

Medical Diagnostics Form (MDF) for athletes with a Physical Impairment (PI)

The form must be completed in <u>typed</u> English by the athlete's individual physician, who signed and sealed the form. The form <u>must</u> be completed and uploaded onto the World Abilitysport -Sports Management System (WA-SMS) no later than six (6) weeks before the next competition that the athlete undergoes athlete evaluation (unless otherwise agreed).

This document does not act as a valid substitute for medical documentation.

Medical documentation providing evidence for the athlete's underlying health condition and impairment, is to be uploaded separately onto the WA-SMS with this form (see page 2). Following information to be completed typed / electronically:

Athlete information:

| Last name: | | | | | |
|---|----------|--------|--------------------------------|--|--|
| First name: | | | | | |
| NPC / NF: | | | | | |
| Gender: | 🗆 Female | 🗆 Male | Date of Birth: (DD.MM.YYYY) | | |
| Sport: | | | | | |
| Handedness: | 🗅 Right | 🗅 Left | | | |
| Number of years competing in the sport at a national level: | | | | | |

Medical information:

Description (*typed in English*) of the Athlete's medical diagnosis <u>and</u> the loss of function this health condition results in:

| condition results in: | | | | | |
|---------------------------------|---------------|-------------|--|--|--|
| | | | | | |
| | | | | | |
| | | | | | |
| Underlying health condition is: | □ progressive | 🗆 permanent | | | |

World Abilitysport – <u>www.worldabilitysport.org</u> World Abilitysport HQ, Aylesbury Campus, Oxford Road, Aylesbury, Buckinghamshire, HP21 8PD, UK Contact: <u>wfclassification@iwasf.com</u> Registered and Incorporated Charity (2713410 and 1011552)



Medical history:

Underlying health condition is: 🛛 acquired

congenital

If acquired, age of onset:

Anticipated future procedure(s):

List of medication prescribed:

Attachments:

The athlete's underlying health condition as stated on this form and the resulting impairment must fully explain the loss of function exhibited by the athlete during athlete evaluation. Otherwise, no sport class can be allocated by the classification panel, as stipulated in the International Wheelchair Fencing sport's classification rules.

Therefore, additional, recent (not older than 12 months), and relevant medical documentation must be included separately, in <u>typed English</u> in headed official clinic/hospital paper with this form if the athlete has the following*:

- an impairment or diagnosis that cannot be ascertained by clear signs and symptoms.
- a complex or rare health condition, or multiple impairments.
- limb deficiency or leg length difference (amputation or dysmelia) at the level of an ankle, knee, wrist or elbow joint (X-rays for the respective joints to be enclosed).
- a spinal cord injury (recent ASIA scale results to be enclosed).
- one of the coordination related impairments Motor Ataxia, Dyskinesia (athetosis, dystonia, chorea) or Hypertonia/Spasticity (Australian Spasticity Assessment Scale scores to be enclosed).

Reports on additional testing by physicians, physiotherapists, and other health professionals are welcomed, where relevant, to complement the medical diagnostic information in an English translated typed version.

The Wheelchair Fencing International Classification panel may ask for further information to be submitted depending on the individual athlete's health condition and impairment.

*Athletes and NPCs/NFs are advised to observe the Eligible Impairments defined in the International Wheelchair Fencing Sport's classification rules, as not all the impairments mentioned above are considered Eligible Impairments in all sports.

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| | I confirm that all the above information is accur | ate. |
|--|---|------|
| Full Name: | | |
| Health care profession: | | |
| Registration Authority & Number: | | |
| Address: | | |
| City: | Country: | |
| Phone: | E-mail: | |
| Date: | Signature: | |