



Medical Diagnostics Form (Athletes with Visual Impairment)

This form must be completed in English by a registered ophthalmologist (or equivalent). All medical documentation required on pages 2-3 must be attached. This form and the attached medical documentation must not be older than 12 months at the time of the Athlete Evaluation.

Athlete Information

Last name: _____

First name: _____

Gender: Female Male Date of Birth: _____

Sport: _____

Country: _____ ISAS License No. _____

Medical Information

Diagnosis:

Medical history:

Age at onset: _____

Anticipated future procedure(s): _____

Athlete wears glasses: yes no Correction: Right: _____
Left: _____

Athlete wears contact lenses: yes no Correction: Right: _____
Left: _____

Athlete wears eye
prosthesis:

right left

Medication:

Eye medications used by the athlete:	
Ocular drug allergies:	

Assessment of Visual Acuity and Visual Field

Visual Acuity

	Right eye	Left eye
With correction		
Without Correction		

Type of correction: _____

Measurement Method: _____

Visual Field:

In degrees (radius)	Right eye	Left eye

Attachments to the Medical Diagnostic Form

1. Visual field test

For all athletes with a restricted visual field a visual field test must be attached to this form. The athlete's visual field must be tested by full-field test (120 degrees) and a 30 degrees, 24 degrees or 10 degrees central field test, depending on the pathology. One of the following perimeters should be used for the assessment: Goldmann Perimetry (Intensity III/4), Humphrey Field Analyzer or Octopus (Interzeag).

2. Additional medical documentation

Please specify which eye condition the athlete is affected by.

Eye condition	Additional medical documentation required (see below)
<input type="checkbox"/> Anterior disease	None
<input type="checkbox"/> Macular disease	<ul style="list-style-type: none">▪ Macular OCT▪ Multifocal and/or pattern ERG*▪ VEP*▪ Pattern appearance VEP*
<input type="checkbox"/> Peripheral retina disease	<ul style="list-style-type: none">▪ Full field ERG*▪ Pattern ERG*
<input type="checkbox"/> Optic Nerve disease	<ul style="list-style-type: none">▪ OCT▪ Pattern ERG*▪ Pattern VEP*▪ Pattern appearance VEP*

<input type="checkbox"/> Cortical / Neurological disease	<ul style="list-style-type: none"> ▪ Pattern VEP* ▪ Pattern ERG* ▪ Pattern appearance VEP*
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The ocular signs must correspond to the diagnosis and degree of vision loss. If eye condition is obvious and visible and explains the loss of vision, no additional medical documentation is required. Otherwise the additional medical documentation indicated in the above table must be attached to this form. If the medical documentation is incomplete, the classifiers will not be able to allocate a sport class.

***Notes on electrophysiological assessments (VEPs and ERGs):**

Where there is discrepancy or a possible discrepancy between the degree of visual loss, and the visible evidence of ocular disease the use of visual electrophysiology is often helpful in demonstrating the degree of impairment.

Submitted data should include the report from the laboratory performing the tests, copies of the original data, the normative data range for that laboratory, and a statement specifying of the equipment used, and its calibration status. The tests should be performed as a minimum to the standards laid down by the International Society for Electrophysiology of Vision (ISCEV) (<http://www.iscev.org/standards/>).

A Full Field Electroretinogram (ERG) tests the function of the whole retina in response to brief flashes of light, and can separate function from either the rod or cone mediated systems. It does not however give any indication of macular function.

- A Pattern ERG tests the central retinal function, driven by the macular cones but largely originating in the retinal ganglion cells.
- A Multifocal ERG tests the central area (approx. 50 degrees diameter) and produces a topographical representation of central retinal activity.

A Visual evoked cortical potential (VEP) records the signal from produced in the primary visual cortex, (V1), in response to either a pattern stimulus or pulse of light. An absent or abnormal VEP is not in itself evidence of specific optic nerve or visual cortex problems unless normal central retinal function has been demonstrated.

- A Pattern appearance VEP is specialised version of the VEP used to establish visual threshold which can be used to objectively demonstrate visual ability to the level of the primary visual cortex.

<p>I confirm that the above information is accurate, and I certify that there is no contra-indication for this athlete to participate in sport at a competitive level</p>	
Name:	
Medical Specialty:	
Registration Number:	
Address:	
City:	
Country:	
Phone:	
E-mail:	

Date:

Signature/Stamp:

PROCEDURE FOR CLASSIFICATION AT AN IBSA COMPETITION

An athlete will only be permitted to undergo International Classification at IBSA competitions if he/she:

- STEP 1: Has an IBSA **ISAS** license; for more information contact: ibsaassist@ibsasport.org
- STEP 2: Has uploaded the required Medical Diagnostics documentation on the ISAS database and applied for a place on the classification programme in the respective competition.

Medical Diagnostics Form for Athletes with Visual Impairment

To facilitate our classifiers and to ascertain that the athlete is correctly classified, it is compulsory that the **IBSA Medical Diagnostics Form (MDF)** be completed for each athlete and uploaded on to the ISAS database **at least 6 weeks** before they undergo classification. Any additional medical reports as outlined on the form should be also uploaded. This allows our classifiers to have enough time to review the documentation and if necessary ask for more information. The following conditions apply:

- The MDF form **must** be completed in English and by a registered ophthalmologist in your country;
- All medical documentation on pages 2-3 needs to be scanned and attached. If the medical documentation is incomplete, the classifiers will not be able to allocate a sport class.
- The form and any additional medical documentation e.g. electrophysiological assessments (VEPs and ERGs), should not be older than 12 months at the time of the Athlete Evaluation.

IBSA will schedule all athletes with a **new**¹ or **review**² status. Where classification schedules at a competition are full, new athletes will take priority over review athletes.

How to upload the Medical Diagnostics form and related material into the ISAS database

Your athlete must be already registered on the ISAS database with a copy of the passport, recent photo and IBSA Eligibility Form.

1. **Scan the Medical Form Document (MDF) into a PDF (Max. size 1280KB) – **jpg or word docs are not acceptable****
2. **Name your MDF in this way: : (3 CAPITAL letters for Country code + underscore + **first 2 letters** of the first given name small letters and all the last family name in CAPITAL letters (as it is on passport) all together (no spaces) :**
 - **Example:** Anna Merkovic from Uzbekistan – File name = **UZB_anMERKOVIC_MDF1.pdf**
3. **Log in to the ISAS database;**
4. **Under “participants” click on Classification;**
5. **Select the athlete you wish to upload medical information;**
6. **Click on the “Documentation + relevant sport “ Tab;**
7. **Upload the MDF to “**Medical Form 1**”;**

8. Upload any other medical documentation including ERG, VF, OCT medical tests to “Medical Form 2” again naming your files as in item 2.

- Example: UZB_anMERKOVIC_ERG.pdf + medical exam abbreviation in CAPITAL letters : ERG: VF: OCT

The screenshot displays the IBSA Sport Administration System interface. At the top, there are logos for IBSA and ISAS, and the system title. Below this is a navigation bar with menu items: Initialization, Participants, Licenses & Invoices, Competition Management, Reports, and User Management. A breadcrumb trail shows the path: Home » Participants » Athlete Classification » Update » 25702 - Bologa, Florin Alexandru (ROU). The main heading is 'Classification of 25702 - Bologa, Florin Alexandru (ROU)'. The 'Documentation - Judo' tab is active, showing 'Upload' and 'Refresh' buttons. Below this is a section titled 'Judo - Recent Classification Files' with requirements: 'only PDF, maximum file size 2.5 MB'. A table lists various documents for upload, each with a 'Choose file' button and 'No file chosen' status. A red arrow points to the 'Medical Form 2' row. At the bottom, there is an 'Archive' section (empty) and a 'back to search' button. The footer contains copyright information for the International Blind Sports Federation and the International Paralympic Committee.

¹ **NEW** athletes: athletes that have never participated in an international IBSA or IPC approved competition.

² **REVIEW** Athletes:

- athletes that have been given a first classification two years before and will be classified again after two years to confirm their classification permanently, as the IBSA rules state;
- athletes whose eyesight has deteriorated and would like to ask for a re-classification;
- Periodically IPC requests a review of certain classes – at present there is an ongoing review of class B2 and B3 athletes and IBSA will also follow suit.