

NJSIAA



1161 Route 130, P.O. Box 487, Robbinsville, NJ 08691 609-259-2776 609-259-3047-Fax

NJSIAA STEROID TESTING POLICY CONSENT TO RANDOM TESTING

In Executive Order 72, issued December 20, 2005, Governor Richard Codey directed the New Jersey Department of Education to work in conjunction with the New Jersey State Interscholastic Athletic Association (NJSIAA) to develop and implement a program of random testing for steroids, of teams and individuals qualifying for championship games.

Beginning in the Fall, 2006 sports season, any student-athlete who possesses, distributes, ingests or otherwise uses any of the banned substances on the attached page, without written prescription by a fully-licensed physician, as recognized by the American Medical Association, to treat a medical condition, violates the NJSIAA's sportsmanship rule, and is subject to NJSIAA penalties, including ineligibility from competition. The NJSIAA will test certain randomly selected individuals and teams that qualify for a state championship tournament or state championship competition for banned substances. The results of all tests shall be considered confidential and shall only be disclosed to the student, his or her parents and his or her school. No student may participate in NJSIAA competition unless the student and the student's parent/guardian consent to random testing.

By signing below, we consent to random testing in accordance with the NJSIAA steroid testing policy. We understand that, if the student or the student's team qualifies for a state championship tournament or state championship competition, the student may be subject to testing for banned substances.

SPORT: _____

Signature of student-Athlete

Print Student-Athlete's Name Date

Signature of parent/guardian

Print Parent/Guardian's Name Date

June 8, 2006

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NJSIAA Banned-Drug Classes 2006 - 2007

The term "related compounds" comprises substances that are included in the class by their pharmacological action and/or chemical structure. No substance belonging to the prohibited class may be used, regardless of whether it is specifically listed as an example.

Many nutritional/dietary supplements contain NJSIAA banned substances. In addition, the U. S. Food and Drug Administration (FDA) does not strictly regulate the supplement industry; therefore purity and safety of nutritional dietary supplements cannot be guaranteed. Impure supplements may lead to a positive NJSIAA drug test. **The use of supplements is at the student-athlete's own risk.** Student-athletes should contact their physician or athletic trainer for further information.

The following is a list of banned-drug classes, with examples of banned substances under each class:

(a) Stimulants (b) Anabolic Agents (c) Diuretics (d) Peptide Hormones & Analogues:

amiphenazole **anabolic steroids** acetazolamide corticotrophin (ACTH)
amphetamine androstenediol bendroflumethiazide human chorionic gonadotrophin (hCG)
bemigride androstenedione benzhiazine leutenizing hormone (LH)
benzphetamine boldenone bumetanide growth hormone (HGH, somatotrophin)
bromantan clostebol chlorothiazide insulin like growth hormone (IGF-1)
caffeine1 (guarana) dehydrochlormethyl- chlorthalidone
chlorphentermine testosterone ethacrynic acid **All the respective releasing factors**
cocaine dehydroepiandro- flumethiazide **of the above-mentioned substances**
cropropamide sterone (DHEA) furosemide **also are banned:**
crothetamide dihydrotestosterone (DHT) hydrochlorothiazide erythropoietin (EPO)
diethylpropion dromostanolone hydroflumenthiazide darbypoetin
dimethylamphetamine epitrenbolone methyclothiazide sermorelin
doxapram fluoxymesterone metolazone
ephedrine gestrinone polythiazide
(ephedra, ma huang) mesterolone quinethazone
ethamivan methandienone spironolactone
ethylamphetamine methenolone triamterene
fencamfamine trichlormethiazide
meclofenoxate **and related compounds**
methamphetamine methyltestosterone
methylenedioxyamphetamine nandrolone
(MDMA, ecstasy) norandrostenediol
methylphenidate norandrostenedione
nikethamide norethandrolone **(e) Definitions of positive depends on the following:**
pemoline oxandrolone 1 for caffeine – if the concentration in urine exceeds 15 micrograms/ml
pentetrazol oxymesterone
phendimetrazine oxymetholone 2 for testosterone – if administration of testosterone or use of any other
phenmetrazine pregnelone manipulation has the result of increasing the ratio of the total
phentermine stanozolol concentration of testosterone to that of epitestosterone in the urine
phenylpropanolamine (ppa) testosterone2 of greater than 6:1, unless there is evidence that this ratio is due to a
microtoxine tetrahydrogestrinone physiological or pathological condition.
pipradol (THG)
prolintane trenbolone
strychnine **and related compounds**
synephrine **other anabolic agents**
(citrus aurantium, zhi shi, bitter clenbuterol
orange)
and related compounds

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