



## FACULTY BOARD ON ATHLETICS UNIVERSITY OF NOTRE DAME

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Meeting of November 11, 2002  
Room 331 Coleman-Morse Center

**Members Present:** Prof. Fernand Dutile (chair); Prof. Matthew Barrett; Prof. Harvey Bender; Prof. William Berry; Ms. Emily Bienko; Prof. John Borkowski; Dr. Matthew Cullinan; Prof. Stephen Fallon; Prof. Umesh Garg; Mr. Patrick Holmes; (Rev.) Mark Poorman, C.S.C.; Prof. Donald Pope-Davis; Prof. Katherine Spiess; Prof. John Weber; Dr. Kevin White.

**Observers Present:** Ms. Sandy Barbour and Mr. Bernard Muir (both of the department of athletics); and Ms. Mary Hendrickson (reporter).

**Guest:** Dr. James Moriarity, chief of medicine, Student Health Center.

**1. Call to Order and Prayer:** The chair called the meeting to order at 4:20 P.M. Father Poorman led the group in prayer.

**2. Minutes of the Previous Meeting:** Following the appropriate motion and second, the Board unanimously approved the minutes of its meeting of October 14, 2002.

**3. Announcements:** The chair announced that he has approved a change in the schedule for men's swimming; the November 9 meet that had been tentatively scheduled against the University of Western Ontario has been cancelled. The chair also approved the following captains: Ashlee Warren and Juliet Buckstaff (rowing); Travis Wells, John Souch, Eric Simon, and Steve Clagett (men's lacrosse); Kris Billmaier, Jon-Paul Gagne, and Steve Sollmann (baseball). The chair has approved an additional captain for hockey: John Wroblewski. Finally, the chair approved a slate of candidates for captain of the football team. From that slate, the ultimate captains for the 2002 season will be selected and announced at the Football Banquet on December 6.

**4. Medical Treatment of Student-Athletes at Notre Dame:** Dr. Moriarity, chief of medicine at the Student Health Center, listed three different ways in which medical treatment might be provided to student-athletes at colleges and universities. The first model, the student-health-center model, calls for student-athletes to receive their care at the institution's general health facility as a subset of the general student body. Under the second model, the athletics department hires its own physicians. This model prevails at Indiana University, Michigan State University, and other Big Ten institutions. Under the third

model, physicians in the community treat student-athletes with the blessing of the athletics department. Many smaller schools adopt this model. Some larger schools employ this model for part of their medical treatment for student-athletes by subcontracting with such physicians for football or other specific sports. Notre Dame's approach reflects a hybrid. Medical services for student-athletes primarily emanate from the Student Health Center. Medical clinics take place every day at 5:00 P.M. at athletic sites on campus, with a separate clinic for football. As a result, Notre Dame physicians treat student-athletes from 5:00 P.M. to 7:30 P.M. daily. They also provide game coverage for contact sports and for "non-contact" sports that in fact involve substantial contact. But our medical treatment of student-athletes relies heavily on community physicians. South Bend Orthopaedic Associates has for many years been a "huge partner" in the provision of medical services. The partnership began with Dr. Les Bodnar decades ago. This indispensable aid continues today through the invaluable contributions of, among others, Drs. Willard Yergler, David Bankoff, Frederick Ferlic, Robert Clemency, and Michael Kelbel. Approximately 400 to 450 student-athletes undergo University physical examinations each year. The Bengal Bouts require an additional hundred. These physicals take place in a four-night period each year and require the cooperation of many community physicians. The community physicians who come to our aid are a magnanimous group; many do not take any fees whatever. Indeed, if a student-athlete breaks a leg, for example, sometimes the orthopaedic surgeon will file for insurance, but turn the money back to Notre Dame. Student-athletes are not charged for physical examinations or for the other services of physicians. University physicians, whose primary allegiance is to the Office of Student Affairs, exercise a "fiduciary" responsibility over the training room. Of course, athletic trainers provide the first contact for injury or illness of student-athletes. We have well equipped facilities, including an X-ray machine in the football stadium. We have an MRI machine as well, donated by Lunar Technologies. Besides doing the obvious things, University physicians must exercise responsibility for our training rooms, work with insurance coverage, and educate and treat student-athletes with regard to eating disorders. Finally, University physicians exercise oversight over the approximately 6,000 young athletes in Notre Dame's various summer sports camps. To Professor Bender's question regarding problems unique to female student-athletes, Dr. Moriarity cited "ACL" injuries and certain stress fractures. Gynecological problems receive treatment at the Health Center. Professor Pope-Davis: How many of our physicians are women? Dr. Moriarity: One of the three University full-time physicians is female. Professor Pope-Davis asked how many physicians attend each football game; three, Dr. Moriarity replied, two of whom are orthopaedic specialists. In response to Professor Borkowski's question, Dr. Moriarity stated that the University did not need more physicians. More is not always better. Indeed, care for student-athletes constitutes but a small part of what these physicians do and student-athletes are, of course, students first and athletes second. Moreover, we make a concerted effort not to separate physicians from certain teams; even if we added four more physicians, each physician wants a continuing relationship with a particular team. Also, for sports-psychology problems, like performance anxiety, we do have access to psychologists. Professor Weber: Is the "pro-bono" model used at Notre Dame unique? Dr. Moriarity: Yes; we don't want to charge athletes for physicals or for physical therapy. A lot of what we do is self-contained, so we have less paperwork. Of course, many physicians love to work with student-athletes. At least one university has "auctioned out" the "opportunity" to treat its student-athletes. In reply to Professor Garg's question, Dr. Moriarity observed that the vast majority of student-athletes have their own insurance. If not, they are encouraged to buy University insurance. For surgery that is done locally, the University "picks up"

the deductible charge. Professor Weber asked if our grants-in-aid cover medical insurance for underprivileged athletes. Ms. Barbour responded that student-athletes normally maintain coverage under their parents' policy or pay a premium of about \$800. The neediest student-athletes receive grants and the University can pay out-of-pocket expenses. Professor Berry asked how often each student-athlete receives a physical examination. Dr. Moriarity stated that the NCAA requires only one physical examination for four years of play; Notre Dame elects to do all contact sports every year. Professor Berry: What percentage of the Health Center's activities involve student-athletes? Dr. Moriarity: We do try to take care of student-athletes at training sites. Addressing questions from Professor Bender, Dr. Moriarity stressed the extremely good relationship which Notre Dame has with specialists in town. With the possible exception of dermatology, any medical specialty can usually be accessed within a day. The Health Center is staffed during regular business hours by physicians. A registered nurse is on duty at all other times. Professor Pope-Davis requested information on how confidentiality might be maintained in the psychological care of student-athletes. Dr. Moriarity: I make clear to student-athletes that matters they bring to me in the training room may be shared with trainers or coaches. If they want a private conversation, they should see me at the Health Center. Accordingly, problems of depression or anxiety should be brought to me there. The chair of the Board asked Dr. Moriarity to comment on the duty of physicians to insure that student-athletes do not play when injured. Fortunately, that has never been a problem, Dr. Moriarity stressed. We have tremendous coaches here at Notre Dame; in sixteen years, he has never had a serious argument with a coach over a medical decision that a student-athlete should not play. (Alas, he cannot say the same with regard to the parents of student-athletes). Eating disorders, however, do present a "gray area." A coach may not think this to be a problem. Eating disorders, he emphasized, occur with both male and female student-athletes. One Board member inquired into efforts being made to treat eating disorders. Dr. Moriarity answered that Notre Dame this year added a dietitian dedicated to the nutrition of student-athletes; this addition has been a "very big help." Doctor Moriarity answered in the negative Professor Barrett's question: In our medical treatment of student-athletes, do we fail to do anything that we should do or, conversely, do anything that we should not do? The Chair thanked Dr. Moriarity for his presentation.

**5. Drug Testing:** At this point, Professor Barrett reported on the work of the University Ad Hoc Drug-Testing Committee, on which he serves. Notre Dame's drug-testing policies date back to the time of former director of athletics Gene Corrigan. Our policy operates independently of the NCAA's. In March 2000, outside consultants thoroughly assessed Notre Dame's program. In May 2000 they reported that our procedures met or exceeded those of the NCAA, thus certifying us to be in full compliance. Nonetheless, the report voiced some concerns. First, reporting lines should be changed to make clear that drug testing falls outside the control of the Department of Athletics; second, the role of the drug-testing committee should expand to include drug education; third, the membership of the permanent drug-testing committee should be reconfigured to exclude the director of athletics and to include representation from the Faculty Board on Athletics; and fourth, the program should provide for an annual outside review of drug-testing procedures. In developing its recommendation to the Board, the University Ad Hoc Drug-Testing Committee presented a policy draft to a meeting of Notre Dame head coaches on July 9 and to the Student-Athlete Advisory Council on October 30. Under the policy proposed by the ad hoc committee, drug testing of student-athletes would answer to the University president rather than to the director of athletics, thus increasing the credibility of the program. The

policy calls for mandatory reporting of positive results, with two offenses leading to the “death penalty,” *i.e.*, a permanent disqualification from athletic competition at Notre Dame. As recommended by the outside consultants, a teaching-and-research faculty member of the Board would serve on the permanent drug-testing committee. Due to concerns regarding confidentiality, no student would serve on that committee. The policy’s most significant change: the move towards random testing. Under the policy, twenty student-athletes would undergo testing each week, resulting in the testing of 560 student-athletes per academic year (previously, more than 700 tests had been conducted annually). The policy provides hair testing for illicit drugs and urine testing for steroids. Professor Barrett acknowledged that some concerns had been raised about testing hair samples since, on average, the hair of certain racial groups (due to the coarseness of hair and its rate of growth) allegedly retains drug residue longer than that of other groups. Nonetheless, there remains, even within specific racial groups, a wide range of duration of retention. Moreover, the matter had been submitted to the Office of General Counsel, which concluded that hair testing met Constitutional and other legal concerns. Nonetheless, Professor Pope-Davis remained concerned with regard to possible discrimination in the use of hair testing. In the absence of conclusive information, should we use that device? Professor Barrett noted that hair testing provides significant advantages. First, it is cheaper. Second, securing the sample is dramatically less invasive than administering urine tests. Finally, it is more accurate. Dr. White added that the testing of student-athletes should be consistent with that used in the pre-hire testing of Notre Dame employees. The latter does rely on hair testing. Professor Borkowski urged that the committee provided for by the policy review existing data at least once a year so as to remain on top of the research regarding possible discrimination. That would allow the University to revise its policy as needed. We need not amend our motion to that effect, Professor Borkowski added, so long as we make a statement to the committee. Father Poorman, convinced that the Office of General Counsel had “done its homework” on this point, suggested that the request appear in a letter to the committee, not in a footnote to the procedures. Dr. Cullinan pointed out that Father Malloy could simply require the committee to keep abreast of this issue. Under the policy, student-athletes, as a condition of participation in athletics, would agree to testing and to the release of the information according to the policy’s provisions. A failure by the student-athlete to cooperate would constitute the equivalent of a positive test. So too would the “sabotage” of a test (for example, shaving off all body hair). Professor Barrett said that the policy automatically expands to include any new drugs added by the NCAA to its proscribed list. Any positive result would be reported to the designated representative of the Counseling Center (Dr. Luis Manzo), the student-athlete involved, the director of athletics, the designee of the director of athletics, the parents of the student-athlete and the student-athlete’s coach. Head coaches were added to the notification list at the recommendation of the department of athletics. Because coaches here are held accountable for the behavior of student-athletes and often have the best chance to modify their behavior, the committee ultimately found it appropriate that coaches be informed of all positive tests. Moreover, it seemed unfair that a coach might learn about drug use only after the student-athlete may no longer participate in athletics at Notre Dame. The policy provides for appeals. Student-athletes would be exempt from random testing while undergoing treatment pursuant to the policy’s provisions. The policy provides for an outside audit at least once every three years. Professor Borkowski asked whether the proposal should call for drug education. Professor Barrett replied that all first-year students get such education and that the Department of Athletics provides such education to student-athletes. In any event, the charge to the ad hoc committee comprised only drug testing, not drug education. Professor Berry:

These sanctions apply only to student-athletes' participation in athletics programs? Yes, Professor Barrett responded, but all student-athletes are subject to other University sanctions and, of course, to the civil law. Professor Bender wanted to know the error rate of the proposed testing. Professor Barrett: All positive results will be re-tested by the same lab. The method used for the re-testing, Dr. Moriarity added, carries no chance of error as long as no mishandling of the sample precedes the second test. In response to a question by Professor Bender, Dr. Moriarity emphasized that the testing methodology reliably distinguishes between illicit drugs and medically prescribed drugs. At this point, Professor Barrett moved that the Board recommend that Father Malloy implement, through executive order, the proposed drug-testing policy. Professor Bender seconded that motion. The Board unanimously approved the motion. [See Appendix for the policy ultimately approved by Father Malloy.]

Anticipating Father Malloy's acceptance of the Board's recommendation, the chair noted that the policy calls for the election by the Board of one of its teaching-and-research faculty members to the permanent drug-testing committee. The chair hoped that the election could take place through e-mail in the near future. To promote continuity on the drug-testing committee, the chair suggested the election of a Board member whose current term on the Board began this fall. Regarding one Board member's concern that the election not take place prior to Father Malloy's approval of the proposal, Professor Barrett suggested a provisional election so that drug testing might take place as early as December 2. No drug testing of student-athletes, he emphasized, has yet taken place this academic year.

**6. Report on Notre Dame Football Bowl Possibilities:** The *FBA Manual* provides for periodic reports by the director of athletics to the Board with regard to Notre Dame's prospects of a football Bowl appearance. Dr. White stressed that, with several weeks remaining in the football season, no clear prognosis was possible. The BCS Bowls currently in play for Notre Dame seem to be the Orange, the Sugar and, remotely, the Rose. As an independent, Notre Dame must deal with the Bowls just as if it were a conference. Accordingly, we hosted visits from Bowl officials last August. We also must work with the ABC television network, since it exercises so much power with regard to Bowl selections, which will take place on December 8. If Notre Dame should finish the season with only one loss, it would most likely rank in the top six in the BCS rankings; such a finish would guarantee it a position in a BCS Bowl, most likely the Orange Bowl. Two losses would likely result in an invitation to the Sugar Bowl. With three losses, we would have the requisite number of wins for a BCS appearance, but would likely rank eleventh or twelfth in the BCS lineup and, therefore, would probably not earn an invitation to a BCS Bowl. Professor Borkowski: Do these Bowl possibilities exert too much pressure on our coaches or players? Mr. Muir: They cherish this kind of situation; they are excited about our possibilities. Inevitably, the players do talk about the money at stake in our BCS prospects. The Department of Athletics tells them that it will do all it can under NCAA rules to enhance their experience if they do go to a BCS Bowl.

**7. Report on Preferential Registration for Student-Athletes:** Mr. Holmes, director of academic services for student-athletes, recalled that over the past two years members of the football team have been given preferential registration for the fall semester. This arrangement, urged by team physicians, allowed team members to practice earlier in the afternoon, eat dinner on a more regular basis, and

appear at the study center by 7:00 P.M. This arrangement also has allowed football players to balance their studies better and has occasioned a rise in the team's grade-point average. The Provost has spoken with the "working deans" with regard to extending this preferential-registration arrangement to both men's basketball and women's basketball, and also to football players, in the Spring semester. These three teams comprise the most academically at-risk student-athletes. Mr. Holmes noted that the "working deans" had concerns about affording the policy to "walk-ons" and, in general, about allowing alterations of academic schedules. Under the proposal, however, student-athletes would not be able to modify their schedules without talking to a dean. The proposal would involve 88 students: 64 in football, 13 in men's basketball and 11 in women's basketball. Of these, 30 are in Arts & Letters, 32 are in Business, 2 are in Engineering and 24 are in the First Year of Studies. All 88 have met with an advisor. The feedback so far has been positive. Father Poorman: What happens when practice conflicts with a lab? I worry that practice schedules sway people from certain majors. Concurring, Professor Berry cited the need to learn more about how many students get "pushed out" of particular majors due to the scheduling of classes or labs. Mr. Holmes stated that he knew of only one student in that situation. Professor Barrett added that we need to look at those athletes who chose not to come to Notre Dame; are they "self-selecting out" early? Maybe our departments could show more flexibility in scheduling, perhaps by offering labs in the morning. Professor Garg noted the difficulty of providing a wide selection of times for labs; graduate students help, but they themselves have classes to attend. Ms. Bienko observed that student-athletes won't "self-select out" because of coaches or because of time constraints. Professor Weber suggested that the Office of Academic Services for Student-Athletes provide information on the choice of majors by student-athletes over the last five years, as compared to choices made by the general student population. Professor Fallon observed that both the College of Science and the Program for Liberal Studies have mandatory classes until 3:00 P.M. on Tuesdays and Thursdays; would this schedule eliminate some majors for student-athletes? The chair thanked Mr. Holmes for his presentation.

**8. Big East Golf Tournament:** Mr. Muir provided an "update" regarding re-scheduling of the Big East Golf Tournament originally set to be held at Notre Dame during Holy Week of 2003. At the urging of the Department of Athletics, the Big East Conference has agreed to change the schedule. Under the revision, practice rounds would be held on Easter Sunday, with each participating institution having the option to avoid practice rounds on Easter morning. Thirty-six holes would then be played on the Monday following Easter and eighteen on the Tuesday. The chair thanked the Department of Athletics for accommodating the concerns of the Board in this matter.

**9. Adjournment:** The chair adjourned the meeting at 6:06 P.M.

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## APPENDIX

### Drug Testing Program for Student-Athletes University of Notre Dame

#### Introduction

In the University of Notre Dame's *Statement of Principles for Intercollegiate Athletics*, Notre Dame dedicates itself to offering an outstanding education to its student-athletes. As a Catholic university, Notre Dame embraces Christian values and principles that both call student-athletes to personal integrity and responsibility and challenge them to develop fully their minds, bodies and souls. In addition, Notre Dame commits itself to the unquestioned integrity of its athletics programs.

Our aspiration for a drug-free environment and our belief that a student-athlete can compete successfully in such an environment stand as the cornerstone of Notre Dame's Drug Testing Program for Student-Athletes ("the Program"). Given the harm that illicit drug use causes and the pressure on student-athletes to use "performance enhancing" drugs, the University's efforts in drug education and drug testing strive to safeguard the health, safety, and welfare of the student-athlete. As a starting point, Notre Dame believes that drug-related education merits particular emphasis. Through education, the University strives to alert student-athletes and coaches to the potential harm arising from "performance enhancing" substances, "socially used" drugs, and alcohol abuse. Drug testing, and the sanctions that result from a positive test, supplement education efforts because studies show that education alone often does not deter drug abuse. Under this Program, all student-athletes remain subject to regular, random, and unannounced drug testing pursuant to the procedures that follow.

Apart from Notre Dame's drug education efforts and this Program, the National Collegiate Athletics Association (NCAA) administers its own drug testing program under a separate protocol. As a member of the NCAA, Notre Dame participates in, and seeks to cooperate fully with, that program. The NCAA program mandates separate testing from that described in this document, both during the season and in tournament and post-season competitions. The NCAA program also screens for a broader range of performance enhancing drugs and imposes different sanctions. This Program, therefore, functions independently from, but works in conjunction with, the NCAA program.

The policies and sanctions of the Drug Testing Program apply only within the Program. However, student-athletes do remain subject to civil laws and University and Department of Athletics policies set forth in both *Du Lac* and the *Student-Athlete Handbook*. In particular, both the Office of Residence Life and Housing and the Department of Athletics reserve the right to impose sanctions for rule violations involving the possession, use, sale, or other transfer of banned substances, separate from and more severe than, the sanctions that this Program establishes.

The procedures that follow strive to address, identify, and treat student-athletes' problems and

concerns surrounding drug abuse; to inform and educate student-athletes and others associated with athletic teams about drugs and the effects of their use and abuse; to seek to maintain “fair play” in intercollegiate athletics by Notre Dame’s student-athletes; and to safeguard the University’s integrity.

### **I. The Committee on the Drug Testing of Student-Athletes**

The Committee on the Drug Testing of Student-Athletes (the “Committee”) reports to the Office of the President and shall consist of five members. The President shall appoint three members: one from the Office of the President, one from the Counseling Center, and one from among the physicians at the Student Health Center. The Director of Athletics shall appoint one member from among the administrators in the Department of Athletics. The Faculty Board on Athletics shall designate one member from among the appointed or elected members of the teaching and research faculty on that body. The President designates the chair of the Committee (the “Chair”) on an annual basis.

- B. Members of the Committee will be appointed for terms of three years. If a member no longer holds the position that qualified the member for appointment, the member's term ends upon leaving the position. The President may allow a member to serve one or more additional terms.
- B. Upon the expiration of their terms, the members appointed from the Counseling Center and from among the physicians at the Student Health Center shall nominate their successors. Any individual so nominated, however, shall become a member only after approval by the President.
- C. The President, the Director of Athletics, or the Faculty Board on Athletics may, at their sole discretion, remove or replace temporarily a member of the Committee they appointed. They must appoint an individual to replace the departing member and give written notice to the new member, the departing member and other members of the Committee.

### **II. Definition and Classification of Prohibited Drugs**

This Program applies to the following categories of drugs (sometimes referred to collectively as “banned substances”) that threaten the health or safety of student-athletes or fair competition among student-athletes. Consult the current NCAA banned drug list for the names of these substances at: < [http://ncaa.org/sports\\_sciences/drugtesting/banned\\_list.html](http://ncaa.org/sports_sciences/drugtesting/banned_list.html) >.

- A. **Illicit Drugs:** These drugs, often known as street drugs, pose a threat to the health or safety of individuals using them.
- B. **Performance Enhancing Drugs:** These drugs, although usually legal under civil law, violate NCAA or Olympic rules. When taken in excessive amounts, they may give an advantage during competition by delaying fatigue. During drug testing, student-athletes must list any medications containing these compounds. Such a requirement seeks to prevent use of these

drugs and to educate student-athletes that detection of these drugs during an NCAA or IOC rule-governed event may result in disqualification and suspension.

- C. Anabolic Steroids: These substances, which include growth hormones, promote muscle growth in student-athletes who are concurrently weight training, when taken internally by mouth or injected by needle.
- D. Masking Agents: These agents, when taken internally or deposited in specimens, disguise or prevent the detection of banned substances.

### **III. Conduct of Drug Testing**

- A. Prior to the beginning of the academic year, the Committee shall identify the following:
  - 1. A member of the Committee to serve as the liaison between the Committee and the drug testing laboratories (the “Liaison”).
  - 2. One or more persons to administer the technical aspects of the collection process (the “Technical Administrator(s)”) pursuant to the procedures that the Committee may adopt and amend from time to time.
  - 3. A designee of the Director of Athletics to receive notification when a student-athlete incurs a positive result (the “Designee”).
  - 4. A representative of the University Counseling Center to convey drug testing results to student-athletes and to coordinate drug evaluations (the “Designated Representative”).
  - 5. One or more laboratories to conduct drug testing on the samples collected under this Program (the “Laboratory” or “Laboratories”).
- B. This Program will utilize the testing of hair or urine samples.
- C. This Program covers all varsity student-athletes.
- D. Upon final approval of this Program or at the beginning of each academic year or at the time of certification, every student-athlete will sign a form (“the Consent Form”), giving consent to drug testing and authorizing the laboratory to release the results to any person authorized by the Program to receive or review such results, including the student-athlete’s parents and Notre Dame employees or agents designated by the President or the Director of Athletics as having a need to know the results.

#### **IV. Procedures for Hair Testing**

This Program uses hair testing as the primary method for detecting illicit drug abuse by student-athletes. The following procedures will be used for testing:

- A. Selection of student-athletes for hair testing will utilize a random selection process conducted by the Institute for the Study of Contemporary Society or another entity selected by the Committee.
- B. Selected student-athletes will be notified of their selection via e-mail and must report to the designated test site within a two-week period. They must present their student identification card to the Technical Administrator, sign their name, and provide their social security number.
- C. The Technical Administrator or a designee at the test-site will cut an appropriate length and quantity of hair, place the sample in a tamper proof container, and transport it under appropriate protocols to the designated laboratory for analysis. The Laboratory will use gas chromatography-mass spectroscopy or alternate testing methods approved by the Committee to confirm a positive test.

#### **V. Procedures for Urine Testing**

The detection of anabolic steroid use by student-athletes requires urine testing. The following procedures will be used for testing:

- A. Selection of student-athletes for anabolic steroid testing may utilize random selection of student-athletes or team selection protocols as designated by the Committee.
- B. Selected student-athletes will be notified of their selection via e-mail and must report to the designated test site at an appointed time. They must present their student identification card to the Technical Administrator, sign their name, and provide their social security number.
- C. A container is given to the student-athlete; to ensure that the specimen remains unadulterated, a witness observes the collection of the urine specimen.
- D. The student-athlete personally takes the specimen container to the check-in station and seals the specimen with evidence tape to protect the specimen physically from any and all possible contamination that may call into question the validity of the testing results. The container is labeled with the student-athlete's initials and a coded identification number.
- E. The test-site coordinator transports the sealed urine container under lock to the Laboratory for splitting of the sample and testing of the specimen. The Laboratory will use gas chromatography-mass spectroscopy or alternate testing methods approved by the Committee

to confirm a positive test.

## **VI. Definition of Positive Results**

A student-athlete incurs a positive result under any of the following circumstances:

- A. The student-athlete tests positive for the use of an illicit drug, performance enhancing drug, or anabolic steroid as a result of a drug test by the University or the NCAA.
- B. The student-athlete refuses or fails to appear for a drug test or fails to cooperate with a drug test conducted by the University or the NCAA.
- C. A drug test uncovers a masking agent in the student-athlete's urine.
- D. The student-athlete attempts to sabotage the collection process, such as by arranging or performing total body shaving of hair after notification of anticipated testing.

## **VII. Notification of Positive Results**

In the case of a positive result:

- A. The Laboratory reports a positive test to the Liaison.
- B. The Liaison reviews the list of drugs the student-athlete is taking to determine if the student-athlete was appropriately taking prescribed medication that rendered the test positive. If the Liaison determines that the positive test is the result of prescription medicine, the Liaison may void the result and notify the Committee of such action.
- C. If no such determination is made, in cases of the first positive result for a student-athlete (a "first positive"), the Liaison notifies the Designated Representative, who in turn notifies the student-athlete. In addition, the Liaison notifies, in writing the Chair of the Committee, who in turn notifies the Director of Athletics and the Designee about the identity of the student-athlete and the nature of the positive result.
- D. In cases of the second positive result for a student-athlete (a "second positive"), the Liaison convenes the Committee to notify its members about the identity of the student-athlete and the details of the positive results, including the results of the first positive so that the Committee can review the case. If the Committee confirms the second positive, the Chair notifies, in writing, the student-athlete, the Director of Athletics, the Designee, and the President about the identity of the student-athlete and the nature of the positive results.

- E. The Director of Athletics or the Designee will meet with the student-athlete after every positive result. Consistent with the University's philosophy to provide information to a student's parents or guardian in extraordinary circumstances involving threats to health or potentially serious disciplinary action, the Director of Athletics or the Designee notifies the student-athlete's parents or guardians about every positive result. The Director of Athletics may notify other individuals pursuant to the language of the Consent Form.

### **VIII. Appeals**

A student-athlete may request review of a positive result by setting forth in writing all of the reasons for the appeal to the Chair within three business days after notification of the positive result. Decisions of the Committee are based on a review of the written file and are final. At its discretion, the Committee may require a student-athlete to undergo a drug test using a hair or urine sample or both, prior to making its decision.

### **IX. Sanctions**

Upon the first positive, a student-athlete must undergo a drug evaluation administered under the direction of the Designated Representative and must comply with all mandatory treatment recommendations that may arise from that evaluation. The Designated Representative will provide in writing all mandatory treatment recommendations to the student-athlete and will send a copy of those recommendations to the Director of Athletics and the Designee. The Designated Representative will report to the Committee any failure to cooperate with the evaluation or to comply with mandatory treatment recommendations. As determined by the Committee, the failure of the student-athlete, either to cooperate in the drug evaluation or to follow all mandatory treatment recommendations, may be treated as a second positive.

- A. A student-athlete with a first positive that involves the use of anabolic steroids or a masking agent may not compete, practice, or participate in formal conditioning programs until such time as repeat testing confirms that the steroid or masking agent has exited the body.
- B. If the Designated Representative deems a student-athlete with a first positive sufficiently impaired, dangerous to self or others, or needing formal drug treatment, the Designated Representative may bar the student-athlete from competition, practice, and formal conditioning programs until after psychological and medical clearance. As part of mandatory treatment, the Designated Representative may require a student-athlete to undergo more frequent drug testing.
- C. Random testing under Parts IV and V will not apply to a student-athlete in treatment for a first positive involving illicit or performance enhancing drugs. After completing treatment or after three months, whichever occurs sooner, the student-athlete again becomes subject to random testing.

- D. A student-athlete with a second positive is permanently banned from competing in varsity athletics at Notre Dame. The Director of Athletics or the Designee shall notify the student-athlete, the coach, and the parents or guardian of the ban.

## **X. Committee Responsibilities**

- A. The Committee shall meet at least twice annually.
  - 1. At an organizational meeting, which shall occur upon final approval of this Program or before the first day of classes each fall, the Committee shall identify the Liaison, the Technical Administrators, the Designee, the Designated Representative, and the Laboratories.
  - 2. After the last day of classes each spring, but before June 1, the Committee shall meet to approve a report to the President and the Director of Athletics that provides the number of student-athletes tested during the past year, the test results, and a statement that describes the circumstances underlying any positive results. The report will include the minutes of the Committee's meetings that year.
- B. In addition, the Committee will meet as needed to review positive results, consider appeals, review policies and procedures, and recommend any necessary changes in this Program to the President.
- C. The Student Health Center keeps the records of this Program for at least five years.
- D. At least once every three years, the Committee's annual report to the President and the Director of Athletics will include the findings of an external audit of the University's policies and procedures conducted by a knowledgeable and qualified sports medicine physician unaffiliated with the University.

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