



NCAA Medical Exceptions Documentation Reporting Form

This form must be completed for medical exception pre-approval (MEPAs) requests prior to a student-athlete participating (practice or competition) or for medical exception requests following a positive NCAA drug test. The NCAA requires that schools submit MEPAs and continued use requests through the NCAA Requests/Self-Reports Online (RSRO) system. Schools submit medical exceptions to the NCAA-designated drug-testing agency. (See [Section 8.0 of the NCAA Drug-Testing Manual](#)).

The MEPA process is under continual reassessment and revision based on updates in medical standards, diagnostic tools, treatments and national standards for sports. A prior approval does not mean that a MEPA will be automatically renewed. Rather, there is a careful and thorough review in each instance.

Note: The NCAA must approve the use of anabolic agents, hormone and metabolic modulators, peptide hormones, growth factors, related substances and mimetics **before the student-athlete is allowed to participate (practice or competition) while taking these medications.**

To be completed by the College/University:

College/University Name: _____

College/University Representative Submitting Form:

Name: _____ Title: _____

Phone: _____ Email: _____

Student-Athlete Name: _____

Student-Athlete Date of Birth: _____

Medication for which approval is requested: _____

If this is a submission for continued use of a previously approved medical exception for the banned substance check here ☐

To be completed by the student-athlete's physician:

Current Treating Physician (print name): _____

Specialty: _____

Office address: _____

Physician signature: _____ Date: _____

Include the following medical documentation with this form:

Pre-approval requests for anabolic agents, hormone and metabolic modulators, peptide hormones, growth factors, related substances and mimetics:

- Diagnostic evaluation; include any laboratory work supporting the diagnosis.
- Treatment history.
- Medication(s) and dosage.
- Follow-up orders.

Requests for all other banned medications:

- Diagnostic evaluation; include any laboratory work supporting the diagnosis.
- Treatment history indicating that all available medical options were tried before prescribing banned substance.
- Medication(s) and dosage.
- Follow-up orders.

Requests for continued use for pre-approved medications:

- Diagnostic evaluation; include any laboratory work supporting the diagnosis.
- Treatment history.
- Medication(s) and dosage.
- Follow-up orders.

DISCLAIMER: The National Collegiate Athletic Association shall not be liable or responsible, in any way, for any diagnosis or other evaluation made, or exam performed, in connection herewith, or for any subsequent action taken, in whole or in part, in reliance upon the accuracy or veracity of the information provided hereunder.

Last updated June 2025