

# **KHL REGULATIONS**

SEASONS 2021/2022, 2022/2023, 2023/2024, 2024/2025

## **APPROVED BY**

CHL LLC Board of Directors

(minutes No. 119 dated 27 July, 2021)

# **KHL MEDICAL REGULATIONS**

Whereas the official language of the Kontinental Hockey League Championship is Russian, in case of inconsistency between the Russian and English versions of the KHL Regulations the Russian text shall prevail

Moscow, 2021

# KHL MEDICAL REGULATIONS

## TABLE OF CONTENTS

<b>TERMS, DEFINITIONS AND ABBREVIATIONS.....</b>	<b>4</b>
<b>CHAPTER 1. MEDICAL SUPPORT OF KHL CLUBS .....</b>	<b>4</b>
Article 1.    General provisions.....	4
Article 2.    KHL Medical Web Portal.....	4
Article 3.    Medical licensing in the Club.....	4
Article 4.    Club medical service .....	4
Article 5.    Club Doctor’s job description .....	5
Article 6.    Requirements for medical bag composition.....	6
<b>CHAPTER 2. REQUIREMENTS FOR MEDICAL STATIONS AT SPORTS FACILITIES AND EQUIPPING A CLUB’S MEDICAL ROOM .....</b>	<b>6</b>
Article 7.    Requirements for the organizing and equipping a Sports Facility Medical Station.....	6
Article 8.    Requirements for equipping the Club Medical Room with medicines and instruments.	7
<b>CHAPTER 3. MEDICAL EXAMINATIONS (HEALTH SCREENING) OF HOCKEY PLAYERS .....</b>	<b>7</b>
Article 9.    Scope and timing of in-depth medical examination (IDME) .....	7
Article 10.   Decision making algorithm in case of detecting adverse changes in a Hockey Player’s Health .....	8
<b>CHAPTER 4. CLUB TEAMS’ MEDICAL ROSTERS .....</b>	<b>8</b>
Article 11.   Procedure for a Club Team’s medical roster .....	8
Article 12.   The Form of medical opinion on admission to training sessions and participation in the Championship .....	9
<b>CHAPTER 5. REQUIREMENTS FOR MEDICAL SUPPORT OF THE CHAMPIONSHIP GAMES AND TRAINING SESSIONS.....</b>	<b>10</b>
Article 13.   General requirements for medical support of the Games and training sessions .....	10
Article 14.   Game Medical Team .....	10
Article 15.   Functions of the Game Medical Team .....	11
Article 16.   Location of the Game Medical Team at the Sports Facility.....	11
Article 17.   Procedure for rendering medical assistance on the ice during the Game and training sessions .....	11
<b>CHAPTER 6. DOPING CONTROL IN THE KHL .....</b>	<b>12</b>
Article 18.   General provisions.....	12
Article 19.   Therapeutic Use Exemptions for prohibited substances and methods.....	13
Article 20.   Doping Control arrangements in the KHL.....	14
<b>CHAPTER 7. FINAL PROVISIONS.....</b>	<b>15</b>
Article 21.   KHL Medical Regulations effectiveness.....	15
Appendix 1.....	16
<b>REGULATION ON THE KHL MEDICAL WEB PORTAL.....</b>	<b>16</b>
Appendix 2.....	18
<b>REQUIREMENTS FOR COMPOSITION OF MEDICINAL PRODUCTS AND MEDICAL EQUIPMENT FOR THE DOCTOR IN SPORTS MEDICINE .....</b>	<b>18</b>
Appendix 3.....	32
<b>PROGRAM OF IN-DEPTH MEDICAL EXAMINATION OF KHL HOCKEY PLAYERS .....</b>	<b>32</b>
Appendix 4.....	34
<b>RECOMMENDED STANDARD FOR EQUIPPING A SPORTS FACILITY MEDICAL</b>	

## KHL MEDICAL REGULATIONS

<b>STATION</b> .....	<b>34</b>
<i>Appendix 5</i> .....	37
<b>MINIMUM RECOMMENDED EQUIPMENT OF A CLUB MEDICAL ROOM</b> .....	<b>37</b>
<i>Appendix 6</i> .....	39
<b>MEDICAL OPINION ON THE ADMISSION OF A SPORTS TEAM ATHLETES TO PARTICIPATE IN A SPORTS EVENT</b> .....	<b>39</b>
<i>Appendix 7</i> .....	41
<b>Medical Opinion on Admission to Participate in Physical Culture and Sports Events (Practice Events and Sports Competitions), Measures to Assess Compliance with the Test Standards of All-Russian Physical Culture and Sports Complex “Ready for Work and Defence”</b> .....	41
<i>Appendix 8</i> .....	43
<b>MEDICAL TEAM COMPOSITION AT THE SPORTS FACILITY</b> .....	<b>43</b>
<i>Appendix 9</i> .....	44
<b>REGULATION ON MANAGING THE WORK OF THE CHIEF PHYSICIAN OF COMPETITIONS DURING THE KHL CHAMPIONSHIP GAMES</b> .....	<b>44</b>
<i>Appendix 10</i> .....	45
<b>Scheme of Providing Emergency Medical Care to an Injured Player (Hockey Player) on the Ice, As Recommended by the Russian Hockey Federation</b> .....	<b>45</b>
<i>Appendix 11</i> .....	46
<b>REQUIREMENTS FOR THE DOPING CONTROL STATION</b> .....	<b>46</b>
<i>Appendix 12</i> .....	48
<b>DOPING TEST SAMPLING PROCEDURE</b> .....	<b>48</b>
<i>Appendix 13</i> .....	51
<b>ACKNOWLEDGEMENT FORM FOR READING AND UNDERSTANDING OF ALL RUSSIAN ANTI- DOPING RULES (WADA CODE - FOR FOREIGN CLUBS)</b> .....	<b>51</b>
<i>Appendix 14</i> .....	52
<b>MEDICAL STATEMENT on the Health Status of the Player (Hockey Player)</b> .....	<b>52</b>

# KHL MEDICAL REGULATIONS

## CHAPTER 1. MEDICAL SUPPORT OF KHL CLUBS

### Article 1. General provisions

1. Medical support of KHL Clubs is based on the healthcare legislation of the Russian Federation, taking into account the specific features of the national laws of the countries participating in the Championship.

Specialized medical care (including dental care) shall be provided to a Main Team Hockey Player over the lifetime of the Contract. The treatment of a Hockey Player shall be carried out only in medical organizations specified (agreed in writing) by the Club, except in cases of treatment of life-threatening conditions, diseases and injuries.

2. If a Hockey Player wishes to receive specialized medical (including dental) care in medical organizations that are not agreed with the Club, the Hockey Player shall pay for such treatment on his own in full.
3. Treatment of employment-related injuries shall be provided at the Club's expense.
4. In case the Hockey Player is injured in the course of the Game, when relocating with the team, during business trips initiated by the Club, or in the training process, the Club shall pay for his treatment, rehabilitation in the prescribed manner until complete recovery, provided that the medical organization was specified by the Club. In case the Hockey Player neglects wearing protective gear (full face mask, eye protection (visor), throat protection, mouthguard, elbow pads, gloves) or wears protective gear inconsistent with the IIHF requirements which results in an injury, treatment shall be paid by the Hockey Player or according to his health insurance policy.
5. The Club shall be responsible for providing Hockey Players with drugs, dietary supplements, vitamin and mineral complexes, orthopedic products and other medical supplies.

### Article 2. KHL Medical Web Portal

1. Medical statistical information about each Hockey Player shall be entered in the KHL Medical Web Portal in accordance with the Regulation on the KHL Medical Web Portal (Appendix 1 to the KHL Medical Regulations).
2. In case of improper entry of information in the KHL Medical Web Portal, the penalties provided for by the KHL Disciplinary Regulations may be applied to the Club.

### Article 3. Medical licensing in the Club

Medical care in the Russian Clubs shall be managed under a medical practice license obtained in accordance with the laws of the Russian Federation by the Club or the administration of the Sports Facility. It is recommended to obtain a medical practice license for physical therapy and sports medicine.

Medical licensing of the Foreign Clubs shall be subject to national healthcare laws.

### Article 4. Club Medical Service

1. Medical support (medical care) of a KHL Club shall be provided by the Club's Medical Service.
2. The staff of the Club's Main Team Medical Service shall comprise at least one (1) doctor with a degree in "General medicine" and one (1) medical professional with vocational medical training.
3. All Club doctors are required to have a valid certificate of accreditation in "Physical therapy and sports medicine" or to be in the process of professional retraining in physical therapy and sports medicine. Copies of the certificates attested by the Club's personnel department shall be transferred to the KHL Medical Authority within one (1) month after their receipt.

Club doctors are recommended to undergo a thematic advanced training in the basic course of cardiopulmonary resuscitation.

4. The Club massage therapist shall be medical professional with vocational medical training and

## KHL MEDICAL REGULATIONS

- have a valid certificate of accreditation in “Medical massage” or “Physical therapy”.
5. The Club Physical Therapy instructor shall be medical professional with vocational medical training and have a valid certificate of accreditation in “Physical therapy”.
  6. The Club medical rehabilitation therapist shall be medical professional with vocational medical training and have a valid certificate of accreditation in “Physical Medicine and Rehabilitation”.
  7. The Club Medical Service staff may comprise other full-time medical professionals if they have a national certificate in the relevant medical training, valid certificates of specialist accreditation, and if the Club is licensed for this type of medical care.

### **Article 5. Club Doctor’s job description**

1. Conduct continuous medical monitoring of the Hockey Players’ health and tolerance to training and competition loads.
2. Provide emergency and urgent medical care to the participants of competitions: athletes, specialists working with athletes, organizers of the competitions, Spectators, personnel of Sports Facilities.
3. Arrange diagnostic and treatment activities for a Hockey Player on a regular basis when corresponding changes in his health take place.
4. Keep the required medical records of Hockey Players’ health encounters, health screening done, the proven diagnosis and the assigned therapy.
5. Immediately inform the Club’s management and the KHL Medical Authority about any life-threatening changes in the health of Club Hockey Players, including cases of revealing an infectious disease.
6. Take preventive and anti-epidemic measures if a patient with suspected infectious disease is detected among Hockey Players and employees of the Club in consistence with the approved Procedure for such measures posted on the Electronic Medical Portal.
7. Provide the requested medical information to the KHL Medical Authority within 24 hours of receiving the official request from the KHL.
8. In case of a call to the national team of the Club's Hockey Player, provide the FHR with a Medical Statement on the Health Status of the Player (Hockey Player) in accordance with the approved form (Appendix No. 14 to the KHL Medical Regulations).
9. Comply with the principles of confidentiality and using individual cipher codes assigned to each Hockey Player for entering information in the KHL Medical Web Portal.
10. Promptly fill out the individual medical record of a Hockey Player in accordance with the Regulation on the KHL Medical Web Portal over the lifetime of the Hockey Player’s Contract with the Club (Appendix 1 to the KHL Medical Regulations).
11. At the request of a Hockey Player provide copies of the results of preseason tests and the preseason (precontract) in-depth medical examination (IDME) and other medical documents.
12. Arrange for the Hockey Players eligible to play for the Club’s Main Team a mandatory preseason (precontract) in-depth medical examination (IDME), and another IDME before the start of the Second Stage of the Championship (play-off), taking into account the program recommended by the KHL Medical Authority (Appendix 3 to the KHL Medical Regulations), but at least once per six (6) months.
13. Attend all Games and training sessions of the Club’s Main Team, carrying the medicines and medical equipment required for providing emergency medical care (Appendix 2 to the KHL Medical Regulations).
14. When providing medical care to Hockey Players, use only the medicines and methods that are

## **KHL MEDICAL REGULATIONS**

officially registered in the Russian Federation (with the exception of the Foreign Clubs). If the Doctor's kit includes medicines and medical devices included in the lists of substances and/or methods prohibited for use in sports in accordance with the All-Russian Anti-Doping Rules approved by the federal executive authority in the field of physical culture and sports, and anti-doping regulations approved by international anti-doping organizations, such medicines and medical devices shall be marked with warning stickers "Prohibited by WADA".

15. Use, if necessary for life saving, the substances and methods included in the WADA Prohibited List, in accordance with the International Standard for Therapeutic Use, assist the Hockey Player in immediate preparation of a retroactive request for 'therapeutic use' to RUSADA or another national anti-doping organization and immediately inform the Club's management and the KHL Medical Authority thereof.
16. Inform Hockey Players and other Club employees about the main provisions of the anti-doping rules and amendments thereto.
17. Control RUSADA/WADA website training of the new Hockey Player who arrived to the Club's location and has no anti-doping certificate, before the Hockey player is added to the roster for participating in the Championship.
18. Carry out professional activities as part of the Game Medical Team during the Game.
19. Improve professional skills, attend awareness-raising, tutorial and training workshops, academic conferences and symposia on sports medicine and anti-doping support, including those held by the KHL, also including distance learning and testing.
20. Annually undergo anti-doping online training on RUSADA/WADA website not later than January 31 of the current year and receive the respective certificate.
21. Submit to the KHL Medical Authority the requested information about education, work experience, other professional information, as well as personal information (such as telephone number and e-mail).

### **Article 6. Requirements for medical bag composition**

1. During the Championship Games, the Club doctors shall always have medicines and medical equipment (including an automatic defibrillator) at their disposal to deliver emergency and urgent medical care (Appendix 2 to the KHL Medical Regulations).
2. All medicines included in medical bags shall be officially registered in the Russian Federation (with the exception of Foreign Clubs).

## **CHAPTER 2. REQUIREMENTS FOR MEDICAL STATIONS AT SPORTS FACILITIES AND EQUIPPING A CLUB'S MEDICAL ROOM**

### **Article 7. Requirements for the organizing and equipping a Sports Facility Medical Station**

1. In order to provide medical support during the KHL Championship Games, a Sports Facility shall comprise at least one (1) properly licensed Sports Facility Medical Station.
2. The Sports Facility Medical Station is intended to provide medical care to the participants of competitions: athletes, specialists working with athletes, organizers of the competitions, Spectators, personnel of Sports Facilities.
3. There shall be a direct, clearly marked, unhindered access to the Sports Facility Medical Station.
4. Employees of Clubs and the Sports Facility, Spectators and other Game participants shall be able to visit the Medical Station unassisted, without the need to contact third parties.
5. It is recommended to equip the Sports Facility Medical Station with medicines, property, instruments and hardware in accordance with Appendix 4 to the KHL Medical Regulations.
6. 6. Medicines and medical devices available at the Medical Station for Hockey players, included in

## KHL MEDICAL REGULATIONS

the lists of substances and/or methods prohibited for use in sports in accordance with the All-Russian Anti-Doping Rules approved by the federal executive authority in the field of physical culture and sports, and anti-doping regulations approved by international anti-doping organizations, shall be marked with warning stickers “Prohibited by WADA”.

7. If the Sports Facility has more than 3,000 Spectator seats, it is recommended to have one (1) additional Sports Facility Medical Station for every 6,000 Spectators.

### **Article 8. Requirements for equipping the Club Medical Room with medicines and instruments**

1. In addition to the Sports Facility Medical Station, a Club Medical Room can be established in order to effectively arrange medical support by the Club, which shall be licensed to provide medical care.
2. The minimum recommended equipment of the Club Medical Room is listed in Appendix 5 to the KHL Medical Regulations.
3. Medicinal equipment of the Club Medical Rooms is recommended by the KHL Medical Authority in accordance with Appendix 4 to the KHL Medical Regulations.
4. It is recommended to allocate separate rooms in the Sports Facility, in direct proximity to the visiting team dressing room, so that the visiting team’s doctor could arrange a massage room there.

## **CHAPTER 3. MEDICAL EXAMINATIONS (HEALTH SCREENING) OF HOCKEY PLAYERS**

### **Article 9. Scope and timing of in-depth medical examination (IDME)**

1. Hockey Players of KHL Clubs are at the stage of top sport performance, therefore an in-depth medical examination (IDME) shall be performed at least once per six (6) months.
2. IDME shall take place only at specialized healthcare facilities (exercise therapy centers) properly licensed to provide health care.
3. The IDME program is set out in Appendix 3 to the KHL Medical Regulations.
4. The IDME results shall be submitted to the KHL Medical Authority as the original copy of a medical opinion on the admission to training sessions and participation in sports competitions prepared by the healthcare facility conducting the IDME. The recommended medical opinion forms are presented in Appendices 6, 7 to the KHL Medical Regulations. A copy of the medical opinion shall be posted on the KHL Medical Web Portal two (2) business days before the Club files an application to participate in the KHL Championship. For more information on medical opinion, see Chapter 4.
5. The preseason (precontract) IDME shall be conducted annually early in the season upon the Hockey Player’s arrival to the Club premises (or within five days before the start date of the Club’s Preseason Practice Session) or before entering into a Contract between the Club and the Hockey Player (including during the season), prior to the commencement of participation in any Games and training sessions associated with physical activity. If the Hockey Player has undergone the preseason (precontract) IDME and was included in the Club’s roster before the season start, then in case of transfer to another KHL Club during the same season, no extra medical permission shall be issued for him.
6. A Contract between a Club and a Hockey Player shall become effective only if the results of the preseason (precontract) IDME prove that the Hockey Player has no diseases (injuries) that would prevent him from playing ice hockey.
7. The second IDME of Hockey Players shall be conducted in six (6) months after a preseason (precontract) IDME.

## KHL MEDICAL REGULATIONS

8. All the Club's Hockey Players who have valid Contracts by the close of the First Stage of the Championship shall undergo the second IDME.
9. The results of a second IDME shall be submitted to the KHL Medical Authority within five (5) business days after the examination.
10. IDME may be omitted by Hockey Players who play for the national team and who were called in such team's premises or who participate in international competitions during the specified period as part of the national team.

Athletes who have diseases with temporary contraindications to physical activity can undergo the IDME individually.

In order to determine the individual dates for their IDME Hockey Players need to contact the KHL Medical Authority.

11. If, on the results of the IDME, a Hockey Player receives no admission to the training sessions and to participation in sports competitions the Club shall add such Hockey Player to the List of Injured Players.

### **Article 10. Decision making algorithm in case of detecting adverse changes in a Hockey Player's Health**

1. In case of obtaining data on pathological changes that significantly impair the health of a Hockey Player, or arising suspicion of a poorly conducted IDME, the KHL Medical Authority shall be entitled to solicit the KHL executives to conduct additional health screening of that Hockey Player involving subject matter medical experts.
2. The decision to exclude a Hockey Player from the training sessions and/or the competitive process for medical reasons shall be made by the chairperson of the medical commission of the medical organization that conducted the preseason (precontract) IDME.
3. In the event of injury and detection of diseases as a result of the IDME that prevent engagement in professional sport (ice hockey), the Contract between the Club and the Hockey Player may be terminated in the manner prescribed by the KHL Legal Regulations and the Hockey Player's Contract.

## CHAPTER 4. CLUB TEAMS' MEDICAL ROSTERS

### **Article 11. Procedure for a Club Team's medical roster**

1. A Club team's Medical Roster precedes the submission of the roster files to the KHL Department of Competitions.
2. A Club team's Medical Roster shall be drawn up by the KHL Medical Authority and shall include the submission of documents by the Club and filling out the KHL Medical Web Portal.

The documents required for the Club team's Medical Roster are following:

- 1) A Medical Opinion on Admission to Participate in Physical Culture and Sports Events (Practice Events and Sports Competitions), Measures to Assess Compliance with the Test Standards of All-Russian Physical Culture and Sports Complex "Ready for Work and Defence"(Appendix 7 to the KHL Medical Regulations) or the Medical Opinion on the Admission of a Sports Team Athletes to Participate in a Sports Event (Appendix 6 to the KHL Medical Regulations);
- 2) the medical license of the Sports Facility Medical Station;
- 3) the medical license of the Hockey Club;
- 4) a list of the Club's medical staff (specifying their educational background, work experience, date of birth and contact details: telephone number, e-mail);
- 5) copies of academic credentials (certificates) of the Club's medical staff certified by the Club's



## KHL MEDICAL REGULATIONS

personnel department;

- 6) copies of valid RUSADA/WADA Certificates of the team's doctor and an employee who is responsible for anti-doping activity in the Club, and Hockey Players;
  - 7) the Game Medical Team composition for the Game in the approved form (Appendix 8 to the KHL Medical Regulations);
  - 8) a copy of the agreement for the support of the Games by at least 2 (two) medical crews;
  - 9) a color photo or video report on the results of the Medical Team's trainings for the evacuation of a purportedly injured Hockey Player with a spinal injury or head injury from an ice rink and according to the cardiopulmonary resuscitation protocol (at least five photographs);
  - 10) a list of healthcare facilities providing medical care to the Hockey Players, or an agreement with an insurer under a voluntary health insurance scheme;
  - 11) the plan of evacuating a purportedly injured Hockey Player from ice;
  - 12) the order appointing an employee among the executives who is responsible for arrangement of the Club's work on Doping prevention in sport and for communications with anti-doping organizations and the KHL on anti-doping support issues;
  - 13) An acknowledgement form for reading and understanding of All-Russian Anti-Doping Rules (WADA Code - for Foreign Clubs) by Hockey Players and the Club's staff (Appendix 13 to the KHL Medical Regulations).
  - 14) additional documents (if necessary).
3. The documents referred to in clause 2 hereof shall be uploaded to the KHL Medical Web Portal. The original medical opinions on the admission of Hockey Players in two (2) copies (Appendices 6, 7 to the KHL Medical Regulations) shall be submitted to the KHL Medical Authority on the date of filing the Club's roster.
  4. The Hockey Players' IDME results shall be uploaded to the KHL Medical Web Portal no later than two (2) business days before the official date of the Club's competition entry for participation in the Championship.
  5. In case of failure to provide the documents specified in clause 2 hereof, or any mistakes in their completion, or inadequate filling in of the Hockey Players' electronic cards on the KHL Medical Web Portal, the Hockey Player's lineup shall not be accepted.

### **Article 12. The Form of medical opinion on admission to training sessions and participation in the Championship**

1. A medical opinion on admission to training sessions and participation in the Championship shall be completed for all the Hockey Players who have undergone IDME in accordance with the approved program (Appendix 3 to the KHL Medical Regulations). The medical opinion can be drawn up in the form of a Medical Opinion on Admission to Participate in Physical Culture and Sports Events (Practice Events and Sports Competitions), Measures to Assess Compliance with the Test Standards of All-Russian Physical Culture and Sports Complex "Ready for Work and Defence" (GTO) (Appendix 7 to the KHL Medical Regulations) or a Medical Opinion on the Admission of a Sports Team Athletes to Participate in a Sports Event (Appendix 6 to the KHL Medical Regulations).
2. The medical opinion on admission shall contain the nominal game roster of the Club team, certified by the 'Admitted' mark in front of each Hockey Player's name and by the sports medicine doctor's signature and personal seal.

The medical opinion on admission shall be signed by the sports medicine doctor deciphering the last name, first name and patronymic (if any) in print and certified by the seal of the healthcare facility licensed to provide medical care, and the license shall encompass work (services) on

## KHL MEDICAL REGULATIONS

physical therapy and sports medicine (by the Club Doctor and Club Manager — on the Medical Lineup).

3. In case of a roster addition of a new Hockey Player in whose regard no lineup has been previously submitted by another Club, the Club shall submit to the KHL Medical Authority a separate medical opinion on the admission of this Hockey Player.
4. In case if more than one page is used for drawing up the medical opinion on admission, duplex printing shall be applied, or the sheets shall be bound and numbered.

### **CHAPTER 5. REQUIREMENTS FOR MEDICAL SUPPORT OF THE CHAMPIONSHIP GAMES AND TRAINING SESSIONS**

#### **Article 13. General requirements for medical support of the Games and training sessions**

1. Medical support for all competitions organized by the KHL shall be provided by forming a Game Medical Team.
2. In Foreign Clubs, the medical support of the Games is based on the effective healthcare laws of the countries participating in the Championship.
3. It is strictly prohibited to hold Championship Games without the participation of a Game Medical Team.
4. It is not allowed to conduct trainings on the ice without a functioning Sports Facility Medical Station and with no immobilization devices (gurney, cervical collar, spinal board, scoop stretcher) and no medical equipment (including an automatic defibrillator) directly at the ice rink.
5. The evacuation of an injured Hockey Player shall be performed according to the pre-approved evacuation plans. The evacuation routes shall never be blocked.

#### **Article 14. Game Medical Team**

1. Game Medical Team to support the Championship Games shall be formed jointly by the Club and the administration of the Sports Facility prior to the season start.
2. Information about the Game Medical Team composition shall be provided to the KHL Medical Authority in the approved form (Appendix 8 to the KHL Medical Regulations) and within the deadline for submitting the Club's medical roster for participation in the Championship. In case of any changes in the composition of the Game Medical Team during the Championship, relevant information shall be provided to the KHL Medical Authority in the approved form (Appendix 8 to the KHL Medical Regulations) within three (3) days.
3. The permanent composition of the Game Medical Team for the entire game season is represented by:
  - 1) Chief Physician of Competitions;
  - 2) the sports medicine doctor of the Sports Facility Medical Station;
  - 3) the home team doctor.
4. In addition to the permanent Game Medical Team composition, each Game shall be attended by ad hoc members:
  - 1) Two (2) mobile medical crews: one (1) class B EMS, one (1) specialized EMS (class C resuscitation team);
  - 2) the visiting team doctor.
5. The staff of the Game Medical Team shall have clear distinctive badges on their clothes.
6. In case of failure to comply with the requirements for the formation of the Game Medical Team working at the Championship Games, the KHL may, in the prescribed manner, apply the penalties provided for by the KHL Disciplinary Regulations.

## KHL MEDICAL REGULATIONS

### **Article 15. Functions of the Game Medical Team**

1. The Game Medical Team is responsible for medical support during the preparation for the Game, during the Game itself and upon completion of the Game during the time period specified in clause 6 hereof.
2. The Chief Physician of Competitions shall perform his functions in accordance with the Regulation on managing the work of the Chief Physician of Competitions during the Championship Games (Appendix 9 to the KHL Medical Regulations).
3. Responsibilities of the Game Medical Team at the preliminary stage (preparation for the Game):
  - 1) identifying the medical evacuation routes from the competition venues and Spectator grandstands;
  - 2) conducting joint trainings with the medical staff of mobile medical crews to evacuate the injured and sick persons to medical organizations, as well as to cooperate in cases of emergencies of a natural, man-made and terrorist nature;
  - 3) in case if certain circumstances occur that prevent holding the Game (for example, inability to arrange evacuation to a medical organization or difficulties in providing effective medical care at the Sports Facility Medical Center), the Chief Physician of Competitions shall inform the Chief Referee of Competitions and the Clubs' executives thereof before the Game;
  - 4) in case if any medical, sanitary and epidemiological risks to the life and health of the Game participants and Spectators are detected, the Chief Physician of Competitions may recommend in writing to the Chief Referee that the Game be canceled or postponed.
4. During the Game the Game Medical Team in cooperation with the mobile medical crews shall provide medical care to the Hockey Players, including on the ice rink, to the Spectators and other Game participants.
5. Upon completion of the Game, the teams' doctors shall enter information about the injuries of the Hockey Players into the Electronic Register of the Chief Physician of Competitions through the Chief Physician of Competitions and in the Official Game Report through the secretary.
6. Representatives of the Medical Team shall be at the Sports Facility and in close proximity to the ice rink from the beginning of admission Spectators in the Sports Facility but at least one hour before the start of the Game, during the Game, and also within 30 minutes after the end of the Game.
7. The Game Medical Team and mobile EMS crews supporting the Games shall be subordinate to the Chief Physician of Competitions.

### **Article 16. Location of the Game Medical Team at the Sports Facility**

1. At the Sports Facility, six (6) seats shall be provided to accommodate representatives of the Game Medical Team, and also parking spaces for two ambulance cars for the entire duration of the Game.
2. The seats for representatives of the Game Medical Team shall be located in the immediate vicinity of the rink, close to the storage space of the evacuation/transport medical equipment and technological gates for ice-resurfacing machines, not higher than the second row of the ice arena grandstands.
3. The seats for representatives of the Game Medical Team shall be marked with a sign (at least 30 × 40 cm in size, white background, red cross in the center), which shall be visible from all points of the ice rink and Spectator grandstands.

### **Article 17. Procedure for rendering medical assistance on the ice during the Game and training sessions**

1. Medical assistance to a Hockey Player in the event of injury shall be provided by the Game

## **KHL MEDICAL REGULATIONS**

Medical Team on the spot of injury and in strict accordance with the following protocol:

- 1) when a Hockey Player gets an injury requiring medical intervention directly on the ice rink, the Club doctor shall be the first to enter the ice to provide medical assistance, with the permission of the Referee;
  - 2) if this amount of medical care is insufficient, the Club doctor shall give a pre-agreed signal (for example, a raised fist) for the Game Medical Team to enter the ice rink;
  - 3) when evacuating the injured Hockey Player from the ice rink, the Game Medical Team shall act in strict accordance with the requirements of the IIHF Medical Regulations (training video “Rescue on the Ice”) and the FHR Medical Regulations (Appendix 10 to the KHL Medical Regulations);
  - 4) it is strongly prohibited to attempt moving, lifting, or any other manipulations with the injured Hockey Player lying on the ice before the arrival of the Club doctor;
  - 5) in the event if a Hockey Player is injured during a training session, the Club doctor shall independently decide to come on the ice.
2. After being evacuated from the rink, the injured Hockey Player shall be immediately transported by a mobile ambulance team to a healthcare facility to receive specialized medical care (in case of appropriate medical indications).
  3. The decision on medical evacuation of the Hockey Player to a healthcare facility shall be made by the EMS doctor in consultation with the Club doctor and the Chief Physician of Competitions. If the health condition of the Hockey Player is not life-threatening, but evacuation to a healthcare facility is required, the EMS crew shall call for an additional local EMS crew, unless otherwise provided for by the EMS attendance service agreement.
  4. Information about the Hockey Player being admitted to hospital shall be immediately communicated by the Chief Physician of Competitions to the KHL Medical Authority via the Electronic Register of the Chief Physician of Competitions.
  5. The ambulance car that has left shall immediately be replaced by the second ambulance team car, and an additional ambulance car shall be called in to provide the required number of ambulance cars at the Sports Facility during the Game.
  6. All cases of providing medical care to the Game participants and the Spectators, as well as information about admissions to hospital, shall be recorded by the Chief Physician of Competitions in the Outpatient Admission Log of the Sports Facility Medical Station and in the Electronic Register of the Chief Physician of Competitions.
  7. The Outpatient Admission Log of the Sports Facility Medical Station shall be set up by the administration of the Sports Facility or the Club before each season start; its pages shall be numbered and bound.
  8. Complaints about medical support of the Game shall be accepted by the Chief Physician of Competitions only in writing and within 30 minutes after the end of the Game.

### **CHAPTER 6. DOPING CONTROL IN THE KHL**

#### **Article 18. General provisions**

1. The KHL implements a number of measures to prevent and fight against Doping in sport, based on the effective Russian and international laws and regulations in the field of countering the spread of Doping in sport, including Doping Control at the Championship Games.
2. The Club Hockey Players, Coaches, medical staff are personally responsible for violation of anti-doping rules.
3. An employee responsible for arrangement of the anti-doping activity, the Club’s doctor and Hockey Players shall annually, by January 31 at the latest, complete an on-line anti-doping

## KHL MEDICAL REGULATIONS

training course on the RUSADA/WADA web site.

4. The following actions and circumstances are considered to be a violation of the anti-doping rule:
  - 4.1. Presence of a prohibited substance or its metabolites or markers in an athlete's test taken during the Competition or out-of-competition period;
  - 4.2. Use or attempted use by an athlete of a prohibited substance or a prohibited method;
  - 4.3. Evasion of passing a test, or refusal without a valid reason, or failure to appear at the test passing procedure after being informed thereof in accordance with applicable anti-doping rules;
  - 4.4. Violation of the procedure for providing information on the location:
    - any combination of three (3) missed tests and/or failure to provide information on the location of the Hockey Player included in the Registered Testing Pool within twelve (12) months is a violation of the anti-doping rule and results in disqualification for 2 (two) years or more (the World Anti-Doping Code);
    - if a Hockey Player misses the deadline for providing information on his location, he shall be subject to 12 months of monitoring. The monitoring period cannot be reduced even if the results of Doping tests passed by the Hockey Player during this period are negative. If the Hockey Player does not make two more refusals to provide location information within the 12-month period, the monitoring shall be terminated after this period;
    - refusal to provide information on the location shall be deemed to have occurred on the first day of the quarter for which the Hockey Player did not enter the required data or in the event of any subsequent refusal to provide data during the same quarter after notification of the anti-doping organization when the Hockey Player failed to provide information by the deadline;
    - shall a Hockey Player skip a Doping test, the 12-month monitoring shall commence from the date when the sample failed to be taken.
  - 4.5. A falsification or attempted falsification in any component of Doping Control.
  - 4.6. Possession of a prohibited substance or a prohibited method.
  - 4.7. Distribution or attempted distribution of a prohibited substance or a prohibited method.
  - 4.8. Administration or attempted administration to any athlete during the competition period of any prohibited substance or prohibited method, or administration or attempted administration to any athlete during the out-of-competition period of a prohibited substance or a prohibited method that are prohibited during the out-of-competition period.
  - 4.9. Complicity.
  - 4.10. Prohibited cooperation.
  - 4.11. Actions of a Hockey Player or other person aimed at obstructing or prosecuting the provision of information to authorized bodies
5. The actions specified in clauses 4.1, 4.2, 4.6, 4.8 hereof shall not constitute a violation of the anti-doping rules if, at the time of their performance, there was a Therapeutic Use Exemption (TUE) issued in accordance with the International Standard for Therapeutic Use Exemptions, or there were circumstances stipulated by this International Standard, allowing for such an exemption after said actions were performed.

### **Article 19. Therapeutic Use Exemptions for prohibited substances and methods**

1. A Hockey Player in need of taking medicines prescribed by a doctor but included in the Prohibited List shall obtain a Therapeutic Use Exemption (TUE).

## KHL MEDICAL REGULATIONS

2. In order to obtain a TUE for substances and/or methods that are prohibited only during the competition period, a Hockey Player shall apply at least 30 days before the start of the Competition.
3. In case of emergency medical care or a sharp deterioration of health, a Hockey Player may apply for a retroactive TUE.
4. An application for a TUE may be submitted to the national anti-doping organization, the International Ice Hockey Federation or another anti-doping organization in the manner prescribed by the anti-doping organization.
5. A TUE that meets the requirements of the International Standard for Therapeutic Use Exemptions granted by the national anti-doping organization shall be recognized by the International Ice Hockey Federation. In the event that the IIHF refuses to recognize a TUE, the Hockey Player and the national anti-doping organization shall be immediately informed thereof.
6. An application for a TUE shall be submitted in the prescribed form and shall be accompanied by the following documents:
  - a statement from a qualified physician certifying that the Hockey Player is in need of using a prohibited substance or a prohibited method for therapeutic purposes (included in the form for a TUE);
  - a detailed clinical record, including documents from the doctors who originally diagnosed the disease (when possible), the results of laboratory and clinical studies, and the imaging studies (ultrasonography, MRI, CT, X-ray, echocardiography, electrocardiography, electroencephalography, etc.).
7. For complete information on the TUE granting procedure, see the International Standard for Therapeutic Use Exemptions.

### **Article 20. Doping Control arrangements in the KHL**

1. Each Sports Facility selected for the Championship Games shall comprise Doping Control facilities. Requirements for the equipment of the Doping Control Station are set forth in Appendix 11 to the KHL Medical Regulations. In case of failure to comply with the requirements for the equipment of the Doping Control Station, the KHL may, in the prescribed manner, apply the penalties provided for by the KHL Disciplinary Regulations.
2. The Club shall appoint an employee among the executives who is responsible for arrangement of the Club's work on Doping prevention in sport and for communications with anti-doping organizations and the KHL on anti-doping support issues. The contact details of the designated person shall be communicated to the KHL Medical Authority along with the Club team roster for participation in the KHL Championship.
3. Hockey Players can be subjected to Doping Control at any time, both during the competition period, starting 12 hours before the start of the Game, and during the out-of-competition period.
4. Out-of-competition tests shall be conducted without prior notice to Hockey Players.
5. Urine samples may be collected for Doping Control. The procedure for taking Doping samples is described in Appendix 12 of the KHL Medical Regulations.
6. Doping testing can be targeted or random. In random testing, Hockey Players shall be selected for Doping Control by drawing of lots, which takes place in the second intermission of the Game witnessed by representatives of both teams.
7. During the season, a Hockey Player may receive a Doping Control notification an unlimited number of times.
8. The planning, sampling, transporting and obtaining the sample analysis results as part of the Doping Control of Championship Games and out-of-competition Doping Control shall be carried

## KHL MEDICAL REGULATIONS

out by the anti-doping agency that signed the WADA Code (RUSADA, IIHF, etc.), or a certified Doping sample collection agency.

9. The Hockey Players' competition Doping testing procedure can be monitored by the IIHF auditors or another organization authorized by the KHL.
10. When conducting Doping Control at the Game, the host Club shall ensure the presence of four (4) Chaperones, whose duties include notifying a Hockey Player that he is selected to take the test, escorting the athlete to the Doping Control Station, surveillance over the athlete from the moment of notification to him being registered at the Control Station, and monitoring the athlete inside or outside the Doping Control Station. The Chaperones shall be of the same sex as the athletes and meet the following requirements:
  - aged 18 or older;
  - able to communicate easily in English and Russian (verbally and in writing);
  - have no conflict of interest in this kind of sport (hockey) and/or with the athletes (Hockey Players) at any of the following levels:
    - the Game (e.g., an opponent, Coach, Official, official team representative);
    - the organization (the district, national or international level);
    - personal and professional contacts (e.g., a relative, friend, acquaintance or client).
11. The cases of violation of anti-doping rules shall be considered and decided on by the anti-doping organization in the prescribed manner, in accordance with the laws of the Russian Federation and the WADA Code.
12. In case of disagreement with the decision made by the anti-doping organization, a Hockey Player may appeal to the Court of Arbitration for Sport at the Arbitration Chamber for Sports Autonomous Non-profit Organization (CAS).

### CHAPTER 7. FINAL PROVISIONS

#### **Article 21. KHL Medical Regulations effectiveness**

The KHL Medical Regulations come into effect from the moment they are approved by the CHL LLC Board of Directors and shall remain effective until the approval of the new KHL Medical Regulations.

**Appendix 1**

**REGULATION ON THE KHL MEDICAL WEB PORTAL**

**Article 1. General provisions**

1. The Medical Web Portal (MWP) is an information resource of the KHL that contains information about the Hockey Players' health.
2. The MWP functioning is based on the principles of medical ethics, medical secrecy and confidentiality.
3. The Legitimacy of the MWP is based on the laws of the Russian Federation and local regulations of the KHL.

**Article 2. Goals, objectives and functions of the Medical Web Portal**

1. The KHL Medical Web Portal was set up with the purpose of automated statistical analysis of the morbidity and injury patterns in the Clubs (in particular) and in the KHL (in general) in order to continuously improve the quality of medical care in the KHL, to preserve health and the sports "longevity" of the Hockey Players.
2. Objectives of the KHL Medical Web Portal:
  - 1) to collect, store and statistically analyze the data on the state of health of Hockey Players, traumas, acute and chronic diseases;
  - 2) promptly submit to the KHL's executives unbiased information on the morbidity and injury patterns in the KHL;
  - 3) to form, maintain, update, and store medical and statistical information to simplify the transfer of information about a Hockey Player to the Clubs upon the decision of the KHL's executives.

**Article 3. Personal data and medical information about state of health of Hockey Players and the forms of statistical medical reporting contained on the MWP**

1. Medical information is entered in the MWP by a Club doctor or an employee authorized by him and represents information regarding the state of health of a Hockey Player in the medical record obtained as a result of each IDME of the Hockey Player or cases of providing medical aid. In case of a disease, the diagnosis is entered in accordance with the current International Classification of Diseases (ICD).
2. Statistical analysis of personal medical information about the state of health of KHL Hockey Players, morbidity and injuries is carried out by the Head of the KHL Medical Authority personally using the Medical Reporting Forms and within the timeframe approved by the KHL's executives.
3. Medical information about the state of health of Russian KHL Hockey Players can be presented by the KHL Medical Authority to the Head Coach and the doctor of the national team of the Russian Federation for the benefit of composing the team, if there is an official request from the Russian Hockey Federation and if agreed with the KHL's executives.

**Article 4. Principles of ensuring the safety of storage and transmission of medical information on the Medical Web Portal**

1. Personal data and medical information about a Hockey Player that is uploaded to the MWP is strictly confidential and cannot be disclosed.
2. All parties who have obtained access to personal medical information about Hockey Players, when using it, are obliged to observe the Federal Law No. 152-FZ "On Personal Data" dd. July 27, 2006 and be responsible for disclosing this information in accordance with the effective laws of the Russian Federation on personal data protection.



## KHL MEDICAL REGULATIONS

3. One can log on the MWP using a login and a password which are only at the Club doctor's disposal and cannot be disclosed to third parties.
4. Personal medical information about KHL Hockey Players is stored on a dedicated server with periodic backups of the entire pool of the medical data.

### **Article 5. Access to the Medical Web Portal**

1. Unlimited access to the MWP is granted to:
  - 1) the head of the KHL Medical Authority;
  - 2) authorized employees of the KHL Medical Authority.
2. Restricted access to the MWP is granted to the Club doctors (access only to the medical records of the Hockey Players of their Club). To obtain the Club doctor access to the MWP for the purpose of obtaining personal medical information about a Hockey Player with the status of an "Fully Free Agent", the Club shall submit an official request to the Head of the KHL Medical Authority.
3. To obtain access to the MWP the doctors of the national hockey teams of the Russian Federation, the FHR shall send an official request to the Head of the KHL Medical Authority KHL (access to the medical records of the Hockey Players of the extended list of national hockey teams of the Russian Federation);
4. if a new user account is required or restoring the user's password, the Club or the FHR shall send an official request to the head of the KHL Medical Authority.

KHL MEDICAL REGULATIONS

Annex 5  
to the agenda voting form  
of the meeting of CHL LLC Board of Directors on \_\_ \_\_\_\_ 2021

**Appendix 2**

**THE REQUIREMENTS TO DRUG PRODUCTS AND MEDICAL PRODUCTS PACKING OF SPORTS MEDICINE PHYSICIAN**

**(in accordance with Order of Ministry of Public Health of the Russian Federation**

**dd. October 23, 2020 No.1144n)**

1. Drug products				
N	ATC - Code	Anatomical Therapeutic Chemical Classification System(ATC)	Drug product	Pharmaceutical form
1.1 Antiacids				
1.1.1	A02AB03	Aluminium phosphate	aluminium phosphate	gel for oral administration
1.2 Hemostatic agents				
1.2.1	A03AA04	Mebeverine	mebeverine	capsules
1.2.2	A03AD02	Drotaverine	drotaverine	solution for injections <*>
1.3 Agents for treatment of functional gastrointestinal disorders				
1.3.1	A03BA01	Anticholinergic drugs	Atropine	solution for injections <*>
1.4 Other agents for functional gastrointestinal disorders				
1.4.1	A03AX13	Simethicone	simethicone	granules, capsules, chewable tablets, oral drops, oral

## KHL MEDICAL REGULATIONS

				suspension, oral emulsion
1.5	Promotility agents			
1.5.1	A03FA01	Metoclopramide	metoclopramide	tablets
1.6	Antiemetic drugs			
1.6.1	A04AA01	Serotonin antagonists	Ondansetron	solution for intravenous<*> and intramuscular administration
1.7	Laxatives			
1.7.1	A06AB02	Contact laxatives	Bisacodyl	Tablets
1.8	Intestinal adsorbents			
1.8.1	A07BA01	Absorbent carbon	Absorbent carbon	tablets, capsules
1.8.2	A07BC05	Diosmectit	Diocahedral smectit	powder for oral suspension
1.9	Drugs reducing abdominal sounds			
1.9.1	A07DA03	Loperamide	Loperamide	tablets, capsules
1.10	Digestants (including enzyme preparations)			
1.10.1	A09AA02	Polyenzymatic agents (including lipase, protease)	Pancreatin	pills, capsules
1.11	Vitamins			

## KHL MEDICAL REGULATIONS

1.11.1	A11DA01	Vitamin B1	Thiamine	Solution for intramuscular administration
1.11.2	A11GA01	Pure ascorbic acid	Ascorbic acid	solution for intravenous<*> and intramuscular administration
1.11.3	A11HA02	Vitamin B6	Pyridoxine	solution for injections <*>
1.12 Anticoagulants				
1.12.1	B01AB01	Heparines	Sodium heparin	Ointment
1.13 Solutions affecting water and electrolyte balance				
1.13.1	B05BB01	Electrolytes	Sodium chloride	solution for injections <*>
1.14 Additives to solutions for intravenous administration				
1.14.1	B05XA30	Electrolytes combinations	Potassium & magnesium aspartate	Tablets
1.15 Cardiotonic agents				
1.15.1	C01CA04	Adrenal and dopamine-mimetics	Dopamine	solution for injections <*>
1.16 Beta-blockers				
1.16.1	C07AA05	Beta-blockers nonselective	Propranolol <*>	solution for intravenous administration, tablets
1.16.2	C07AB02	Beta-blockers selective	Metoprolol <*>	solution for intravenous administration, tablets
1.16.3	C07AB03	Beta-blockers selective	Atenolol <*>	Tablets

## KHL MEDICAL REGULATIONS

1.17 Selective calcium channel blockers with dominating effect on vessels				
1.17.1	C08CA05	Dihydropyridine derivatives	Nifedipine	coated tablets
1.18 Selective calcium channel blockers with direct effect on heart				
1.18.1	C08DA01	Phenyl-alkyl-amine derivatives	Verapamil	solution for intravenous administration <*>
1.19 Agents affecting angiotensin-renin system				
1.19.1	C09AA01	ACE inhibitors	Captopril	Tablets
1.19.2	C09AA02	ACE inhibitors	Enalapril	Tablets
1.20 Antiseptics and disinfectants				
1.20.1	D08AC02	Biguanides and amidines	Chlorhexidine	solution for topical and external application
1.20.2	D08AG02	iodine preparations	Povidone-iodine	solution for topical and external application
1.20.3	D08AX01	Other antiseptics and disinfectants	Hydrogen peroxide	solution for topical and external application
1.21 Antibacterial preparations for systematic use				
1.21.1	J01CA04	Beta-lactam antibiotics - penicillines	Amoxicillin	Tablets
1.21.2	J01MA02	Antibacterial preparations - quinolone derivatives	Ciprofloxacin	Coated tablets solution for infusion

## KHL MEDICAL REGULATIONS

1.22 Preparations for treatment of musculoskeletal system diseases				
1.22.1	M01AB15	Acetic acid derivatives and congeners	Ketorolac	tablets, gel, solution for intravenous <*> and intramuscular administration
1.22.2	M01AE01	Propionic acid derivatives	Ibuprofen	tablets, gel, solution for intravenous <*> and intramuscular administration
1.22.3	M01AE03	Propionic acid derivatives	Ketoprofen	tablets, gel, solution for intravenous <*> and intramuscular administration
1.22.4	M02AA15	Nonsteroidal anti-inflammatory drugs for topical administration	Diclofenac	tablets, gel, solution for intravenous <*> and intramuscular administration
1.22.5	M03AC01	Neuromuscular blocking agents of peripheral action	Pancuronium bromide	lyophilisate for solution for intravenous<*>administration
1.23 Topic anaesthesia preparations				
1.23.1	N01BA02	Aminobenzoic acid ethers	Procaine	solution for injections <*>
1.23.2	N01BB01	Amides	Bupivacaine	solution for injections <*>
1.23.3	D04AB01	Lidocaine	Lidocaine	spray for topical application metered-dose or spray for topical application
1.24 Other analgesics and antipyretics				
1.24.1	N02BE01	Anilides	Paracetamol	Tablets
1.25 Nasal preparations				

## KHL MEDICAL REGULATIONS

1.25.1	R01AD05	Corticosteroids	Budesonide	powder inhaler metered-dose inhaler dry powder metered-dose inhaler suspension
1.25.2	R01AX	Other nasal preparations for topical application		Nasal drops
1.26 Obstructive airway disease drugs				
1.26.1	R03DA05	Xanthines	Aminophylline	solution for intravenous administration <*> solution for intramuscular administration
1.27 Antitussives and catarrhal disease treatments				
1.27.1	R05CB01	Mucolytics	Acetylcysteine	powder for oral solution
1.28 Antihistaminic drugs for systemic use				
1.28.1	R06AA02	Alkyl amine ethers	Diphenhydramine	solution for intravenous<*> and intramuscular administration
1.28.2	R06AC03	Ethylenediamines substituted	Chloropyramine	solution for intravenous<*> and intramuscular administration
1.28.3	R06AE07	Piperazine derivatives	Cetirizine	Tablets
1.28.4	R06AX13	Other antihistaminic drugs for systemic use	Loratadine	Tablets
1.29 Eye disease drugs				

## KHL MEDICAL REGULATIONS

1.29.1	S01XA20	Other skin disease drugs	Artificial tears and other indifferent drugs	Nasal drops
1.30 Heart disease drugs				
1.30.1	C01DA02	organic nitrates	Nitroglycerin	sublingual metered-dose aerosol or solution for intravenous administration or infusion solution concentrate
1.30.2	C01BB01	Antiarrhythmic agents of Ib class	Lidocaine	solution for intravenous<*> and intramuscular administration
1.31 Tissue regeneration promoters				
1.31.1	D03AX03	Other drugs promoting normal cicatrization	Dexpanthenol	Aerosol for external application, ointment for external application
1.32 Nonsteroidal anti-inflammatory drugs for external use				
1.32.1	M02AA15	Nonsteroidal anti-inflammatory drugs for external use	Diclofenac sodium	Gel for external application, ointment for external application
1.33 Other skin disease drugs				
1.33.1	D11AX	Trophism and tissue regeneration improving drugs, for external use	Actovegin, Solcoseryl	gel for external application, cream for external application, ointment for external application
1.34 Antibacterial drugs				
1.34.1	D06AX07	Ointment for external use	Gentamycine	Ointment for external use



## KHL MEDICAL REGULATIONS

1.34.2	D08AH	Quinoline derivatives	Dioxidine	Ointment for external use
2. Medical products				
No	Name of medical product			Quantity, min
2.1.	Medical gauze bandage unsterile (14 cm x 7 cm)			5 pcs.
2.2.	Medical gauze bandage unsterile (7 cm x 5 cm)			5 pcs.
2.3.	Medical gauze bandage unsterile (10 cm x 5 cm)			5 pcs.
2.4.	Medical plaster, adhesive plaster (1 cm x 5 cm)			2 pcs.
2.5.	Medical plaster, adhesive plaster (2 cm x 5 cm)			2 pcs.
2.6.	Medical plaster, adhesive plaster (5 cm x 5 cm)			2 pcs.
2.7.	Medical plaster, antiseptic band-aid			A set
2.8.	Sterile dressing wipe (3 cm x 6 cm)			5 pcs.
2.9.	Sterile dressing wipe (16 cm x 14 cm)			10 pcs.
2.10.	Sterile dressing wipe (45 cm x 29 cm)			5 pcs.
2.11.	Fixing and compression dressings			A set
2.12.	Hygienic cotton wool			100 g pack
2.13.	Injection syringe disposable, 5.0 ml			5 pcs.

## KHL MEDICAL REGULATIONS

2.14.	Injection syringe disposable, 2.0 ml	5 pcs.
2.15.	Tourniquet	2 pcs.
2.16.	Medical examination gloves unsterile disposable	25 pairs
2.17.	Surgical gloves sterile disposable	10 pairs
2.18.	Tongue spatula, disposable	10 pcs.
2.19.	Mechanical sphygmomanometer with aneroid manometer (for arterial blood pressure measurement) with pediatric and adult patient pressure cuffs	1 pc.
2.20.	Phonendoscope	1 pc.
2.21.	Mouth gag disposable	1 pc.
2.22.	Surgical tweezer disposable	2 pcs.
2.23.	Surgical scissors disposable	2 pcs.
2.24.	Surgical forceps disposable	2 pcs.
2.25.	Automatic portable defibrillator	1 pc.
2.26.	A set of immobilization splints for limbs	1 pc.
2.27.	Manual respiratory apparatus	1 pc.
2.28.	Neurological reflex hammer	1 pc.
2.29.	Bandage (cervical collar of different sizes, a set)	1 pc.

## KHL MEDICAL REGULATIONS

2.30.	Ice bag	2 pc.
2.31.	Medical thermometer mercury-free in a case	2 pc.
2.32.	Electronic thermometer non-contact	1 pc.
2.33.	Thermochemical cold pack	2 pc.
2.34.	Cooling spray	2 pc.
2.35.	Pipette disposable	2 pc.
2.36.	Alcohol wipes	20
2.37.	Hand disinfection gel	1
2.38.	Diagnostic flashlight with power element	1
2.39.	Tourniquet for intravenous infusion	1
2.40	Medical unsterile 3-ply non-woven face earloop or tie-on face mask	20 pc.
3. Other products		
3.1.	Sports medicine doctor's bag (box, backpack), with a shoulder carrying strap	1
3.2.	Ampoule holder or a device specifically designed for storage (use) of ampouled drugs in the sports medicine doctor's bag (box, backpack)	1
3.3.	Tool case	1
4. Drugs for providing emergency medical aid<i>		

## KHL MEDICAL REGULATIONS

N	ATC - Code	Anatomical Therapeutic Chemical Classification System(ATC)	Drug product	Pharmaceutical form
4.1 Blood substitutes and perfusion solutions<*>				
4.1.1	B05BA03	carbohydrates	Dextrose	solution for intravenous administration and solution for infusions
4.1.2	B05BB01	electrolytes	sodium chloride compound solution [potassium chloride+calcium chloride+sodium chloride]	solution for infusion
4.2 Heart disease drugs<*>				
4.2.1	C01CA24	epinephrine	epinephrine (thermoreistant)	solution for injections
4.3 Corticosteroids of systemic action <*>				
4.3.1	H02AB02	dexamethasone	dexamethasone	solution for intravenous and intramuscular administration and solution for injections
4.3.2	H02AB06	prednisolone	Prednisolone (thermoreistant)	solution for intravenous and intramuscular administration and solution for injections
4.4 Obstructive airway disease drugs <*>				
4.4.1	R03AK03	Fenoterol in combination with other drugs	ipratropium bromide+fenoterol	aerosol for inhaling metered-dose and solution for inhaling
4.4.2	R03AC02	salbutamol	salbutamol	aerosol for inhaling metered-dose and solution for

## KHL MEDICAL REGULATIONS

				inhaling
4.5 Solvents and diluents, including irrigating solutions				
4.5.1	V07AB	solvents	water	solvent for preparation of pharmaceutical forms for injections
5. Medical products for providing emergency medical aid <ii>				
N	Name of medical product			Quantity, min
5.1.	Laryngeal mask airway disposable (size 3)			1 pc.
5.2.	Laryngeal mask airway disposable (size 4)			1 pc.
5.3.	Laryngeal mask airway disposable (size 5)			1 pc.
5.4.	Holders for infusion bottles <*> (with bracket, for 400 ml)			1 pc.
5.5.	Medical hemostatic forceps bent disposable			1 pc.
5.6.	Cannulation catheter for peripheral veins <*> (of different sizes), including device for infusion to small veins			6 pc.
5.7.	Bag for medical wastes class A (volume not less than 10 l)			1 pc.
5.8.	Bag for medical wastes class B (volume not less than 10 l)			1 pc.
5.9.	Rescue blanket isothermical (not less than 150 cm x 200 cm)			1 pc.
5.10.	Alcohol antiseptic wipe made from non-woven fabric (not less than 12.5 cm x 11.0 cm)			20 pc.

## KHL MEDICAL REGULATIONS

5.11.	Antiseptic with hydrogen peroxide	3 pc.
5.12.	Breathing stimulator with ammonia solution	3 pc.
5.13.	Sterile lancet disposable	2 pc.
5.14	Sterile hemostatic dressing based on zeolites or calcium and sodium aluminosilicates or hydrated calcium silicate (not less than 50 g) <*>	2 pc.
5.15.	Sterile hemostatic dressing with aminocaproic acid (not less than 6 cm x 10 cm)	2 pc.
5.15.1	Sterile hemostatic dressing based on chitosan <*>	2 pc.
5.16.	Anti-burn hydrogel sterile dressing (based on alliloxyethanol and lidocaine)	2 pc.
5.17.	Sterile wipe or drape (not less than 70 cm x 140 cm)	1 pc.
5.18.	Device for injection of infusion solutions <*>	3 pc.
6. Other products		
6.1	Ampoule holder or a device specifically designed for storage (use) of ampouled drugs, packing accessory in the sports medicine doctor's bag (box, backpack) for providing emergency medical aid	1 pc.

<\*> Drugs and/or methods of administration shall be used in accordance with the requirements of the laws of the Russian Federation on the prevention of and fighting against doping in sport, along with such international standards as the Prohibited List and the World Anti-Doping Code International Standard for Therapeutic Use Exemptions (ISTUE).

7. Packing shall be supplied with the drugs dedicated for medical application, which registered in accordance with the established procedure <sup>1</sup>, in primary packing or in secondary (user) packing without removal of Instruction for Medical Use.

8. Packing shall be supplied with the medical products, registered according to the established procedure <sup>2</sup>.

## KHL MEDICAL REGULATIONS

9. Packing is positioned in casing (container) with strong locks (fixators). Material and structure of casing (container) shall provide multiple disinfection.
10. Upon expiring of life time, drugs of medical use, medical products that were supplied for this packing, shall be subject to cancellation and elimination (disposal) in accordance with the law of the Russian Federation.
11. When use the medical drugs, medical products, that were provided for packing, it is required to complete packing again.
12. It is not allowed to supply for packing medical products, drugs for medical use in case of their non-sterility.
13. Completing of packing may change due to specificity of providing with the conditions at which one or another kind of sport/sport discipline is carried out (training activities, sport competitions), in accordance with the requirements of medical rules and regulations of sport organizations, as well as international.
14. Completing of packing of sports medicine physician may change due to specificity of providing with the conditions at which one or another kind of sport/sport discipline is carried out (training activities, sport competitions), in accordance with the requirements of medical rules and regulations of sport organizations, as well as international.
15. The corresponding warning labels “Prohibited by WADA” are glued on the packing with medical drugs and medical products, which are included in the list of substances and (or) methods, prohibited for use in sport in accordance with the All-Russian antidoping rules, approved by federal executive body in the field of physical training and sports, and antidoping rules, approved by international antidoping organizations.

-----  
<sup>1</sup> Decision of Council of the Eurasian Economic Commission dd. November 3, 2016 No.78 “On Rules of Registration and Expertise of the Drugs for Medical Use” (Official site of the Eurasian Economic Commission <http://www.eaeunion.org/>, November 21, 2016, July 20, 2018, February 21, 2020), Federal Law dd. April 12, 2010 No.61-FZ “On Drugs Circulation” (Collected Acts of the Russian Federation, 2010, No.16, Article 1815; 2020; No.29, Article 4516).

<sup>2</sup> Decision of Council of the Eurasian Economic Commission dd. February 12, 2016 No.46 “On Rules of Registration and Expertise of Safety, Quality and Effectiveness of Medical Products” (Official site of the Eurasian Economic Commission <http://www.eaeunion.org/>, July 12, 2016), Decree of the Government of the Russian Federation dd. December 27, 2012 No.1416 “On Approval of the Rules of State Registration of Medical Products” (Collected Acts of the Russian Federation, 2013, No. 1, Article 14; No.43, Article 5556; 2014, No. 30, Article 4310; 2017, No. 8, Article 1233; 2018, No. 24, Article 3523; 2020, No. 12, Article 1792).

**Appendix 3**

**PROGRAM OF IN-DEPTH MEDICAL EXAMINATION  
OF KHL HOCKEY PLAYERS**

The purpose of the in-depth medical examination of Hockey Players of KHL Clubs is to determine whether they shall be admitted to training sessions and competitions based on assessing their state of health, fitness level and functional capacity.

All Hockey Players of KHL Clubs are at the stage of top sport performance, therefore an in-depth medical examination (IDME) shall be carried out at least two (2) times a year.

**The IDME program of Hockey Players of KHL Clubs shall include the following:**

**Examination by medical specialists:**

1. Physical therapy and sports medicine doctor;
2. Physician;
3. Neurologist;
4. Trauma orthopedist;
5. ENT specialist;
6. Ophthalmologist;
7. Dentist;
8. Cardiologist;
9. STD and skin specialist;
10. Surgeon;
11. Urologist;
12. Other specialists (based on medical necessity).

**Instrumental diagnostic methods:**

13. Anthropometry (height, weight);
14. Spirography;
15. Abdominal ultrasonography;
16. Pelvic ultrasonography;
17. Thyroid ultrasonography;
18. Chest X-ray (once per year, before the season start);
19. ECG at rest (12-lead);
20. Echocardiography;
21. Treadmill test or bicycle ergometer test with achievement of maximum heart rate or maximum exercise load;
22. Analysis of the psycho-emotional status examination by SCAT (in the recent version);
23. Magnetic resonance imaging of the brain.

Mandatory for the Hockey Players diagnosed with brain concussion during the previous season of the Championship, and for the Hockey Players for whom no information is available as for such a diagnosis during the previous season of the Championship.

The rest of the team — if medically required;

24. Other specialized functional studies (based on medical necessity): duplex scanning of cerebral vessels, computed tomography, magnetic resonance imaging, electroneuromyography, cardiointervalography, rheovasography; electroencephalography; reaction speed test.

**Laboratory diagnostic methods:**



## KHL MEDICAL REGULATIONS

25. CBC + DIFF;
26. Clinical urinalysis;
27. Serological assay for infections (HIV Ag/Ab, RW, Anti-HBs, Anti-HCV);
28. Blood biochemistry (minimum volume: total bilirubin, direct bilirubin, ALT, AST, creatinine, urea, uric acid, total protein, alkaline phosphatase, glucose, cholesterol, triglycerides, phosphorus, sodium, calcium, potassium, iron, cortisol, total testosterone, galactopoietic hormone, free triiodothyronine T3, free thyroxine T4, thyroid stimulating hormone (TSH), creatine phosphokinase (CPK), creatine phosphokinase myocardial band (MB CPK));
29. Other diagnostic methods (based on medical necessity).

### **This in-depth medical examination program results in:**

- 1) detection of diseases and pathological conditions that impede engagement in sports;
- 2) detection of risk factors for pathological conditions (including life-threatening);
- 3) identification of the features of physical development at the time of screening;
- 4) evaluation of changes in the parameters of physical development depending on the focus of the training process, sports skills and the stage of the training process;
- 5) evaluation of the functional state of the body;
- 6) drafting of health maintenance recommendations;
- 7) drafting of proposals for the adjustments to the training process depending on the detected changes.

The obtained IDME results are entered into the athlete's regular medical checkup card and the KHL Medical Web Portal.

The results of each IDME are used to draw up the Consolidated Medical Opinion on the Health and Functional Status of Players (Hockey Players) (Appendix 6 to the KHL Medical Regulations) or the medical lineup (Appendix 7 to the KHL Medical Regulations).

## KHL MEDICAL REGULATIONS

### Appendix 4

#### RECOMMENDED STANDARD FOR EQUIPPING A SPORTS FACILITY MEDICAL STATION

No.	Name of types of medical devices, furniture, medicines	Required quantity, pcs.
-----	--	-------------------------

#### I. Drugs and dressings

	First aid kit for the prevention of infection of healthcare professionals with blood borne infections; anti-shock first-aid kit; analgesics; nonsteroidal anti-inflammatory drugs; antihistamines; heart disease drugs; hemostatic agents; blood substitutes and perfusion solutions; synthetic antibacterial agents; vitamins; mineral supplements; antidiarrheal, intestinal anti-inflammatory (antimicrobial) drugs; drugs for functional gastrointestinal disorders; digestants, including enzyme preparations; diabetes drugs; medications for respiratory diseases (including anti-asthma drugs); topical medications for muscle and joint pain; topical anesthetics; immune sera (tetanus toxoid, anti-tetanic serum); dressings; antiseptics.	On demand
	WADA Prohibited List	1

- The packaging of drugs included in the World Anti-Doping Agency Prohibited List is pasted with appropriate warning stickers “Prohibited by WADA”.
- The list of drugs included in the World Anti-Doping Agency Prohibited List shall be publicly available at the Sports Facility Medical Station (on the wall, on the desktop, etc.).

#### II. Furniture and equipment

1.	Examination table	2
2.	Massage couch	2
3.	Medical cabinet	2
4.	Wardrobe for clothes	1
5.	Wardrobe for linens	1
6.	Medical privacy screen	1
7.	Medical refrigerator	1
8.	Instrument table	2
9.	Doctor’s workplace	2
10.	Nurse’s workplace	2
11.	Clothes hanger	2
12.	Pedal bucket	2

## KHL MEDICAL REGULATIONS

13.	Bedside table, cabinet	3
14.	Waste container	2
15.	Disinfection container (tub)	3

### III. Textile products and disinfectants

16.	Disinfectants	On demand
17.	Waste container	For each workplace
18.	Red container for especially hazardous waste (B)	1
19.	Disposable medical linen	2 per couch
20.	Draw sheet	According to the number of couches
21.	Rubber mat	1
22.	Protective face mask	100

### IV. Medical products

23.	Sphygmomanometer (blood pressure gauge), membrane	1
24.	Medical utensils and laboratory consumables	On demand
25.	Medical eye bath	2
26.	Heating pad	1
27.	Tourniquet	3
28.	Rubber, latex, polymer catheter	3
29.	Crutches	2 pairs
30.	Emesis basin	5
31.	Wheelchair or Hormone manual hospital stretcher 1 pc. of each	2
32.	Scoop stretcher	2
33.	Stirring rod	10
34.	Eye pipette	20
35.	Disposable gloves	10 pairs
36.	Rubber ice bag	5
37.	Phonendoscope	2
38.	Bedpan	1
39.	Medical mercury thermometer	5
40.	Limb immobilization splint	5 sets
41.	Spinal board with head support	1
42.	Medical scales	1
43.	Stadiometer	1
44.	Stopwatch	1
45.	Manual medical ventilator (bag valve mask type) with a set of face masks	1
46.	Neurological reflex hammer	1
47.	Orthopedic bandage	5

## KHL MEDICAL REGULATIONS

48.	Neoprene knees bandages in different sizes	5
49.	Ice in cellophane or zippered packs	10
50.	Inflatable air splints for adults and children	1 set
51.	Hard cervical immobilization collar (all sizes)	2 sets

### V. Apparatus and devices

52.	Blood glucose analyzer (blood glucose meter), portable analyzer	1
53.	Test kit, strips for biochemical analysis	On demand
54.	Ultraviolet bactericidal irradiator (for indoor use)	1
55.	Ultraviolet air recirculation irradiator	1
56.	Alcometer, breathalyzer, breath ethanol/alcohol tester	1
57.	Air dry heat sterilizer	1
58.	Single channel, three-channel portable ECG recorder	1
59.	Battery-powered automated external defibrillator for naive users	2

### VI. Medical instruments

60.	Sterilization box (dressing box) for storing sterile instruments and material	3
61.	Container (tank) for pre-sterilization cleaning, disinfection and sterilization of medical devices	8
62.	Airway, breathing tube (set)	2
63.	Otoscope	4
64.	Hemostat	3
65.	Sponge forceps	Not less than 3
66.	Scissors (straight and curved)	5 of each kind
67.	Rhinoscope	3
68.	Dissection forceps	3
69.	Surgical forceps	3
70.	Blood transfusion and fluid transfer system (device)	10
71.	Mouth gag	2
72.	Tongue forceps	2
73.	Disposable scalpel	4
74.	Tongue spatula	100
75.	Laboratory stand	2
76.	Disposable injection syringes (including insulin syringes)	40

**KHL MEDICAL REGULATIONS**

**Appendix 5**

**MINIMUM RECOMMENDED EQUIPMENT  
OF A CLUB MEDICAL ROOM**

<b>Item No.</b>	<b>Name</b>	<b>Qty</b>
1.	Laptop with Internet access, printer / scanner / copier	1
2.	Refrigerator	1
3.	Hot air sterilizer	1
4.	Ultraviolet air recirculation irradiator	1
5.	Aspirator	1
6.	Body composition measuring device (caliper, bio-impedance or infrared analyzer)	1
7.	Scales	1
8.	Stadiometer	1
9.	Phonendoscope	2
10.	Blood pressure gauge	1
11.	Thermometer	1
12.	Wrist dynamometer	1
13.	Spirometer	1
14.	Neurological reflex hammer	1
15.	Rubber ice bag	2
16.	ECG apparatus	1
17.	Automatic portable defibrillator	1
18.	Bag valve mask (manual resuscitator)	1
19.	Limb transport immobilization splints	1 set
20.	Hard cervical collar (sizes S, L, XL)	3
21.	Tourniquet	1
22.	Cricothyrotomy set	1
23.	Laryngeal mask (3 sizes)	3
24.	Emergency intubation tube	2
25.	Scoop stretcher and gurney	1
26.	Spinal board with a head immobilizer	1
27.	Intravenous infusion stand*	1
28.	Intravenous infusion systems*	5
29.	Antishock solutions	0.5 l (5 pcs. of 100 ml)

(\*) Drug administration methods shall be used in accordance with the requirements of the laws of the Russian Federation on the prevention of and fighting against Doping in sport, along with such international standards as the Prohibited List and the World Anti-Doping Code International Standard for Therapeutic Use Exemptions (ISTUE).

## KHL MEDICAL REGULATIONS

It is necessary to equip the Club Medical Room with copies of all-Russian and international regulations against Doping in sport:

- a. the World Anti-Doping Agency Prohibited List;
- b. the WADA International Standard for Therapeutic Use Exemptions (ISTUE);
- c. All-Russian Anti-Doping Rules;
- d. TUE application templates.

The Club Medical Room shall be additionally equipped with medicines necessary to provide emergency medical care in life-threatening conditions (Order of the Ministry of Health of the Russian Federation No. 36n dd. January 22, 2016 “On Approval of Requirements for Completing Doctor’s Bags and Emergency Ambulance Kits with Drugs and Medical Products”), taking into account their use in accordance with the requirements of the anti-doping laws of the Russian Federation, the WADA Prohibited List and the World Anti-Doping Agency International Standard for Therapeutic Use Exemptions.

Equipping Foreign Clubs with medicines shall be subject to national healthcare laws.

---

**KHL MEDICAL REGULATIONS**

**Appendix 6**

*Name of the medical organization,  
stamp, telephone, e-mail*

**MEDICAL OPINION ON THE ADMISSION OF A SPORTS TEAM ATHLETES TO PARTICIPATE IN A SPORTS EVENT**

Medical Opinion Registry Number \_\_\_\_\_

Name of the Sports Team

\_\_\_\_\_

Sports Organization

\_\_\_\_\_

Sport/Athletic discipline \_\_\_\_\_

Number of athletes \_\_\_\_\_

Item No.	Full name (including patronymic if any)	Date of birth	Athlete Registry Number*	Personal Medical Opinion Registry Number**	Admitted/Not Admitted

**KHL MEDICAL REGULATIONS**


\* Russian Clubs only

\*\* Russian Clubs only

Medical Opinion issue date \_\_\_\_\_, 20\_\_

Responsible person of the medical organization \_\_\_\_\_ / \_\_\_\_\_ /  
Signature Last name, Initials

Medical organization seal

**Club Manager**

**Club Doctor**

\_\_\_\_\_ / \_\_\_\_\_ /  
(signature) (printed)

\_\_\_\_\_ / \_\_\_\_\_ /  
(signature) (printed)

L.S.

**KHL Medical Authority**

The KHL Medical Authority has received information the  
on admittance of \_\_\_\_\_ Hockey Players

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

\_\_\_\_\_ / \_\_\_\_\_ /  
(signature) (printed)



*Name of the medical organization,  
stamp, telephone, e-mail*

**Medical Opinion on Admission  
to Participate in Physical Culture and Sports Events  
(Practice Events and Sports Competitions),  
Measures to Assess Compliance with the Test Standards  
of All-Russian Physical Culture and Sports Complex  
“Ready for Work and Defence”**

**Medical Opinion Registry Number** \_\_\_\_\_

Last Name \_\_\_\_\_

First Name \_\_\_\_\_

Patronymic (if any) \_\_\_\_\_

Date of Birth \_\_\_\_\_

Individual Registry Number (athlete) \_\_\_\_\_

Issue Date, Name of the Issuing Authority \_\_\_\_\_

Name of the Event \_\_\_\_\_

Sport (if any) \_\_\_\_\_

Athletic Discipline (if any) \_\_\_\_\_

Athletic performance stage (if any) \_\_\_\_\_

Following the results of a medical examination, in-depth medical examination

**ADMITTED**

by the Commission (delete as necessary)

- to practice
- to sports competitions
- to athletic sporting events
- to testing compliance with standards of the GTO complex

Restrictions, including physical activity, terms of restrictions: (YES/NO)

Description: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Medical Opinion Issue Date \_\_\_\_\_

Medical Opinion valid through (specify date) \_\_\_\_\_

Responsible person of the medical organization 41 / \_\_\_\_\_ /

**KHL MEDICAL REGULATIONS**

Signature

Last name, Initials

Medical organization seal

**Club Manager**

**Club Doctor**

\_\_\_\_\_/\_\_\_\_\_  
\_\_\_\_\_/\_\_\_\_\_  
(signature) (printed)

\_\_\_\_\_/\_\_\_\_\_  
\_\_\_\_\_/\_\_\_\_\_  
(signature) (printed)

**KHL Medical Authority**

The KHL Medical Authority has received information  
the on admittance of \_\_\_\_\_ Hockey Players

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

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
(signature) (printed)

**KHL MEDICAL REGULATIONS**

**Appendix 8**

**MEDICAL TEAM COMPOSITION AT THE SPORTS FACILITY**

" \_\_\_\_\_ " \_\_\_\_\_

*(address)*

**during the KHL Championship Games of the 20\_\_ / 20\_\_ season**

The KHL Championship Game Medical Team is formed and approved by order of the Head of the Sports Facility/ Club No. \_\_\_\_\_ dated \_\_\_\_\_, 20\_\_

<b>Position</b>	<b>Family, given and patronymic name</b>	<b>Telephone, e-mail*</b>
Chief Physician of Competitions		Tel.: e-mail: Signature:
Doctor of the Sports Facility Medical Station		Tel.: e-mail: Signature:
Club doctor		Tel.: e-mail: Signature:
Club massage therapist		Tel.: e-mail: Signature:
Mobile medical crews	Included in the Game Medical Team based on the Contract No. _____ dd. _____, 20__**	

*Note:* \* — required field; \*\* — Contract copy to be attached.

Club Manager \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

*(signature) (printed name)*

L.S.

\_\_\_\_\_, 20\_\_

**Appendix 9**

**REGULATION ON MANAGING THE WORK OF THE CHIEF PHYSICIAN OF COMPETITIONS DURING THE KHL CHAMPIONSHIP GAMES**

1. This Regulation governs the aspects of work of the Chief Physician of Competitions during the KHL Championship Games.
2. The Chief Physician of Competitions is appointed by order of the Head of the Sports Facility or Club for the entire Game season.
3. The Chief Physician of Competitions can be a specialist who meets the Qualification Requirements for specialists with a graduate and postgraduate medical and pharmaceutical degree in Physical Training and Sports Medicine and/or Public Health and Health Management.
4. The working conditions of the Chief Physician of Competitions are determined by the labor legislation of the Russian Federation or the country participating in the KHL Championship.
5. The Chief Physician of Competitions is subordinate to the Chief Referee of the Game and shall perform the following functions:
  - 1) arrange medical support of any “home” Game of a Club and, if required, other Games arranged by KHL on the Club arena;
  - 2) determine the number of medical personnel for the Game, the schedule of their work at the Sports Facility during the pregame training sessions and competitions;
  - 3) determine the list of healthcare facilities involved in the provision of medical care during the KHL Championship Games;
  - 4) control the arrival of mobile medical crews and their operating procedures;
  - 5) give instructions to the Game Medical Team one hour before the start of the Game and manage its operations during the Game;
  - 6) arrange and hold trainings with the Game Medical Team to provide medical assistance and evacuate participants of the competitions from the ice rink and Spectator grandstands;
  - 7) assess the sanitary and hygienic state of the competition and training venues; sign a Game readiness certificate and an operational and technical inspection report;
  - 8) control the organization of work of the Sports Facility Medical Stations and their maintenance and medicine supplies;
  - 9) manage work on the collection and removal of medical waste in accordance with the sanitary norms and rules;
  - 10) receive and duly consider complaints about the provision of medical assistance during the Game;
  - 11) supervise the keeping of the Outpatient Admission Log of the Sports Facility Medical Station;
  - 12) recommend the Chief Officials of the Game to cancel or postpone the Game in the event of a threat to the life and health of Hockey Players and/or Spectators;
  - 13) recommend the Chief Officials of the Game to suspend a Hockey Player from participating in the Game for medical reasons;
  - 14) keep accounting records and reporting documents in the form established by the KHL Medical Authority, including in the Electronic Register of the Chief Physician of Competitions;
  - 15) send a report on the provision of medical assistance during the Game, evacuation and hospitalization to the Chief Officials of the Game;
  - 16) be personally responsible for the Game Medical Team’s failure to comply with the rules, regulations and requirements for medical support of the KHL Championship Games.

## KHL MEDICAL REGULATIONS

### Appendix 10

#### **Scheme of Providing Emergency Medical Care to an Injured Player (Hockey Player) on the Ice, As Recommended by the Russian Hockey Federation**

The Game Medical Team consisting of three people (including a critical care team doctor) and carrying a gurney, a vacuum mattress (if such equipment is available), a spinal board with a head immobilizer, a scoop stretcher, a hard cervical immobilizer (Philadelphia type), a bag valve mask ([Ambu-bag](#)), dressing material, a tourniquet, and transportation splints (for leg and arm) shall come to the rink (ice) immediately after the Club (Team) doctor has given a predetermined signal (for example, a raised fist or arms crossed above the head).

1. Lower the gurney on the ice in the immediate vicinity of the injured Player (Hockey Player).
2. Turn the athlete on his back, if he lies face down, firmly fixing his head, neck and shoulders with hands in order to avoid damage to the integrity of the spinal cord with damaged cervical vertebrae.
3. Undo the safety visor (if any) and put a hard cervical immobilizer on the athlete (for Hockey Players, it is usually size XL).
4. If the athlete does not breathe independently, then it is necessary to insert an S-shaped air duct into his mouth and begin artificial respiration using a bag valve mask.
5. In case of bleeding, apply a tourniquet on the injured limb and/or pack the wound.
6. In case of fracture of the bones of the upper or lower limbs or visible damage to the elbow or knee joints, immobilize the damaged limb with a transportation splint.
7. Open the scoop stretcher and bring it under the Player (Hockey Player).
8. Close the scoop stretcher and tighten the straps.
9. Lift and shift the Player (Hockey Player) on the scoop stretcher to the spinal board located on top of the vacuum mattress (if such equipment is available) on the gurney.
10. Undo the straps on the scoop stretcher, disconnect the “scoops” and remove them from under the Player (Hockey Player).
11. Secure the Player’s (Hockey Player’s) head on the spinal board with an immobilizer, and the body with straps.
12. Lift the gurney and roll it out of the ice arena directly to the ambulance car (mobile ICU) or to its parking lot.
13. In the event of clinical death, cardiac arrest or fibrillation, perform cardiopulmonary resuscitation according to the ABC algorithm (A – air open the way; B – breath of victim; C – circulation of blood) immediately after the injured Player (Hockey Player) is evacuated to the space under the grandstands.
14. If a vacuum mattress is available (if medically required), carry out additional immobilization of the Player (Hockey Player) on the lowered gurney.
15. Roll the gurney with the athlete into the ambulance car and start evacuating the Player (Hockey Player).
16. If a gurney of the Sport Ice Arena and/or the Club (team) was used, the Player (Hockey Player) immobilized on the spinal board (in a vacuum mattress) shall first be moved to the ambulance gurney; then proceed as described in clause 15.

*Note.* All manipulations shall be carried out wearing medical gloves and shall be coordinated (if necessary, through an interpreter) with the Club (team) representative accompanying the injured Player. It is advisable to refrain from performing resuscitation on the ice in the presence of the

## KHL MEDICAL REGULATIONS

Spectators, journalists and photographers.

**Appendix 11**

**REQUIREMENTS FOR THE DOPING CONTROL STATION**

1. In order to conduct in-competition testing, the Doping Control Station shall meet the following criteria:
  - 1.1. During the Game, the rooms of the Doping Control Station shall be used exclusively for the purpose of Doping Control.
  - 1.2. The Doping Control Station shall be located directly on the territory of the Sports Facility and be easily accessible to a Hockey Player; be clearly identified and have the “No Entry” inscription on the door; the corridor to the Doping Control Station and the floor in the waiting room shall be lined with a special coating that protects the skates from damage.
  - 1.3. The rooms of the Doping Control Station shall be closed and interconnected.
  - 1.4. The rooms of the Doping Control Station shall provide for the safe storage of sampling equipment.
  - 1.5. A security officer shall be present outside the Doping Control Station.
  - 1.6. Only authorized persons shall have access to the Doping Control Station:
    - 1.6.1. For the purpose of drawing lots (after the second Game period):
      - Chief Physician of Competitions;
      - Doping Control Officer (hereinafter referred to as the DCO);
      - one representative from each team;
      - Game Commissioner;
      - an employee of the KHL Medical Authority.
    - 1.6.2. In order to carry out the Doping Control procedure:
      - Doping Control Officer and/or an accompanying person (Chaperone);
      - the Hockey Player summoned for Doping Control, having in hand a notice of passing the Doping Control. The Hockey Player shall appear within five minutes after the Game end.

A Hockey Player may leave the Doping Control Station only upon presentation of a pink copy of the Doping Control protocol or accompanied by the Doping Control Officer or a Chaperone;
      - a representative of the Hockey Player (shall be represented personally by the athlete);
      - a translator (shall be represented personally by the athlete);
2. Requirements for the rooms and equipment of the Doping Control Station:
  - 2.1. The Doping Control Station shall consist of a waiting room (at least 18 m<sup>2</sup>) with the possibility of separating the working area (partition or screen separation) and a toilet.
  - 2.2. The waiting room shall be equipped with:
    - chairs or armchairs — 10 pcs (2 chairs for each athlete, 1 chair for each DCO);
    - table for registration of documents — 2–3 pcs (one table at the entrance to the Doping Control Station for the registration of incoming and outgoing athletes and personnel, one table for each DCO);
    - wardrobe for outerwear, bags, equipment — 1 pc;
    - refrigerator for storing samples with a locking device — 1 pc;

## KHL MEDICAL REGULATIONS

- clothes hanger — 1 pc;
- waste bin — 2 pcs;
- a screen broadcasting the current Game — 1 pc;
- plasma display panel with TV channels (recommended) — 1 pc;
- telephone (landline) and Internet access;
- information board — 1 pc;
- wall promotional materials (posters with instructions for athletes on the Doping testing rules);
- coffee table;
- magazines, booklets, newspapers;
- drinking water and drinks for athletes in closed bottles.

### 2.3. Toilet room (recommended size 1.5×1.5 m):

- flush toilet — 1 pc;
- sink — 1 pc;
- vertical mirror (1200 × 60 cm) — 3 pcs.

*Mirrors shall provide a three-sided reflection of the toilet and washbasin areas;*

- waste bin — 1 pc.



# KHL MEDICAL REGULATIONS

## Appendix 12

### DOPING TEST SAMPLING PROCEDURE

#### Urine sample

The Doping test sampling procedure determines the following sequence of actions:

#### 1. Informing the athlete of the need to submit to a test

1.1. The Doping Control Officer (DCO) or a Chaperone shall introduce themselves to the athlete and inform him of the following:

- that he was selected for the test sampling procedure;
- the organization on whose behalf the samples are being taken;
- the type of sample to be submitted;
- any mandatory requirements that shall be met before the sample is taken;
- implications of refusal to submit to the test;
- the need to go immediately to the Doping Control Station.

1.2. If a notification form is used, the DCO or Chaperone shall ask the athlete to complete and sign it.

1.3. The athlete shall:

- follow the DCO's or Chaperone's instructions;
- be continuously supervised by the DCO or Chaperone until the end of the procedure;
- refrain from actions that may compromise the integrity of the Doping Control procedure;
- show a photo ID.

1.4. The athlete has the right to:

- ask the DCO or Chaperone to show an ID confirming his authority;
- request the presence of a representative (minor athletes);
- request the presence of an interpreter (if possible);
- ask for further clarification on the procedure if something is unclear;
- request a delay in arrival at the Doping Control Station (shall be granted if there are enough personnel available to ensure the athlete is monitored during the delay).

#### 1.5. Grounds for the delay

##### 1.5.1. In-competition testing:

- participation in a medal ceremony;
- performance of commitments to the media;
- participation in further competitions;
- performing cool down exercises;
- receiving the necessary medical care;
- looking for a representative and/ (or) translator;
- looking for a photo ID.

##### 1.5.2. Out-of-competition testing:

- looking for a representative;

## KHL MEDICAL REGULATIONS

- completing the training or performing cool down exercises;
- receiving the necessary medical care;
- looking for a photo ID.

### **2. Arrival at the Doping Control Station**

The athlete shall arrive at the Doping Control Station immediately after the notification and remain there until the completion of the entire sampling collection procedure. Upon arrival at the Doping Control Station, the athlete may be asked to register in the entry-exit log.

The athlete may leave the Doping Control Station before the procedure is completed only with the permission of the DCO and only for the above reasons stated for delaying the arrival at the Doping Control Station. Such permission can only be granted if there are enough personnel available to ensure the athlete is monitored during his absence.

While waiting for the sample to be collected, the athlete may consume food and drinks, in which case the responsibility for the ingredients of food and drinks rests with the athlete. The athlete shall avoid excessive fluid intake, as this may lead to insufficient gravity of the urine sample, and an additional sample collection will be required.

### **3. Selecting the sample container**

- The athlete shall be given a choice of three sample containers;
- the athlete shall check that the containers are clean and the seals are intact, and select an acceptable kit;
- in case if the athlete is not satisfied with any of the kits, but the DCO considers them satisfactory, the athlete can record his objections in the protocol, but the procedure shall be continued.

*After the athlete has selected a sample container, it shall be held and controlled by the athlete until the sample (or intermediate sample) is sealed.*

### **4. Sample collection**

- The DCO who will monitor the urine collection by an athlete shall be of the same gender as the athlete;
- the DCO shall accompany the athlete to the toilet room for direct observation of the sample collection;
- the athlete shall ensure that the DCO has an unobstructed view of the sample collection process.

*The athlete shall provide at least 90 ml of urine, but it is recommended to provide a greater volume if possible. If it is impossible to provide 90 ml of urine, an intermediate sample will be taken.*

### **5. Selecting the sample storage kit**

- The DCO shall record the total urine volume in the Doping Control protocol;
- the DCO shall offer the athlete at least three sample storage kits;
- the athlete shall check that all seals are intact and have not been forged;
- the athlete and the DCO together shall check that all the items in the selected kit are clean, intact and have the same number.

### **6. Splitting the samples in the A and B vials**

- The athlete shall open the “B” vial, take out the red ring and pour at least 30 ml of urine into the “B” vial;
- the athlete shall open the “A” vial, take out the red ring and pour at least 60 ml of urine into

## KHL MEDICAL REGULATIONS

the “A” vial;

- if more than the minimum volume was collected, the athlete shall fill the “A” vial to the maximum mark;
- If some amount of urine remains after that, the athlete shall fill the “B” vial to the maximum mark.

*Do not fill the vial above the maximum line (or the vial “shaller”). After splitting the sample in vials, some urine shall be left in the urine bottle to measure the specific gravity.*

### **7. Sealing the sample**

- The athlete shall tightly screw the caps of both vials until the distinctive clicks stop;
- the DCO shall check if the caps are tightly screwed and if the vials are leak-proof;
- the DCO shall record the time taken to seal the sample in the Doping Control protocol.

*No one except the athlete (or his representative) shall touch the vials until the athlete (or his representative) closes them.*

### **8. Checking the specific gravity**

- The DCO shall measure the specific gravity. If it is below 1.005, an additional sampling procedure shall be carried out.
- If the urine gravity is normal, the excess urine shall be disposed of.

*The procedure for the selection of additional samples shall be carried out at the request of the Doping Control Officer in case if the specific gravity of the first sample is insufficient, or when the DCO has other grounds for such a request, including violations during the procedure of collecting the first sample. The procedure is similar to the standard urine collection procedure.*

### **9. Filling in the Doping Control protocol and checking the entered data**

- The DCO shall record all necessary information in the protocol;
- the athlete shall record in the protocol information about the medications used by him, as well as all his comments and observations on the procedure;
- if there is not enough space, the DCO shall provide the athlete with an additional report form;
- after the protocol has been filled in, the DCO and the athlete shall check if the entered data are correct.

### **10. Completion of the Doping Control procedure**

- The DCO shall sign the Doping Control protocol;
- the athlete shall sign the Doping Control protocol;
- the DCO shall give to the athlete a copy of the protocol, along with additional protocols and the blood passport application form, if they were used;
- the athlete shall sign in the entry-exit log and leave the Doping Control Station.

**KHL MEDICAL REGULATIONS**

**Appendix 13**

**ACKNOWLEDGEMENT FORM**

**for reading and understanding of All-Russian Anti-Doping Rules  
(WADA Code - for Foreign Clubs)**

**in the 20\_\_\_\_/20\_\_\_\_ season**

No.	Surname, patronymic, name of a Hockey Player / employee of the Hockey Club	I have read and understood the All-Russian Anti- Doping Rules (WADA Code - for Foreign Clubs)		
		personal signature	printed name	date of acknowledgement

\_\_\_\_\_, 20\_\_\_\_

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

\_\_\_\_\_  
name of the Club Manager's position  
L.S.

\_\_\_\_\_  
signature / printed name

**KHL MEDICAL REGULATIONS**

**Appendix 14**

**MEDICAL STATEMENT  
on the Health Status of the Player (Hockey Player)**

Full Name \_\_\_\_\_

Date of Birth \_\_\_\_\_

Information on the diseases and injuries suffered over the past 30 days:

Rehabilitation advice:

For health reasons (according to the KHL electronic medical portal; IDME results)

\_\_\_\_\_

Hockey Player full name

**HAS NO/HAS MEDICAL CONTRAINDICATIONS**

(delete as necessary)

to participate in practice and international competitions within the period from “\_\_\_” to “\_\_\_”  
\_\_\_\_\_ 202\_

Club Doctor \_\_\_\_\_

(Full Name)

\_\_\_\_\_

(personal signature)

L.S. (Medical Seal)

Hockey Player \_\_\_\_\_

(Full Name)

\_\_\_\_\_

(personal signature)

L.S. (Club Seal)