



TAS / CAS
TRIBUNAL ARBITRAL DU SPORT
COURT OF ARBITRATION FOR SPORT
TRIBUNAL ARBITRAL DEL DEPORTE

CAS 2026/A/12149 Enrico Pellegrini v. International Ski Mountaineering Federation & International Testing Agency

ARBITRAL AWARD

delivered by the

COURT OF ARBITRATION FOR SPORT

sitting in the following composition:

President: Ms. Marianne Saroli, Attorney-at-Law in Montreal, Canada
Arbitrators: Prof. Luigi Fumagalli, Attorney-at-Law in Milan, Italy
Mr. Alexander McLin, Attorney-at-Law in Lausanne, Switzerland

in the arbitration between

Enrico Pellegrini, Italy

Represented by Ms. Veena Swarna Ravoori and Mr. Filippo Apolloni, Attorneys-at-Law in Padova, Italy

Appellant

v.

International Ski Mountaineering Federation, Switzerland

Represented by Mrs. Dominique Leroux-Lacroix, Mrs. Charlotte Frey and Mr. Anton Sotir of the International Testing Agency in Lausanne, Switzerland

and

International Testing Agency, Switzerland

Represented by Mrs. Dominique Leroux-Lacroix, Mrs. Charlotte Frey and Mr. Anton Sotir, Lausanne, Switzerland

Respondents

I. PARTIES

1. Mr. Enrico Pellegrini (the “Athlete” or the “Appellant”) is an Italian ski-mountaineering athlete born on 13 March 2006. He is affiliated with the Federazione Italiana Sport Invernali (the “FISI”), the Italian national federation for winter sports. The Athlete has competed in the youth category since 2023, taking part between 2023 and 2025 in International Ski Mountaineering Federation (the “ISMF”) competitions, including ISMF Youth World Cups and European Championships, where he finished on several occasions on the podium. During the 2024 season, he finished first in the overall World Cup ranking in the U18 category. He was included in the ISMF Registered Testing Pool (“RTP”) on 11 June 2024.
2. The ISMF (or the “First Respondent”) is the world governing body for the sport of ski-mountaineering, with its seat in Lausanne, Switzerland. As a signatory to the World Anti-Doping Code (“WADC”), the ISMF has adopted its own anti-doping rules, the ISMF Anti-Doping Rules (“ISMF ADR”). The ISMF has delegated the implementation of its anti-doping programme, including the results management and the prosecution of anti-doping rule violations (“ADRVs”), to the International Testing Agency (the “ITA”).
3. The ITA (or the “Second Respondent”) was named as a respondent by the Athlete in his Statement of Appeal. It is a foundation under Swiss law, with its seat in Lausanne, Switzerland. The ITA objected to its inclusion as a respondent, an objection which the Panel addresses below.

II. FACTUAL BACKGROUND

4. Below is a summary of the relevant facts and allegations based on the Parties’ written submissions, pleadings and evidence adduced at the hearing. Additional facts and allegations found in the Parties’ written submissions, pleadings and evidence may be set out, where relevant, in connection with the legal discussion that follows. While the Panel has considered all the facts, allegations, legal arguments and evidence submitted by the Parties in the present proceedings, it refers in its Award only to the submissions and evidence it considers necessary to explain its reasoning.

A. Background facts

5. On 25 and 26 January 2025, the Athlete participated in the ISMF Youth World Cup held in Forni di Sopra, Udine, Italy (the “Event”). He competed in the sprint race on 25 January 2025 and in the relay race on 26 January 2025. At the beginning of the 2025 season, the Athlete had moved from the U18 to the U20 category and, according to his explanations, this transition required him to use a more rigid model of ski boots.
6. During the Event, the Athlete states that he developed blisters and bruising on both heels, in the area of the Achilles tendons. According to the Athlete, on 25 January 2025, the team physiotherapist, Ms. Camilla Cona, treated the injuries by draining the blisters, disinfecting the affected areas, and applying bandages and plasters. The Athlete further states that, at the conclusion of the Event on 26 January 2025, Ms. Cona observed that the injuries had worsened. It is undisputed that no qualified doctor was present at the Event.

7. Following the Event, the Athlete claims that a cream marketed under the name Trofodermin was purchased on the evening of 26 January 2025 at Farmacia Dr. Dal Zotto in Cogollo del Cengio (the “Pharmacy”) and was subsequently applied to treat those injuries. The circumstances surrounding the purchase and application of Trofodermin, including the dates on which these events occurred and the extent of the Athlete’s knowledge and involvement, are disputed between the Parties. Trofodermin is a topical cream available over the counter in Italy without a medical prescription. Its active ingredient is clostebol. The packaging bears a red “*DOPING*” warning, and clostebol is identified as an active ingredient on both the outer packaging and the tube. The package leaflet, written in Italian, states: “*For those involved in sport: the use of this medication without a legitimate medical reason constitutes doping and may result in a positive result in anti-doping tests.*”
8. On 28 January 2025, the Athlete was selected for an out-of-competition doping control at his home in Cogollo del Cengio, Italy, under the testing and results management authority of the ISMF. The Athlete provided urine samples A and B, bearing code number 1442264. The doping control form (“DCF”) records that “*Trofodermin cream*” had been used during the seven days preceding sample collection, with the date of last use recorded as 27 January 2025.
9. The Athlete’s samples were subsequently transferred to the World Anti-Doping Agency (“WADA”)-accredited laboratory in Ghent, Belgium (the “Ghent Laboratory”).
10. On 18 February 2025, the Ghent Laboratory reported an adverse analytical finding (“AAF”) for the presence of clostebol metabolite 4-Chloro-3 α -hydroxy-androst-4-en-17-one in sample A-1442264, at an estimated concentration of 0.5924 ng/mL. Clostebol is a non-specified substance listed under class S1.1 (Anabolic Androgenic Steroids) of the 2025 WADA Prohibited List, and is prohibited at all times.
11. Upon receipt of the AAF, the ITA conducted an initial review pursuant to Article 7 of the ISMF ADR. It confirmed that the Athlete had neither been granted nor had a pending therapeutic use exemption (“TUE”) for clostebol. The review further found no apparent departure from the International Standard for Testing and Investigations (“ISTI”) or the International Standard for Laboratories (“ISL”) that could reasonably have caused the AAF or otherwise undermined its validity.

B. The charge

12. On 26 February 2025, the ITA, acting on behalf of the ISMF, notified the Athlete of the AAF, informed him of his rights under the ISMF ADR, and imposed a mandatory provisional suspension with immediate effect pursuant to Article 7.4.1 of the ISMF ADR. The Athlete was also invited to submit his written explanations.
13. On 28 February 2025, through his legal representatives, the Athlete confirmed that he did not challenge the AAF, expressly waived his right to the opening and analysis of the B-sample, and requested a copy of the A-sample laboratory documentation package (the “LDP”).
14. On 10 March 2025, the ITA provided the Athlete with the A-sample LDP and set 17 March 2025 as the deadline for the submission of his written explanations regarding the AAF.

15. On 17 March 2025, the Athlete submitted his written explanations, attributing the AAF to a single topical application of Trofodermin on the evening of 26 January 2025. In support thereof, the Athlete submitted, *inter alia*, a statement from his father, Mr. Paolo Pellegrini (the “Father”); a statement from Ms. Cona; a statement from a teammate; a statement from the pharmacist; photographs of the injuries; the purchase receipt for Trofodermin dated 26 January 2025; a toxicological opinion from Professor Donata Favretto; and a certificate confirming his participation in a WADA anti-doping education course.
16. On 21 May 2025, at the ITA’s request, the Athlete provided photographs of the Trofodermin and its packaging.
17. On 6 October 2025, the ITA, acting on behalf of the ISMF, issued a notice of charge alleging an ADRV under Articles 2.1 and/or 2.2 of the ISMF ADR. The Athlete was offered the possibility either to admit the ADRV and accept a reduced period of ineligibility of three years pursuant to Article 10.8.1 of the ISMF ADR, or to submit further explanations in support of a greater reduction. The Athlete was informed that a failure to respond within 20 days would be treated as an acceptance of the consequences and a waiver of his right to a hearing, and that a decision imposing a four-year period of ineligibility, together with the disqualification of results, would then be issued pursuant to Article 8.3.3 of the ISMF ADR without further notice.
18. On 25 October 2025, the Athlete, through his legal representatives, responded to the notice of charge, maintaining that the AAF resulted from a single topical application of Trofodermin and submitting further evidence, including statements confirming that no doctor had been present at the Event and a document from the national federation confirming that no doctor had been summoned.
19. On 3 November 2025, the ITA, acting on behalf of the ISMF, asserted that the Athlete had failed to establish that the ADRV was not intentional and that a four-year period of ineligibility was therefore applicable from the date of the provisional suspension. The Athlete was granted until 10 November 2025 either to accept the consequences or to refuse them and have the matter referred to the Anti-Doping Division of the Court of Arbitration for Sport (the “CAS ADD”). The Athlete did not respond within that deadline.
20. On 17 November 2025, the Athlete was granted a final deadline of 24 November 2025, warning that a failure to respond would result in the issuance of a sanctioning decision under Article 8.3.3 of the ISMF ADR without further notice. The Athlete did not respond, and did not request referral of the matter to the CAS ADD.

C. The Appealed Decision

21. On 9 January 2026, in the absence of any response from the Athlete and without a first-instance hearing, the ITA, acting on behalf of the ISMF, issued a decision pursuant to Article 8.3.3 of the ISMF ADR (the “Appealed Decision”).
22. The Appealed Decision found that the Athlete had committed an ADRV under Article 2.1 and/or Article 2.2 of the ISMF ADR, determined that the violation was intentional within the meaning of Article 10.2.3 of the ISMF ADR, and imposed a period of ineligibility of four years running from 26 February 2025, the date of the provisional suspension, until 25

February 2029. It further ordered the disqualification of all competitive results obtained by the Athlete between 28 January 2025 and 26 February 2025, with forfeiture of all related medals, points and prizes. The Appealed Decision recorded that the Athlete had no prior ADRV and had, so far, respected the terms of his provisional suspension.

23. It is against the Appealed Decision that the Athlete has filed the present Appeal before the Court of Arbitration for Sport (“CAS”).

III. PROCEEDINGS BEFORE THE COURT OF ARBITRATION FOR SPORT

24. On 29 January 2026, the Athlete filed a Statement of Appeal with the CAS against the ISMF, the ITA and WADA in respect to the Appealed Decision, pursuant to Articles 47 and 48 of the CAS Code of Sports-related Arbitration (the “Code”). In his Statement of Appeal, the Athlete nominated Professor Luigi Fumagalli, Attorney-at-Law in Milan, Italy, as arbitrator in this matter. He also requested an extension of 10 days to file his Appeal Brief.
25. On 30 January 2026, the CAS Court Office acknowledged receipt of the Statement of Appeal filed on 29 January 2026. In the same correspondence, it invited, *inter alia*, the ISMF, the ITA and WADA to jointly nominate an arbitrator within 10 days. It further granted, on behalf of the CAS Director General, a 10-day extension to the Athlete to file his Appeal Brief, pursuant to Article R32(2) of the Code.
26. On 4 February 2026, WADA submitted correspondence asserting that it manifestly lacked standing to be sued by the Athlete and requesting its removal from the proceedings. In the same correspondence, WADA also requested that the time limit for the ISMF, the ITA and WADA to jointly nominate an arbitrator be suspended pending a determination of its request for removal from the proceedings.
27. On the same date, the CAS Court Office acknowledged receipt of WADA’s request to be removed from the proceedings and invited the Athlete to submit his position by 9 February 2026.
28. On 9 February 2026, the Athlete confirmed that he did not oppose WADA’s request and accordingly withdrew WADA as a respondent in these proceedings.
29. On the same date, the ISMF informed the CAS Court Office that it would be represented in these proceedings by the ITA, specifying that the ITA acts as its delegated third party pursuant to the WADC and the ISMF ADR. It further clarified that, as a result, the ITA is neither a separate party to, nor does it have independent standing in, the present proceedings.
30. On 10 February 2026, the CAS Court Office acknowledged receipt of the Athlete’s position regarding WADA’s request and confirmed that WADA had been removed as a respondent from the proceedings. It further noted the ISMF’s statement that the ITA does not have independent standing in these proceedings and invited the Athlete to submit his position on this issue by 16 February 2026.
31. On 16 February 2026, the Athlete informed the CAS Court Office that he had taken note of the ISMF’s position on the ITA’s status as a respondent in this Appeal. However, in light of

the imminent expiry of the deadline to file his Appeal Brief on 18 February 2026, he requested an extension of time to submit his position on this issue.

32. On the same date, the CAS Court Office, on behalf of the CAS Director General, granted the Athlete's request for an extension pursuant to Article R32(2) of the Code. It further informed the Parties that the time limit for the Respondents to jointly nominate an arbitrator remained suspended. In the absence of any timely objection, it also confirmed that English would be the language of the proceedings pursuant to Article R29 of the Code.
33. On 18 February 2026, the Athlete filed his Appeal Brief in accordance with Article R51 of the Code. He also separately set out his position with respect to the ITA's status as a respondent in this Appeal as follows:

"[...]"

- a. The Doping Test was conducted by ITA;*
- b. The Results Management and the Initial Review of the ADRV was determined by ITA;*
- c. The provisional suspension was imposed by ITA;*
- d. All communications and notifications were sent and signed by from ITA;*
- e. ITA played an active and decisive role during the first instance proceedings and now before CAS;*
- f. the Appealed Decision was issued and signed by ITA; and*
- g. ITA continues to represent ISMF*

Thus, the Appellant has correctly included ITA as a Respondent, considering it was the decision-making body that issued the Appealed Decision. Under these circumstances, the Appellant considers it appropriate to maintain both entities as Respondents. We remain at the disposal of the CAS to indicate the appropriate way forward in this matter."

34. On 20 February 2026, the CAS Court Office acknowledged receipt of the Appeal Brief filed by the Athlete on 18 February 2026 and took note of his position regarding the ITA's status as a respondent in this Appeal. It further informed the Parties that the issue of the ITA's status would be determined by the Panel once constituted and that the time limit for the Respondents to jointly nominate an arbitrator was no longer suspended. The Respondents were also invited to file their Answer within 20 days.
35. On 27 February 2026, the ITA nominated, on behalf of the ISMF, Mr. Alexander McLin, Attorney-at-Law in Lausanne, Switzerland, as an arbitrator in this matter.
36. On 9 March 2026, the ITA requested, on behalf of the ISMF, a 10-day extension of the time limit to file its Answer. On 10 March 2026, the CAS Court Office, on behalf of the CAS Director General, granted this request pursuant to Article R32(2) of the Code.

37. On 23 March 2026, the ITA filed, on behalf of the ISMF, an Answer in accordance with Article R55 of the Code. In a separate submission, the ITA contended that it had been incorrectly designated as a respondent in these proceedings, for the following reasons:

“- CAS has jurisdiction only vis-à-vis the ISMF under Article R47 of the CAS Code. The Athlete has not provided, and indeed cannot provide, “a copy of the provisions of the statutes or regulations or the specific agreement providing for appeal to CAS” that would allow an appeal to CAS against the ITA, as no such basis exists.

- Furthermore, the ITA has no standing in these proceedings. It acted exclusively in an operational capacity as a Delegated Third Party on behalf of the ISMF during Results Management and therefore cannot be the subject of appeal proceedings in its own right.*

Consequently, we respectfully request that the Panel rule that CAS has no jurisdiction to hear the Athlete’s appeal against the ITA and, in any event, that the ITA lacks standing to be sued.”

38. On 24 March 2026, the Parties were informed, pursuant to Article R56(1) of the Code, that, following the submission of the Appeal Brief and the Answer, they could no longer supplement or amend their requests, introduce new arguments, or submit additional evidence, unless otherwise agreed by them or ordered by the President of the Panel in exceptional circumstances. The Parties were further invited to inform the CAS Court Office by 31 March 2026 whether they preferred a hearing to be held or for the Panel to render an award based solely on the written submissions. Within the same time limit, they were also invited to indicate whether they requested a case management conference. Finally, pursuant to Article R54 of the Code, the Parties were informed of the composition of the Panel, as follows:

President: Ms. Marianne Saroli, Attorney-at-Law in Montreal, Canada

Arbitrators: Professor Luigi Fumagalli, Attorney-at-Law in Milan, Italy

Mr. Alexander McLin, Attorney-at-Law in Lausanne, Switzerland

39. On 1 April 2026, the CAS Court Office acknowledged the Parties’ preference for a hearing in this matter and noted that the ITA, acting on behalf of the ISMF, had not requested a case management conference at that stage.
40. On 30 April 2026, the CAS Court Office, on behalf of the Panel, informed the Parties that a hearing would be held on 11 May 2026 by videoconference.
41. On 8 May 2026, the Parties signed and returned their respective Orders of Procedure in this Appeal.
42. On 11 May 2026, a hearing took place by videoconference. The Panel was assisted by Ms. Amelia Moore, Counsel to the CAS, and joined by the following:

For the Athlete:

- Ms. Veena Swarna Ravoori, Attorney
- Mr. Filippo Apolloni, Attorney
- Mr. Alessio Bertoncello, Trainee attorney

- Mr. Enrico Pellegrini, Appellant
- Mr. Paolo Pellegrini, Witness
- Ms. Ermelinda Rendano, Witness
- Dr. Eber Dal Zotto, Witness
- Ms. Camilla Cona, Witness
- Ms. Martina Scola, Witness
- Mr. Luca Curioni, Witness
- Mr. Daniele Cappelletti, Witness
- Mr. Mirco Bertolina, Witness
- Mr. Umberto Ferrazza, Witness
- Ms. Roberta Fiscon, Interpreter

For ISMF:

- Ms. Charlotte Frey, Counsel for the ISMF
- Mr. Anton Sotir, Counsel for the ISMF
- Mr. Cristian Moldovan, Legal intern
- Mr. Lucas Nanchen, ISMF representative

43. At the outset of the hearing, the Parties confirmed that they had no objection to the constitution of the Panel and the way the proceedings had been conducted thus far. At the conclusion of the hearing, the Parties confirmed that their right to be heard had been fully respected.

IV. SUBMISSIONS OF THE PARTIES

A. The Athlete

44. In his Appeal Brief, the Athlete sought the following relief:

“As a Preliminary Claim:

- *to admit this Appeal along with its exhibits/annexes;*

On the Merits, as the Primary Claim:

- *to set aside, in whole or in part, the Appealed Decision passed on 9 January 2026 by the International Testing Agency, on behalf of the International Ski Mountaineering Federation;*
- *to find that the alleged Anti-Doping Rule Violation was not intentional within the meaning of Article 10.2.3 of the ISMF Anti-Doping Rules;*
- *to find that the Appellant bore No Fault or Negligence and accordingly eliminate the period of Ineligibility pursuant to Article 10.5 of the ISMF Anti-Doping Rules;*

On the Merits, in the Alternative:

- *to find that the Appellant bore No Significant Fault or Negligence within the meaning of Article 10.6 of the ISMF Anti-Doping Rules and accordingly to reduce the period of Ineligibility to a period significantly below 2 years (as requested within 12-18 months);*

- *additionally, and/or in the alternative, consider the application of Article 10.7 of the ISMF Anti-Doping Rules, allowing for the elimination, reduction, or suspension of the period of Ineligibility or other consequences for reasons other than fault, in light of the exceptional circumstances of the present case;*

In any event:

- *to order that any reduced period of Ineligibility be credited with the period already served and that the disqualification of results and related consequences be adjusted accordingly;*
- *to order the Respondents to contribute to the Appellant's legal and other expenses incurred in connection with these proceedings;*
- *to grant any further relief deemed appropriate given the circumstances of the present matter."*

45. The Athlete's submissions, in essence, may be summarised as follows:

a. The ITA as a respondent

- The Athlete submits that the ITA was properly designated as a respondent because it conducted the doping control process, carried out the results management, imposed the provisional suspension, issued the relevant correspondence and notifications, and signed the Appealed Decision. In the Athlete's view, the ITA exercised the relevant decision-making functions in the first-instance proceedings and was therefore properly joined as a respondent in this Appeal.

b. Establishment of the ADRV

- The Athlete accepts that clostebol was detected in his sample and that an ADRV under Articles 2.1 and/or 2.2 of the ISMF ADR is established. His Appeal is directed solely at the characterisation of the ADRV as intentional and the consequences imposed by the Appealed Decision.

c. Applicable consequences

i. Period of ineligibility

(a) Source of clostebol in the Athlete's system

- The Athlete submits that the injuries to his heels were caused by the ski boots he was required to use after moving from the U18 to the U20 category at the beginning of the 2025 season. According to the Athlete, the transition required him to replace his plastic ski boots with fully carbon boots, which were more rigid and could not be moulded to the shape of his feet.
- The Athlete contends that, during the first day of the Event on 25 January 2025, the new boots caused severe blisters and bruising in the area of his Achilles tendons. The injuries were treated by the team physiotherapist, Ms. Cona, on the same day. However, after competing again on the second day of the Event, the injuries deteriorated. The Athlete submits that he nevertheless continued competing because he had been encouraged to do so by his coaches

and because withdrawing would have prevented his teammates from participating in the relay race.

- The Athlete alleges that, upon returning home on the evening of 26 January 2025, he was experiencing considerable pain, with swollen ankles and wounds that appeared to be at risk of infection. According to the Athlete, his Father, concerned by the condition of the injuries, disinfected the wounds, photographed them and, after locating a pharmacy that was still open at that hour, went to the Pharmacy, showed the photographs to the pharmacist and requested an effective treatment. The pharmacist, Dr. Eber Dal Zotto, recommended Trofodermin, which the Father purchased over the counter and brought home.
- The Athlete further submits that his Father applied the Trofodermin to his heels without telling him beforehand what product was being used, without showing him the product and without obtaining his express consent. The Athlete claims that he was lying face down on a bed with the injured area exposed and, due to the location of the injuries, was unable to see either the product or its packaging. He therefore maintains that he was unaware of the identity of the product or its active ingredients. The Athlete further submits that the Trofodermin was applied on a single occasion only.
- He also submits that he attended school on 27 January 2025 with his ankles bandaged and that, during the doping control on 28 January 2025, the use of Trofodermin was voluntarily disclosed on the DCF. While acknowledging that the DCF records the date of last use as 27 January 2025, the Athlete contends that this entry resulted from an error by the doping control officer (“DCO”). He maintains that the sole application of Trofodermin occurred on the evening of 26 January 2025.

(b) The absence of intent

- The Athlete submits that his ADRV was not intentional within the meaning of Article 10.2.3 of the ISMF ADR. He contends that Article 10.2.3 applies only where an athlete knew that his conduct constituted an ADRV or knew that there was a significant risk that it might do so and manifestly disregarded that risk. Relying on CAS 2016/A/4643 *Maria Sharapova v. ITF*, he argues that what matters is his actual knowledge, not what he ought to have known.
- The Athlete also relies on the two-pronged test articulated in CAS 2023/A/9518 *Mitoglou v. FIBA*, pursuant to which indirect intent requires both knowledge of a significant risk and a manifest disregard of that risk. He contends that neither of those requirements is satisfied in the present case. According to the Athlete, the Trofodermin was applied by his Father in the circumstances described above, without his prior knowledge of the identity or contents of the product. He therefore maintains that he could not have consciously disregarded a risk of which he was unaware. The Athlete further argues that the voluntary declaration of Trofodermin on the DCF is inconsistent with any intention to dope.
- The Athlete further submits that the authorities relied upon in the Appealed Decision do not apply to the present case. In particular, he argues that the Appealed Decision incorrectly relied on CAS 2016/A/4609 *WADA v. Indian NADO & Pereira* (the “Pereira case”) to conclude that the mere identification of a prohibited substance on a product’s packaging is sufficient to prevent an athlete from establishing that the ADRV was unintentional. The Athlete contends that the reasoning in the *Pereira* case applies only where an athlete personally used or

administered the product and had the opportunity to verify its contents. He recalls that, in the *Pereira* case, the player had personally taken the medication on four occasions, following a prescription from his doctor for a specific treatment. By contrast, he contends that he neither handled nor saw the Trofodermin packaging and that the heightened duty of care expected from athletes who personally use medication cannot be applied in the present case.

- Moreover, the Athlete submits that the ADRV conferred no performance-enhancing benefit. In support of this contention, he relies on the toxicological opinion of Professor Favretto and on the low detected concentration of 0.5924 ng/mL, which he says is consistent only with a single topical application and incompatible with any doping purpose. In this respect, he refers to CAS 2017/A/5301 *Sara Errani v. ITF* & CAS 2017/A/5302 *Nado Italia v. Sara Errani and ITF* (the “Errani case”), where a concentration of 65 ng/mL resulted in a sanction of 10 months, and to the case of the Italian biathlon athlete Ms. Rebecca Passler, in which a concentration of 1.1 ng/mL was considered very low. He argues that these cases demonstrate that substantially higher concentrations have not, in themselves, been considered sufficient to establish intentional use.
- Finally, the Athlete submits that more than 20 recent anti-doping cases involving clostebol have been attributed to the use of Trofodermin. Relying on CAS 2010/A/2277 *Roberto La Barbera v. IWAS*, he argues that he has established, on the balance of probabilities, both the source of administration and the circumstances in which clostebol entered his system.

ii. The Athlete’s degree of fault

- In the alternative, the Athlete submits that the present case involves exceptional circumstances warranting a finding of no fault or negligence under Article 10.5 of the ISMF ADR and, consequently, the elimination of the period of ineligibility. He contends that he neither knew nor could reasonably have known or suspected, even with the exercise of utmost caution, that a prohibited substance was being administered to him. He submits that Trofodermin was applied by his Father, without his knowledge or consent, in response to an acute medical situation. He further points to his age, the absence of meaningful anti-doping education, and the fact that neither he nor his Father was aware of the anti-doping implications of Trofodermin.
- In support of this position, he refers to the first-instance decisions in *ITIA v. Sinner* and *ITIA v. Bortolotti*, both of which concerned AAFs for clostebol following exposure to Trofodermin in Italy. He argues that those cases are comparable because they involved the use of Trofodermin, its over-the-counter availability in Italy, and the administration of the product by a third party without the athlete’s knowledge of the medication or its application. As regards the *Sinner* case, the Athlete submits that, notwithstanding WADA’s subsequent appeal and the parties’ eventual settlement, the first-instance tribunal concluded that Mr. Sinner bore no fault or negligence. He further argues that, unlike Mr. Sinner, who was an experienced elite professional athlete supported by an extensive entourage, he was only 18 years old, competed at youth level, and had not benefited from comparable anti-doping education, support or guidance. The Athlete also relies on the first-instance decision in *ITIA v. Bortolotti*, in which the tribunal found that the player could not reasonably have been expected to take additional precautions and therefore bore no fault or negligence.

- In the further alternative, the Athlete submits that his degree of fault should be characterised as light under the three-category framework established in CAS 2013/A/3327 *Marin Cilic v. ITF* & CAS 2013/A/3335 *ITF v. Marin Cilic* (the “Cilic case”), as adapted to non-specified substances in CAS 2022/A/9141 *Mariano Tammaro v. ITF* (the “Tammaro case”). On that basis, he contends that the appropriate period of ineligibility falls within the range of 12 to 18 months, with 15 months representing the standard sanction for a light degree of fault.
- As regards the objective element of fault, the Athlete argues that the ordinary precautions expected of an athlete, such as reading the product label, checking its ingredients against the Prohibited List and researching the product online, necessarily presuppose access to the product before or at the time of its use. Relying on the *Tammaro* case, he submits that such precautions cannot reasonably be expected where, as in the present case, the athlete was unaware of the product and had no opportunity to inspect it.
- As regards the subjective element, the Athlete invokes his age, his status as a non-professional athlete competing in a predominantly amateur environment, the absence of meaningful anti-doping education before the AAF, the stressful circumstances in which the Trofodermin was applied and the absence of any performance-enhancing purpose. In particular, he relies on TAS 2023/A/9845 *Beatrice Carletti v. NADO Italia*, in which a sole arbitrator imposed a period of ineligibility below the one-year minimum in a clostebol case involving a young, *de facto* amateur athlete who had not received meaningful anti-doping education. He submits that his circumstances are materially comparable.
- Finally, the Athlete argues that, even if his Father’s conduct were to be attributed to him, it would not elevate his own degree of fault beyond the light category because his personal departure from the applicable standard of care was minimal. In this respect, he distinguishes his case from the *Errani* case, observing that Ms. Errani was an elite professional athlete subject to a higher standard of care, yet ultimately received a 10-month period of ineligibility.

iii. Application of Article 10.7 of the ISMF ADR

- The Athlete otherwise relies on Article 10.7 of the ISMF ADR, submitting that, in light of the exceptional circumstances of the present case, the period of ineligibility should be eliminated, reduced, or suspended on grounds unrelated to fault.

B. The ISMF

46. In its Answer, ISMF sought the following relief:

“(1) The appeal of Enrico Pellegrini is dismissed.

(2) The Decision on the Anti-Doping Rule Violation in accordance with Article 8.3.3 of the ISMF Anti-Doping Rules rendered on 9 January 2026 is confirmed.

(3) Enrico Pellegrini is found to have committed an Anti-Doping Rule Violation pursuant to Article 2.1/2.2 of the ISMF ADR.

(4) Enrico Pellegrini is sanctioned with a period of Ineligibility of four years from 26 February 2025 until 25 February 2029.

(5) All competitive results of Enrico Pellegrini from 28 January 2025 until 26 February 2025 are disqualified with all resulting consequences, including forfeiture of medals, points and prizes.

(6) The arbitration costs, if any, shall be borne by Enrico Pellegrini.

(7) The International Ski Mountaineering Federation is granted a contribution to its legal and other costs.”

47. The ISMF’s submissions, in essence, may be summarised as follows:

a. The ITA is not a respondent

- The ISMF submits that the ITA has been incorrectly designated as a respondent in these proceedings. It contends that the ITA acted solely in an operational capacity as a delegated third party on behalf of the ISMF pursuant to the WADC and the ISMF ADR. According to the ISMF, CAS has jurisdiction only in respect of the ISMF, no arbitration agreement exists between the Athlete and the ITA, and the ITA has no independent standing to be the subject of appeal proceedings before CAS.

b. Establishment of the ADRV

- The ISMF does not dispute that Trofodermin was declared on the DCF or that the Athlete identifies the topical application of that cream as the source of the clostebol detected in his sample. It contends, however, that the Athlete has failed to establish, on the balance of probabilities, the precise circumstances in which clostebol entered his system and that, in any event, the ADRV was at least indirectly intentional.

c. Applicable consequences

i. Period of ineligibility

(a) Source of clostebol in the Athlete’s system

- The ISMF submits that the Athlete’s explanation is undermined by a number of inconsistencies and should not be accepted by the Panel. In particular, it relies on the following:
 - The receipt produced by the Athlete indicates that Trofodermin was purchased at 19:40 on Sunday, 26 January 2025. However, relying on publicly available information, including a snapshot of the Pharmacy’s website dated January 2025, the ISMF submits that the Pharmacy is closed on Sundays and closes at 19:30 on weekdays. According to the ISMF, the purchase could therefore not have occurred in the manner alleged by the Athlete, casting doubt on the reliability of his explanation.
 - The Athlete declared 27 January 2025 as the date of last use on the DCF but now maintains that the Trofodermin was applied only once, on 26 January 2025. The ISMF submits that the Athlete has failed to explain why, if the injuries constituted a genuine medical emergency, the cream would have been applied only once despite the injuries persisting the following day.

- The Athlete claims that he was unaware that Trofodermin had been applied to his heels, yet identified the product by name on the DCF. According to the ISMF, this is inconsistent with the Athlete's assertion that he had no knowledge of the product or its application.
- The ISMF notes that the Athlete's next competition was scheduled for 6 February 2025, less than two weeks after the Event, and submits that this provided him with a strong incentive to accelerate his recovery.

(b) Presence of intent

- The ISMF submits that, even accepting the Athlete's explanation, his conduct amounted to indirect intent within the meaning of Article 10.2.3 of the ISMF ADR. According to the ISMF, the Athlete knew that there was a significant risk that his conduct might result in an ADRV and nevertheless manifestly disregarded that risk.
- In support of that position, the ISMF relies on the following circumstances:
 - Despite his age, the Athlete was an international-level athlete included in the RTP. Upon his inclusion in the RTP, he was expressly notified of his anti-doping obligations, including the duty to verify any medication before use and to inform medical personnel of those obligations. The ISMF further notes that, in December 2024, the Athlete had been instructed to complete a mandatory anti-doping education programme.
 - Consistent CAS jurisprudence establishes that an athlete's duty of care is heightened in relation to medications, given the inherent and significant risk that they may contain prohibited substances. This heightened duty applies irrespective of whether the medication is used on a single occasion, is available over the counter, or is applied by a third party.
 - The Trofodermin packaging prominently displayed a red "*DOPING*" warning, identified clostebol as an active ingredient on both the box and the tube, and was accompanied by a package leaflet containing an express warning for athletes. According to the ISMF, the Athlete could have discovered this information by inspecting the packaging, asking his Father which product was being applied or carrying out a basic internet search. The ISMF submits that the Athlete took none of these precautions, before or after the application.
 - The ISMF disputes the Athlete's assertion that his pain or exhaustion prevented him from asking his Father what product was being applied. It also disputes the Athlete's claim that the Trofodermin was applied without his consent, arguing that he knew his Father had gone to obtain treatment, positioned himself to receive it, and thereby acquiescing in its application.
- The ISMF relies principally on CAS 2023/A/9482 *Joanna Evans v. World Aquatics*, CAS 2023/A/9564 *WADA v. World Aquatics & Joanna Evans*, and CAS 2023/A/9592 *World Aquatics v. Joanna Evans* (the "Evans cases"), in which a panel found that an athlete who applied Trofodermin to treat a knee injury without taking any precautionary measures had acted with indirect intent. According to the ISMF, the decisive consideration in the *Evans* cases was the athlete's failure to take even minimal steps to verify the product despite the prominent anti-doping warnings on its packaging. The ISMF submits that the present case is even more compelling because, although the Athlete knew that his Father had gone to a

pharmacy to obtain treatment, he made no enquiry as to the identity or contents of the product either before or after its application.

- The ISMF further relies on the *Pereira* case, in which a finding of indirect intent was made notwithstanding the player's assertion that he had acted in accordance with his treating doctor's prescription. The ISMF submits that the present case is even more culpable because, unlike the player in *Pereira*, the Athlete relied exclusively on his Father, who was neither a medical professional nor an anti-doping expert, without undertaking any personal verification of the product.
- The ISMF also refers to CAS 2012/A/2822 *Erkand Qerimaj v. IWF*, CAS 2016/A/4512 *WADA v. TFF & Kuru*, CAS 2016/A/4716 *Cole Henning v. SAIDS*, CAS 2020/A/7536 *Ashley Kratzer v. ITF*, CAS 2021/A/8458 *WADA v. NADA & Rani Rana* and CAS 2024/A/10366 *WADA v. ADAK & Wambui* in support of its submission that an athlete's complete failure to exercise diligence in relation to medication may constitute indirect intent.

(c) The Athlete's degree of fault

- The ISMF submits that, if the Panel finds that the ADRV was intentional, Articles 10.5 and 10.6 of the ISMF ADR are inapplicable. In support of that submission, it relies on the commentary to Article 10.6.2 of the ISMF ADR and the WADC, which states that those provisions "*may be applied to any anti-doping rule violation except those articles where intent is an element of the anti-doping rule violation or an element of a particular sanction (e.g. Article 10.2.1).*"
- In the alternative, should the Panel conclude that the ADRV was not intentional, the ISMF submits that the Athlete's complete lack of diligence precludes any finding of no fault, no significant fault or a reduced degree of fault. According to the ISMF, the Athlete took no precautions to verify the product either before or after its application and did not seek to identify it even after completing the mandatory anti-doping education programme on 4 February 2025. The ISMF notes that the prohibited nature of the product came to light only following notification of the AAF. In those circumstances, it submits that the applicable sanction is a two-year period of ineligibility pursuant to Article 10.2.1.1 of the ISMF ADR.

ii. The mandatory disqualification of results

- The ISMF further submits that the disqualification of the Athlete's competitive results from 28 January to 26 February 2025, together with the forfeiture of any medals, points and prizes, is mandatory under Article 10.10 of the ISMF ADR.

V. JURISDICTION

48. Article R47 of the Code provides as follows:

"An appeal against the decision of a federation, association or sports-related body may be filed with CAS if the statutes or regulations of the said body so provide or if the parties have concluded a specific arbitration agreement and if the Appellant has exhausted the legal remedies available to it prior to the appeal, in accordance with the statutes or regulations of that body."

49. It follows that, in the absence of a specific arbitration agreement, CAS has jurisdiction to hear an appeal only where the statutes or regulations of the sports-related body whose decision is challenged expressly provide for a right of appeal to CAS.

50. In the present case, the Appeal was brought against both the ISMF and the ITA. The Panel will assess next whether it has jurisdiction over the Appeal insofar as it is directed against each of them.

A. Jurisdiction over the ISMF

51. The Athlete relies on Article 13.2.3.1 of the ISMF ADR, which provides as follows:

“[...] the following parties shall have the right to appeal to CAS: (a) the Athlete or other Person who is the subject of the decision being appealed;”

52. The Panel notes that the Athlete is the person subject to the Appealed Decision within the meaning of Article 13.2.3.1 of the ISMF ADR. The Appealed Decision was issued pursuant to the ISMF ADR, within the meaning of Article 13.1 thereof, and concerns an anti-doping matter governed by those rules. As the ISMF does not dispute CAS jurisdiction over the Appeal insofar as it is directed against it, the Panel is satisfied that it has jurisdiction to hear the Appeal against the ISMF.

53. Moreover, both the Athlete and the ISMF expressly accepted CAS jurisdiction by signing the Order of Procedure and participated without objection in the present arbitral proceedings.

B. Jurisdiction over the ITA

54. The Athlete also directed the present Appeal against the ITA.

55. By correspondence to the CAS Court Office dated 9 February 2026, the ITA submitted that it had been incorrectly designated as a respondent. It argued that it had acted solely in an operational capacity as a delegated third party on behalf of the ISMF and that no arbitration agreement existed between the Athlete and the ITA. The ISMF adopted this position in its Answer, submitting that CAS has jurisdiction only vis-à-vis the ISMF under Article R47 of the Code.

56. The Athlete, for his part, submits that the ITA was properly joined as a respondent because it administered the anti-doping proceedings, exercised the relevant decision-making functions and issued the Appealed Decision.

57. The Panel considers that the ITA’s objection raises two separate questions. First, whether CAS has jurisdiction over the Appeal insofar as it is directed against the ITA. Second, if jurisdiction exists, whether the ITA has standing to be sued in these proceedings. Since standing to be sued is a question of substantive law under Swiss law, the Panel will address that issue separately in the Merits section below. At this stage, the Panel limits its analysis to the question of jurisdiction.

58. Turning to the question of jurisdiction over the ITA, the Panel recalls that, under Article R47 of the Code, CAS has jurisdiction only over appeals against the decision of a federation, association or sports-related body where the statutes or regulations of that body provide for

such an appeal, or where the parties have concluded a specific arbitration agreement. The question before the Panel is therefore whether, for the purposes of Article R47, the Appealed Decision is properly to be regarded as a decision of the ITA or the ISMF.

59. In this respect, the preface to the ISMF ADR provides *inter alia* the following:

“[...] As provided in the Code, ISMF shall be responsible for conducting all aspects of Doping Control. Any aspect of Doping Control or anti-doping Education may be delegated by ISMF to a Delegated Third Party, such as the International Testing Agency (ITA) however, ISMF shall require the Delegated Third Party to perform such aspects in compliance with the Code, International Standards, and these Anti-Doping Rules.

*When ISMF has delegated its responsibilities to implement part or all of Doping Control to the ITA or to other Delegated Third Party, any reference to ISMF in these Rules should be intended as a reference to the ITA or the other Delegated Third Party, where applicable and within the context of the aforementioned delegation. **ISMF shall always remain fully responsible for ensuring that any aspects of Doping Control that it delegates to a Delegated Third Party are performed in compliance with the Code.** [...]” (emphasis added)*

60. From this preface, the Panel notes that the ISMF “*shall be responsible for conducting all aspects of Doping Control*”, that any aspect of doping control “*may be delegated by ISMF to a Delegated Third Party, such as the International Testing Agency (ITA)*”, and that the ISMF “*shall always remain fully responsible*” for any aspect of doping control that it delegates. The ISMF ADR thus distinguishes between the performance of delegated operational functions and the retention of ultimate responsibility for those functions. While the ITA may perform delegated functions on the ISMF’s behalf, the ISMF remains fully responsible for their exercise under its own regulations. Since “*Doping Control*” is defined in the ISMF ADR to include results management, the ITA’s handling of the results management process falls within the scope of the authority delegated under those rules.
61. The Athlete nevertheless points to the sentence in the preface stating that “[w]hen ISMF has delegated its responsibilities to implement part or all of Doping Control to the ITA or to other Delegated Third Party, any reference to ISMF in these Rules should be intended as a reference to the ITA or the other Delegated Third Party, where applicable and within the context of the aforementioned delegation.” However, the Panel considers that this sentence merely enables the ITA to perform the functions delegated to it by the ISMF and ensures that references to the ISMF in the ISMF ADR may, where the context so requires, encompass the ITA. It does not substitute the ITA for the ISMF as the author of the Appealed Decision, nor does it transfer responsibility for that decision from the ISMF to the ITA. On the contrary, this sentence must be read together with the one that immediately follows it, which expressly provides that the ISMF “*shall always remain fully responsible*” for any delegated function.
62. Moreover, the Appealed Decision was issued expressly “*on behalf of ISMF*”, a formulation appearing both in the letterhead and in the signature block. It is clear from the Appealed Decision that the ITA acted in a representative capacity when exercising the delegated results management functions entrusted to it by the ISMF.
63. The Panel further notes that no separate arbitration agreement between the Athlete and the ITA has been identified or relied upon in these proceedings.

64. In light of the foregoing, the Panel concludes that the Appealed Decision is a decision of the ISMF, not the ITA. As no separate arbitration agreement exists between the Athlete and the ITA, and the Appealed Decision was not issued by the ITA, neither of the jurisdictional basis contemplated by Article R47 of the Code is satisfied in respect of the ITA. Therefore, the Panel lacks jurisdiction over the Appeal insofar as it is directed against the ITA.

VI. ADMISSIBILITY

65. Article R49 of the Code provides as follows:

“In the absence of a time limit set in the statutes or regulations of the federation, association or sports-related body concerned, or in a previous agreement, the time limit for appeal shall be twenty-one days from the receipt of the decision appealed against. The Division President shall not initiate a procedure if the statement of appeal is, on its face, late and shall so notify the person who filed the document. When a procedure is initiated, a party may request the Division President or the President of the Panel, if a Panel has been already constituted, to terminate it if the statement of appeal is late. The Division President or the President of the Panel renders her/his decision after considering any submission made by the other parties”.

66. Article 13.6.1 of the ISMF ADR further provides as follows:

“The time to file an appeal to CAS shall be twenty-one (21) days from the date of receipt of the decision by the appealing party. The above notwithstanding, the following shall apply in connection with appeals filed by a party entitled to appeal but which was not a party to the proceedings that led to the decision being appealed:

(a) Within fifteen (15) days from the notice of the decision, such party/ies shall have the right to request a copy of the full case file pertaining to the decision from the Anti-Doping Organization that had Results Management authority;

(b) If such a request is made within the fifteen (15) day period, then the party making such request shall have twenty-one (21) days from receipt of the file to file an appeal to CAS.”

67. The Appealed Decision was issued on 9 January 2026, and the Athlete filed his Appeal with the CAS on 29 January 2026.
68. Therefore, the Panel is satisfied that the Appeal is admissible, as it was filed within 21 days from the date of receipt of the Appealed Decision by the Athlete.

VII. APPLICABLE LAW

69. Article R58 of the Code provides as follows:

“The Panel shall decide the dispute according to the applicable regulations and, subsidiarily, to the rules of law chosen by the parties or, in the absence of such a choice, according to the law of the country in which the federation, association or sports-related body which has issued the challenged decision is domiciled or according to the rules of law the Panel deems appropriate. In the latter case, the Panel shall give reasons for its decision”.

70. The Panel notes that the present Appeal is directed against the Appealed Decision concerning an alleged ADRV in application of the ISMF ADR.
71. Accordingly, the Panel concludes that the “*applicable regulations*” for the purposes of Article R58 of the Code are those of the ISMF ADR. The Panel’s conclusion is further supported by the fact that the application of the ISMF ADR is not disputed by the Parties, who also explicitly refer to these regulations in their respective submissions.
72. Moreover, because the ISMF issued the Appealed Decision and is seated in Switzerland, Swiss law is subsidiarily applicable.

VIII. PROCEDURAL MATTERS

A. Admissibility of new exhibits submitted by the Athlete

73. Approximately three hours before the commencement of the hearing held on 11 May 2026, the Athlete filed two new exhibits and requested their admission into the record pursuant to Article R56 of the Code:
- Annex 24, comprising the 2025 duty rota for on-call pharmacies affiliated with the Province of Vicenza, approved by the Director General of Azienda ULSS 7 Pedemontana by Deliberation No. 2205 of 29 November 2024 and circulated to all pharmacies in the province, together with the relevant entry showing that the Pharmacy was designated as the on-call pharmacy for Sunday, 26 January 2025; and
 - Annex 25, an extract from the Athlete’s school register for 27 January 2025, indicating that he was required to attend school on that date to submit a technical assignment to his teacher, Professor Gazzin Pierpaolo, during his final year of secondary education.
74. The Athlete submitted that both exhibits were filed in response to allegations raised for the first time in paragraph 69(i)-(iii) of the Answer concerning the Pharmacy’s opening hours on Sunday, 26 January 2025, and the relevance of his attendance at school the following day. He argued that these allegations could not reasonably have been anticipated at the time he filed his Appeal Brief and that the exhibits were relevant to establishing the source of the clostebol detected in his sample and to corroborating his explanation of the injury.
75. The ISMF, for its part, opposed the admission of these exhibits. Relying on Article R56 of the Code, it submitted that no exceptional circumstances justified their admission and that the Athlete had provided no satisfactory explanation for the delay. In particular, it noted that the Answer had been filed on 23 March 2026, six weeks before the hearing on 11 May 2026, giving the Athlete ample time to seek admission of these exhibits at an earlier stage.
76. In light of the Parties’ respective positions, the Panel recalls that Article R56 of the Code provides, in relevant part, as follows:

“Unless the parties agree otherwise or the President of the Panel orders otherwise on the basis of exceptional circumstances, the parties shall not be authorized to supplement or amend their requests or their argument, to produce new exhibits, or to specify further evidence on which they intend to rely after the submission of the appeal brief and of the answer.”

77. The Panel notes that, while Article R56 permits the introduction of new exhibits where exceptional circumstances exist, it does not define the circumstances that may qualify as exceptional. In assessing whether such circumstances exist, the Panel is guided by CAS jurisprudence, which has recognised that new evidence submitted after the appeal brief and the answer may be admitted where it is necessary to establish relevant facts and relates to arguments already raised in the first instance proceedings. Likewise, such evidence may be admitted where it merely confirms statements or positions already advanced in the appeal brief, provided that its admission does not prejudice the respondent (MAVROMATI/REEB, *The Code of the Court of Arbitration for Sport*, 2nd ed., 2025, ad R56, p. 542).
78. With this, the Panel highlights that its authority to admit or refuse new exhibits into the record is inherently connected to the powers conferred upon it by Article R57(3) of the Code. Pursuant to that provision, the Panel may order the production of additional documents at any time if it deems this appropriate in order to supplement the file.
79. Be that as it may, the Panel remains mindful that its authority to admit or refuse new exhibits, or to order the production of additional documents at any stage of the proceedings, must always be exercised with its overriding duty to respect the fundamental principles of equality of the Parties and their right to be heard, as guaranteed by Article 190(2)(d) of the Swiss Private International Law Act (“PILA”) (MAVROMATI/REEB, *The Code of the Court of Arbitration for Sport*, 2nd ed., 2025, ad R56, pp. 541-543). The Panel recalls that the admission of new evidence by one party cannot operate to the detriment of the other. Thus, the Panel must ensure that the opposing party, here the ISMF, has an equal opportunity to examine and comment on any new evidence admitted into the record.
80. Bearing the above in mind, the Panel observes that the two exhibits were submitted in response to positions advanced by the Athlete that were disputed for the first time in the Answer. Prior to that, neither during the results management proceedings nor in the Appealed Decision had the ISMF disputed the Athlete’s assertion that the Pharmacy was open on 26 January 2025 or sought to draw any adverse inference from his attendance at school on the following day. The Athlete could therefore not reasonably have anticipated, when filing his Appeal Brief, the need to adduce evidence addressing those points.
81. That said, the Athlete’s explanation does not account for why he waited until the morning of the hearing to seek admission of the exhibits. The Panel agrees with the ISMF that the Athlete did not act promptly following the filing of the Answer and that the application could and should have been made during the six weeks preceding the hearing, rather than on the day of the hearing itself. While this delay weighs against admission, it must nevertheless be considered in light of the circumstances in which the exhibits were produced and the extent to which their late submission affected the ISMF’s ability to respond.
82. In this respect, the Panel notes that the new exhibits do not change the Athlete’s position as advanced in the Appeal Brief but merely serve to corroborate it. Annex 24 supports his assertion that his Father purchased the product at the Pharmacy on the evening of 26 January 2025 and therefore that the Pharmacy was open on that date. The Pharmacy’s opening hours became an issue only in the Answer, where the ISMF argued that pharmacies in Italy are generally closed on Sundays. Similarly, Annex 25 supports the Athlete’s explanation that he attended school the following day despite the pain.

83. In these circumstances, the Panel is satisfied that the exhibits could not have taken the ISMF by surprise. They neither expand the scope of the dispute nor introduce new factual allegations, arguments, relief, or legal theories. By the time of the hearing, the ISMF was already aware of the Athlete's position that Trofodermin had been purchased on 26 January 2025 and that he had attended school the following day despite the pain. The Father and Dr. Dal Zotto had already provided written statements supporting the former position and were scheduled to be examined at the hearing. Having itself placed these matters in dispute in the Answer, the ISMF could reasonably have anticipated that the Athlete would seek to address them at the hearing, irrespective of whether Annexes 24 and 25 were admitted.
84. Moreover, although the exhibits were filed only on the morning of the hearing, they were submitted approximately three hours before its commencement at 13:30. While this afforded the ISMF only limited time to review them, it nevertheless allowed it to consider their contents before the hearing and prepare its response. The ISMF was also afforded a full opportunity at the hearing to address the exhibits. In particular, it made submissions on their admissibility, relevance, and evidentiary value and cross-examined the Athlete, the Father, and Dr. Dal Zotto, all of whom were already scheduled to give evidence concerning the subject matter of the exhibits. The ISMF was therefore afforded a full and equal opportunity to examine and comment on the new evidence.
85. While the late submission of the new exhibits undoubtedly caused some inconvenience and disruption to the hearing, it did not result in prejudice of such a nature or degree as to affect the ISMF's right to be heard or the principle of equality of the Parties.
86. In light of the foregoing, the Panel considers that the exhibits address issues raised for the first time in the Answer while corroborating the position consistently advanced by the Athlete in his Appeal Brief and written observations during the results management proceedings. Having regard to their nature, the circumstances in which they were produced, and the absence of any significant prejudice to the ISMF, the Panel finds that they are necessary and relevant to the establishment of the facts. Although the Athlete's delay weighs against their admission, it does not outweigh these considerations. The Panel therefore concludes that exceptional circumstances exist within the meaning of Article R56 of the Code and admits Annexes 24 and 25 into the record.
87. The Panel informed the Parties at the hearing of the admission of Annexes 24 and 25.
88. The weight to be accorded to Annexes 24 and 25 is a separate question from their admissibility and will be addressed, insofar as necessary, in the Panel's assessment of the merits.

IX. SCOPE OF THE PANEL'S REVIEW

89. Article R57 of the Code provides in relevant part as follows:

"The Panel has full power to review the facts and the law. It may issue a new decision which replaces the decision challenged or annul the decision and refer the case back to the previous instance. [...]"

90. The Panel therefore has full power to examine *de novo* the facts, matters and circumstances in this Appeal in order to assess whether or not the ADRV under Articles 2.1 and/or 2.2 has been established and what, if any, sanctions should follow.

X. MERITS

A. ITA's standing to be sued

91. Under Swiss law, standing to sue (*Aktivlegitimation*) and standing to be sued (*Passivlegitimation*) are questions of substantive law rather than admissibility. According to the constant jurisprudence of the Swiss Federal Tribunal (ATF 126 III 59 consid. 1a; ATF 138 III 537 consid. 2.2.1; ATF 142 III 782 consid. 3.1.4), the absence of standing leads to the dismissal of the claim on the merits rather than to a finding of procedural inadmissibility. CAS jurisprudence is consistent with that approach, recognising that standing to be sued belongs to the party against which the substantive right invoked is directed (CAS 2019/A/6639, *Hellas Verona FC v. LFF & JFC Skonto*; CAS 2013/A/3278, *Marítimo da Madeira v. Clube Desportivo Brasil*).
92. As explained in the jurisdiction section above, the Panel has already concluded that it lacks jurisdiction over the Appeal insofar as it is directed against the ITA. Strictly speaking, it is therefore unnecessary to determine whether the ITA also has standing to be sued. Nevertheless, in light of the Parties' submissions, the Panel considers it appropriate to address that point for the sake of completeness.
93. Whether a party has standing to be sued depends upon whether it is the holder of the substantive legal relationship that is the subject of the proceedings. The decisive question is thus whether the relief sought by the Athlete is directed against rights and obligations belonging to the ITA or to the ISMF.
94. In the present case, the Athlete seeks the annulment, or alternatively the reduction, of the period of ineligibility imposed upon him, together with the corresponding adjustment of the disqualification of his competitive results. Those consequences derive exclusively from the ISMF ADR and operate solely within the ISMF's legal sphere. Likewise, any restoration of results, medals, points or prizes would affect only the legal rights and obligations of the ISMF. By contrast, the ITA neither imposed the sanction in its own name nor would acquire, lose or modify any substantive right or obligation as a consequence of the relief sought in these proceedings. Hence, the substantive legal relationship giving rise to the present Appeal exists solely between the Athlete and the ISMF.
95. The Panel has nevertheless considered the Athlete's submission that the ITA conducted the results management process, imposed the provisional suspension, issued the relevant correspondence, signed the Appealed Decision and continues to represent the ISMF in these proceedings. The Panel appreciates that those circumstances may reasonably have created the impression that the ITA acted as the relevant decision-making body. However, and as explained in the jurisdiction section above, the ITA acted exclusively as the ISMF's delegated service provider in the exercise of functions entrusted to it under the ISMF ADR. Consequently, what is determinative is not which entity carried out the operational aspects of the proceedings, but which entity holds the regulatory and disciplinary authority whose

exercise is challenged and within whose legal sphere the contested consequences operate. Under the ISMF ADR, that entity is the ISMF.

96. Even if (*quod non*) the Panel had jurisdiction over the ITA, it would have concluded that the ITA lacks standing to be sued. The substantive relief sought by the Athlete is directed exclusively against the ISMF, which is therefore the only proper respondent to this Appeal.
97. For these reasons, the Panel rules that the ITA should be removed as a respondent in these proceedings.

B. The burden and the standard of proof

98. Before examining whether the Athlete committed an ADRV, the Panel recalls the applicable principles governing the burden and standard of proof.
99. The burden and the standard of proof are set out in Article 3.1 of the ISMF ADR, which states as follows:

*“ISMF shall have the burden of establishing that an anti-doping rule violation has occurred. The standard of proof shall be whether ISMF has established an anti-doping rule violation to the **comfortable satisfaction** of the hearing panel **bearing in mind the seriousness of the allegation which is made**. This standard of proof in all cases is greater than a mere balance of probability but less than proof beyond a reasonable doubt. Where these Anti-Doping Rules place the burden of proof upon the Athlete or other Person alleged to have committed an anti-doping rule violation to rebut a presumption or establish specified facts or circumstances, except as provided in Articles 3.2.2 and 3.2.3, the standard of proof shall be by a **balance of probability**.”* (emphasis added)

100. In addition, Article 3.2 of the ISMF ADR provides that facts related to ADRVs may be established by any reliable means, including admissions, witness statements, documentary evidence, analytical data, or conclusions drawn from longitudinal profiling.
101. The ISMF ADR further establish two evidentiary presumptions that bear upon the present analysis. Under Article 3.2.1, analytical methods approved by WADA are presumed to be scientifically valid. Under Article 3.2.2, WADA-accredited laboratories are presumed to have conducted sample analysis and custodial procedures in accordance with the ISL, and an athlete may rebut that presumption only by establishing a departure from the ISL which could reasonably have caused the AAF. Under Article 3.2.3, departures from any other International Standard neither invalidate analytical results nor constitute a defence, save in the limited cases there enumerated, among them a departure from the ISTI related to sample collection or sample handling.
102. It follows that the ISMF has the burden of establishing, to the comfortable satisfaction of the Panel, that an ADRV has occurred, bearing in mind the seriousness of the allegation. The standard of comfortable satisfaction has been consistently applied in CAS jurisprudence (CAS 2009/A/1912 *P. v. ISU* & CAS 2009/A/1913 *DESG v. ISU*) and “*must take into account the circumstances of the case*” (CAS 2013/A/3258 *Beşiktaş Jimnastik Kulübü v. UEFA*).

C. Establishment of the ADRVs

103. The Panel turns first to the question of whether the Athlete committed an ADRV under the ISMF ADR. In its notice of charge dated 6 October 2025, the ISMF alleged that the Athlete had committed an ADRV under Articles 2.1 and/or 2.2 of the ISMF ADR. The reasoning of the Appealed Decision indicated at its paragraph 23 that it was “*undisputed that the Athlete ha[d] committed an ADRV under Article 2.1*” whereas its operative part found an ADRV “*under Article 2.1 and/or Article 2.2*”.
104. Before this Panel, the ISMF maintains the “*and/or*” formulation and requests that the Athlete be found to have committed an ADRV pursuant to Articles 2.1 and/or 2.2 of the ISMF ADR. The Athlete, for his part, does not dispute that an ADRV occurred. While he formally seeks to set aside, in whole or in part, the Appealed Decision, the substance of his Appeal concerns only the consequences of the violation. In particular, he asks the Panel to find that the ADRV was not intentional within the meaning of Article 10.2.3 of the ISMF ADR and that he bore no fault or negligence under Article 10.5.
105. Nevertheless, the Panel must determine whether the evidence establishes a violation under Article 2.1, Article 2.2, or both. This determination is necessary because the operative part of the Appealed Decision employs the alternative formulation “*Article 2.1 and/or Article 2.2*”, whereas this Award must identify precisely the violations that have been established.
106. The Panel begins with the alleged violation under Article 2.1 of the ISMF ADR, which concerns the presence of a prohibited substance in an athlete’s sample. Article 2.1.3 provides that, except where a decision limit is specifically identified, the presence of any reported quantity of a prohibited substance or its metabolites in an athlete’s sample constitutes an ADRV. Article 2.1.2 further provides that sufficient proof of such an ADRV includes the presence of a prohibited substance or its metabolites in the athlete’s A sample “*where the Athlete waives analysis of the B Sample and the B Sample is not analyzed*”.
107. An ADRV under Article 2.2 of the ISMF ADR, in turn, concerns the use of a prohibited substance. Appendix 1 defines “*use*” as the “*utilization, application, ingestion, injection or consumption by any means whatsoever of any Prohibited Substance or Prohibited Method*”. Pursuant to Article 3.2 of the ISMF ADR, such a violation may be established by any reliable means, including admissions, witness statements, documentary evidence, analytical data or conclusions drawn from longitudinal profiling, or reliable analytical data from either an A or B sample.
108. Against this background, the Panel notes that the facts giving rise to the charge are not in dispute. On 28 January 2025, the Athlete was selected for an out-of-competition doping control and his samples were transferred to the Ghent Laboratory for analysis. On 18 February 2025, the Ghent Laboratory reported an AAF in the Athlete’s A sample for clostebol, in an estimated concentration of 0.5924 ng/mL.
109. By his correspondence of 28 February 2025, the Athlete confirmed that he did not challenge the AAF and expressly waived his right to the opening and the analysis of the B sample. The condition set out in Article 2.1.2 of the ISMF ADR is therefore satisfied, since a prohibited substance was found to be present in the A sample, the Athlete waived the analysis of the B sample, and the B sample was not analysed.

110. Moreover, the Athlete was provided with the LDP for Sample A on 4 March 2025. At no stage, whether during the results management process or in these proceedings, has he alleged any departure from the ISL or the ISTI, nor has he challenged the chain of custody of the sample. The presumptions set out in Articles 3.2.1 and 3.2.2 of the ISMF ADR thus remain un rebutted, and the Panel sees no basis to question the reliability of the analytical result.
111. The Panel notes, for completeness, that the DCF explicitly records the use of Trofodermin, the Athlete having consistently maintained that the clostebol detected in his sample originated from that product. Whether the Athlete has established that source, and the consequences flowing from it, are addressed in Section D below. For the purposes of establishing the ADRV, however, the Athlete's explanation in this regard is immaterial.
112. The Panel further notes that the Athlete neither obtained nor applied for a TUE in relation to the use of clostebol, whether prospectively or retroactively. The Athlete submits that he would have been eligible for a TUE had he been aware of the applicable procedure. However, that submission is irrelevant to the establishment of the ADRV. Under Article 4.4.1 of the ISMF ADR, an ADRV is excluded only where the presence of the prohibited substance is consistent with a TUE granted in accordance with the International Standard for Therapeutic Use Exemptions. A hypothetical entitlement to a TUE that was never sought or granted cannot satisfy that requirement and therefore affords no defence.
113. In light of the foregoing, the Panel is comfortably satisfied that the ISMF has discharged its burden under Article 3.1 of the ISMF ADR in establishing an ADRV pursuant to Article 2.1. The analytical result is reliable, the Athlete waived the analysis of the B sample, no TUE existed, and the AAF has never been disputed. The requirements of Article 2.1 are thus satisfied. Pursuant to the principle of strict liability reflected in Article 2.1.1, the Athlete's intent, fault or negligence are irrelevant to the establishment of the violation and become material only when determining the consequences under Article 10.
114. Having concluded that the requirements of Article 2.1 are met, the Panel must next determine whether the same evidence also establishes the alleged violation under Article 2.2. Here, the AAF shows that clostebol entered the Athlete's body before the collection of the sample. Since a prohibited substance cannot, in principle, be detected in an athlete's urine without having previously been utilised, applied, ingested, injected or otherwise consumed, the undisputed analytical result constitutes reliable evidence of "use" within the meaning of Article 2.2 and Appendix 1 to the ISMF ADR. The Panel is therefore comfortably satisfied that the analytical result, by itself, establishes that the Athlete used clostebol before the collection of the sample on 28 January 2025. That conclusion does not depend on the Athlete's explanation that the Trofodermin was applied by his Father rather than by himself. If accepted, that explanation may be relevant to the Athlete's intent or degree of fault. It does not change the objective fact that clostebol entered the Athlete's body and therefore does not affect the existence of the violation under Article 2.2.
115. Finally, the Panel notes that both ADRVs arise from the same sample, the same analytical finding and the same Event. The ISMF has never contended that Article 2.2 constitutes a separate, additional or subsequent violation for sanctioning purposes. Article 10.9 concerns multiple violations committed on different occasions, whereas Article 10.9.3.1 expressly provides that violations notified together are treated "*as one single first violation*". Hence,

the concurrent findings under Articles 2.1 and 2.2 neither multiply the number of violations, nor aggravate the applicable consequences.

116. For these reasons, the Panel is comfortably satisfied that the Athlete committed ADRVs under both Articles 2.1 and 2.2 of the ISMF ADR. The alternative formulation “*and/or*” adopted in the operative part of the Appealed Decision is clarified by this Award. The remaining issues concern solely the consequences of those violations, to which the Panel now turns.

D. The period of ineligibility

a. The legal and jurisprudential background

117. Article 10.2.1 of the ISMF ADR defines the period of ineligibility for presence, use or attempted use, or possession of a prohibited substance as follows:

“10.2.1 The period of Ineligibility, subject to Article 10.2.4, shall be four (4) years where:

10.2.1.1 The anti-doping rule violation does not involve a Specified Substance, unless the Athlete or other Person can establish that the anti-doping rule violation was not intentional.

10.2.1.2 The anti-doping rule violation involves a Specified Substance and ISMF can establish that the anti-doping rule violation was intentional.

10.2.2 If Article 10.2.1 does not apply, subject to Article 10.2.4.1, the period of Ineligibility shall be two (2) years.”

118. In the present case, the ADRVs concern a non-specified substance. Accordingly, pursuant to Article 10.2.1 of the ISMF ADR, the applicable period of ineligibility is four years unless the Athlete establishes, on the balance of probabilities, that the ADRVs were not intentional. If the Athlete discharges that burden, the applicable period of ineligibility is reduced to two years under Article 10.2.2 of the ISMF ADR, subject to any further reduction or elimination based on the Athlete’s degree of fault pursuant to Articles 10.5 and 10.6.
119. For the purposes of Article 10.2.1.1 of the ISMF ADR, the Athlete bears the burden of establishing that the ADRVs were not intentional within the meaning of Article 10.2.3. Although the ISMF ADR does not expressly make the proof of the source of the prohibited substance a legal condition to establishing lack of intent, a consistent line of CAS jurisprudence has recognised that an athlete will ordinarily need to establish how the prohibited substance entered his or her body in order to discharge that burden (see, e.g., (i) CAS 2017/A/5248 *WADA v. Africa Zone V RADO & ADAK & Eliud Musumba Ayiro*, para. 55; (ii) CAS 2017/A/5295 *WADA v. ADAK & Athletics Kenya & Sally Chelagat Kipyego*, para. 105 (iii) CAS 2017/A/5335 *WADA v. Mohammad Yaseen Alhasan*, para. 137; (iv) CAS 2017/A/5392 *FINA v. Georgia Anti-Doping Agency & Eastern Europe RADO & Irakli Bolkvadze*, para. 63; and (v) CAS 2018/A/5570 *Denislav Dimitrov Ivanov v. IJF*, para. 51).
120. At the same time, certain CAS awards have recognised that the absence of intent may, at least in principle, be established even where an athlete is unable to establish the source of the prohibited substance. Those awards nevertheless emphasise that such cases are confined to exceptional circumstances. For example:

- In CAS 2016/A/4534 *Maurico Fiol Villanueva v. FINA*, the panel held that “[w]here an athlete cannot prove source it leaves the narrowest of corridors through which such athlete must pass to discharge the burden which lies upon him” (para. 37).
 - In CAS 2016/A/4919 *WADA v. WSF & Iqbal*, the panel concluded that “while this Panel assumes in favour of the Athlete that he does not have to necessarily establish how the prohibited 19-NA entered his system when attempting to prove on a balance of probability the absence of intent, in all but the rarest cases the issue is academic.”
121. The Comment to Article 10.2.1.1 of the ISMF ADR likewise recognises that, while it is “*theoretically possible*” for an athlete to establish a lack of intent without demonstrating how the prohibited substance entered his or her system, it is “*highly unlikely*” that an athlete will succeed in doing so.
122. In practice, therefore, the source of the prohibited substance will usually constitute the evidentiary basis upon which the question of intent is answered. Where an athlete relies on a particular source, that explanation must be established with sufficient precision. In this respect, CAS jurisprudence has consistently held that an athlete must establish not merely the route of administration but also “*the factual circumstances in which administration occurred*” (CAS 2006/A/1140, adopted in CAS 2010/A/2277 *La Barbera v. IWAS*, para. 35). Mere speculation or a hypothetical explanation unsupported by evidence is insufficient.
123. That said, an athlete is not required to exclude every conceivable alternative explanation but must demonstrate that his or her proposed explanation is more likely than not to have occurred. As the panel stated in CAS 2009/A/1926 *ITF v. Gasquet* and CAS 2009/A/1930 *WADA v. ITF & Gasquet*, adopted and confirmed in CAS 2017/A/5296 *WADA v. Roberts* (para. 52), the athlete must establish that there is a 51% chance that the proposed means of ingestion occurred and that “*one specific way of ingestion is marginally more likely than not to have occurred*”.
124. Moreover, independently of the question of intent under Article 10.2.1.1, establishing the source of the prohibited substance is an express condition for any reduction of the period of ineligibility based on no significant fault or negligence pursuant to Article 10.6 of the ISMF ADR. The definition of “*No Significant Fault or Negligence*” in Appendix 1 provides that, except in the case of a protected person or recreational athlete, “*for any violation of Article 2.1, the Athlete must also establish how the Prohibited Substance entered the Athlete’s system*”. Having been born on 13 March 2006 and included in the RTP on 11 June 2024, the Athlete was neither a protected person nor a recreational athlete on 26 January 2025. Accordingly, that exception does not apply to him.
125. Against that legal and jurisprudential background, the Panel will first examine whether the Athlete has discharged his burden of establishing that the ADRVs were not intentional within the meaning of Article 10.2.1.1 of the ISMF ADR. Consistent with the applicable CAS jurisprudence, this requires the Panel to determine, first, whether the Athlete has established the source of the clostebol detected in his sample and, second, whether the ADRVs were committed unintentionally. Only if the Athlete discharges that burden will the Panel consider whether any further reduction or elimination of the period of ineligibility is warranted under Articles 10.5 or 10.6 of the ISMF ADR.

b. Has the Athlete established that his ADRVs were not intentional?

i. Source of clostebol in the Athlete's system

126. According to the Athlete, the clostebol detected in his sample originated from a topical application of Trofodermin to his injured heels on the evening of 26 January 2025. He contends that the cream was purchased by his Father from the local pharmacy, upon the recommendation of the pharmacist on duty, and was applied shortly after the family returned home from the Event.
127. The ISMF does not dispute that Trofodermin is capable, as a matter of pharmacology, of producing the analytical finding in this case. It is common ground that Trofodermin contains clostebol, a non-specified prohibited substance expressly identified on both the list of ingredients and the product packaging, which also bears a prominent red doping warning. The ISMF also does not dispute that topical application of Trofodermin is capable of introducing clostebol into the body.
128. The ISMF nevertheless contends that identifying a product capable of containing clostebol is not enough. In its view, the Athlete must establish, on the balance of probabilities, when, how and in what circumstances the prohibited substance entered his system. It argues that several inconsistencies in the Athlete's explanation prevent him from establishing the necessary causal link between the alleged use of Trofodermin and the AAF.
129. The Panel agrees with the ISMF that it is not sufficient for an athlete merely to identify a product capable of containing the prohibited substance. Rather, the athlete must establish, on the balance of probabilities, that the identified product was in fact the source of the prohibited substance detected in the sample. This requires a coherent and persuasive explanation of the route, timing and circumstances of exposure, supported by evidence establishing a sufficient causal connection between that explanation and the analytical finding. That does not mean, however, that the athlete must reconstruct every aspect of the exposure with absolute precision or demonstrate an exact correlation between the alleged use and the concentration ultimately detected. To require such precision would impose an unrealistic evidentiary burden, approaching a standard closer to certainty than to the balance of probabilities. It is sufficient that an athlete's explanation, viewed as a whole, is more likely than not to account for the AAF.

(a) Assessment of the Athlete's explanation

130. In the present case, the Athlete's explanation comprises several factual elements relating to the purchase and application of Trofodermin on 26 January 2025. The Panel must determine whether those elements have been established on the balance of probabilities and, taken together, are sufficient to establish that Trofodermin was the source of the clostebol detected in the Athlete's sample.
131. The Panel begins with the evidence concerning the Athlete's heel injuries. Whether the Athlete suffered injuries for which Trofodermin could plausibly have been obtained and used forms an important part of the factual context in which his explanation must be assessed. The Panel is satisfied that this element has been established. The evidence concerning the Athlete's heel injuries is substantial and largely uncontested. At the hearing, the Athlete explained the

progressive deterioration of painful blisters throughout the Event weekend. His explanation is corroborated by Ms. Cona, the team physiotherapist, who drained the blisters with a sterile needle, disinfected the wounds and advised him to continue disinfecting them and to expose them to air. One of the Athlete's teammates, Ms. Martina Scola, confirmed the treatment administered by Ms. Cona, and the photographs produced in these proceedings also depict extensive lesions to both heels. During closing submissions, the ISMF itself accepted that the Athlete had indeed suffered the injuries shown in those photographs. The Panel is therefore satisfied that, by the evening of 26 January 2025, the Athlete had developed injuries to his heels.

132. The Panel next considers the circumstances surrounding the purchase of Trofodermin, noting that the evidence on this point is predominantly objective. In this respect, the Athlete produced a receipt recording the purchase of Trofodermin at the Pharmacy at 19:40 on 26 January 2025. Dr. Dal Zotto confirmed both in his written statement and in his oral evidence that he remembered the Father attending the Pharmacy, showing photographs of the Athlete's injured heels and requesting an effective treatment available without prescription. He testified that he recommended Trofodermin and sold the product to the Father.
133. The Panel is satisfied that Dr. Dal Zotto is an independent witness. It has identified no circumstance suggesting that he has any interest in the outcome of these proceedings or that he had any prior relationship with the Athlete or his family. Having observed his testimony, the Panel found him to be a credible witness and accepts his evidence.
134. Dr. Dal Zotto's testimony is further corroborated by Annex 24, namely the official rota of emergency pharmacies for the Province of Vicenza, which confirms that the Pharmacy was the designated duty pharmacy on the evening of Sunday, 26 January 2025. Dr. Dal Zotto also explained the operation of the *farmacie di turno* system, whereby pharmacies designated for emergency duty continue providing services outside their ordinary opening hours.
135. The ISMF nevertheless submits that the Pharmacy's published opening hours are inconsistent with a purchase at 19:40 on a Sunday. The Panel accepts that this objection was understandable on the written record alone. However, it cannot be maintained in light of the evidence heard at the hearing. The published opening hours relate only to the Pharmacy's ordinary trading hours and do not reflect its emergency duty obligations. Having regard to Annex 24 and Dr. Dal Zotto's explanation of the *farmacie di turno* system, the Panel is satisfied that there is no inconsistency between the Pharmacy's published opening hours and the purchase recorded at 19:40 on 26 January 2025.
136. The Panel therefore finds that the Father purchased Trofodermin from Dr. Dal Zotto on the evening of 26 January 2025 following the latter's recommendation.
137. The Panel then turns to whether the Trofodermin purchased that evening was in fact applied to the Athlete's injured heels. Unlike the purchase, the application occurred in the privacy of the family home and was not witnessed by any independent person. The question is therefore whether the surrounding evidence nevertheless establishes that application on the balance of probabilities.
138. In particular, the Panel places significant weight on the DCF completed on 28 January 2025, on which Trofodermin was expressly disclosed as a medication used by the Athlete. This

disclosure was made approximately one day after the alleged application and several weeks before the Ghent Laboratory reported the AAF. At that time, neither the Athlete nor his parents had any apparent reason to anticipate that the sample would return an AAF or that they would later need to explain the presence of clostebol. The Panel further notes that the DCF predates any litigation strategy or explanation developed in response to the AAF. Its content is a strong indication that Trofodermin formed part of the Athlete's treatment at the relevant time and was not a product introduced retrospectively to construct an explanation for the AAF during these proceedings.

139. The Panel also accepts the evidence of the Athlete and his Father concerning the manner in which the DCF was completed. Both explained that, while the Athlete was providing his urine sample, the Father retrieved the medications from the family home, placed them before the DCO and identified them for inclusion on the DCF. According to the Athlete, he subsequently signed the DCF without personally reviewing each entry. The Panel found that explanation to be consistent with the evidence as a whole. It further notes that the DCO neither provided oral evidence nor a witness statement contradicting that explanation. The evidentiary record therefore contains no basis upon which the Panel could reject the Father's description of how the information recorded on the DCF came to be provided.
140. Accordingly, the DCF corroborates both the Athlete's account that Trofodermin was present in the family home immediately before the doping control and his explanation of how the product came to be recorded on the form.
141. That evidence also aligns with the testimony of both parents. The Father explained that he returned from the Pharmacy and subsequently applied the cream to the Athlete's heels before placing the tube in a drawer. The Athlete's mother, Mrs. Ermelinda Rendano (the "Mother"), likewise recalled that the Athlete remained in considerable pain when the Father returned home and that he applied the cream shortly afterwards. Although their accounts differ on certain aspects, they are consistent in their description of the events surrounding the purchase of the Trofodermin and its subsequent application. The Panel further notes that the ISMF does not meaningfully dispute that it was the Father, and not the Athlete, who applied Trofodermin to the Athlete's heels. Having weighed the testimony of the Athlete and his parents together with the documentary evidence, the Panel is satisfied that the Father applied the cream to the Athlete's injured heels. The Father's account was tested in cross-examination, is corroborated by the evidence of both the Athlete and the Mother, and is contradicted by no factual, witness or expert evidence adduced in these proceedings.
142. Against this factual background, the toxicological evidence provides independent scientific support for the Athlete's explanation as to how clostebol entered his system and the timing of its use. Professor Favretto concluded that the urinary concentration of clostebol detected in the Athlete's sample was *"compatible with a minimal application the day before by topical application that is completely unsuitable for any doping activity"*. The ISMF adduced no expert evidence challenging those conclusions.
143. Taken together, the evidence provides a coherent and objectively corroborated narrative of how Trofodermin was purchased and applied in the days preceding the doping control. It establishes that the Athlete sustained heel injuries during the Event, that his Father sought treatment from an independent pharmacist, that Trofodermin, a medicinal product containing clostebol, was purchased on the evening of 26 January 2025, and that it was applied by the

Father and formed part of the Athlete's treatment immediately before the doping control, as declared on the DCF. Whether this narrative is ultimately sufficient to establish, on the balance of probabilities, that Trofodermin was the source of the clostebol detected in the Athlete's sample must be assessed in light of the alleged inconsistencies invoked by the ISMF.

(b) The alleged inconsistencies invoked by the ISMF

144. The ISMF submits that several inconsistencies prevent the Athlete from discharging his burden of proving the source of the prohibited substance found in his sample.
145. The Panel has carefully considered each of those alleged inconsistencies. While certain discrepancies do emerge from the evidence, the determinative question is whether, individually or collectively, they undermine the overall plausibility of the Athlete's explanation or prevent the Panel from concluding, on the balance of probabilities, that Trofodermin was the source of the clostebol detected in his sample.
146. First, the ISMF argues that the Athlete's explanation of a single application lacks credibility. It observes that the manufacturer's instructions recommend one or two daily applications over several days and points out that, according to the Athlete himself, he remained in pain on 27 January 2025 despite having sought what is said to have been urgent treatment the previous evening. The ISMF argues that these circumstances are inconsistent with the Athlete's assertion that the cream was applied only once.
147. The Panel accepts that the ISMF's submission raises a legitimate question as to the plausibility of the Athlete's explanation of a single application, but does not consider it decisive as to the source. The manufacturer's instructions describe the recommended use of the product, not how the Athlete actually used it in this case. The recommended posology therefore does not establish that the Athlete used the product as recommended or how many times Trofodermin was in fact applied to his heels. Moreover, the ISMF has not argued, and the evidence does not suggest, that repeated applications of Trofodermin were necessary to produce the urinary concentration of 0.5924 ng/mL found in his sample collected on 28 January 2025, or that this concentration was incompatible with the Athlete's claim that the product was used only once.
148. As already noted, Professor Favretto's uncontradicted expert opinion indicates that the concentration of clostebol detected in the Athlete's sample was "*compatible with a minimal application the day before by topical application*". Although that opinion does not indicate whether the cream was applied once or on multiple occasions, it does confirm that a recent, minimal topical application of the kind described by the Athlete and his parents is scientifically capable of producing the concentration of clostebol found in the sample of 28 January 2025. Thus, the fact that the Athlete may not have followed the manufacturer's recommended posology does not, in itself, undermine his explanation as to the source of the clostebol. Whether the Trofodermin was applied once or more than once may affect the extent of the exposure, but it does not necessarily change the identity of the source.
149. The Panel also does not consider that the Athlete's attendance at school on 27 January 2025 is inconsistent with the seriousness of his injuries or with his assertion of a single application. The ISMF relies on his attendance at school as evidence that the Athlete's explanation is implausible and that he has not discharged his burden of establishing the source. At the hearing, the Athlete himself confirmed that he attended school that day despite the pain, while

the Mother gave evidence that he did so with his heels covered by plasters and that the blisters had already begun to improve. Furthermore, the Panel has no reason to doubt the authenticity or reliability of Annex 25 and accepts that it records that the Athlete was required to attend school on 27 January 2025 to submit assessed work during his final year of secondary education. This provides a reasonable explanation for his attendance despite the pain he says he was experiencing. In these circumstances, the Panel does not consider that the Athlete's attendance at school undermines the plausibility of his explanation.

150. Second, the ISMF relies upon the discrepancy between the DCF and the Athlete's explanation of the timing of the application. The DCF records the last use of Trofodermin on 27 January 2025, whereas the Athlete has maintained throughout these proceedings that the cream was applied only once, on the evening of 26 January 2025. He explains the discrepancy by asserting that the date was mistakenly recorded by the DCO when completing the DCF.
151. The Panel accepts that this discrepancy requires explanation. In this respect, the Panel reminds that the Athlete must not only show how the clostebol entered his system, but also that the timing of such use be consistent with the concentrations of the clostebol ultimately found in his sample on 28 January 2025. The Panel must therefore determine if the one-day difference is an immaterial transcription error, as the Athlete contends, or a fundamental error that prevents him from establishing the source, as the ISMF submits. This turns on whether the difference materially affects the validity of the Athlete's source explanation.
152. This discrepancy must, as a preliminary matter, be assessed within its proper context. The DCF was completed at approximately 06:00 AM on 28 January 2025, based on information provided by the Father to the DCO while the Athlete was in the bathroom providing his sample and preparing to leave for school. The evidence, however, does not enable the Panel to determine whether the date recorded on the DCF resulted from a miscommunication, an inaccurate recollection, or a clerical error during completion of the form.
153. In the Panel's view, however, the precise reason for this discrepancy does not materially affect the weight to be given to the evidence before it. Professor Favretto's expert opinion is that the estimated urinary concentration of 0.5924 ng/mL is "*compatible with a minimal application the day before by topical application*". Furthermore, the Panel underlines that Professor Favretto found that "*given the low concentration detected on 01/28/25, at the time of the next scheduled competition on 02/08/2025 the Athlete would have been absolutely negative*". Although Professor Favretto referred to 8 February rather than 6 February 2025 as the date of the next competition, the Panel does not consider this to affect the substance of her opinion, which demonstrates that the concentration detected on 28 January 2025 was sufficiently low to remain consistent with a recent, minimal topical application.
154. Moreover, the ISMF did not adduce any counter-expert toxicological or pharmacokinetic evidence to challenge Professor Favretto's findings, nor did it suggest that a difference of approximately 24 hours between 26 January and 27 January would render the Athlete's explanation scientifically implausible or incompatible with his AAF. Consequently, the one-day difference on the face of the DCF is insufficient to undermine the overall probability of the Athlete's explanation or to sever the causal link between the Trofodermin and the AAF.
155. Third, the ISMF points to an inconsistency concerning the Athlete's level of awareness when the cream was applied, relying upon his varying descriptions at the hearing that he was "*half*

asleep” or “*almost sleeping*”. The Panel does not consider that this inconsistency prevents the Athlete from establishing the source of the clostebol detected in his sample. Even if the Athlete was more aware of the application than he now recalls, the evidence remains that he suffered injuries to his heels during the Event on 25 and 26 January 2025, that his Father purchased Trofodermin on 26 January 2025 at 19:40 to treat those injuries, and that this product, which was subsequently declared on the DCF, contained clostebol, the same prohibited substance detected in his sample collected on 28 January 2025. Against this background, the Athlete’s precise level of awareness at the time of the application is therefore of limited relevance to the source analysis. It is, however, relevant to the subsequent assessment of whether the ADRVs were intentional and, if necessary, the degree of fault attributable to the Athlete, and will be considered in that context below.

156. Fourth, the ISMF submits that the Athlete cannot simultaneously maintain that he did not know which product had been applied to his heels and rely upon the fact that Trofodermin appears on the DCF. As already explained, the Panel accepts the evidence that the information recorded on the DCF was provided by the Father rather than by the Athlete himself. The inclusion of Trofodermin on the DCF is therefore not inconsistent with the Athlete’s explanation as to the source. The Panel nevertheless observes that the Athlete signed the DCF and thereby confirmed the accuracy of its contents. That circumstance raises legitimate questions concerning the extent of his knowledge of the product and will be considered when the Panel assesses intent and fault.

(c) Conclusion

157. Considering the evidence as a whole, the Panel is satisfied that the Athlete has discharged his burden of establishing, on the balance of probabilities, that the clostebol detected in his sample originated from the topical application of Trofodermin to his injured heels shortly before the doping control. The inconsistencies identified by the ISMF are legitimate, but they do not, individually or collectively, render the Athlete’s explanation improbable, particularly in light of the uncontradicted expert evidence that the concentration of clostebol detected in his sample was compatible with a recent, minimal topical application of Trofodermin. Some of those inconsistencies, in particular those concerning the Athlete’s level of awareness when the cream was applied and his knowledge of the product recorded on the DCF, may nevertheless be relevant to the subsequent assessment of his intent and degree of fault.

ii. Were the ADRVs committed intentionally?

158. Having found that the Athlete has established, on a balance of probabilities, the source of the prohibited substance, the Panel must now determine whether the Athlete has also established that the ADRVs were not intentional within the meaning of Article 10.2.3 of the ISMF ADR.
159. The Athlete submits that the ADRVs were not intentional and that he neither knowingly nor deliberately used clostebol.
160. Under Article 10.2.3 of the ISMF ADR, the term “*intentional*” is meant to identify those athletes who (a) engage in conduct which they knew constituted an ADRV (direct intent), or (b) knew that there was a significant risk that the conduct might constitute or result in an ADRV and manifestly disregarded that risk (indirect intent). The Athlete bears the burden of establishing, on a balance of probabilities, that neither form of intent is present.

(a) Did the Athlete act with direct intent?

161. The first limb concerns the athlete who engages in “*conduct which they knew constituted an anti-doping rule violation*”. The Panel must accordingly determine whether the Athlete knew that the product contained a prohibited substance or otherwise knew that its use would constitute an ADRV.
162. On the evidence before it, the Panel is not so satisfied. As found above, it was the Father who purchased the Trofodermin on the recommendation of Dr. Dal Zotto and who applied it to the Athlete’s injured heels. The Athlete did not accompany his Father to the Pharmacy and did not select the product. He testified that he did not see the tube or its packaging and that he learned that the cream applied to him was Trofodermin only upon notification of the AAF. The Father’s evidence is to the same effect. He stated that he had informed only the Mother of his errand to the Pharmacy and that he applied the cream without telling his son what he was using. Whatever the Athlete’s precise level of awareness at the time of the application, a question to which the Panel returns below, there is no evidence that he knew the cream was Trofodermin, that Trofodermin contained clostebol, or that its use could amount to an ADRV.
163. This conclusion is reinforced by the objective circumstances in which the Trofodermin was obtained and applied. The product was openly purchased over the counter from the duty pharmacist in the Athlete’s home village after the Father sought treatment for his son’s worsening lesions. The Father, rather than the Athlete, selected the product on the pharmacist’s recommendation and subsequently applied it. The purchase receipt was retained, and the product was kept in the family home rather than discarded. These circumstances are inconsistent with any intent to conceal a doping violation.
164. The subsequent doping control further defeats any allegation of direct intent. When the DCO arrived at the family home on 28 January 2025 and requested details of medications used, the Father spontaneously and voluntarily produced the Trofodermin alongside the other medications present in the household. Consequently, the Trofodermin was recorded on the DCF approximately three weeks before the AAF was even reported. Because the DCO had no independent means or prior suspicion of knowing that the Trofodermin had been used, its disclosure depended entirely upon the upfront honesty of the Athlete and/or his Father. In the Panel’s view, the voluntary disclosure of the exact product that later caused the positive test is incompatible with any prior knowledge that its use constituted an ADRV. An athlete who knew that a prohibited substance had been applied to his skin would not be expected to volunteer that product, or to permit it to be volunteered, on the very form destined for the anti-doping authorities.
165. Indeed, the fact that the use of Trofodermin was transparently declared on the DCF, well before the Athlete had any knowledge of the impending AAF, constitutes a strong indication that neither he nor his Father knew the product contained a prohibited substance. This declaration lends significant credibility to the Athlete’s testimony that he did not knowingly and deliberately use a prohibited substance.
166. The Panel has nevertheless considered whether this disclosure could have been a calculated attempt to create an innocent explanation in anticipation of a future positive test. However, such a hypothesis presupposes that the Athlete or his Father possessed prior knowledge of Trofodermin’s composition, and further assumes a degree of legal sophistication and strategic

planning unsupported by the evidence before the Panel. Notably, the ISMF advanced no arguments on this basis.

167. The Panel also notes the Athlete's contention that he had never heard of clostebol. While this assertion is not, of itself, dispositive, it aligns with the Panel's finding that he lacked knowledge of the product's prohibited status. The Father likewise testified that he did not appreciate that an over-the-counter medicinal product could contain a prohibited substance. Although the Father's state of mind is not determinative of the Athlete's intent, it supports the finding that the Trofodermin was acquired and applied strictly as an ordinary therapeutic treatment, rather than as part of a deliberate attempt to violate anti-doping regulations.
168. The Panel further notes Professor Favretto's unchallenged expert evidence that "*there was no possibility of increasing one's athletic performance by the application of a few grams of cream for topical use*" and that "[t]here is no benefit for doping purposes in using clostebol acetate topically". The Panel, however, approaches this evidence with appropriate caution. As observed in CAS 2016/A/4512 *WADA v. TFF & Kuru*, the fact that a prohibited substance is used solely for therapeutic purposes does not, by itself, establish that an ADRV was not intentional, because the definition of intent does not expressly require an intention to enhance performance. But while the absence of a performance enhancing purpose is not decisive of direct intent, it still remains one factor that may properly be considered alongside all the other evidence. And in the present case, the therapeutic context in which the Trofodermin was chosen and applied corroborates the Panel's finding that the Athlete did not engage in conduct which he knew constituted an ADRV.
169. As to the ISMF's submission that the Athlete had every reason to recover before the competition on 6 February 2025, the Panel accepts that the Athlete had a legitimate incentive to recover from his injury before competing. However, an incentive to recover from an injury is not equivalent to an intention to dope.
170. Considering the evidence as a whole, the Panel is satisfied that the Athlete has established, on the balance of probabilities, that he did not know that the Trofodermin applied to his heels contained clostebol or that its use would constitute an ADRV. Hence, the Panel finds that the ADRVs were not committed with direct intent within the meaning of the first limb of Article 10.2.3 of the ISMF ADR. This conclusion is also consistent with the manner in which the ISMF has presented its position, which focuses on indirect intent under the second limb of Article 10.2.3, which the Panel will consider next.

(b) Did the Athlete act with indirect intent?

171. The Panel turns to the question of indirect intent, which lies at the heart of the present Appeal. As the ISMF submits, the application of Article 10.2.3 does not require the Athlete to have acted with direct intent in committing the ADRVs. It is sufficient that the Athlete acted with indirect intent, namely, that the Athlete (i) "*knew that there was a significant risk that the conduct might constitute or result in an anti-doping rule violation*" and (ii) "*manifestly disregarded that risk*".
172. In this regard, the Panel observes that the wording of Article 10.2.3 is instructive. Article 10.2.3 applies where an athlete "*knew*" that a significant risk existed and nevertheless disregarded that risk, requiring an assessment of the athlete's subjective state of mind. The

focus is therefore not on whether the athlete ought reasonably to have appreciated the risk or whether a reasonable athlete in the same circumstances would have done so. This distinction is reflected elsewhere in the ISMF ADR. Notably, Appendix 1 defines “*No Fault or Negligence*” by reference to what the athlete “*could not reasonably have known or suspected even with the exercise of utmost caution*” whereas the definition of “*Fault*” directs consideration to “*the degree of risk that should have been perceived by the Athlete*”. While both definitions expressly invoke objective standards of reasonableness, Article 10.2.3 does not. This being reinforced by the comment to Article 10.2.3, which explains that the provision contains a special definition of “*intentional*” to be applied solely for the purposes of Article 10.2. The assessment of indirect intent under Article 10.2.3 is therefore distinct from that of fault and negligence under Articles 10.5 and 10.6.

173. Applying these principles, the Panel recalls that it did not consider it necessary, for the purpose of establishing the source of the prohibited substance, to determine with precision whether the Athlete was asleep, half asleep or fully awake when the cream was applied. That determination is now relevant because Article 10.2.3 requires the Panel to determine what the Athlete actually knew at that time. In doing so, the Panel must consider not only whether the Athlete knew that a cream was being applied to his injured heels, but whether he appreciated that such cream might contain a prohibited substance and therefore carried a significant risk of resulting in an ADRV.
174. The Panel first addresses the Athlete’s evidence concerning his awareness of the application. The Athlete maintained at the hearing that he was “*half asleep*” or “*almost sleeping*” when his Father applied the cream and that he therefore neither saw the product nor knew precisely what was being applied.
175. The Panel accepts that, on the balance of the evidence, the Athlete was tired after the Event and not fully attentive when his Father applied the Trofodermin. However, the Panel is not satisfied that the Athlete was “*half asleep*” or “*almost sleeping*” to such an extent that he could not have been aware that a cream was being applied to what must have been painful wounds on his feet. The Panel notes in this regard that the Athlete’s characterisation of his state as “*half asleep*” or “*almost sleeping*” was advanced for the first time at the hearing and is not consistent with the Mother’s witness statement, which records that the Father applied the cream immediately because the Athlete was agitated and crying out in pain. On that basis, the Panel finds that the Athlete was awake in the relevant sense, namely sufficiently aware to know that his Father was applying a cream to his injured heels. While that finding establishes the Athlete’s awareness of the treatment itself, it does not, however, establish that he knew which product was being applied or what it contained.
176. As to the ISMF’s submission that the reference to Trofodermin on the DCF is inconsistent with the Athlete’s claimed ignorance of the product, the Panel recalls its finding that the information recorded on the DCF was provided by the Father. In this context, the reference to Trofodermin reflects the Father’s knowledge of the product, not necessarily the Athlete’s. That said, the Panel does not overlook that the Athlete signed the DCF and thereby confirmed the accuracy of its contents, including the declaration that Trofodermin had been taken during the seven days preceding the control. The Athlete explained that he signed the DCF in haste, without reviewing it, as he was preparing to leave for school. The Panel considers this explanation credible, having regard to the early hour of the control and the circumstances of that morning as described in the oral testimonies of the Athlete and his parents and supported

by the DCF, which records the medications in the DCO's handwriting. There is also no evidence that the Athlete reviewed the DCF's entries, namely the list of medications declared, before signing it. The Panel therefore accepts that the Athlete did not read the DCF. But even had he read the DCF, seen the name Trofodermin, and understood that it was the cream applied to his heels, this would establish, at most, that by the morning of 28 January 2025, after clostebol had already entered his system, he knew or should have known the name of the product. It would not *per se* establish that he knew or appreciated, then or at any earlier moment, that the product contained a prohibited substance or could result in an ADRV. The Athlete's failure to verify the contents of the DCF is nevertheless relevant to his degree of fault and will be considered in that context below.

177. The absence of evidence that the Athlete saw the packaging or became aware of its contents does not, by itself, resolve the question whether he nevertheless appreciated that the use of the cream carried a significant risk of resulting in an ADRV. In addressing that question, the Panel has considered the information available to the Athlete before the doping control. By that time, the Athlete had competed internationally in the U18 category since 2023 and had finished first in the overall U18 World Cup ranking in 2024. He had entered the RTP on 11 June 2024 and on 24 June 2024 signed the corresponding acknowledgement, which reminded him that he remained responsible at all times for what went into his body and that any medical treatment had to comply with the ISMF ADR. The Athlete stated that he had read that document, although only "*quite quickly*". He had also undergone doping controls on 6 August and 27 October 2024. On 18 December 2024, the ITA invited him to complete the mandatory anti-doping education programme through WADA's education platform and provided a link to the ITA Athlete Hub. The Athlete acknowledged that he postponed completing the programme because of his academic and sporting commitments. He further stated that, although he understood in general terms that doping substances were prohibited, he had never discussed anti-doping matters with his parents.
178. Those circumstances establish the information that was made available to the Athlete and the anti-doping responsibilities that were imposed upon him. They do not, however, establish what he actually knew for the purposes of Article 10.2.3. The fact that an athlete has been informed of his responsibilities, or ought to have familiarised himself with the applicable anti-doping rules, is highly relevant when assessing fault, but does not necessarily establish that he appreciated that the use of an over-the-counter cream carried a significant risk of resulting in an ADRV.
179. Article 10.2.3 does not require an athlete merely to know, in general terms, that doping is prohibited. It requires the athlete to have known that the particular conduct carried a significant risk of resulting in an ADRV, namely, in this case, that the cream being applied to his heels might contain a prohibited substance. There is an important distinction between knowing that prohibited substances must not be used and appreciating that an apparently ordinary medicinal cream purchased from a local pharmacy may itself contain such a substance. Anti-doping education exists precisely to bridge that gap. The ISMF submits that the Athlete should nevertheless be taken to have appreciated the relevant risk because he was part of the RTP and had previously completed DCFs. In the Panel's view, participation in the RTP and previous experience with doping controls may objectively demonstrate that the Athlete ought to have appreciated the relevant risk, but they do not necessarily establish that he actually did. The fact that the Athlete had not completed the mandatory anti-doping education before the doping control is also relevant in this context.

180. The ISMF, nevertheless, argues that the Athlete still acted with indirect intent, relying in particular on *Pereira*, which adopted the “minefield” analogy first articulated in CAS 2012/A/2822 *Qerimaj v. IWF*. An athlete who crosses a minefield despite clear warning signs may intend only to reach the other side safely, but by proceeding in the face of an obvious danger accepts the risk that an ADRV may occur. Such conduct amounts to indirect intent within the meaning of Article 10.2.3 and the Panel accepts that principle without reservation.
181. The analogy, however, presupposes that the athlete is aware that the field may contain mines. It describes an athlete who perceives a significant risk and consciously proceeds despite it. It does not describe an athlete who had never appreciated that such a risk existed in the first place. *In casu*, the evidence shows that the Athlete postponed completing the mandatory anti-doping education programme because of competing academic and sporting commitments, at a time when he still had a few months before the completion deadline. There is no evidence that he knew or anticipated that an unannounced doping control would occur before he completed the programme, let alone that he postponed the programme to avoid acquiring information that he suspected might be relevant to his own conduct. Simply postponing anti-doping education, which could have been legitimately completed until March 2025, is distinct from deliberately avoiding knowledge of a risk already perceived.
182. The distinction between a risk that has entered an athlete’s awareness and one that he or she has never appreciated is illustrated by the circumstances of the *Pereira* case. In that case, the player contended that he had questioned both his treating doctor and his team doctor about whether the prescribed medication contained a prohibited substance. The sole arbitrator found that contention corroborated by nothing beyond the player’s own testimony and held that, even if the enquiries had been made and the assurances given, the player could not “*simply hide behind*” them (*Pereira* case, paras. 66, 72 and 73). Hence, the risk that the medication might be prohibited had already entered the player’s mind, and the assurances he claimed to have received were deemed insufficient to exclude manifest disregard, since he had undertaken no verification of his own on any of the four occasions on which his treating doctor administered the medication by intramuscular injection between 15 January and 10 February 2015, before the doping control (*Pereira* case, paras. 71, 76 and 79). Thus, in *Pereira*, there was evidence from which the player’s actual awareness of the risk could be inferred, as well as repeated opportunities for him to act on that awareness. The present case, however, is different. Unlike the player in *Pereira*, there is no evidence that the Athlete ever suspected that the cream might contain a prohibited substance or that the possibility of such a risk had otherwise entered his mind before it was applied. There is also no evidence that the Athlete raised any concern with his Father, or that his Father, when obtaining the cream, raised any concern with Dr. Dal Zotto as to whether it might contain a prohibited substance. Dr. Dal Zotto confirmed at the hearing that he was not informed that the Athlete was a competitive athlete or subject to anti-doping obligations and recommended the cream solely on the basis of the photographs and the Father’s description of the injuries.
183. The same distinction applies to the *Evans* cases. There, the athlete personally purchased, handled and repeatedly applied the cream and testified that she had failed to notice the references to clostebol and the prominent doping warning appearing on the packaging and tube. The panel did not believe that testimony and found it more likely than not that the athlete had seen the warning or the references to clostebol and had used the cream nonetheless. Here, by contrast, the evidence does not establish that the Athlete ever handled the packaging or saw either the warning or the list of ingredients before the doping control. That said, the ISMF

argues that the Athlete knew that his Father had gone to a pharmacy to obtain a product for his injured heels and that he nevertheless took no precautions to ascertain what was to be applied to his skin. This may have afforded the Athlete an opportunity to make further enquiries, and his failure to do so may be relevant to the assessment of his degree of fault. It does not, however, in itself establish that he subjectively appreciated a significant risk that the cream might contain a prohibited substance.

184. Even assuming, in the Athlete's disfavour, that he possessed some general awareness that medicinal products might warrant caution, the term "*manifestly*" sets a particularly high bar. It requires the conscious setting aside of a significant risk that the athlete has actually perceived. This requirement presupposes that the significant risk was first actually perceived by the athlete. The evidence before the Panel does not establish such awareness. At most, it establishes that the Athlete never turned his mind to whether the cream might contain a prohibited substance. However negligent that omission may have been, thoughtlessness is not equivalent to the manifest disregard of a perceived risk.
185. Having considered the evidence as a whole, the Panel is satisfied that the circumstances surrounding the purchase and disclosure of Trofodermin are more consistent with the Athlete's assertion that he did not appreciate any significant risk than with the ISMF's contention that he did. The product was purchased openly from a pharmacist and was subsequently disclosed to the DCO during an unannounced doping control, before the AAF was known. The Panel accepts the Father's explanation that he had no reason to suspect that an over-the-counter medicinal cream could contain a prohibited substance and therefore saw no reason to inform the pharmacist that his son was a competing athlete. Similarly, there is no evidence that either the Athlete or his Father expressed any concern about a possible anti-doping risk when the cream was obtained and applied. The Panel also takes into account that the Athlete had not completed the mandatory anti-doping education programme before the doping control, a fact expressly acknowledged by the ISMF in paragraph 35 of the Appealed Decision, which stated that the Athlete "*had not received any anti-doping education prior to said doping control*".
186. The Panel is therefore satisfied, on a balance of probabilities, that the Athlete has established that he neither knew that the treatment of his injured heels carried a significant risk of resulting in an ADRV, nor manifestly disregarded any such risk. Consequently, the Panel concludes that the ADRVs were not intentional within the meaning of Article 10.2.3 of the ISMF ADR.
187. The Panel emphasises, however, the limits of this conclusion, which should not be understood as rewarding ignorance or permitting athletes to evade liability by remaining uninformed. Under the ISMF ADR, athletes bear an unwavering duty to familiarise themselves with anti-doping regulations and to ensure that no prohibited substance enters their bodies. The Athlete failed to do so and his ignorance was therefore avoidable. He was given the opportunity to complete anti-doping education before the doping control but chose to postpone it and this may carry weight in the assessment of fault under Articles 10.5 and 10.6. Likewise, the involvement of a third party does not automatically shield an athlete from a finding of indirect intent.
188. Pursuant to Article 10.2.2 of the ISMF ADR, the otherwise applicable period of ineligibility is therefore two years rather than four. The Appealed Decision cannot stand in that respect.

The Panel accordingly turns to whether that period should be eliminated or further reduced pursuant to Articles 10.5 and 10.6 of the ISMF ADR.

c. Is the period of ineligibility to be eliminated or further reduced based on the Athlete's degree of fault?

i. Did the Athlete bear no fault or negligence?

189. The Panel must next determine whether the Athlete has established that he bore no fault or negligence within the meaning of Article 10.5 of the ISMF ADR. If so, the otherwise applicable two-year period of ineligibility must be eliminated.

190. Article 10.5 of the ISMF ADR provides the following:

“If an Athlete or other Person establishes in an individual case that he or she bears No Fault or Negligence, then the otherwise applicable period of Ineligibility shall be eliminated”

191. Appendix 1 to the ISMF ADR defines the concept of “No Fault or Negligence” as follows:

“The Athlete or other Person’s establishing that he or she did not know or suspect, and could not reasonably have known or suspected even with the exercise of utmost caution, that he or she had Used or been administered the Prohibited Substance or Prohibited Method or otherwise violated an anti-doping rule. Except in the case of a Protected Person or Recreational Athlete, for any violation of Article 2.1, the Athlete must also establish how the Prohibited Substance entered the Athlete’s system.”

192. The Panel has already found that the Athlete established the source of the clostebol detected in his sample, namely the application of Trofodermin to his injured heels. The remaining question is therefore whether the Athlete has established that, even with the exercise of utmost caution, he could not reasonably have known or suspected that he was using a product containing a prohibited substance.

193. Unlike Article 10.2.3, which turns on the Athlete's subjective knowledge, Article 10.5 applies an objective standard. The question is no longer what the Athlete actually knew, but what he could reasonably have known had he exercised utmost caution. As the panel observed in *Errani* (para. 197), that standard requires an athlete to take every reasonable precaution to ensure that no prohibited substance enters his or her body. The comment to Article 10.5 confirms that elimination of the period of ineligibility is reserved for exceptional circumstances.

194. In that regard, the comment to Article 10.5 provides the following illustrations of circumstances in which no fault or negligence would not apply:

“[...] They will only apply in exceptional circumstances, for example, where an Athlete could prove that, despite all due care, he or she was sabotaged by a competitor. Conversely, No Fault or Negligence would not apply in the following circumstances: (a) a positive test resulting from a mislabeled or contaminated vitamin or nutritional supplement (Athletes are responsible for what they ingest (Article 2.1) and have been warned against the possibility of supplement contamination); (b) the Administration of a Prohibited Substance by the Athlete’s personal physician or trainer without disclosure to the Athlete (Athletes are responsible for

their choice of medical personnel and for advising medical personnel that they cannot be given any Prohibited Substance); and (c) sabotage of the Athlete's food or drink by a spouse, coach or other Person within the Athlete's circle of associates (Athletes are responsible for what they ingest and for the conduct of those Persons to whom they entrust access to their food and drink). However, depending on the unique facts of a particular case, any of the referenced illustrations could result in a reduced sanction under Article 10.6 based on No Significant Fault or Negligence.]”.

195. The Panel notes that the present case does not fall within any of those illustrations. The Father was neither the Athlete's physician nor trainer, the cream was neither food nor drink, and there was no sabotage. The panel in *Tammaro* (para. 185) correctly observed, in this Panel's view, that a parent's intervention of his own motion falls outside those illustrations. It would therefore be inappropriate to resolve the present case by reference to illustrations that do not fit its facts.
196. As such, the contamination cases relied upon by the Athlete are of limited relevance in the present case. In the *Errani* case, the prohibited substance was a medication belonging to the athlete's mother which found its way into food she had prepared. The wider line of clostebol cases relied upon by the Athlete concerns exposure occurring without the athlete's knowledge that any product had been used at all. In such cases, there is no duty, let alone opportunity, to enquire because there is nothing to enquire about. The present case is different because the Athlete was aware that his Father had applied on his heels a medicinal product to treat his injuries. The question to be resolved here is therefore not one of unknown exposure, but whether the Athlete took reasonable steps to identify what was being applied to his heels.
197. In assessing that question, the Panel has already found that the Athlete was awake, that he was in pain, and that he knew his Father was applying a medicinal product to his heels. In those circumstances, utmost caution required him to make basic enquiries. He could have asked his Father the name of the product, looked at the packaging, or contacted Ms. Cona, who had treated the same injury days earlier, who had advised disinfectant and no cream of any kind, and whose contact details he had. Any of those steps would have revealed the nature of the product. The Athlete took none of them, before the application or after it.
198. This is also consistent with the responsibilities imposed upon athletes by Article 20 of the ISMF ADR. Article 20.1 of the ISMF ADR requires athletes “[t]o be knowledgeable of and comply with these Anti-Doping Rules”, Article 20.3 requires them “[t]o take responsibility, in the context of anti-doping, for what they ingest and Use”, and Article 20.4 requires them “[t]o inform medical personnel of their obligation not to Use Prohibited Substances and Prohibited Methods and to take responsibility to make sure that any medical treatment received does not violate these Anti-Doping Rules”. While these provisions do not create a separate basis of liability, they reflect the standard of care expected of an athlete subject to the ISMF ADR.
199. Although the Athlete did not intentionally use a prohibited substance, he accepted a medicinal treatment without taking any precaution to ascertain what product was being applied to his heels. He has thus not established no fault or negligence within the meaning of Article 10.5 of the ISMF ADR, and the period of ineligibility cannot be eliminated on that basis.

ii. Did the Athlete bear no significant fault or negligence?

200. Having concluded that the Athlete does not bear no fault or negligence within the meaning of Article 10.5, the Panel turns to whether the otherwise applicable period of ineligibility may be reduced on the basis of no significant fault or negligence pursuant to Article 10.6 of the ISMF ADR.
201. Article 10.6.1 provides the following:

“10.6 Reduction of the Period of Ineligibility based on No Significant Fault or Negligence

10.6.1 Reduction of Sanctions in Particular Circumstances for Violations of Regulation 2.1, 2.2 or 2.6.

10.6.1.1 Specified Substances or Specified Methods

Where the anti-doping rule violation involves a Specified Substance (other than a Substance of Abuse) or Specified Method, and the Athlete or other Person can establish No Significant Fault or Negligence, then the period of Ineligibility shall be, at a minimum, a reprimand and no period of Ineligibility, and at a maximum, two (2) years of Ineligibility, depending on the Athlete’s or other Person’s degree of Fault.

10.6.1.2 Contaminated Products

In cases where the Athlete or other Person can establish both No Significant Fault or Negligence and that the detected Prohibited Substance (other than a Substance of Abuse) came from a Contaminated Product, then the period of Ineligibility shall be, at a minimum, a reprimand and no period of Ineligibility, and at a maximum, two (2) years Ineligibility, depending on the Athlete or other Person’s degree of Fault.

10.6.1.3 Protected Persons or Recreational Athletes

Where the anti-doping rule violation not involving a Substance of Abuse is committed by a Protected Person or Recreational Athlete, and the Protected Person or Recreational Athlete can establish No Significant Fault or Negligence, then the period of Ineligibility shall be, at a minimum, a reprimand and no period of Ineligibility, and at a maximum, two (2) years Ineligibility, depending on the Protected Person or Recreational Athlete’s degree of Fault.

10.6.2 Application of No Significant Fault or Negligence beyond the Application of Article 10.6.1

If an Athlete or other Person establishes in an individual case where Article 10.6.1 is not applicable that he or she bears No Significant Fault or Negligence, then, subject to further reduction or elimination as provided in Article 10.7, the otherwise applicable period of Ineligibility may be reduced based on the Athlete or other Person’s degree of Fault, but the reduced period of Ineligibility may not be less than one-half of the period of Ineligibility otherwise applicable. If the otherwise applicable period of Ineligibility is a lifetime, the reduced period under this Article may be no less than eight (8) years.”

202. The Panel first notes that none of the specific reductions provided for in Article 10.6.1 applies. Clotebol is not a specified substance, Trofodermin is not a contaminated product within the

meaning of Appendix 1 because the presence of clostebol is expressly disclosed on its packaging, and the Athlete is neither a protected person nor a recreational athlete.

203. The applicable provision is therefore Article 10.6.2, under which the otherwise applicable period of ineligibility may be reduced according to the Athlete's degree of fault, but not below one-half of the otherwise applicable sanction. Since the applicable sanction is two years, the available range is 12 to 24 months.

204. Appendix 1 to the ISMF ADR defines the concept of "*No Significant Fault or Negligence*" as follows:

"The Athlete or other Person's establishing that any Fault or Negligence, when viewed in the totality of the circumstances and taking into account the criteria for No Fault or Negligence, was not significant in relationship to the anti-doping rule violation. Except in the case of a Protected Person or Recreational Athlete, for any violation of Article 2.1, the Athlete must also establish how the Prohibited Substance entered the Athlete's system."

205. Appendix 1 to the ISMF ADR further defines "*Fault*" as follows:

"Fault is any breach of duty or any lack of care appropriate to a particular situation. Factors to be taken into consideration in assessing an Athlete's or other Person's degree of Fault include, for example, the Athlete's or other Person's experience, whether the Athlete or other Person is a Protected Person, special considerations such as impairment, the degree of risk that should have been perceived by the Athlete and the level of care and investigation exercised by the Athlete in relation to what should have been the perceived level of risk. In assessing the Athlete's or other Person's degree of Fault, the circumstances considered must be specific and relevant to explain the Athlete's or other Person's departure from the expected standard of behavior. Thus, for example, the fact that an Athlete would lose the opportunity to earn large sums of money during a period of Ineligibility, or the fact that the Athlete only has a short time left in a career, or the timing of the sporting calendar, would not be relevant factors to be considered in reducing the period of Ineligibility under Article 10.6.1 or 10.6.2."

206. As such, the assessment of fault requires consideration of, among other things, the Athlete's experience, the degree of risk that should have been perceived, and the level of care and investigation exercised in light of that risk. The Panel recalls that the threshold for establishing no significant fault or negligence is not intended to be unduly high. By definition, such a finding is compatible with the existence of some degree of fault and is not excluded merely because an athlete has left some stones unturned or could have taken additional precautions (CAS 2016/A/4643 *Maria Sharapova v. ITF*, para. 84).

207. In assessing the Athlete's degree of fault, the Panel applies the framework developed in the *Cilic* case, which distinguishes between objective and subjective elements. The objective element concerns the standard of care expected of a reasonable athlete in the circumstances. The subjective element concerns the particular circumstances of the athlete, including his personal characteristics and experience. The objective element generally determines the applicable category of fault, while the subjective element may justify moving the athlete into a different category (*Cilic* case, paras. 72 and 87; *Tammaro* case, paras. 157-159).

208. As adapted in *Tammaro* for cases involving non-specified substances, the relevant categories are:
- “*Significant degree of or considerable fault*”: No reduction of the otherwise applicable sanction (Article 10.6.2 of the 2021 TADP);
- “*Normal degree of fault*”: 18 to 24 months, with a standard normal degree of fault of 21 months;
- “*Light degree of fault*”: 12 to 18 months, with a standard light degree of fault of 15 months.”
209. Before assessing the Athlete’s degree of fault, the Panel considers it necessary to identify the point at which his duty of care arose. This is because the objective criteria identified in the *Cilic* case primarily concern the obligations incumbent upon an athlete before personally using a product. Where, however, a product is applied by a third party without the athlete’s active participation, and the athlete’s failure of care occurs only after the application, CAS jurisprudence recognises that the objective degree of fault may be less significant (CAS 2017/A/5317, applied in the *Tammaro* case). The determination of when the Athlete’s duty of care became engaged is therefore central to the assessment of his degree of fault.
210. In the present case, the Athlete’s duty of care arose before the cream was applied. As explained above, although the evidence does not establish that the Athlete knew the cream was Trofodermin or appreciated that it contained clostebol, he was aware that his Father was treating his injured heels with a medicinal cream.
211. From that moment onwards, and in assessing the objective elements of his degree of fault, the Panel observes that the Athlete failed to exercise even basic diligence. He did not ask what product was being applied, examine the packaging, or seek advice from Ms. Cona, despite having her contact details, her having advised disinfectant and plasters and no cream of any kind, and her having treated the same injury during the Event. He also signed the DCF declaring the use of Trofodermin without reviewing its contents. Even after the application, he remained under a continuing duty to ascertain the identity of the product that had been administered to him (CAS 2017/A/5317; *Tammaro* case). The Athlete therefore failed to take even basic steps to identify what was being administered to his body. Those failures are sufficient, without more, to place the Athlete’s objective degree of fault within the category of normal fault.
212. The Panel must nevertheless consider whether the conduct of the Father should also be taken into account. In the *Tammaro* case, the panel declined to attribute parental fault to the player because he “*neither consented to the application of the Trofodermin spray by his Father nor delegated the medical treatment of his wound to the Father to the extent that the Father could have exercised his discretion as to how to treat the wound*”, stating that “[i]t would be different if the Player had consented to the use of the Trofodermin spray by his Father, or if the Player had allowed his Father to treat the wound in the Father’s own discretion” (para. 184).
213. The Panel considers that the present case falls within that distinction. Although the Athlete did not specifically request Trofodermin, he permitted his Father to select and administer

whatever treatment he considered appropriate. He made no enquiry before, during or after the application and, in his first explanation of 17 March 2025, expressly stated that he trusted his Father to have chosen a product that was appropriate and free of prohibited substances. The Panel therefore finds that the Athlete delegated the choice of treatment to his Father. In those circumstances, the Father's conduct is attributable to the Athlete (CAS 2015/A/4059 *Errani; Tammaro*).

214. The Father's conduct represented a significant departure from the level of care required in the circumstances. He obtained a medicinal product for an international-level athlete without informing the pharmacist that his son was subject to anti-doping rules. He applied the cream without reading the packaging, which expressly identified clostebol and bore a prominent doping warning, and carried out no anti-doping verification before or after its use. The Panel accepts that the Father acted entirely in good faith and solely out of concern for his son's wellbeing. Those circumstances explain his conduct but cannot excuse the failure to take the precautions reasonably required before administering a medicinal product to an athlete subject to anti-doping rules.
215. Moreover, the Athlete's own submissions highlight that Trofodermin has been implicated in numerous clostebol cases in Italy. That circumstance reinforces, rather than diminishes, the degree of care required. The risk was one which an athlete in the RTP should have been alert to, and the level of investigation undertaken by the Athlete was effectively absent.
216. The Panel nevertheless does not consider that the Athlete's fault reaches the level of significant or considerable fault. This is not a case of an athlete who deliberately selected, purchased, and personally applied a product containing a prohibited substance. The Athlete did not choose the product, procure it, or administer it. The product was applied by his Father in response to injuries sustained during the Event. Those circumstances distinguish this case from the highest category of fault. At the same time, they do not place it in the lowest category because the Athlete's duty of care was engaged before and after the application, and he took no precautions to discharge it.
217. The objective degree of fault therefore falls within the category of normal fault, corresponding to a range of 18 to 24 months.
218. The Panel must finally consider the subjective elements, several of which operate in the Athlete's favour. At the time of the violation, he was 18 years old and had been in the RTP for only seven months, and thus had limited experience with anti-doping procedures. The product was obtained and applied by his Father, not by professional support personnel. The Father acted in good faith, following the advice of a pharmacist, late in the evening after the Athlete had competed while injured. The product was available over the counter, the application was isolated, and neither the Athlete nor his family attempted to conceal the use of the product. To the contrary, the Father transparently disclosed it to the DCO when he could have remained silent.
219. The Athlete's lack of anti-doping education is also a relevant subjective consideration, although it carries limited weight in the overall assessment. While the Athlete had not completed any anti-doping education before the violation, the ITA had made the mandatory educational programme available to him more than a month before the doping control took place. The Athlete consciously chose to postpone completing it due to his academic and

sporting commitments. Accordingly, while the absence of completed anti-doping education forms part of the overall assessment, it cannot be regarded as an element entirely beyond the Athlete's control.

220. The comparison with the *Tammaro* case further confirms that the Athlete cannot be placed within the light-fault category. In that case, the player also had a Trofodermin product applied to him by his father, but several elements justified a lower sanction, namely he was a protected person, he had asked his father whether the product had been checked, and he had an established practice of verifying medications through doctors, coaches, and his own research. Here, the Athlete was not a protected person, he made no enquiry, and he had no established practice of checking medications. Moreover, unlike the *Tammaro* case, the Father's fault is attributable to the Athlete in the present circumstances.
221. In addition, the Panel does not consider the *Errani* case to be of assistance to the Athlete. That case concerned a specified substance and was decided under a different sanctioning framework, one which permitted a reduction below the minimum period available in the present case. By contrast, clostebol is a non-specified substance, and Article 10.6.2 of the ISMF ADR does not permit a reduction below 12 months. The Panel also cannot accept the ISMF's submission that no reduction is warranted, as such an approach would fail to give proper weight to the mitigating circumstances identified above, including the Athlete's youth, his limited anti-doping experience, the intervention of a well-intentioned parent, and the complete absence of any attempt to conceal the use of the product.
222. Weighing the objective and subjective elements in the totality of the circumstances, the Panel determines that the appropriate period of ineligibility is 20 months.

d. Reduction of the period of ineligibility for reasons other than fault

223. The Athlete also invokes Article 10.7 of the ISMF ADR, which provides for the elimination, reduction or suspension of the period of ineligibility for reasons other than fault. Article 10.7.1 applies where an athlete provides substantial assistance in discovering or establishing ADRVs. Article 10.7.2 applies where an athlete voluntarily admits an ADRV before receiving notice of a sample collection that could establish the violation, provided that the admission constitutes the only reliable evidence of the violation at the time it is made. Article 10.7.3 merely governs the combined application of reductions available under Article 10.7 and does not create a separate basis for relief. Neither provision applies to the Athlete. He did not provide, or offer to provide, substantial assistance within the meaning of Article 10.7.1. Nor does Article 10.7.2 apply, because any admissions made by the Athlete occurred only after he had been notified of the AAF, and in any event the AAF itself already constituted reliable evidence of the violation. Accordingly, none of the grounds for relief under Article 10.7 finds application here. Moreover, Article 10.7 does not confer a residual equitable discretion to reduce a sanction whenever the Panel considers the circumstances exceptional. The Athlete's invitation to apply the provision on that basis therefore cannot succeed.
224. The Athlete further submits that the sanction imposed upon him is disproportionate. That submission was directed primarily at the four-year period of ineligibility imposed in the Appealed Decision, which the Panel has already found to be inapplicable. To the extent that the argument is maintained in relation to the 20-month period of ineligibility determined by this Panel, it must likewise be rejected. The sanctioning regime established by the ISMF ADR

reflects the proportionality assessment embodied in the WADC. The role of the Panel is not to substitute its own view of the appropriate sanctioning framework, but to apply the regime prescribed by the ISMF ADR and to exercise the discretion conferred by that regime. That is precisely what the Panel has done by assessing the Athlete's individual degree of fault under Article 10.6.2 and fixing the sanction within the applicable range. In the present case, a period of ineligibility of 20 months, imposed upon an athlete who permitted an unidentified medicinal product to be applied to his body without making any enquiry as to its identity or contents before, during or after its use, cannot be regarded as disproportionate, still less manifestly so.

225. Having determined that the appropriate period of ineligibility is 20 months, the Panel turns to the commencement of that period, the credit to be given for the provisional suspension already served, and the resulting disqualification of results.

e. Commencement of the period of ineligibility

226. The Panel notes that the Athlete was provisionally suspended on 26 February 2025. There is no evidence that the Athlete has breached his provisional suspension. By Article 10.13 of the ISMF ADR, credit is given for the period of provisional suspension already served. Therefore, the Panel determines that the Athlete shall be sanctioned with a period of ineligibility of 20 months commencing on the date of this Award, in accordance with Article 10.13.1 of the ISMF ADR, with credit for the provisional suspension effectively served since 26 February 2025.

E. Disqualification of the results

227. Pursuant to Article 10.10 of the ISMF ADR, all the competitive results of the Athlete obtained from the date of sample collection on 28 January 2025 until the date of imposition of the provisional suspension on 26 February 2025 shall be disqualified, including forfeiture of any medals, points and prizes.

XI. COSTS

(...)

ON THESE GROUNDS

The Court of Arbitration for Sport rules that:

1. The Court of Arbitration for Sport has no jurisdiction to hear the appeal filed by Enrico Pellegrini on 29 January 2026 against the International Testing Agency.
2. The appeal filed by Enrico Pellegrini with the Court of Arbitration for Sport on 29 January 2026 against the International Ski Mountaineering Federation with respect to the decision rendered on 9 January 2026 by the International Ski Mountaineering Federation is partially upheld.
3. The decision rendered on 9 January 2026 by the International Ski Mountaineering Federation is set aside.
4. Enrico Pellegrini is found to have committed anti-doping rule violations under Articles 2.1 and 2.2 of the International Ski Mountaineering Federation Anti-Doping Rules 2021.
5. Enrico Pellegrini is sanctioned with a period of ineligibility of 20 months commencing on the date of this Award, in accordance with Article 10.13.1 of the International Ski Mountaineering Federation Anti-Doping Rules 2021, with credit for the provisional suspension effectively served since 26 February 2025.
6. All competitive results obtained by Enrico Pellegrini during the period from and including the date of sample collection on 28 January 2025 until the date of imposition of the provisional suspension on 26 February 2025 shall be disqualified including forfeiture of any medals, points and prizes.
7. (...).
8. All other motions or prayers for relief are dismissed.

Seat of arbitration: Lausanne, Switzerland

Date: 11 September 2026

THE COURT OF ARBITRATION FOR SPORT

Marianne Saroli
President of the Panel

Luigi Fumagalli
Arbitrator

Alexander McLin
Arbitrator