



Rugby Australia Semi-Professional Medical Policy

Effective from 6 July 2018

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Table of Contents

ARTICLE	TITLE	PAGE
Article 1	Position statement	3
Article 2	Objectives – why does this Policy exist?	3
Article 3	Application – who does this Policy apply to?	3
Article 4	Obligations – Players	3
Article 5	Obligations (general) – Semi-Professional Club	4
Article 6	Obligations (general) – Rugby AU	4
Article 7	Core medical and health staff within an SPC	5
Article 8	Medical decision making	6
Article 9	Medical Procedures	6
Article 10	Medications	7
Article 11	Sourcing Medications	8
Article 12	Needles and Injections	8
Article 13	General medical and cardiac screening	9
Article 14	Approval for medical research and Medical Procedures	11
Article 15	Keeping medical records	11
Article 16	Storage and security	12
Article 17	Travel and Medications	12
Article 18	NRC Club Doctor travelling with Team	13
Article 19	Induction and education protocol	14
Article 20	Reporting under this Policy	14
Article 21	Confidentiality	14
Article 22	Amendment and Interpretation	15
Article 23	Definitions	15
Schedule 1	Player Obligations	1919
Schedule 2	Core medical and health staff	22
Schedule 3	Painkiller Medication Guidelines	26
Schedule 4	Anti-Inflammatory Medication Guidelines	28
Schedule 5	Sleeping Medication Guidelines	29

Rugby AU Semi-Professional Medical Policy

1. Position statement

- 1.1. Rugby Australia Ltd (**Rugby AU**) acknowledges that there is a wide range of Medications, Medical Procedures and medical practices that may be required for the effective treatment of illness or injury in Rugby.
- 1.2. It is in the interests of all Players and Semi-Professional Clubs (**SPCs**) to have a safe and consistent approach to the administration of all Medications and Medical Procedures to Players.
- 1.3. Rugby AU acknowledges the importance of protecting and maintaining the health and well-being of Players.
- 1.4. Rugby AU acknowledges that there is a core group of medical and health staff at an SPC who deliver an appropriate level of medical care to Players.
- 1.5. All medical and health staff within an SPC must act ethically and make decisions based on maintaining and protecting the health and well-being of Players.

2. Objectives – why does this Policy exist?

- 2.1. This Policy has been developed by Rugby AU with the objective of:
 - 2.1.1. protecting the health and well-being, and encouraging safe and healthy practices, for all Participants;
 - 2.1.2. minimising the risk of Medications or Medical Procedures leading to an inadvertent 'doping' offence, or a Player's health or performance being compromised;
 - 2.1.3. establishing protocols for providing and documenting: (i) Medications; (ii) injury and illness that may impact the Player's ability to be selected, train or play; and (iii) Medical Procedures and for storing Medications and equipment, to be followed by Players, SPCs and persons within SPCs, that will ensure a safe and consistent approach to Players' health and well-being, whilst maintaining appropriate levels of confidentiality; and
 - 2.1.4. clearly setting out the responsibilities and minimum standards and qualifications of the core members of the medical and health staff within an SPC.

3. Application – who does this Policy apply to?

- 3.1. All Players and SPCs must comply with this Policy.
- 3.2. This Policy is effective on and from 6 July 2018 and applies for the duration of the Competition.

4. Obligations – Players

- 4.1. All Players:
 - 4.1.1. Must comply with Schedule 1 (*Player Obligations*); and
 - 4.1.2. acknowledge that this Policy is a Rugby AU By-Law for the purposes of their Player Contract and non-compliance with the Policy may constitute a breach of the:
 - a) Player Contract; and/or
 - b) Rugby AU Code of Conduct (as amended and replaced from time to time), following which sanctions may apply, including fines, suspension or termination of their Player Contract.

5. Obligations (general) – SPC

Rugby AU Semi-Professional Medical Policy

5.1. SPCs must:

- 5.1.1. adopt, implement and comply with this Policy;
- 5.1.2. only provide or permit the provision of any Medication or Medical Procedure to the Players in accordance with this Policy;
- 5.1.3. record, in accordance with this Policy, details of:
 - a) any Medication, illness or injury that may impact a Player's ability to be selected, train or play; and
 - b) any Medical Procedure provided, administered or conducted.
- 5.1.4. ensure that all members of the SPC Management, or any other person engaged by the SPC, act ethically and make decisions based on maintaining and protecting the health and well-being of Players and do not cause or induce the SPC or a Player to fail to comply with this Policy;
- 5.1.5. ensure that any Doctor recommended to a Player, or to whom a Player is referred by the SPC Doctor, understands both the Rugby AU's Group Medical Policies and that the Player must comply with Rugby AU's Group Medical Policies;
- 5.1.6. ensure that each of the Players and members of SPC Management have been provided with, and acknowledge the application of, this Policy;
- 5.1.7. ensure that the SPC and the SPC Management comply with this Policy and discharge their obligations under this Policy in a discreet and confidential manner in accordance with Article 21 (*Confidentiality*);
- 5.1.8. in respect of the National Rugby Championship, ensure the NRC Club Doctor (or another Doctor appointed by the NRC Club Doctor) accompanies the NRC Team at all times when they are playing at a location that is not their home ground.
- 5.1.9. stay informed of any changes to this Policy (where Rugby AU notifies the SPC of any changes to this Policy); and
- 5.1.10. ensure that all medical issues relating to a Professional Player playing for an SPC other than a Club which is affiliated to the PRB the Player is contracted to, are communicated directly and on a regular basis to that Player's PRB Team Doctor.

6. Obligations (general) – Rugby AU

6.1. Rugby AU must:

- 6.1.1. adopt, implement and comply with this Policy;
- 6.1.2. ensure this Policy is made available to those bound by this Policy;
- 6.1.3. require that each Player and member of SPC Management attends appropriate education programs in relation to this Policy, including prior to the Policy becoming effective;
- 6.1.4. ensure that each Player and SPC is notified of any change to this Policy;
- 6.1.5. ensure that the information recorded on Smartabase (or such other centrally documented system as may be notified by Rugby AU) pursuant to this Policy, is subject to strict and appropriate access controls in accordance with Australian privacy legislation;
- 6.1.6. discharge Rugby AU's obligations under this Policy in a discreet and confidential manner in accordance with Article 21 (*Confidentiality*);

Rugby AU Semi-Professional Medical Policy

- 6.1.7. develop and implement appropriate education programs and initiatives for Rugby in relation to the key messages of this Policy;
- 6.1.8. consider and review the compliance of SPCs and Players with this Policy and, if considered appropriate, conduct compliance audits of SPCs;
- 6.1.9. provide reasonable access to any independent person appointed as an auditor by the Rugby AU CEO to audit Rugby AU's compliance with this Policy; and
- 6.1.10. remain committed to ongoing research and obtaining expert advice from recognised regulatory bodies in relation to Medication use and Medical Procedures used for high performance athletes.

7. Core medical and health staff within an SPC

7.1. Rugby AU:

- 7.1.1. acknowledges that an SPC may engage a range of health practitioners to assist with maintaining Player health and well-being, but may also face limitations in the number of health practitioners it is able to engage;
- 7.1.2. acknowledges that there is a core group of persons who work in an SPC's medical and health staff, and are responsible for delivering an appropriate level of medical care to its Players which must comply with Rugby AU's Group Medical Policies;
- 7.1.3. will engage a person to be the Rugby AU Chief Medical Officer who is responsible for the development, implementation monitoring and management of medical policies for Rugby AU, Clubs and Rugby in Australia, who has achieved the qualifications required by Article 1.2 of Schedule 2 (*Core medical and health staff*); and

7.2. NRC Clubs will:

- 7.2.1. engage different persons to fill each of the following roles (the duties and responsibilities of each role are described in Schedule 2 (*Core medical and health staff*)):
 - Match Day Staff**
 - a) Match Day Medical Staff;
 - Team Staff**
 - b) SPC Doctor;
 - c) Head Physiotherapist; and
- 7.2.2. ensure that each person the Club engages under Article 7.2.1 meets the minimum qualifications and continual professional education requirements set out in Schedule 2 (*Core medical and health staff*).

7.3. Super W Clubs will:

- 7.3.1. engage different persons to fill each of the following roles (the duties and responsibilities of each role are described in Schedule 2 (*Core medical and health staff*)):
 - Match Day Staff**
 - a) Match Day Doctor
 - Team Staff**
 - b) SPC Doctor
 - c) Head Physiotherapist; and

Rugby AU Semi-Professional Medical Policy

- 7.3.2. ensure that each person the SPC engages under Article 7.3.1 meets the minimum qualifications and continual professional education requirements set out in Schedule 2 (*Core medical and health staff*).

8. Medical decision making

8.1. Medical decisions in respect of Players within an SPC

- 8.1.1. SPCs will ensure that medical decisions made by or within that organisation are made according to the following guidelines:
- a) if there is any difference of opinion between members of the SPC Medical Staff or other health professionals within the SPC, regarding a Player's health or medical condition, or the appropriate Medical Procedure for that Player, the SPC Doctor has the final decision, and if they are not available, the Head Physiotherapist has the final decision.;
 - b) the SPC Doctor is responsible for making the final decision in relation to the fitness of their Player to play or train (even if the SPC has engaged a person to co-ordinate or facilitate Medical Procedures and provide information to Players), and if they are not available, then the decision will be made by the Head Physiotherapist;
 - c) the NRC Club Doctor is responsible for making the final decision in relation to the fitness of their Player to remain on the field in a game situation; and
 - d) the Match Day Doctor is responsible for the final decision in relation to the fitness of a Super W Player to remain on the field in a game situation.

8.2. Medical decisions in respect of Professional Players

- 8.2.1. Outside of game situations, all medical decisions with respect to Professional Players playing in SPCs (other than those which are affiliated to the Player's contracted PRB) must be made by the Player's SPC Doctor in consultation with the respective PRB Team Doctor.
- 8.2.2. During the Competition, the SPC Doctors and PRB Team Doctors will work collaboratively in relation to all issues relating to the welfare of the respective Professional Player, including circumstances where there is a difference of medical opinion.
- 8.2.3. Subject to Article 8.2.1, in the event of a difference of opinion between the SPC Doctor and PRB Team the PRB Team Doctor will have the final decision.
- 8.2.4. The Rugby AU Medical Policy continues to operate with respect to the process by which medical assessments and interventions are conducted by Rugby AU and PRB Teams in respect of a PONI.

9. Medical Procedures

9.1. SPCs must:

- 9.1.1. not permit any Medical Procedure (including for example, blood tests, intravenous procedures, scans, hyperbaric therapy or overseas treatments) that has not been approved in advance by the SPC Doctor (and where the Player is a Professional Player, approved by the PRB Team Doctor) unless the therapy is a Medical Emergency and prior approval by the SPC Doctor is not possible or not practicable;
- 9.1.2. only permit the SPC Doctor to approve the following Approved Medical Procedures:
- a) provision of standard medications in accordance with the WADA Code;
 - b) standard physiotherapy;

Rugby AU Semi-Professional Medical Policy

- c) standard physical therapies including the use of appliances such as strapping, ice and heat packs;
- d) specialist physiotherapy (Australian Physiotherapy Association approved);
- e) dentistry and dental procedures;
- f) consultation with a Doctor;
- g) psychology (practitioners registered with Psychology Board of Australia);
- h) physical recovery and conditioning sessions;
- i) standard exercise physiologist;
- j) pilates;
- k) yoga;
- l) sprint training;
- m) altitude training, including when undertaken overseas;
- n) massage therapy;
- o) podiatry;
- p) orthotics;
- q) dry needling;
- r) acupuncture;
- s) phonophoresis;
- t) vaccinations against specific infectious diseases;
- u) surgery to treat a documented medical condition, illness or injury;
- v) hypoxic treatment;
- w) iontophoresis;
- x) extracorporeal shock wave therapy;
- y) any standard Medical Investigation conducted by the SPC Doctor to investigate a documented or suspected medical condition, illness or injury (such as a blood or pathology tests, x-ray, MRI, CT scan, diagnostic ultrasound, nuclear medicine tests, vascular studies and echocardiography);
- z) subject to Article 5.1.5, any Medical Procedure or Investigation prescribed or ordered by a Doctor who is a specialist, where the Player has been referred to that specialist by the SPC Doctor; and
- aa) any Medical Procedure approved under Article 9.1.3;

9.1.3. only permit the SPC Doctor to approve a Medical Procedure that is not an Approved Medical Procedure, if the SPC Doctor has first received written approval to do so from the Rugby AU Chief Medical Officer (and, if the Player is a Professional Player, the SPC Doctor has also received approval from the PRB Team Doctor). As part of the approval process, the Rugby AU Chief Medical Officer will ensure that a proper and ethical process is followed which may include documentation of the potential benefits and adverse effects of the procedure; a signed consent form from the Player; and an independent medical opinion by an appropriate medical specialist independent of the SPC; and

9.1.4. ensure that after any Medical Procedure, all relevant details of the Medical Procedure are recorded by the SPC Doctor on Smartabase (or such other centrally documented system as may be notified by Rugby AU) pursuant to this policy, and if relating to a Professional Player communicated immediately to the PRB Team Doctor, as soon as practicable.

10. Medications

10.1. Clubs will:

- 10.1.1. only provide Over-the-Counter Medication through the SPC Doctor or a member of the Team Medical Staff nominated by, and acting under the direction of, the SPC Doctor;
- 10.1.2. ensure that, the only persons who are permitted to provide any of the Players with Prescription Medication is a Club Doctor or an Approved Doctor recommended by the SPC;
- 10.1.3. ensure that any painkiller Medication provided to any of the Players is provided in accordance with the Painkiller Medication Guidelines in Schedule 3 (*Painkiller Medication Guidelines*);

Rugby AU Semi-Professional Medical Policy

- 10.1.4. ensure that any Anti-Inflammatory provided to any of the Players is provided in accordance with the Anti-Inflammatory Guidelines in Schedule 4 (*Anti-Inflammatory Guidelines*);
- 10.1.5. ensure that any Sleeping Medication provided to any of the Players is provided in accordance with the Sleeping Medication Guidelines in Schedule 5 (*Sleeping Medication Guidelines*);
- 10.1.6. place bright alert labels on any Medication that is subject to a TUE before providing that Medication to any of the Players and give that Player written instructions regarding the appropriate use of that Medication, in order to avoid the possibility of a violation under the Rugby AU Anti-Doping Code;
- 10.1.7. ensure that before any Over-the-Counter Medication is provided to Players by a member of the SPC Medical Staff nominated by, and acting under the direction of, the SPC Doctor, and in doing so, will ensure:
 - a) that the member of SPC Medical Staff has examined the Player and taken basic medical observations including, as applicable, resting pulse rate, respiratory rate and temperature;
 - b) the Player does not have a fever; and
 - c) the Player does not have any known allergies that would prevent the Medication being provided;
- 10.1.8. ensure that after any Medications are provided to Players by anyone other than an SPC Doctor, all necessary details required are recorded on Smartabase (or such other centrally documented system as may be notified by Rugby AU) pursuant to this policy and, (where the Player is a Professional Player), communicated to the PRB Team Doctor as soon as practicable; and
- 10.1.9. ensure that no Player is provided with any of the following (and if there is any doubt regarding the status of a peptide, approval from the Rugby AU Chief Medical Officer must be sought):
 - a) any substance on the World Anti-Doping Agency Prohibited List; and
 - b) Peptides GHRP-2, GHRP-6, CJC 1295, AOD 9604, Hexarelin, Ipamorelin, Sermorelin and related substances,

(each a **Prohibited Medication**).

11. Sourcing Medications

- 11.1. Rugby AU acknowledges the risks associated with Players using Medications that have been sourced (or whose ingredients have been sourced) from unknown or potentially disreputable sources.
- 11.2. SPCs will:
 - 11.2.1. only provide the Players, or permit the Players to use, Medications that have been approved by the Therapeutic Goods Administration (TGA) (or if travelling in another country, the relevant authority in that country) and which are sourced from a reputable pharmacy; and
 - 11.2.2. not provide the Players, or permit the Players to use, Medications that have been prepared in a Compounding Pharmacy or by a Compounding Pharmacist unless the SPC Doctor receives written approval to do so from the Rugby AU Chief Medical Officer.

12. Needles and Injections

- 12.1. Rugby AU will:
 - 12.1.1. ensure that the Rugby AU Chief Medical Officer responds to all applications sent to them by an SPC Doctor for the registration of a Player on the Rugby AU Self-Injection Register; and

Rugby AU Semi-Professional Medical Policy

12.1.2. ensure that the Rugby AU Self-Injection Register is kept up-to-date and is accessible by each SPC Doctor.

12.2. SPCs will:

- 12.2.1. ensure that any injection of a substance complies with Articles 26 to 30 of Schedule 1 (*Player Obligations*);
- 12.2.2. ensure that, before any injection of a substance is administered by a Doctor or Nurse, that the Doctor or Nurse checks:
- a) the correct Player is receiving the Medication;
 - b) the correct Medication is being administered;
 - c) the correct dose is being administered;
 - d) the correct route of administration is being utilised; and
 - e) the Medication has not expired;
- 12.2.3. ensure that any Doctor or Nurse who performs an injection, complies with, or notifies the SPC Doctor (and where the Player is a Professional Player, notifies the PRB Team Doctor) for the purposes of complying with Article 15 (*Keeping medical records*);
- 12.2.4. ensure that any written confirmation from the SPC Doctor to a Player, confirming that Player's registration on the Rugby AU Self-Injection register, is not provided unless and until the application to which the confirmation relates has been approved in writing by the Rugby AU Chief Medical Officer;
- 12.2.5. ensure that the SPC has an appropriate amount of injection equipment on hand at all times to meet the reasonably anticipated medical requirements of the Players;
- 12.2.6. ensure that all injectable substances and injecting equipment are stored in a safe and secure environment, and access to which is exclusively controlled by the SPC Doctor (except for substances and equipment used by a Player registered on the Rugby AU Self-Injection List); and
- 12.2.7. only access the information on the Rugby AU Self-Injection Register through the SPC Doctor.

13. General medical and cardiac screening

13.1. Rugby AU acknowledges that:

- 13.1.1. it is important to conduct medical screening on each Player in order to identify any undiagnosed medical issues and ensure any future Medical Procedure or Medication that is provided to a Player, is provided in the context of their full and accurate medical history;
- 13.1.2. there is an increasing awareness of sudden cardiac death in young people, especially in sport, with some studies indicating an increased risk faced by competitive athletes compared with non-athletes;
- 13.1.3. the provisions of this Policy relating to cardiac screening are based on the recommendations of World Rugby;
- 13.1.4. each Professional Player competing in a Competition has already completed a general medical and cardiac screening with their respective Professional Rugby Body.

13.2. SPCs will:

General medical screening

Rugby AU Semi-Professional Medical Policy

- 13.2.1. be provided with the relevant Professional Player general medical screening information prior to the commencement of the Competition;
- 13.2.2. in respect of the National Rugby Championship, ensure that each Non-Professional Player has conducted a general medical screening conducted by the NRC Club Doctor prior to playing a match each season, which must include:
- taking a general medical history of the Player, including injuries and Medical Procedures undertaken;
 - taking a detailed description of medications and supplements (as prescribed in the NRC Sports Supplements Policy) taken by the Player;
 - conducting a physical examination of the Player;
 - advising Players of the need to maintain good skin and oral health and, where appropriate, recommending that Players seek external skin and/or dental expertise for examination and advice;
 - conducting any additional examinations or investigations that the NRC Club Doctor believes are necessary or prudent to protect the health and well-being of that Player;
 - recording the details obtained from each step of the general medical screening outlined in paragraphs a) to e) above, in Smartabase (or such other centrally documented system as may be notified by Rugby AU) as outlined to in Article 15 (*Keeping medical records*); and
 - notifying the Player that their medical information may be disclosed in accordance clause 21 of this Policy;
- 13.2.3. in respect of the Super W Tournament, ensure that each Non-Professional Player has completed a general medical questionnaire and that questionnaire is reviewed by the Club Doctor prior to playing a match each season.
- 13.2.4. ensure that immediately prior to a Player ceasing to be contracted by the SPC:
- a general medical screening as outlined in Article 13.2.2 (for NRC Players) or general medical questionnaire as outlined in Article 13.2.3 (for Super W Players) is carried out; and
 - following the general medical screening or general medical questionnaire, the Player signs a form (prepared by the SPC Doctor in consultation with the Player) that acknowledges the results of the medical screening conducted in accordance with 13.2.4.a) and records any and all injuries, illness and Medical Procedures occurring during the term that the Player was contracted with the SPC.

Cardiac screening

- 13.2.5. ensure that, as soon as practicable after joining the SPC and prior to representing the SPC in a match, each Non-Professional Player has undergone a cardiac screening conducted by the Club Doctor or a Doctor approved by the Club Doctor, which includes:
- requiring the Player to sign the World Rugby Cardiac Screening disclaimer prior to undergoing the cardiac screening evaluation;
 - requiring the Player to complete the World Rugby Cardiac Screening Questionnaire;
 - conducting a cardiovascular physical examination;
 - conducting an electrocardiogram (ECG), echocardiograph or other additional investigations if considered necessary or prudent by the Club Doctor or Doctor approved by the Club Doctor, taking into account the Player's symptoms and/or family history of cardiac problems;
 - ensuring the Club Doctor receives the results of the cardiac screening outlined in paragraphs a) to d) above, if the screening is completed by a Doctor other than the Club Doctor; and
 - recording the details obtained from each step of the cardiac screening outlined in paragraphs a) to d) above, in Smartabase (or such other centrally documented system as may be notified by Rugby AU) as outlined in Article 15 (*Keeping medical records*);

Rugby AU Semi-Professional Medical Policy

- 13.2.6. ensure that the SPC Doctor or a Doctor approved by the SPC Doctor conducts the World Rugby Cardiac Screening Questionnaire and a cardiovascular examination prior to every season.

Consent

- 13.2.7. ensure that if a Player is less than 18 years of age, that the general medical and cardiac screening requirements outlined in this Article 13.2 are not completed without the permission or under the supervision of that Player's parent or guardian.

14. Approval for medical research and Medical Procedures

- 14.1.** Rugby AU acknowledges that all medical research and Medical Procedures conducted in relation to Players should be conducted ethically and according to best practice principles. Rugby AU encourages caution be exercised where the efficacy of the relevant Medical Procedure or product is yet to be established.
- 14.2.** SPCs must not permit any research to be conducted in relation to a Player or multiple Players in relation to any Medical Procedure or supplement use, or Player health or well-being, unless the SPC has submitted a research proposal to and received written approval from the Rugby AU Chief Medical Officer, and if the research includes a Professional Player, approval must also be received from the relevant PRB Team Doctor(s) (unless a Human Research Ethics Committee has approved the Medical Procedure, in which case Rugby AU CMO and PRB Team Doctor need only be notified).
- 14.3.** Rugby AU shall ensure that before any written approval is given to an SPC Doctor by the Rugby AU Chief Medical Officer under Article 14.2 in respect of any research proposal the Rugby AU Chief Medical Officer will first submit the proposal to, and receive approval from, a Human Research Ethics Committee registered with the National Health and Medical Research Council.

15. Keeping medical records

- 15.1.** SPC Doctors will ensure the following details are recorded in respect of any of the Players on Smartabase (or such other centrally documented system as may be notified by Rugby AU):
- 15.1.1. (**Medications**) those details listed as required fields on Smartabase (or such other centrally documented system as may be notified by Rugby AU) regarding any Medication provided to that Player in accordance with this Policy (including when the SPC Doctor has been notified that a Medication has been provided), which will include:
- a) Player's name;
 - b) date of provision;
 - c) date of sign-off by Doctor (if applicable);
 - d) Medication name;
 - e) strength;
 - f) amount of Medication provided;
 - g) dosage instructions;
 - h) route of administration;
 - i) batch number (for injections);
 - j) expiry date of Medication (for injections);
 - k) any known allergies; and
 - l) any adverse reactions.
- 15.1.2. (**Injury or Illness**) those details listed as required details on Smartabase (or such other centrally documented system as may be notified by Rugby AU) regarding any injury or illness that may impact the Player's ability to be selected, play or train; and
- 15.1.3. (**Medical Procedure**) those details listed as required fields on Smartabase (or such other centrally documented system as may be notified by Rugby AU) regarding any Medical

Rugby AU Semi-Professional Medical Policy

Procedure administered or conducted in relation to that Player in accordance with this Policy (including when the SPC Doctor has been notified that a Medical Procedure has been administered or conducted)

- 15.2. Each SPC Doctor has an ongoing obligation to provide all medical information relating to each Professional Player to the relevant PRB Team Doctor as soon as practicable throughout the Competition
- 15.3. Each PRB will provide the relevant screening and medical information of each Professional Player to the respective SPC Doctor prior to the commencement of the Competition.

16. Storage and security

- 16.1. SPCs will:
 - 16.1.1. store all Over-the-Counter Medications, injection equipment and intravenous equipment that have not yet been provided to an individual in a safe, secure and locked environment, such as a Medication cabinet;
 - 16.1.2. ensure that access to all Over-the-Counter Medications, injection equipment and intravenous equipment stored by the SPC is restricted to appropriate members of the SPC Medical Staff who have been granted access by the SPC Doctor and that the SPC Doctor keeps a register of these persons;
 - 16.1.3. display clear signage on the Over-the-Counter Medications, injection equipment and intravenous equipment storage area which includes the nature of the storage area and the persons who have access to it;
 - 16.1.4. ensure that if any Prescription Medication is stored on site, it is stored in a safe and secure environment that is under the exclusive control of, and only accessible by, the SPC Doctor; and
 - 16.1.5. not store on site any Schedule 8 Medication, this Medication will be kept under the direct control of the SPC Doctor at all times.

17. Travel and Medications

- 17.1. When a team representing an SPC travels for the purposes of training or playing Rugby, that SPC will:
 - 17.1.1. prepare appropriately. For international travel this will include:
 - a) obtaining any necessary permits and licenses to export or import any substances controlled under the Australian Customs Regulations;
 - b) developing an understanding of, and obtaining any necessary approvals under, regulations pertaining to carriage, import and export of Medications for the country of destination;
 - c) ensuring that any Medication that is taken with the Team can be lawfully used and, if required, distributed (as the SPC participants may be required), in the destination country.
 - 17.1.2. create a detailed inventory of Medications carried;
 - 17.1.3. not travel with any Medication that has passed its expiry date;
 - 17.1.4. record all details required under Article 15 (*Keeping medical records*) in relation to any Medications provided to the Players, and update Smartabase (or such other centrally documented system as may be notified by Rugby AU) referred to in Article 15 (*Keeping medical records*) at a time that is practical;
 - 17.1.5. conduct a reconciliation of the Medication carried and dispensed on completion of the travel;

Rugby AU Semi-Professional Medical Policy

- 17.1.6. keep any Medications which have not yet been provided to an individual in a locked container under the direct control of the SPC Medical Staff that has been nominated by the SPC Doctor (usually, the Head Physiotherapist);
- 17.1.7. store the locked container of Medications referred to in Article 17.1.6 in the room of the person who has direct control of those Medications under Article 17.1.6, and not in the treatment room, physiotherapy room or team room;
- 17.1.8. only permit the SPC Doctor (and not any Player or other individual within the SPC, including any member of the SPC Medical Staff nominated under Article 17.1.6), to travel with Prescription Medication that is not for their personal use; and
- 17.1.9. store any Schedule 8 Medications in a locked container which remains, at all times, under the direct control of the Doctor that is accompanying the Players (if there is no Doctor accompanying the Players, then no Schedule 8 Medications may be taken).

18. NRC Club Doctor travelling with the NRC Team

- 18.1.** The NRC Club Doctor (including another Doctor appointed by the NRC Club Doctor) must at all times accompany the NRC Team when they are playing at a location that is not their home ground.
- 18.2.** Rugby AU acknowledges that when NRC teams do not travel with their NRC Club Doctors, it can have the following effects:
 - 18.2.1. the safety of Players can be put at risk as well as an increased risk of committing an inadvertent 'doping' offence, because of limited access to medical advice and treatment or provision of medical advice and treatment by individuals who do not have specific training in the relevant field of practice;
 - 18.2.2. therapists travelling with the team, such as physiotherapists, may feel pressured to overstep the boundaries of their professional training and provide advice on matters outside their scope of practice and as such, may be placed in a position of reputational, professional, ethical and legal risk; and
 - 18.2.3. the relevant NRC Club can be put at risk in the event of an adverse health outcome, particularly where a Player has received medical advice or treatment by an individual acting outside the scope of their training.
- 18.3.** Subject to Article 18.3 below, when an NRC Team travels for games, that NRC Club will use its best efforts to ensure that the NRC Club Doctor accompanies that team (this includes another Doctor appointed by the NRC Club Doctor), unless in the opinion of the NRC Club Doctor, their presence during will not be required because those Players will be provided with appropriate medical support. If it is not possible for the NRC Club Doctor to accompany an NRC Team during travel, that NRC Club will:
 - 18.3.1. engage a local Approved Doctor to be the NRC Club Doctor while the NRC Team is travelling for games;
 - 18.3.2. not permit any member of the NRC Club Medical Staff (apart from the Approved Doctor) or any other person within the NRC Club to carry or supply Prescription Medication;
 - 18.3.3. educate the NRC Players and NRC Club Management that the team physical therapists (such as physiotherapists and soft-tissue therapists):
 - a) are not doctors and should not be put in a position of having to behave as a 'pseudo-doctor';
 - b) will not carry or supply Prescription Medication;

Rugby AU Semi-Professional Medical Policy

- c) may carry a limited supply of basic Over-the-Counter Medication for provision to Players in specific circumstances and must receive written instructions around such Medication provision by the NRC Club Doctor prior to departure;
- d) will not supply any painkiller Medication other than paracetamol, panadeine and low dose Over-the-Counter Anti-Inflammatories;
- e) should communicate with the NRC Club Doctor or other appropriate Doctor (via e-mail, telephone, video-chat or other means), if medical matters of a more serious nature arise;
- f) should keep the NRC Club Doctor informed of all medical issues, including illness, injury and medical conditions;
- g) will refer Medical Procedures that they are not qualified to provide, to a local Approved Doctor; and
- h) where Prescription Medications are unexpectedly required, will source them from a local Approved Doctor, in consultation with the NRC's Club Doctor.

19. Induction and education protocol

19.1. SPCs will:

- 19.1.1. work with Rugby AU to ensure that all of their Players attend appropriate education programs in relation to this Policy; and
- 19.1.2. ensure that all members of the SPC Medical Staff and any other person who may provide any Medication, Medical Procedure or medical advice to any of the SPC Players follows an induction and education protocol that systematically takes that person through the Rugby AU Semi-Professional Medical Policy and any other policies and procedures the SPC may have.

20. Reporting under this Policy

20.1. SPCs will:

- 20.1.1. ensure that any person within the SPC promptly reports to the SPC CEO, SPC Doctor or the Rugby AU Head of Integrity if they know or reasonably suspect that any person has engaged in conduct, or has been approached to engage in conduct, that may be in breach of this Policy;
- 20.1.2. ensure that the identity of a person that makes a report under Article 20.1.1 is kept confidential in accordance with Article 21 (*Confidentiality*);
- 20.1.3. ensure that any person within the SPC promptly notifies the SPC Doctor or the Rugby AU Head of Integrity if they are interviewed, charged, or arrested by police or a government body in respect of conduct that may be a breach of this Policy; and
- 20.1.4. ensure that any activity reported to the SPC Doctor under Articles 20.1.1 and 20.1.3 is promptly reported to the Rugby AU Head of Integrity.

21. Confidentiality

- 21.1. Information about a Player or other person within an SPC that is provided under this Policy must not be disclosed or caused to be disclosed unless expressly authorised and required in accordance with this Policy, if required by law or if the Player otherwise consents.
- 21.2. Each Player is deemed to have consented to their information being:
 - 21.2.1. mutually disclosed between an SPC, Professional Rugby Body that they are or may be contracted to and Rugby AU for the purposes of assessing a Player's ability to be selected, play or train; and
 - 21.2.2. disclosed to third party medical practitioners as necessary for the treatment of the Player.

Rugby AU Semi-Professional Medical Policy

- 21.3.** For the purposes of Articles 20.1.1 and 20.1.2, and Article 34 of Schedule 1 (*Player Obligations*), persons who report information about a breach of this policy to an SPC Doctor or the Rugby AU Head of Integrity will have their identity in relation to that report kept confidential unless:
- 21.3.1. their identity is required to be disclosed as part of a disciplinary procedure in accordance with the Rugby AU Code of Conduct (as amended and replaced from time to time);
 - 21.3.2. their identity is required to be disclosed by law;
 - 21.3.3. the person consents to disclosure of their identity.
- 21.4.** If a person has not complied with this Policy and as a consequence of any disciplinary action taken by an SPC (limited to suspension and termination of a Player's contract) or Rugby AU, it is impractical or impossible for that SPC or Rugby AU to maintain confidentiality (as determined by those organisations), there is no requirement to keep the information regarding that person's non-compliance with this Policy confidential.
- 21.5.** If a Player has provided information to an SPC or Rugby AU under Article 36 of Schedule 1 (*Player Obligations*), that SPC and Rugby AU are not required to keep that information confidential.
- 21.6.** Rugby AU may disclose statistical information recorded under this Policy to persons outside the SPCs and Rugby AU, if it does not include personal information that identifies an individual Player.

22. Amendment and Interpretation

- 22.1.** Rugby AU may amend this Policy from time to time.
- 22.2.** The headings used in this Policy are for convenience only and do not affect the interpretation of this Policy.
- 22.3.** Words importing the singular include the plural and vice versa.
- 22.4.** Words used to denote persons generally or importing a natural person include any company, organisation or other entity (whether or not the body is incorporated).
- 22.5.** Reference to "including" and similar words are not words of limitation.
- 22.6.** This Policy includes all schedules attached.

23. Definitions

AIS means the Australian Institute of Sport.

Anti-Inflammatory means nonsteroidal anti-inflammatory Medication.

Approved Doctor means a practicing medical practitioner, listed on the Rugby AU List of Approved Doctors (that can be provided and updated by the Rugby AU Chief Medical Officer), who has agreed to comply with this Policy and is aware of the requirement for Players to adhere to Rugby AU's Group Medical Policies.

Approved Medical Procedure means any treatment, procedure, test or investigation listed in Article 9.1.2.

ASADA means the Australian Sports Anti-Doping Authority.

Australian Customs Regulations means the *Customs (Prohibited Imports) Regulations 1956* and *Customs (Prohibited Exports) Regulations 1958* or any successor or replacement regulations.

Australian Sevens Player means a Player who is contracted to Rugby Australia to play seven-a-side Rugby.

Rugby AU Semi-Professional Medical Policy

Competition means the relevant playing or training periods with respect to the National Rugby Championship, the Super W Tournament and/or any other competition as advised by Rugby AU from time to time.

Compounding Pharmacist means a pharmacist licenced to create pharmaceutical products tailored to fit the unique needs of a patient.

Compounding Pharmacy means a pharmacy where pharmaceutical products are tailored to fit the unique needs of a patient.

Doctor means a medical practitioner registered with the Australian Health Practitioner Regulation Agency.

Head Physiotherapist means the member of SPC Medical Staff whose responsibilities, minimum qualifications and continuing education requirements are set out in Article 2 of Schedule 2 (*Core medical and health staff*).

High Performance Agreement means any High Performance Agreement between Rugby AU and a Super Rugby Licensee.

Human Research Ethics Committee means an ethics committee:

- a) constituted and operating as an ethics committee in accordance with guidelines issued by the CEO of the National Health and Medical Research Council as in force from time to time; and
- b) which has notified its existence to the Australian Health Ethic Committee established under the National Health and Medical Research Council Act 1992 or superseding legislation.

Match Day Medical Staff means the persons engaged by the home Club for NRC matches whose responsibilities, recommended qualifications and continuing education requirements are set out in Article 4 of Schedule 2 (*Core medical and health staff*), and includes any Doctor, Nurse, paramedical, physiotherapist or other physical therapist engaged by an NRC Club.

Match Day Doctor means the person engaged by the home Club for Super W matches whose responsibilities, minimum qualifications and continuing education requirements are set out in Article 5 of Schedule 2 (*Core medical and health staff*). For the avoidance of doubt the Match Day Doctor may be the home team's Super W Club Doctor.

Medical Emergency means a medical condition that is acute and poses an immediate risk to a Player's health.

Medical Procedure means any, medical procedure, treatment, test or investigation conducted in relation to a Player.

Medications means Over-the-Counter Medications, Prescription Medications and any other substance that would commonly be referred to as a medication.

Member means a union in membership of Rugby AU as set out in the Rugby AU constitution.

Non-Professional Player means a Player who is not a Professional Player who has entered into an NRC contract, Super W contract or a contract with an SPC in any other Competition as defined by this Policy.

NRC means the National Rugby Championship.

NRC Club means any entity (including a Super Rugby Licensee, NRC Club and/or other organisations or entities) that is responsible for the management of a team participating in the NRC. The Current NRC teams, being:

- Brisbane City
- Queensland Country
- Sydney Rays
- NSW Country

Rugby AU Semi-Professional Medical Policy

- Canberra Vikings
- Melbourne Rising
- Western Force

NRC Club Doctor means the senior Doctor of an NRC Club, whose responsibilities, minimum qualifications and continuing education requirements are set out in Article 1 of Schedule 2 (*Core medical and health staff*). For the avoidance of doubt, the NRC Club Doctor, may, in some cases be the same as the Super Rugby Doctor, where the NRC Club is connected to the Super Rugby Licensee (e.g. Brisbane City, Queensland Country, Canberra Vikings and Melbourne Rising).

Nurse means a nurse registered with the Australian Health Practitioner Regulation Agency.

Over-the-Counter Medications means any medication sold directly to a consumer, without the requirement to have a prescription from a healthcare professional in the relevant jurisdiction and includes 'pharmacist only'/ behind-the-counter medications that do not require a prescription from a healthcare professional.

Player means any person who is named as a player in an SPC for the NRC, Super W Tournament and/or any other Competition as advised by Rugby AU from time to time. For the avoidance of doubt, this includes both Professional and Non-Professional Players.

Player Contract means a contract which governs a Player's participation in the Competition.

Player of National Interest or PONI means, in relation to the Wallabies, a Player identified as one of national interest and notified to the Super Rugby Licensee by Wallabies Management in accordance with the terms of the High Performance Agreement or, in relation to the Wallaroos, means a Player identified as one of national interest and notified to the Player by Wallaroos Management.

Policy means this Rugby AU Semi-Professional Medical Policy.

PRB Team Doctor means the senior Doctor of a Professional Rugby Body, whose responsibilities, minimum qualifications and continuing education requirements are set out in Article 1 of Schedule 2 (*Core medical and health staff*) of the Rugby AU Medical Policy.

Prescription Medication means any medication that needs a written prescription from a Doctor or other prescriber before a pharmacist can supply that medication.

Professional Player means a contracted Super Rugby Player or an Australian Sevens Player.

Professional Rugby Body or PRB means either Rugby AU or any Super Rugby Licensee which at the relevant point in time employs a Player under a Player Contract.

Prohibited Medication means those substances described in Article 10.1.9.

Rugby means the game of rugby football.

Rugby AU means Rugby Australia Ltd ACN 002 898 544.

Rugby AU Chief Medical Officer or Rugby AU CMO means the person appointed to be the Chief Medical Officer of Rugby AU.

Rugby AU's Group Medical Policies means this Policy, the WADA Code, the Rugby AU Anti-Doping Code, the Rugby AU Sports Supplements Policy and Rugby AU's Illicit Drug Policy all as amended and replaced from time to time.

Rugby AU Head of Integrity means Head of Integrity at Rugby AU, who is contactable at integrity@rugby.com.au.

Rugby AU Semi-Professional Medical Policy

Rugby AU Semi-Professional Sports Supplement Policy means the Sports Supplement Policy issued by Rugby AU for the Competition.

RUPA means the Rugby Union Players' Association.

Schedule 8 Medication means any Medication classified as a 'schedule 8 Medication' by the TGA.

Semi-Professional Club or SPC means entities or organisations who are responsible for the management of Semi-Professional Teams including Super Rugby Licensees, NRC Clubs, Super W Clubs and others as advised by Rugby AU from time to time.

Smartabase means the electronic central database known as 'Smartabase' operated by Fusion Sport Pty Ltd CAN 103 526 147

SPC Doctor means the senior Doctor of an SPC, whose responsibilities, minimum qualifications and continuing education requirements are set out in Article 1 of Schedule 2 (*Core medical and health staff*).

SPC Management means any person engaged by Rugby AU or an SPC to work directly with any players, squad or team during the Competition (includes, without limitation, the Team Medical Staff, dietitians, sports scientists, trainers, coaches and team managers).

SPC Medical Staff means any Doctor, Nurse, paramedical, physiotherapist or other physical therapist engaged by an SPC.

SPC Sports Dietitian means a Sports Dietitian engaged by the SPC for the duration of the Competition whose responsibilities, minimum qualifications and continuing education requirements are set out in Article 3 of Schedule 2 (*Core medical and health staff*).

Super Rugby Competition means the international provincial rugby competition organised by SANZAAR currently known as Super Rugby, and any equivalent successor competition.

Super Rugby Licensee means a future or present entity that has an agreement with Rugby AU that permits it to field a team in the Super Rugby Competition.

Super Rugby Player means a Player who is contracted to a Super Rugby Licensee for the Super Rugby Competition.

Super W Club means any Super Rugby Licensee, Super W Club and/or other organisations or entities who are responsible for the management of Teams, being:

- NSW Waratahs
- Queensland Reds
- Melbourne Rebels
- ACT Brumbies
- Western Australia

Team means a Rugby Team participating in the National Rugby Championship, Super W Tournament and/or any other Competition as advised by Rugby AU from time to time.

Therapeutic Use Exemption or **TUE** has the meaning given to that term in the Rugby AU Anti-Doping Policy.

TGA means the Therapeutic Goods Administration of Australia.

WADA Code means the current World Anti-Doping Code produced by the World Anti-Doping Agency.

WADA Prohibited List means the current World Anti-Doping Agency List of Prohibited Substances and Methods.

World Rugby means the international governing body of Rugby, formerly known as International Rugby Board.

Rugby AU Semi-Professional Medical Policy

Schedule 1 Player Obligations

1. You will comply with this Rugby AU Semi-Professional Medical Policy (**Policy**).

External medical providers

2. You acknowledge that the preferred first-line treatment for all your medical issues, is for you to see your SPC Doctor or a Doctor approved by your SPC Doctor.
3. If you see other Doctors or health professionals before speaking to your SPC Doctor, you must do so in accordance with the terms of this Policy which includes notifying your SPC Doctor of:
 - 3.1. any Medical Procedure conducted in relation to you;
 - 3.2. any medical advice, diagnosis or treatment given by a Doctor with respect to an injury or illness that may impact your ability to be selected, train or play; and
 - 3.3. any Medication prescribed to you.
4. You will ensure that any Doctor that prescribes, conducts or recommends to you any Medical Procedure or Medication, understands that you must comply with Rugby AU's Group Medical Policies.

Medical Procedures

5. You will not participate in or permit any Medical Procedure (which includes any medical treatment, procedure, test or investigation) in relation to you, that you know or suspect has not been approved in advance by your SPC Doctor (such as blood tests, intravenous treatments, scans, hyperbaric therapy or overseas treatments) unless the treatment is for a Medical Emergency and the treating medical practitioner at the time advised you that you had no option but to undergo that particular Medical Procedure.
6. You will notify your SPC Doctor of any Medical Procedures conducted in accordance with Article 5 above.
7. You will notify your SPC Doctor of any injury or illness you have that may impact your ability to be selected, train or play.

Medications

8. You will only use a Medication as directed by an SPC Doctor and in accordance with the Rugby AU Group Medical Policies.
9. You will notify your SPC Doctor of any Over-the-Counter Medications that you are using or propose to use, in accordance with the Rugby AU Group Medical Policies.
10. You will not take any Medication prescribed to you by anyone other than your SPC Doctor without the prior approval of your SPC Doctor, unless the Prescription is required for a Medical Emergency or you are unable to contact your SPC Doctor for approval. If Prescription Medication has been prescribed to you by anyone other than your SPC Doctor, you will advise your SPC Doctor of the prescription within 24 hours and ensure that all the medical information surrounding the prescription is provided directly to your SPC Doctor by the Doctor authorising the prescription.
11. Do not use or source any Medication that *is not* from a pharmacy that is widely considered as reputable, *has not* been approved by the Therapeutic Goods Administration (or if travelling overseas, the equivalent authority), *has been prepared* in a compounding pharmacy (where they create the pharmaceutical product in the pharmacy) or *has been prepared* by a compounding pharmacist unless approval is received from the Rugby AU Chief Medical Officer.
12. Do not share any Medication that has been provided to you with any other person, or otherwise distribute them to any other person.
13. Do not remove any Medication provided to you under this Policy from its original packaging (i.e. removing tablets from their blister packaging).
14. Do not use a Prohibited Medication, which includes substances on the WADA Prohibited List and various peptides listed in Article 10.1.9.

WADA Code

15. You acknowledge that you are solely responsible for any substances on the current WADA Prohibited List (or traces of them) found to be present in your body and for your possession, use, attempted use, trafficking or attempted trafficking of the substances or methods on the current WADA Prohibited List.

Sleeping Medications

16. You will acknowledge that good sleeping habits are the basis for ensuring healthy sleeping patterns.
17. You will only obtain sleeping Medications from your SPC Doctor or a Doctor approved by your SPC Doctor and notify your SPC Doctor of the details of any sleeping Medication that was prescribed to you by another Doctor.
18. You will only take any sleeping Medication as directed by your SPC Doctor or a Doctor approved by your SPC Doctor.

Rugby AU Semi-Professional Medical Policy

19. You acknowledge that sleeping tablets are not a long-term solution to sleep difficulty.
20. You acknowledge that some sleeping tablets are addictive, and you may experience withdrawal effects after using sleeping tablets regularly (for as little as one week).
21. If you propose to take any sleeping tablets, you will only take them to assist with sleeping difficulty and for short periods of time (not more than a few days in succession).
22. Do not take sleeping tablets in conjunction with other sedative Medication such as other sleep Medication, strong painkilling Medication, muscle relaxants, antidepressant Medication or psychoactive substances (which are substances that alter mood, perception or consciousness as a result of changes in the way the central nervous system functions).
23. Only take sleeping Medication in accordance with Schedule 5 of this Policy.
24. Do not take sleeping Medication in conjunction with alcohol or caffeine drinks.

Therapeutic Use Exemption (TUE) Medications

25. You will store any Therapeutic Use Exemption (TUE) Medication you may have obtained in accordance with the Rugby AU Anti-Doping Policy in an appropriate and secure environment, not provide your TUE Medication to other Players and not remove any labelling from your TUE Medication.

Needles and Injections

26. Do not inject or permit the injection of any substance into you, except when the injection is legitimately required for treatment of a medical illness or injury, or for vaccination purposes.
27. Do not self-inject any substance unless you have a documented medical condition that requires self-injection of that substance and you have received written confirmation of your registration on the Rugby AU Self-Injection Register in relation to that substance from your SPC Doctor and that registration remains current.
28. Do not permit any other person to inject a substance into you except for a Doctor or Nurse acting on the instructions of your SPC Doctor or with the discretion to take such action expressly delegated to them by your SPC Doctor.
29. If applicable, you will apply to be registered on the Rugby AU Self-Injection Register by written application to your SPC Doctor (who will then seek authorisation from the Rugby AU Chief Medical Officer).
30. Do not order or possess any injection equipment unless you are registered on the Rugby AU Self-Injection Register, and in which case you only order or possess the equipment required to self-inject in accordance with this Policy.

Travelling without your SPC Doctor

31. For Players in the National Rugby Championship:
 - 31.1. where your NRC Club Doctor cannot travel with you, you will be notified as soon as practicable and, you will be responsible for making an appointment with your NRC Club Doctor or a Doctor approved by your NRC Club Doctor to receive any Medications and/or relevant medical advice that is reasonably anticipated to be required prior to any travel; and
 - 31.2. you will only seek and receive medical advice or Medical Procedures, whilst travelling unaccompanied by your NRC Club Doctor, from match day medical staff or from an Approved Doctor who you will be notified of prior to departing for travel. (You should also ask your NRC Club Management which Doctors at your destination location are Approved Doctors).
32. For Players in the Super W Tournament:
 - 32.1. as your Club Doctor does not travel with you, you will be responsible for making an appointment with your Club Doctor or a Doctor approved by your Club Doctor to receive any medication and/or relevant medical advice that is reasonably anticipated to be required prior to any travel; and
 - 32.2. you will only seek and receive medical advice or Medical Procedures from the Match Day Doctor or from an Approved Doctor who you will be notified of prior to departing from travel. (You should also ask your Club Management which Doctors at your destination location are Approved Doctors).
33. You acknowledge that your team physical therapists (such as physiotherapists and soft-tissue therapists) are not doctors and should not be put in a position of having to behave as a 'pseudo-doctor'.

Reporting

34. You will promptly report to your SPC Doctor or the Rugby AU Head of Integrity, any person's conduct (including your own conduct or an approach to engage in conduct) that you know or reasonably suspect may be a breach of this Policy and your identity in relation to this report will be kept confidential in accordance with Article 21 (*Confidentiality*) of this Policy.
35. You will promptly notify your SPC Doctor or the Rugby AU Head of Integrity if you are interviewed, charged, or arrested by police or a government body in respect of conduct that may be a breach of this Policy.

Rugby AU Semi-Professional Medical Policy

36. You will fully comply with any investigation (including by providing full disclosure of any information you hold) by Rugby AU and/or your SPC into suspected or apparent non-compliance with the Policy by you or any other individual.

General

37. You consent to the provision and recording of information about you in accordance with this Policy and acknowledge the application of Article 21 (*Confidentiality*) of the Policy.
38. You will use your influence to support and reinforce the education messages regarding Medications and medical practices that are promoted by Rugby AU, including in this Policy.
39. You will make yourself available for, and actively engage in, education programs nominated by Rugby AU or your SPC in relation to this Policy.
40. You will stay informed of any changes to this Policy (where Rugby AU notifies you of any changes to this Policy or that are published on the Rugby AU website).
41. You will acknowledge that this Policy is a Rugby AU By-Law for the purposes of your Player Contract and not complying with this Policy is a breach of your Player Contract and may be a breach of the Rugby AU Code of Conduct (as amended and replaced from time to time) and sanctions may follow including fines, suspension or termination of your Player Contract.

Schedule 2

Core medical and health staff

SPC staff

1. SPC Doctors

1.1. **Role:** The SPC Doctor is responsible for the day to day management of the medical issues of teams and Players within the SPC.

1.2. **Minimum qualifications:** Immediately prior to their appointment as SPC Doctor, the person proposed to be the SPC Doctor must have achieved the following qualifications:

1.2.1. obtained a medical degree that is recognised by the Australian Health Practitioner Regulation Agency;

1.2.2. current registration with the Australian Health Practitioner Regulation Agency; and

1.2.3. completed the World Rugby match day medical staff education module;

and for the purposes of Article 1.2.3 of this Schedule 2 will be satisfied by the successful completion of the following online education modules:

1.2.4. the World Rugby First Aid in Rugby module;

1.2.5. the World Rugby Immediate Care in Rugby module;

1.2.6. the World Rugby concussion modules;

1.2.7. the World Rugby anti-doping (Keep Rugby Clean) module;

1.2.8. the ASADA anti-doping module; and

1.2.9. any other education requirements as determined by Rugby AU.

1.3. **Recommended qualifications:** Rugby AU recommends that the person appointed as the SPC Doctor has achieved the following qualifications and experience:

1.3.1. current registration with the Australian Health Practitioner Regulation Agency;

1.3.2. post graduate qualifications in sports and exercise medicine, either as a specialty or as general practitioner with further training (eg through Sports Doctors Australia); and

1.3.3. experience in pitch-side medical coverage (preferably in Rugby).

1.3.4. completed the World Rugby/Rugby AU level 2 or level 3 pitch-side education course.

1.4. **Continual professional development:** The SPC Doctor must actively engage in continual professional development.

2. Head Physiotherapist

2.1. Role: The Head Physiotherapist is a physiotherapist, or other practitioner approved by the Rugby AU Chief Medical Officer, and is responsible for the day to day management of all physiotherapy and related therapies for Players within the SPC.

2.2. Minimum qualifications: Immediately prior to their appointment as Head Physiotherapist, the person proposed to be Head Physiotherapist has achieved the following qualifications and experience (unless the Rugby AU Chief Medical Officer has approved a non-physiotherapist practitioner for this role):

- 2.2.1. university qualified in Applied Science in Physiotherapy or equivalent;
- 2.2.2. current registration with the Australian Health Practitioner Regulation Agency; and
- 2.2.3. in respect of Super W physiotherapists, completion of the World Rugby pitch-side education level 2 course; and
- 2.2.4. any other education requirements as determined by Rugby AU.

and for the purposes of Article 2.2.3 of this Schedule 2 will be satisfied by the achievement of the following qualifications and experience:

- 2.2.5. current CPR and First Aid certificate; and
- 2.2.6. head and spinal injury assessment skills.

2.3. Recommended qualifications: The Rugby AU recommends that the person appointed as the Head Physiotherapist has achieved the following qualifications and experience:

- 2.3.1. in respect of NRC physiotherapists, completion of the World Rugby pitch-side education level 2 course;
- 2.3.2. postgraduate qualifications in sports physiotherapy, manipulative therapy, or exercise rehabilitation or hold the title of 'APA Sports Physiotherapist';
- 2.3.3. 5 years postgraduate physiotherapy experience;
- 2.3.4. practising experience in elite level or professional sport; and
- 2.3.5. completed the World Rugby/Rugby AU level 2 or level 3 pitch-side education course.

and for the purposes of Article 2.3.1 of the Schedule 2 will be satisfied by the achievements of the following qualifications and experience:

- 2.3.6. current CPR and First Aid certificate; and
- 2.3.7. head and spinal injury assessment skills.

2.4. Continual professional development: The Head Physiotherapist must actively engage in continual professional development.

3. SPC Sports Dietitian

Rugby AU Semi-Professional Medical Policy

It is recommended that SPC's engage an SPC Sports Dietitian for the Competition, however it is not mandatory.

- 3.1. *Role:*** The SPC Sports Dietitian may also be the SPC Sports Dietitian under the Rugby AU Semi-Professional Sports Supplements Policy, and is responsible for providing a range of 'best practice' performance nutrition services and expertise to Players within the SPC.
- 3.2. *Recommended qualifications:*** Immediately prior to their appointment as SPC Sports Dietitian, the person proposed to be SPC Sports Dietitian has achieved the following qualifications and experience:
- 3.2.1. university-qualified to provide nutrition and dietary advice;
 - 3.2.2. eligible for membership with the Dietitians Association of Australia as an Accredited Practising Dietitian;
 - 3.2.3. current 'Advanced Sports Dietitian' or 'Accredited Sports Dietitian' membership with Sports Dietitians Australia;
 - 3.2.4. completed the International Olympic Committee (IOC) Diploma in Sports Nutrition;
 - 3.2.5. completed the Sports Dietitians Australia 4-day sports nutrition course;
 - 3.2.6. current accreditation from the International Society for the Advancement of Kinanthropometry as a Level 1 Anthropometrist;
 - 3.2.7. five years experience in an elite sport environment managing a performance-focused nutrition program, including clinical counselling; and
 - 3.2.8. completed any education requirements as determined by Rugby AU.

Match day staff

4. Match Day Medical Staff for National Rugby Championship

- 4.1.** The Match Day Medical Staff are responsible for assisting with the provision of medical services on match days.

Recommended qualifications: Immediately prior to their appointment as Match Day Medical Staff, the persons proposed to be Match Day Medical Staff are recommended have achieved the following qualifications:

- 4.1.1. completed the World Rugby match day medical staff education module; and
- 4.1.2. the World Rugby concussion modules.

5. Match Day Doctor for Super W Tournament

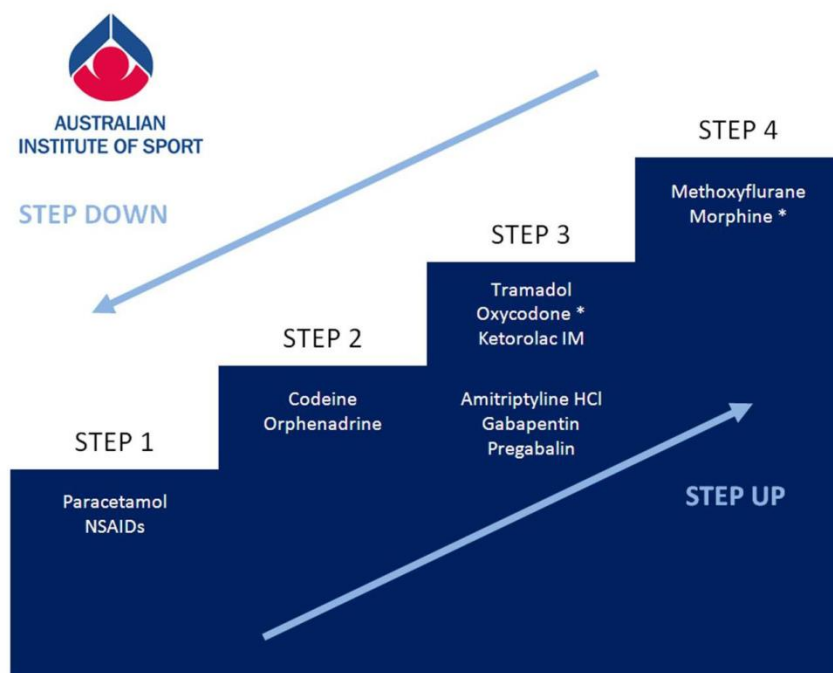
- 5.1.** The Match Day Doctor is responsible for the following:
- 5.1.1. organising the match day medical room and the provision of emergency services for injuries and illness on match day for both teams;
 - 5.1.2. providing an independent medical opinion on the management of injuries, and specifically for concussion;

- 5.1.3. ensuring that Laws, Regulations and Guidelines relating to blood, concussion and substitution are understood and adhered to; and
 - 5.1.4. making the final decision regarding whether a player is medically fit to remain on the field of play.
- 5.2.** For the avoidance of doubt, the Match Day Doctor can be the home Team's Club Doctor and shall operate for both the Home and Away Teams on Match Day. If the Match Day Doctor is not the home Team's Club Doctor the home Team is responsible for appointing a Match Day Doctor.
- 5.3. *Minimum qualifications:*** Immediately prior to their appointment as Match Day Doctor, the person proposed to be the Match Day Doctor must have achieved the following qualifications:
- 5.3.1. obtained a medical degree that is recognised by the Australian Health Practitioner Regulation Agency;
 - 5.3.2. current registration in Australia with the Australia Health Practitioner Regulation Agency; and
 - 5.3.3. completed the World Rugby match day medical staff education module;
- and for the purposes of Article 5.3.3 of this Schedule 2 will be satisfied by the successful completion of the following online education modules;
- 5.3.4. the World Rugby First Aid in Rugby module;
 - 5.3.5. the World Rugby Immediate Care in Rugby module;
 - 5.3.6. the World Rugby concussion modules;
 - 5.3.7. the World Rugby anti-doping (Keep Rugby Clean) module;
 - 5.3.8. the ASADA anti-doping module; and
 - 5.3.9. any other education requirements as determined by Rugby AU.
- 5.4. *Recommended Qualifications:*** Rugby AU recommends that the person appointed as the Match Day Doctor has achieved the following qualifications and experience:
- 5.4.1. current registration with the Australian Health Practitioner Regulation Agency;
 - 5.4.2. post graduate qualifications in sports and exercise medicine, either as a specialty or as general practitioner with further training (e.g. through Sports Doctors Australia);
 - 5.4.3. experience in pitch-side medical coverage (preferably in Rugby); and
 - 5.4.4. completed the World Rugby/Rugby Au level 2 or level 3 pitch-side education course.
- 5.5. *Continual professional development:*** The Match Day Doctor must actively engage in continual professional development.

Schedule 3

Painkiller Medication Guidelines

1. Rugby AU supports and has adopted the Australian Institute of Sport painkiller policy, as set out in this Schedule 3.
2. SPCs will ensure that the provision of painkiller Medication to any of the Players will be guided by the following principles:
 - 2.1. the general approach to pain relief will be based on the 'step-up, step-down' method, set out in the World Health Organisation Analgesic Ladder as adapted by the Australian Institute of Sport as follows:



- 2.2. for mild to moderate pain the use of regular paracetamol without opiates is the treatment of first choice;
- 2.3. if there is clinical evidence of inflammation at the first presentation, an Anti-Inflammatory may be preferred over paracetamol;
- 2.4. Anti-Inflammatories should be used for the shortest duration possible with a view to switching over to paracetamol;
- 2.5. where paracetamol or an Anti-Inflammatory alone fails to control pain, paracetamol and codeine is an appropriate next option;
- 2.6. where there is severe inflammatory pain, it may be appropriate to combine an Anti-Inflammatory with codeine;
- 2.7. where the pain is strongly associated with muscle spasm, orphenadrine is an appropriate first drug of choice;

- 2.8. Tramadol must be used with caution and should only be used in those who are intolerant of codeine (the analgesic effect of Tramadol is unlikely to be superior to paracetamol/codeine but the side effect profile is significantly worse);
- 2.9. where there is strong evidence of significant neuropathic contribution to the pain, use of amitriptyline HCl, gabapentin or pregabalin should be considered;
- 2.10. Amitriptyline HCl can be efficacious in situations of chronic pain, or where there is evidence of pain centralisation, or both;
- 2.11. Oxycodone can be used for severe pain, often in the post-operative period. **Oxycodone is not permitted in Competition;**
- 2.12. Intramuscular ketorolac can be used for acute severe pain (fractures, acute spinal pain) where there is need for immediate strong pain relief; and
- 2.13. Methoxyflurane or morphine, or both, can be used in situations of emergency pain relief for severe pain where the Player requires relief for transportation to hospital. **Morphine is not permitted in Competition.**

Schedule 4**Anti-Inflammatory Medication Guidelines**

1. Rugby AU has adopted the Australian Institute of Sport Anti-Inflammatory policy, as set out in this Schedule 4.
2. SPCs will ensure that the provision of Anti-Inflammatories to any of the Players will be guided by the following principles:
 - 2.1. regular paracetamol should be the primary baseline treatment for most musculoskeletal injuries. Anti-Inflammatories should be used when there is good clinical evidence of an inflammatory component to the pain aetiology;
 - 2.2. Doctors should take a detailed history of a Player's previous adverse drug reactions, history of gastrointestinal symptoms, hypertension, renal disease, asthma and urticarial reactions;
 - 2.3. a Player should be asked about their prior experience with using Anti-Inflammatories in terms of efficacy and side effects;
 - 2.4. a Player at high risk for gastrointestinal complications from Anti-Inflammatories should be offered:
 - 2.4.1. regular paracetamol before an Anti-Inflammatory;
 - 2.4.2. Celecoxib as the preferred Anti-Inflammatory;
 - 2.4.3. Ibuprofen as the preferred non-selective Anti-Inflammatory, where Cox 2 coverage is deemed not appropriate; and
 - 2.4.4. proton pump inhibitor cover while taking an Anti-Inflammatory;
 - 2.5. a Player considered at high risk for cardiovascular complications should be offered ibuprofen or naproxen;
 - 2.6. prolonged ingestion of Anti-Inflammatories should be avoided;
 - 2.7. Anti-Inflammatories should be prescribed at the minimal efficacious dose; and
 - 2.8. where it is deemed appropriate to treat a Player's acute injury with an Anti-Inflammatory, Doctors should aim to use the Anti-Inflammatory for about five days before switching to regular paracetamol.

Schedule 5

Sleeping Medication Guidelines

1. Rugby AU has adopted the Australian Institute of Sport Sleeping Medication policy as set out in this Schedule 5.
2. Rugby AU acknowledges that, in some circumstances, it may be appropriate to provide sleeping Medication to a Player who:
 - 2.1. is travelling, in order to assist them to adjust to a different time zone; or
 - 2.2. in the short term, is having difficulty with sleeping for non-travel related reasons.
3. SPCs will ensure that the provision of sleeping Medications to any of the Players will be guided by the following principles:
 - 3.1. not all travelling Players require sleeping Medication;
 - 3.2. good sleep habits (also known as sleep hygiene) is the basis for obtaining normal sleep patterns as set out in this fact sheet from the Australian Institute of Sport:
https://www.clearinghouseforsport.gov.au/_data/assets/pdf_file/0008/545858/Sleep_fact_sheet_2013.pdf
 - 3.3. any sleeping Medication prescribed to a Player, must be done by the SPC Doctor;
 - 3.4. any sleeping Medication prescribed by the SPC Doctor is prescribed for a short duration use unless an individual's medical circumstances require otherwise;
 - 3.5. melatonin or temazepam should be utilised as the first line treatment;
 - 3.6. other Medications can be used if medically appropriate and deemed necessary for an individual's medical circumstances; and
 - 3.7. the SPC Doctor will warn Players being provided with sleeping Medications, of potential adverse effects (including warning against inappropriate use such as mixing with alcoholic or caffeinated drinks).