Preface

This ADAMS User Guide was designed to show you how to perform basic functions within ADAMS, step by step, in the most direct way. The individual sections are arranged in a sequence that follows a typical workflow. Throughout this document, we have used fictitious names for all persons in our screen shots and examples. Any resemblance to real persons, living or not, is purely coincidental. Please note, too, that some screen shots may appear different than in your installation due to browser settings and hardware configuration of your computer.

What’s New as per 1 Jan 2020?

Substance codes: due to the revision of the Prohibited List 2020 there will be a major change on the Substance classes S1.1A Exogenous AAS and S1.1B Endogenous AAS.

The subdivision into exogenous/endogenous will be removed and all AAS will be joined into one new class S1.1 Anabolic Androgenic Steroids (AAS). Consequently there is an impact on the specific codes of the substances. The new codes as of 1 Jan 2020 can be found here.

- codes in class S1.1: in the 2nd worksheet the specific codes of the substances in class S1.1 are stated. Presently they show a suffix ‘_’ at the end (e.g. androstane_ ) which will be removed effective 1 Jan 2020, which means that as a Lab you can continue to use the specific codes in your batch Import/Update files as they were valid for the classes S1.1A/B.
- codes in class S1.1A/B: see the substance codes in the first worksheet. A suffix _A or _B will be added to the specific codes in the substance class S1.1A respectively S1.1B, effective 1 Jan 2020. Therefore, should you after 1 Jan 2020 want to update an existing result containing a substance of class S1.1A/B, make sure to specify the appropriate suffix _1A or _1B.

What’s New in March 2019?

- The list of APMU recommendations and Experts' opinions were updated as per the 2019 ISTI effective on March 1st 2019:
  - The option "Passport Suspicious: suspicious further analysis required" was replaced with "Suspicious”. Reports previously submitted are not impacted.
  - New options: "Unanimous likely doping" and “APF” were added for APMU users.
  - When an APMU report is submitted with any of the above recommendations, the "Likely Doping" notification type is triggered.
- The Athlete Biological Passport Custodian was added to the subject of the following notifications: "Atypical Steroidal Passport notifications", "Atypical Hematological Passport notification", "Biological result notification", "New data logger uploaded".

What’s New in February 2019?

- The value "-2" is allowed for all steroidal parameters.

What’s New in September 2018?

- ADAMS Legal consent and data privacy is available in: Arabic, Chinese, Czech, French, Italian, Magyar, Serbian, Spanish, Portuguese (Brazil).
- ADAMS sends suspicious account activity email alerts: Atypical Account Activities emails

What’s New in July 2018?

- The field "Blood Analyzer" is mandatory in the BPLR form.
  (Import column name remains "analyser")
- Each laboratory, must add to its organization settings their analyzer's type

What’s New in June 2018?
ADAMS Two-Factor Authentication: http://adams-docs.wada-ama.org/display/EN/ADAMS+Two-Factor+Authentication+guide

Labs are able to provide the LH-Analysis details for Urine samples: see Creating a Lab Result with LH details

What's New in March April 2018?

- Users have to provide a email address and optional mobile phone number (Alternate Login Options)
- Users with validated mobile phone number are offered an alternate login method should they forget the answers to their security questions (User Contact Details)
- Administrator accounts can only be created and edited by ADAMS administrators
- All temporary passwords (including the ones assigned by administrators) expiry within 24 hours

What's New in Release 5.2 ?

- Updates to IRMS conclusions.
- Performance enhancements.

What's New in Release 4.7.0 ?

IRMS-analysis
Labs are able to indicate a dedicated Overall IRMS conclusion irrespective and independent from the overall Lab test result. The PDF Test-report to the Testing/Result Management Authority (TA/RMA) will be enhanced with this new IRMS-conclusion.

The relevant updated pages in the User Guide for WADA-accredited Laboratories are:

- Creating a Lab Result - EN
- XML Schema
- CSV file
- File format - Update Lab results

What's New in Release 4.1 ?

The “comment” field of the Biological Passport Lab Results is no longer available to athletes
The comment field of the Biological Passport Lab Results form will no longer be available to athletes.

Athlete Biological Passport pages
- The banner available to APMU and Expert users will also display the athlete age and Passport custodian.
- Additional fields will be available for selection in the Biological Passport table

Updates to comply with TD2016EAAS

Inline with the TD2016EAAS the following modifications will be implemented and effective as of January 1st 2016:

- New Steroidal Passport algorithm
  The Steroidal Passport algorithm will be updated to reflect the changes in the TD2016EAAS.

  - New graph for 5a-diol/E will be added to the steroidal Passport.
  - Criteria for sending the Suspicious Confirmation Procedure request notifications will be updated.
  - The Confirmation Procedure Request notifications will not be sent when a lab result is submitted with an IRMS analysis.

- Urine Lab Result form updates
  - A warning will be displayed on urine lab results that triggered a confirmation procedure request.
  - Confirmed specific gravity will become mandatory.
  - The concentration of Epitestosterone should be reported as “-2” when the chromatographic peak signal for E cannot be detected (i.e. below the Limit of Detection).

- Other updates:
  - The fields “Sample Collection date” and “confirmed specific gravity” will become mandatory for urine lab results submission.
  - The field “Sample Collection date” will be mandatory for blood results submissions.
  - As of January 1st 2016: The name of the analysis attribute GHRF (GHRH/GHS/GHRP) will be changed into GHRF (GHS/GHRP), and a new attribute GHRF (GHRH) will be added.