in the development of male pattern baldness. There are many approved treatments for male pattern baldness including minoxidil, latanoprost, ketoconazole, dutasteride and finasteride. Finasteride and dutasteride require a TUE.

## Initial TUE Application

As a reminder, all TUE applications must be sent to the Independent Administrator prior to the initiation of treatment.

The following specific requirements must be satisfied in order to grant a TUE for male pattern baldness:

1. History and physical examination performed by a physician knowledgeable with the evaluation and treatment of male pattern baldness; and
2. Identification of pattern of hair loss using an accepted scale (e.g., Norwood-Hamilton).

## Annual Renewal

All TUEs for male pattern baldness require renewal every three years. The following must be submitted prior to May 1 of the third year::

1. Documentation of all follow-up visits concerning this condition since initial application, including effect of treatment, adverse effects, and identification of hair loss pattern using the same scale as previously used; and
2. Management plan for the year including the medication prescribed with dose, route and frequency.:





# Hypogonadism

Hypogonadism is the absent or decreased function of the testes resulting in decreased production of testosterone and/or spermatozoa. Hypogonadism can be primary, e.g., a problem in the testes with etiologies such as Klinefelter's syndrome, Leydig cell aplasia, bilateral anorchia, testicular infection, trauma, etc. Hypogonadism can also be secondary with normal testes but lack of the stimulatory signals (gonadatropic hormones LH and/or FSH). Examples of medical conditions or treatments that may cause hypogonadotropic hypogonadism include isolated LH deficiency, hypopituitarism due to tumor, infection or trauma, medications, etc.

Previous use of exogenous androgens may result in decreased pituitary and/or gonadal function, but a TUE is not indicated and will not be granted for this condition. Additionally, low normal levels of gonadal hormones and/or gonadotropins are not conditions for which a TUE will be granted.

## Initial TUE Application

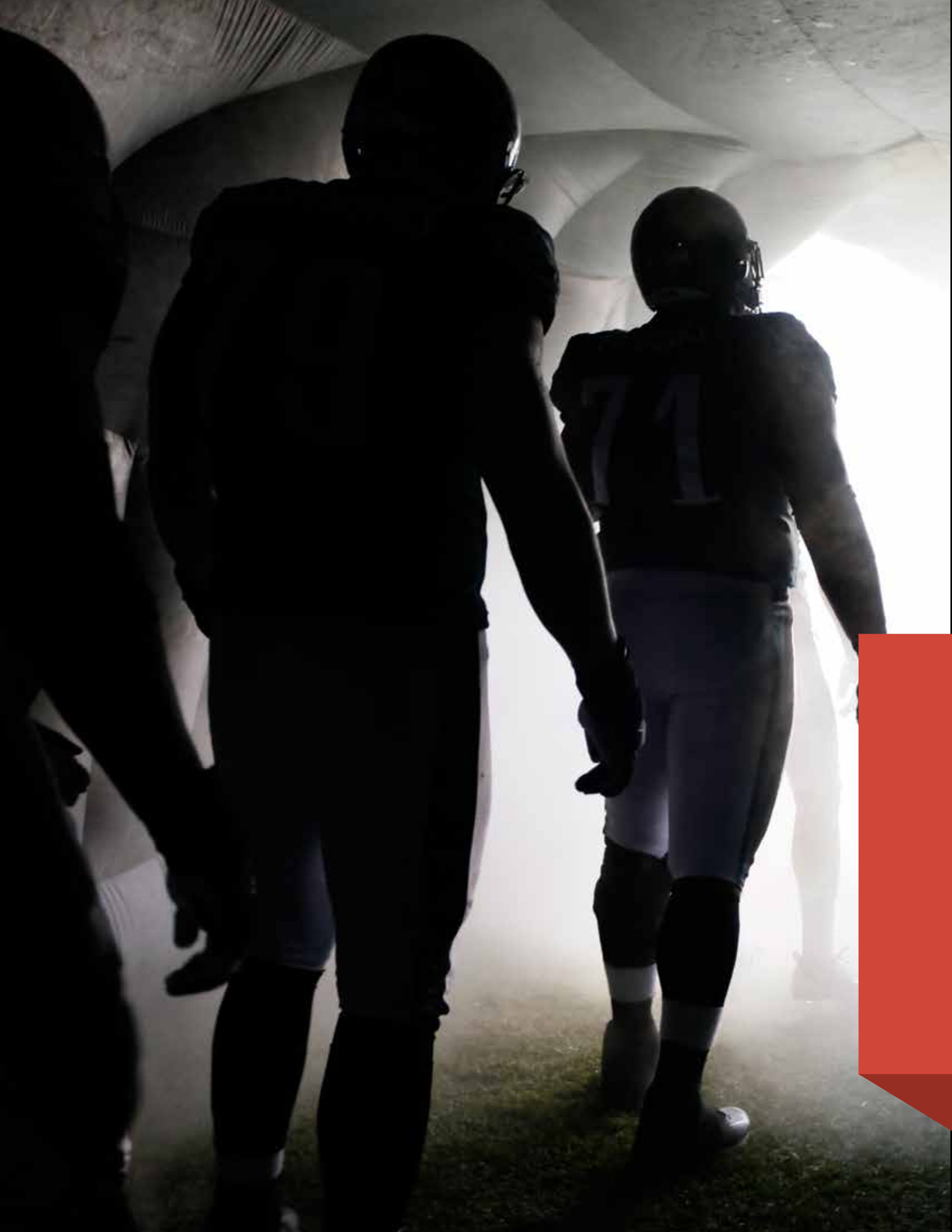
**As a reminder, all TUE applications must be sent to the Independent Administrator prior to the initiation of treatment. Additionally, because expanded drug testing is required during the evaluation process (see below), the Independent Administrator should be notified when diagnosis is being considered.of treatment.**

The following specific requirements must be satisfied in order to grant a TUE for hypogonadism:

1. History and physical examination performed by an endocrinologist and all medical records which document the diagnosis;
2. Laboratory testing that includes:
  - a. Free (dialysis method) and Total testosterone drawn before 10 AM – repeated 3 times over 4 weeks
  - b. LH and FSH – drawn with testosterone each time
  - c. Sex hormone binding globulin (SHBG)
  - d. TSH and free T4
  - e. Estradiol
  - f. Prolactin
  - g. IGF-1



4. If hypogonadotropic hypogonadism is the presumptive diagnosis, then stimulation testing and imaging must be performed including:
  - a. Glucagon stimulation test or GHRH for HGH
  - b. HCG stimulation test
  - c. MRI of brain with pituitary (sella) cuts with and without contrast
5. Drug testing under the NFL Policy on Performance-Enhancing Substances to coincide with the administration of repeated tests for testosterone (to be arranged through the Independent Administrator);







### 6. Management plan, including:

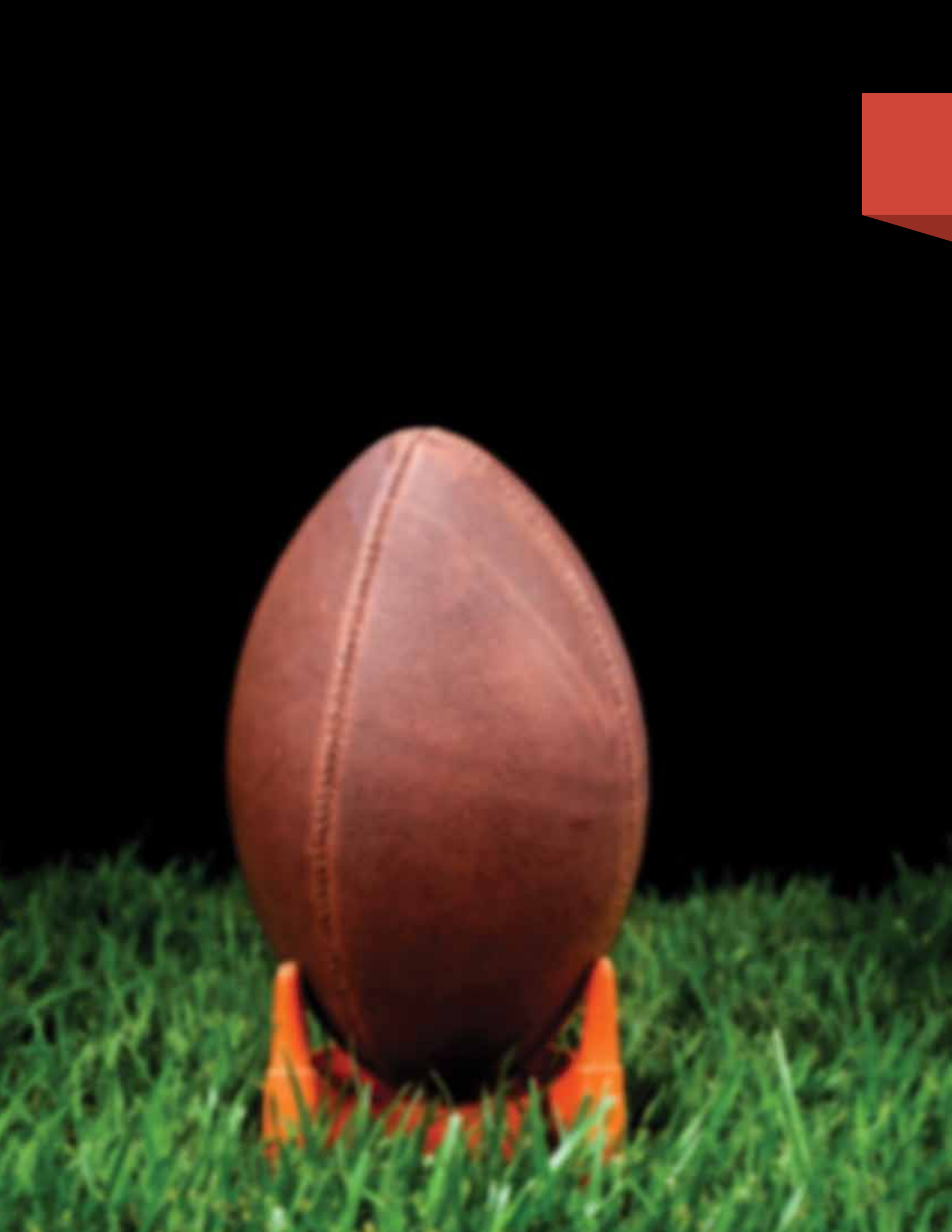
- a. Medication suggested with dose, route and frequency and who will be administering medication;
- b. Regular testing of serum hormone levels (Free and total testosterone, LH, FSH) with levels not exceeding therapeutic range. Results must be sent to the Independent Administrator, who may at his discretion require additional testing of the player's serum hormone levels on twenty-four (24) hours' notice; and
- c. Regular visits and plans for re-evaluation (e.g. trial off medication with testing).

**All players granted a TUE for hypogonadism will be subject to expanded testing under the Policy during the year.**

## Annual Renewal

All TUEs for hypogonadism require annual renewal. The following must be submitted annually prior to May 1:

1. Documentation of all follow-up visits including effect of treatment, adverse effects and results of all laboratory tests (latest test must be within 60 days of application);
2. Results of a re-evaluation following removal from the medication with adequate washout period (4-6 weeks) or a medical justification why a re-evaluation is not necessary; and
  - a. Management plan for the year to include: Medication suggested with dose, route and frequency and who will be administering medication;
  - b. Regular testing of hormone levels (Free and total testosterone, LH, FSH)
  - c. Regular visits and plans for re-evaluation (e.g., trial off medication with testing).



# Therapeutic Use Exemption (TUE) Application Form

**Please print clearly or type all sections of this form**

## **Athlete Information**

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
Team: \_\_\_\_\_ Position: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Cell: \_\_\_\_\_ E-mail: \_\_\_\_\_

Medical Information (Medical records must be included that document diagnosis & treatment)  
Diagnosis: \_\_\_\_\_

Medication requested: Name (generic): \_\_\_\_\_

Dose: \_\_\_\_\_ Route: \_\_\_\_\_ Frequency: \_\_\_\_\_ Duration of treatment: \_\_\_\_\_

Alternative treatments with non-prohibited substances attempted: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

## **Physician Information and Declaration**

I certify that the above treatment is medically appropriate and that the use of alternate medication not on the prohibited list would be unsatisfactory for this condition.

Name: \_\_\_\_\_ Degree: \_\_\_\_\_

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

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-mail: \_\_\_\_\_

Signature of Physician: \_\_\_\_\_ Date: \_\_\_\_\_

**All TUE applications with documentation are to be sent to:**

John A. Lombardo, MD

Independent Administrator of NFL Policy Anabolic Steroids and Related Substances

1953 Lytham Road, Columbus, OH 43220

Fax: 614-442-0107

E-mail: johnalomba@aol.com





# List of Prohibited Substances

The following substances and methods are prohibited by the National Football League:

## I. ANABOLIC AGENTS

### A. ANABOLIC/ANDROGENIC STEROIDS:

<u>GENERIC NAME</u>	<u>BRAND NAMES (EXAMPLES)</u>
Androstenediol	Androstederm
Androstenedione	Androstan, Androtex
1-Androstenediol	1-AD
1-Androstenedione	---
Bolandiol	---
Bolasterone	Myagen
Boldenone	Equipoise, Parenabol
Boldione	---
Calusterone	---
Clostebol	Turinabol, Steranabol
Danazol	Cyclomen, Danatrol
Dehydrochloromethyltestosterone	Oral-Turinabol
Dehydroepiandrosterone	DHEA, Prasterone
Desoxymethyltestosterone	DMT, Madol
Dihydrotestosterone	DHT, Stanolone
Drostanolone	Drolban
Ethylestrenol	Maxibolin, Orabolin
Fluoxymesterone	Halotestin
Formebolone	Esiclone, Hubernol

**A. ANABOLIC/ANDROGENIC STEROIDS: (contd)**

<u>GENERIC NAME</u>	<u>BRAND NAMES (EXAMPLES)</u>
Furazabol	Miotolon
Gestrinone	Tridomose
17-Hydroxypregnenedione	---
17-Hydroxyprogesterone	
Hydroxytestosterone	
Mestanolone	---
Mesterolone	Proviron
Methandienone	Danabol, Dianabol Methandriol Androdiol
Methandrostenolone	Dianabol
Methenolone	Primobolan
Methyltestosterone	Metandren
Methyl-1-testosterone	M1T
7 -Methyl-19-nortestosterone	MENT
Methylnortestosterone	---
Methyltrienolone	---
Metribolone	---
Mibolerone	Testorex
Nandrolone	
19-Norandrostenediol	19-Diol
19-Norandrostenedione	19 Nora Force



## List of Prohibited Substances

Cont'd



A. ANABOLIC/ANDROGENIC STEROIDS: (contd)	
<u>GENERIC NAME</u>	<u>BRAND NAMES (EXAMPLES)</u>
Norboletone	Genabol
Norclostebol	---
Norethandrolone	Nilevar
Normethandrolone	---
19-Nortestosterone (Nandrolone)	Deca-Durabolin
Oxabolone	---
Oxandrolone	Anavar, Lonovar
6-Oxoandrosterone	6-Oxo
Oxymesterone	Oranabol
Oxymetholone	Anadrol
Prostanazol	---
Quinbolone	Anabolicum Vister
Progesterone	---
Stanozolol	Stromba, Winstrol
Stenbolone	---
Testosterone	Andronate
1-Testosterone	---
Tetrahydrogestrinone	THG
Trenbolone	Finaject
and related substances	

B. HORMONES:	
GENERIC NAME	BRAND NAMES (EXAMPLES)
Human Growth Hormone (hGH)	Saizen, Humatrope, Nutropin AQ
Animal Growth Hormones	---
Human Chorionic Gonadotropin (hCG)	Novarel, Menotropins
Insulin Growth Factor (IGF-1)	---
Erythropoietin (EPO)	---
C. BETA-2-AGONISTS (Clenbuterol, etc.)	
Clomiphene	Clomid
Cyclofenil	
Exemestane	Aromastin
Fadrozole	Afema
D. ANTI-ESTROGENIC AGENTS)	
Aminoglutethimide	Cytadren
Anastrozole	Arimidex
Formestane	Lentaron
Fulvestrant	Faslodex
Letrozole	Femara
Raloxifene	Evista
Tamoxifen	---
Testolactone	
Toremifene	
Vorazole	Rivizor

## List of Prohibited Substances

Cont'd



II. MASKING AGENTS	
A. DIURETICS:	
GENERIC NAME	BRAND NAMES (EXAMPLES)
Acetazolamide	Amilco
Amiloride	Midamor
Bendroflumethiazide	Aprinox
Benzthiazide	Aquatag
Bumetanide	Burine
Canrenone	---
Chlorothiazide	Diuril
Chlorthalidone	---
Cyclothiazide	Anhydron
Ethacrynic Acid	Edecrin
Flumethiazide	---
Furosemide	Lasix
Hydrochlorothiazide	Aprozide
Hydroflumethiazide	Leodrine
Indapamide	Lozol, Natrilix
Methyclothiazide	Aquatensen
Metolazone	Zaroxolyn
Polythiazide	Renese
Probenecid	Benemid
Quinethazone	Hydromox



A. DIURECTICS: (contd)	
GENERIC NAME	BRAND NAMES (EXAMPLES)
Spironolactone	Aldactone
Triamterene	Jatropur, Dytac
Trichlormethiazide	Anatran
and related substances	
B. EPITESTOSTERONE	
C. PROBENECID	
III. STIMULANTS	
Amphetamine	Greenies, Speed, Adderall
Ephedrine	Ma Huang, Chi Powder
Fenfluramine	Phen-Fen, Redux Fenetylline
Methamphetamine	---
Methylephedrine	---
Methylphenidate	Ritalin, Daytrana, Metadate, Methylin
Modafinil	Provigil
Norfenfluramine	---
Phentermine	Fastin, Adipex, Ionamin Prenylamine
Pseudoephedrine *	Sudafed, Actifed
Synephrine	Bitter Orange, Citrus Aurantium
And other substances with a similar chemical structure or similar biological effect(s)	
* Except as properly prescribed by Club medical personnel.	

## List of Prohibited Substances

Cont'd



### IV. DOPING METHODS

- A. Introduction of a Prohibited Substance into the body by any means, including but not limited to the introduction of a Prohibited Substance, or the ingestion or injection of a supplement of other product containing a Prohibited Substance.

Pharmacological, chemical or physical manipulation by, for example, catheterization, urine substitution, tampering, or inhibition or renal excretion by, for example, probenecid and related compounds.

### FOR MORE INFO CONTACT:

Juné M. Rogers

Director of Drug Programs and Policies// 202.756.9172



1133 20th Street, NW, Washington, DC 20036 • 800.372.2000



@NFLPA |



WWW.FACEBOOK.COM/NFLPA







## 2014 Therapeutic Use Exemption (TUEs) Application Form

Please print clearly or type all sections of this form

### Athlete Information

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Team: \_\_\_\_\_ Position: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Cell: \_\_\_\_\_ E-mail: \_\_\_\_\_

### Medical Information (Medical records must be included that document diagnosis & treatments)

Diagnosis: \_\_\_\_\_

Medication requested: Name (generic): \_\_\_\_\_

Dose: \_\_\_\_\_ Route: \_\_\_\_\_ Frequency: \_\_\_\_\_ Duration of treatment: \_\_\_\_\_

Alternative treatments with non-prohibited substances attempted: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

### Physician Information and Declaration

I certify that the above treatment is medically appropriate and that the use of alternate medication not on the prohibited list would be unsatisfactory for this condition.

Name: \_\_\_\_\_ Degree: \_\_\_\_\_

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

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-mail: \_\_\_\_\_

Signature of Physician: \_\_\_\_\_ Date: \_\_\_\_\_

---

### All TUE applications with documentation are to be sent to:

John A. Lombardo, MD  
Independent Administrator of NFL Policy for  
Anabolic Steroids and Related Substances

mail: 1953 Lytham Road, Columbus, OH 43220  
fax: 614-442-0107  
e-mail: johnalomba@aol.com