



APPENDIX A

WORLD BOXING ASSOCIATION MEDICAL AND SAFETY GUIDELINES

ARTICLE 1

In order to obtain a license or the renewal of a license, all boxers must submit to a thorough medical examination by a physician approved by the Boxing Commission. The examination shall include a complete history of the applicant and any of all of the following laboratory procedures at the discretion of such physician: x-rays, skull x-rays, flat abdominal x-rays, electrocardiogram, complete blood count, including bleeding and coagulation time, urine analysis, serological examination of syphilis, neurological and psychiatric examination, and any other test which might be indicated by the past record or present condition of the applicant. Tests for blood borne disease must be done for HIV, Hepatitis B (surface antigen) and Hepatitis C (Core-Antibody).

The following minimum physical requirements and disqualification shall apply to professional boxers (unless contrary to law of a given region).

1. Age: Upper Limit -36 years

Any boxer over 40 years will be required to submit following annual tests:-

- a. Cardiac Stress Test
- b. Cardiac Stress Echo
- c. Brain MRI
- d. Dilated Eye Exam

2. Lower Limit -17 years

Exception: If in a championship bout, the fighter is just over 36 years (Example: 36 years and 7 days), then this may be waived by discretion of the Commissioner. No person of 36 years or over will be allowed to start a career in professional boxing.

3. Blood Pressure: No over 150/90. If the physician thinks that the blood pressure was raised because of the boxer's anxiety, he may take several readings. If a boxer suffers from hypertension above 150/90, without evidence of cardiovascular disease and can be allowed to fight.
4. No organic heart disease or history of cardiac surgery.
5. No active lung disease, e.g., pneumonia, tuberculosis, pneumothorax.

6. Fundi -- no retinopathy or detached retinas (repaired or not).
7. Vision – Each eye, without the use of corrective lenses should be 20/100 or better.
 - a. Soft contact lenses will be approved.
 - b. Lasik eye surgery can be approved should be approved however radial keratotomy will not be approved.
 - c. Intra-ocular implants are not permitted
8. Abdomen – no hernias or organomegalia (enlarged liver or spleen) or palpable masses.
9. Oral temperature – not over 37.4° C or 100° F.
- 10.No dental abscess.
- 11.No skin infection.
- 12.No recent wound on face or ear which is less than 6 weeks old.
- 13.No active ear infections.
- 14.No absence of kidney or actual renal (kidney) disease.
- 15.No body deformity that may tend to cause bodily injuries.
- 16.No cranial or brain surgery.
- 17.No changes in gait*, mental status, or boxing performance.

* Baseline Gait testing needs to be introduced. Eg Neuro-vestibular testing pre and post bout

- 18.No hand fractures less than 6 weeks old.
- 19.No history of epilepsy.
- 20.No history of mental illness.
- 21.20. No rapid dehydration. If a boxer is more than 5% overweight 5 days before a fight, he should not be allowed to dehydrate himself and should not be permitted to fight. If he presents signs of dehydration or excessive loss of weight on the day of the fight, he should not be permitted to fight.

* Introduction regulation for weight certification (Dr. Lovelace- Seminar)
Minimum Weight limits (Dr. Joe Estwanik)

All boxers applying for an original given electroencephalogram, chest x-rays, syphilis and preferably a CAT Scan of the brain. The CAT Scan of the brain shall be an obligatory exam for all classified WBA boxers, and should be repeated when clinical circumstances so require. Any boxer that presents an altered CAT Scan that indicates brain atrophy, intra or extra cerebral hemorrhage, aneurysms, or any other pathological abnormalities, shall be retired permanently from boxing.

ARTICLE 2

Boxers in all have the type of examination outlined in section (a) on the day of the weigh-in and *1 again a short while before the boxing program begins. The boxer shall furthermore, be *2 checked by a physician before leaving the venue of the tournament.

*1 ie:- Doctor should meet with Boxer before the fight.

*2 Doctor should check boxer for any signs, symptoms or complaints

ARTICLE 3

In the event of any serious injury, the ringside physician shall immediately render any emergency treatment necessary, recommend further treatment or hospitalization if indicated, and fully report the entire matter to the Commission within twenty four (24) hours and subsequently thereafter, if necessary. Such physician may also require that the injured boxer remain in the ring or on the premises after the contest for such period of time, as the physician deems advisable.

Addendum: The Supervisor / Supervising Physician will submit report to the WBA Medical Committee within 36 hours.

ARTICLE 4

Any boxer who has sustained any severe injury shall seek medical care immediately and shall be suspended until cleared by a consulting Licensed Physician.

Any boxer who suffers an actual knockout, in a bout, shall, within twenty four (24) hours, be thoroughly examined by a physician approved by the Boxing Commission. Such examination shall include any or all the procedures as provided in Section (a) above, or as is specifically directed by the Commission physician or the ringside physician. Upon the physician's request, the Commission may suspend the boxer until he is fully recovered, and similarly, may extend such suspension already imposed. (See rules of Article 7)

A Boxer who suffers a TKO shall, within twenty four (24) hours, be thoroughly examined by a physician approved by the Boxing Commission

.ARTICLE 5

All medical reports submitted to the Commission relative to the physical examination or condition of boxers shall be considered confidential, and shall be open to

examination only to the Commission or its authorized representative, to the licensed boxer upon his written permission to the Commission or its authorized representative, to the licensed boxer upon his written application to examine said records, or upon the order of a court of competent jurisdiction in an appropriate case.

ARTICLE 6

Any contestant who has lost six (6) consecutive fights, must be automatically suspended and cannot be reenroll until he has submitted to a medical examination of the type specified in (a) above.

ARTICLE 7

The following are conditions for suspension protocol:-

Suspension following Boxing Activity

Both Boxers will follow automatic suspension irrespective of the outcome of the bout:

- a) 9 and over 10 rounds: 30 days
- b) Between 6 and 8 rounds- 21 days
- c) Between 1 and 5 rounds-14 days

Winner Suspension:

In addition to the above, on the advice of the Ringside Physician, the winning Boxer may be required to extend beyond the above if:

- A) The sway test following the bout indicates head trauma
- B) The Ringside Physician deems it necessary

Suspension for TKO-HEAD

TKO-BODY

Suspension for Non-Concussed Injury:-

- Facial Laceration
- ENT Injuries
- Hand Injuries
- Eye Injuries
- Internal

Suspension for KO:

Any boxer who has suffered an actual knockout shall be suspended for a minimum of sixty (delete at least) (60) days and shall forthwith surrender his license card to the Commission. The Boxer must submit to Medical testing as instructed by the Ringside

Physician and cannot be reinstated until he has submitted to a medical examination performed by a Consulting Licensed Physician that includes neurological clearance. The Consulting Licensed Physician will submit to the Commission and the Medical Advisory Committee a letter of clearance (including neurological fitness).

If such a boxer suffers a knockout in his next bout, or within three-(3) month following a previous knockout, he shall be suspended from boxing for a period six (6) months. During the six-(6) months interval he shall refrain from any contact training in the gymnasiums. It shall be the responsibility of the boxer's manager to see that he complies with this rule, and any violation shall result in indefinite suspension of the boxer and/or his manager.

ARTICLE 8

Ringside Officials

All licensed Referees and Judges must have an annual Medical Examination including Blood tests for HIV, Hepatitis B and C.

Will submit an annual Medical Clearance to the WBA Medical Committee. Such examination must be of the same type and thoroughness as is outlined in Section (a). This report will be submitted to the Medical Committee.

Officials shall sign a form confirming that be of sound mind and fit body with full vision, full hearing and use of all extremities.

ARTICLE 9

In the event that a boxer who has suffered a knockout or any severe injury has on such account been treated by his personal physician or has been hospitalized, he or his manager must promptly submit to the Boxing Commission a full report from such physician or hospital. (What commission?)

ARTICLE 10

The Commission shall appoint a panel of three physicians to especially examine any licensed boxer when a question arises as to the physical ability of such licensee to engage in a scheduled match, and the findings of such panel shall be a conclusive determination of such question. Any injury of illness before a scheduled match or while in training for a such match must be fully reported to the Commission within

twenty four (24) hours by the licensee or his licensed manager. In such event the Commission does not request the appointment of such panel, the license must be examine by one approved physician in accordance with he procedure outlined in Section 1, above. (What Commission?)

ARTICLE 11

Each boxer shall be equipped with and use throughout the out a custom made individually fabricated mouth guard.

ARTICLE 12

A portable resuscitator with oxygen equipment and a stretcher shall be available at ringside. An ambulance properly equipped with resuscitation equipment and manned by duly WBA RULES as Adopted at Directorate Meeting in Sofia, Bulgaria 6/11/15 trained personnel to transfer any injured boxer to a hospital that is available at the site of the bout. The injured boxer should be transported to a hospital, which has neurological facilities.

ARTICLE 13

DRUG TESTING – “FAIR” PROGRAM

The administration or use of drugs or stimulants, or physiologic substances in order to increase the performance of the boxer in an artificial and unfair manner, before or during the bout is forbidden. Any fighter who violates this rule shall be disqualified.

Especially forbidden drugs are stimulants, narcotics and their derivatives, psychotropic drugs, anabolic steroids, corticosteroids, diuretics, probenecid, and all other substance determined by the Medical Advising Committee of the World Boxing Association, which shall issue a list of forbidden substances. This list shall be updated periodically by this Committee, and notified to the affiliated Commissions.

a) Champions and the top 3 ranked Boxers have until July 2017 to enroll in the voluntary drug testing program by VADA and will be subject to random, year-round, unannounced testing for performance-enhancing drugs and other prohibited methods.

b) All rated boxers by the WBA are required to enroll in the voluntary drug testing program by VADA by January 2018 and will be subject to random, year-round, unannounced testing for performance-enhancing drugs and other prohibited methods.

ARTICLE 14

APPROVED RINGSIDE CARE

HYDRATION: Consumption of water or an approved (by the Ringside Physician or the presiding Commission) electrolyte drink (in a sealed bottle) are permitted during a bout.

The discretionary use of Vaseline around the eyes shall be permitted; however, the use of Vaseline, grease or any other substance on the arms, legs or body on any of the contenders is forbidden.

APPROVED HEMOSTASTIC AGENTS:- The discretionary use of hemostatic agents such as adrenaline (epinephrine) solution (1/1000), thrombin and avatene are approved for the purpose of controlling bleeding. The ringside physician is authorized to examine, at any moment, the substances being used as hemostatics during the fight.

ARTICLE 15

VADA DRUG TESTING PROTOCOL AT TITLE EVENTS – VADA (attached)