

FISA PARA-ROWING CLASSIFIERS INSTRUCTION MANUAL

The purpose of this manual is to guide FISA Para-Rowing Classifiers in the proper completion of the classification process for all rowers with a physical disability. The purpose of this classification system is to minimize the impact that eligible impairment types have on the outcome of competition. The FISA system of classification aims to place rowers into classes according to how much their impairment impacts on the core determinants of success in rowing.

This manual supports the *2013 FISA Classification Regulations and Bye-Laws*.

FISA PARA-ROWING CLASSIFIERS

A FISA Para-Rowing Classifier is one who has been approved as such by FISA after undergoing the required training for this purpose. There are two types of FISA Classifier:

- (1) FISA Medical Classifier: a medical doctor, doctor of osteopathic medicine, or physiotherapist,
- (2) FISA Technical Classifier: a person with extensive practical knowledge of rowing with experience such as a rowing coach, sport scientist, former rower, physical educator or similarly qualified person.

For both types of FISA Classifier, experience with Para-Rowing is strongly recommended but not a requirement.

The Executive Committee of FISA shall appoint one Head of Classification. The Head of Classification and FISA Para-Rowing Commission will appoint one Chief Classifier for each FISA event as needed. All FISA Classifiers must adhere to the Classifiers Code of Conduct at all times. Please refer to Appendix 1 for the Code of Conduct.

PROCESS FOR CLASSIFYING ROWERS WITH A PHYSICAL DISABILITY

The standard FISA classification process is conducted by a FISA Classification Panel comprised of two FISA Classifiers, one of whom must be a FISA Medical Classifier and one a FISA Technical Classifier

The process involves three parts:

- (1) Bench Test – performed by a FISA Medical Classifier with FISA Technical Classifier in attendance.
- (2) Ergometer Test – performed by a FISA Technical Classifier with FISA Medical Classifier in attendance.
- (3) On Water Observation – performed by both a FISA Medical Classifier and a FISA Technical Classifier and conducted during training and/or competition. Observation should be completed while the rower is aware of being observed and also while not aware. This test is not obligatory, but is recommended where the bench and ergometer tests are inconclusive or additional observations are required in order to make an agreed determination.

PREREQUISITES FOR CLASSIFICATION

Rowers seeking to be classified as a Pararower must present to the Classification Panel:

- A completed *Para-Rowing Classification Application Form*
- A completed *Consent for FISA Para-Rower Classification Form*
- A completed *Declaration of Medical Conditions that may Require Emergency Measures Form*
- A signed letter or documentation from a Medical Physician confirming a clear medical diagnosis of the physical disability, the date of injury, and the functional effect the

injury has on the rower. This must be in English, or be accompanied by an official medical English translation.

- Rowers with a Visual Impairment must provide proof of prior IBSA classification with a sport class, or have their ophthalmologist complete the Visual Qualification Form.

For rowers with a Visual Impairment, the VI Classification Panel will review all paperwork and evaluate rowers using the IBSA Classification regulations and sign where appropriate, indicating the correct sport class. A functional assessment is not required. Classifiers may also check the eyewear to ensure that it eliminates light completely.

FUNCTIONAL CLASSIFICATION PROCESS FOR ROWERS WITH A PHYSICAL DISABILITY

The rower must present ready to be classified in a rowing outfit or at least ready to row.

PART ONE: BENCH TEST

To be completed by a FISA Medical Classifier, with a FISA Technical Classifier present

Materials Required

- Plinth or mat table
- Goniometer
- All forms related to adaptive rowing classification including medical documentation
- Ergometer with sliding seat
- Standard chair (height approximately 45 cm)

Process

- Review required documentation (refer to above) to ensure proper completion.
- Interview rower to ensure all diagnosis information is correct and detailed.
- Assess function to determine whether the rower meets the minimum requirements to compete as a Para-Rower.

Assessment using *Functional Classification Assessment Test*

General:

- This test is to be completed to the standards of manual muscle testing as described in Daniels and Worthingham's *Muscle Testing: Techniques of Manual Examination*, by Helen Hislop and Jacqueline Montgomery, January 2007, Saunders.
- Classifiers will use a 0-5 scale for manual muscle tests and coordination tests and a 0-10 scale for AFROM (Active Functional Range of Motion) tests, as noted on the *Functional Classification Assessment Chart*, a copy of which is part of the application form. The +/- scale will not be used for the purpose of this test.
- If a rower has an amputation, a score of "0" is entered for the affected joint.
- Technical Classifiers shall assist the Medical Classifiers in completion of the forms. Medical Classifiers must ensure that the forms are completed correctly.

1. Assess Active Functional Range of Motion (AFROM)

- Refer to charts on page 20-21 defining the active functional range of motion for each joint. Test Active Range of Motion first, and if there are limits, test Passive Range of Motion. You are documenting functional range of motion, but it is important to assess both to ensure a full understanding of the rower's abilities. Active Functional Range of Motion is documented. Document the flexion and extension score for each joint in the space provided on page 20-21 as well as the total AFROM. If a rower has more than the standard AFROM, place the ">" sign before the number. Then document the functional active score; 0-10 on the assessment chart.

Position for AFROM	
seated	shoulder flexion and extension elbow flexion and extension wrist flexion and extension finger flexion and extension knee extension ankle dorsiflexion ankle plantar flexion
supine	hip flexion knee flexion hip extension

2. Assess Strength/Coordination

- Test muscle strength and document points 0-5 on assessment chart. If a rower has a central nervous system disorder, assess coordination as well and document points 0-5 on assessment chart, and note that coordination was assessed. Total the lower score.
- When assessing coordination, it is important to consider available range of motion, left vs. right symmetry, fluidity of movement, any apparent spasticity. If a rower has bilateral involvement, left vs. right is not as important as consideration of "normal" movement patterns. Consider what type of movement is expected, and what movement patterns are observed. Refer to Test Instructions for Coordination for Rowers with CNS Disorder for more detailed information.

Position for muscle test	
seated	shoulder flexion and extension* elbow flexion and extension* wrist flexion and extension finger flexion and extension knee extension ankle dorsiflexion hip flexion
prone	hip extension knee flexion ankle plantar flexion*

*Ideally, ankle plantar flexion should be tested using a single leg heel raise, but if this is not possible, you may test in the prone position. Shoulder extension and elbow extension shall be assessed in prone if there is any question as to the manual muscle test score.

3. Enter the scores at the appropriate line on *Functional Assessment Chart*, and total them below where indicated.

- All joint motions and strengths must be tested and scores entered. Failure to do so will result in an incomplete and therefore non-valid classification of the rower.
- A rower who meets the minimum disability requirements for Para-Rowing (loss of 10 points in one limb, or 15 points across 2 limbs, a full loss of three fingers in one hand, or a tarsal metatarsal amputation) will be classified as eligible for the LTA sport class, at a minimum, subject to satisfactory completion of the ergometer and (if needed), on-water assessment. Subject to additional testing, this rower may also be eligible for TA and/or the AS class.
- If any rower does not meet the minimum disability, he/she will be deemed as Not Eligible to compete as an adaptive rower, and the classification will end here. If this is the case, one additional assessment of the athlete must be offered at the soonest available time.
- All findings must be documented on the *Para-Rowing Classification Application Form for Physical Disabilities*.

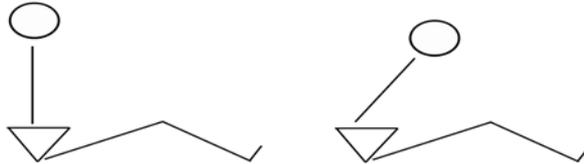
4. 90 degree Squat Test

- The purpose of this test is to assess whether a rower has reasonable functional strength of the quadriceps and other leg muscles to perform the sliding motion in the boat and provide enough power to propel the boat through the water.
- The rower will stand without external assistance. If a rower uses a prosthesis or orthosis, this test should be completed with and without the device.
- The rower will perform a squat, with both or one leg as able, flexing the knee(s) to a 90-degree angle.
- The rower will then return to a full standing position.
- Minimal balance assistance may be given for safety.
- If the rower is able to complete this test, this is considered to be a pass, and his/her place as an LTA-PD rower is likely, subject to assessment on the ergometer and on-water observation.
- If the rower is not able to complete this test, (including a rower in a wheelchair or with significant leg weakness who cannot participate in the test at all) this is considered to be a fail, and he/she may be considered for the TA or AS class. If a rower fails the test, the reason for failing the test must be documented clearly.
- If there is any doubt as to a pass or fail, clearly document the findings as to why the decision was made. This documentation shall support the final decision of the sport class for the rower.
- All findings must be documented on the *Para-Rowing Classification Application Form for Physical Disabilities*.

5. Long Sit Test

- This test is used to assess whether the rower has the ability to lean forward and return to an upright position with enough strength to assist with boat movement through the water.
- If the rower uses a prosthesis or orthosis, this test shall be performed with and without the device.

- The rower shall sit in a long sit position on the plinth with legs as straight as possible.
- The rower shall lean the trunk forward to approximately a 30-45 degree angle without using the arms for support.
- He/she shall hold this position for 3 seconds then return to the upright position without using the arms.
- The rower shall then lean backward to approximately a 30-degree angle at the trunk without using the arms.
- He/she shall hold this position for 3 seconds and then return to upright position without using the arms.



- If the rower is able to do the above tests, repeat while providing minimal resistance.
- If apparent hamstring tightness exists, the rower should repeat the entire test seated on a fixed seat on the ergometer to eliminate the effects of hamstring tightness.
- If the rower is able to complete all of the above, it is considered to be a pass, and he/she will likely be at least in the TA sport class, subject to confirmation in the ergometer test and on-water observation.
- If the rower is not able to complete all of the above, it is considered to be a fail, and he/she may be considered for the AS class, subject to confirmation in the ergometer test and on-water observation. If the rower fails the test, the reason for failing must be documented clearly on the form.
- If there is any doubt as to a pass or fail, clearly document the findings as to why the decision was made. This documentation shall support the final decision of the sport class for the rower.
- All findings must be documented on the *Para-Rowing Classification Application Form for Physical Disabilities*.

PART TWO: ERGOMETER TEST

To be completed by FISA Technical Classifier with a FISA Medical Classifier present

Materials Required

- Ergometer with sliding seat
- Ergometer with fixed seat
- Appropriate strapping to complete test
- Appropriate cushion to prevent tissue breakdown
- Any other necessary equipment for the individual rower
- Tape Measure

The role of the FISA Technical Classifier is to assess the rowing motion when conducted on an ergometer. Such tests should be able to confirm or refute the bench test classification for the LTA-PD, TA or AS Sport Class.

FISA Functional Objectives for each sport class

When assessing rowers in the ergometer test and through on-water observation the classifier/s will have regard to the functional objectives for each of the NE, LTA-PD, TA and AS sport classes as described in the FISA Classification Regulations and Bye Laws. These are as follows:

NE

The NE sport class is for rowers who do not meet the minimum disability required to be eligible to compete as a pararower.

LTA-PD

The LTA-PD class is for rowers with a verifiable and permanent disability who have functional use of their legs, trunk and arms for rowing, and who can utilise the sliding seat to propel the boat.

TA

The TA class is for rowers who have functional use of the trunk movement and who are unable to use the sliding seat to propel the boat because of significantly weakened function or mobility of the lower limbs.

AS

The AS class is for rowers who have no or minimal trunk function. An AS class rower is able to apply force predominantly using the arms and/or shoulders. These rowers will also likely have decreased sitting balance.

Process

- The rower's sitting balance should be assessed prior to carrying out a functional assessment on the ergometer (consider long sit test). If the rower presents with even fair trunk function/sitting balance and leg function then the assessment should be carried out on a standard sliding seat. If the rower's sitting balance is compromised, a postural support seat may be used that is appropriate to the rower's needs. Trunk strapping should not be used immediately.
- If the rower uses a prosthesis or orthosis, the ergometer shall be performed with and without the device. The sport class that is issued will be the more functional sport class.
- The sliding seat step may be eliminated if it is unsafe for the rower to perform, i.e. rower with poor sitting balance, complete paraplegia, or significantly poor leg strength based on medical classification.
- If the rower is not able to complete the above test on the sliding seat as a direct result of their disability, or is not safe to be tested this way, a fixed seat will be added to the ergometer. The classifier should begin to assess the rower performing with the least amount of assistance possible, without a chest strap. The medical classifier must guard the rower to prevent falls.
- The rower will be asked to take enough strokes to represent his/her rowing ability, for example: 5 with arms and shoulders, 5 with arms and trunk, 5 at $\frac{1}{4}$ slide, 5 at $\frac{1}{2}$ slide, 5 at $\frac{3}{4}$ slide and 5 at full slide. At full slide the rower should be asked to increase power to full and stroke rate >30 spm. Classifiers may request more detailed

procedures, i.e. distance rowed over a certain time, average power, etc. Such tests should be able to support, or otherwise, the rower's classification for the LTA-PD, TA or AS sport class having regard to the above functional criteria.

- Assessing rowers with diagnosed central nervous system impairments on the ergometer should begin at low stroke rates and be continued to higher stroke rates similar to that of race rates. Rowers with central nervous system impairments may demonstrate a somewhat fluid, or normal looking stroke performance at low stroke rates, however may not be able to maintain this at higher stroke rates, resulting in decreased coordination of stroke mechanics. Conversely, rowers who demonstrate predominately mild tone impairments and/or athetosis (a symptom of a central nervous system disorder that causes people to have worm-like movements) may perform the cyclical nature of the rowing stroke with more fluidity than anticipated. Ergometer assessment should continue for sufficient time and at high rates to ensure that the classifiers have reviewed typical performance of the rower as would be anticipated during the body of a race. With classifications that pose difficulties, in particular with those new to rowing, review status may be appropriate to allow reclassification following training and/or increased fitness. Remember it may be appropriate to issue the more functional sport class if there is a question involved here.
- Observe the rower from the side, rear, and front for linear motion on ergometer. Check if the rower is able to achieve good compression and obtain 90 degrees of flexion at the knees and trunk against or close to thighs. Allow the rower to row at full-slide for a minimum of 2 minutes if needed to assess rower's ability to maintain power and slide length.
- Observe the rower to see if decreased coordination occurs during the rowing stroke at higher rates with a change in power output and/or reduced slide length.
- Considerations for rowers with diagnosed central nervous system impairment:
 - Observation during (sliding seat) ergometer assessment
 - Classifiers should watch for difficulty in one or both legs in alternating between full flexion (as in compression at the catch) and full extension (as in the finish). This difficulty may be further demonstrated at higher stroke rates as in race rates (>30 spm) due to resulting increased muscle tone (this makes people appear to have spastic movements) with an increased velocity of movement. This may also be seen in a significant decrease in stroke length with increasing stroke rate. Specifically, decreased compression may occur at the catch position due to decreased body swing, decreased knee flexion and ankle dorsiflexion occurring during the recovery. The finish position may demonstrate decreased extension of the legs. These are both a result of the abnormal tone, not of decreased flexibility alone. Decreased coordination between leg drive, body swing and arm pull resulting in decreased fluidity and inability to row at higher stroke rates may also be noted with or without the ability to accomplish the above positions. An inability to maintain reasonably fluid stroke mechanics at higher stroke rates, along with decreased coordination during the slide portion of the stroke would direct classifiers to assess this rower for fixed seat rowing.
 - Observation during fixed seat ergometer assessment

- During the assessment of the TA technique, the rowers' body-swing mechanics may demonstrate an inability to maintain body-swing resulting in decreased length of stroke possibly further seen while rowing at higher stroke rates. Poor dynamic trunk control may also be demonstrated by an inability to maintain trunk movement into extension as arm pull is initiated resulting in trunk movement to the handle rather than the handle being brought to trunk during the drive. Rowers with impaired trunk control may also demonstrate increased use of head movement to create body-swing movement. With very limited contribution of the trunk to the drive this rower would be more appropriate as AS.
- Process for completion of Ergometer Evaluation Table:
 - Description of Rower Sitting Balance – The rower should be sitting upright, legs in extension. This is evaluated after having seen the rower during the medical assessment. This should also be conducted (if safe) on a standard ergometer seat first. If rower's sitting balance too poor, then a postural support seat without restraints shall be used. Evaluate static balance, trunk flexion/extension, and dynamic balance with and without the ergometer handle and observe what is moving – trunk, shoulders, head.
 - Evaluation Sliding Seat – If possible evaluate how the rower performs the rowing technique on the sliding seat. This may be skipped if and only if there is not enough balance, or there is poor muscle strength based on the medical evaluation, and the reason for skipping must be documented. Document the amount of slide that was assessed, how much of the slide the rower was able to maintain during the test.
 - Evaluation Fixed Seat – This is only conducted if the athlete is unable to demonstrate leg function on a sliding seat. This should be completed without any strapping first.
 - Evaluation Strapping – The strapping must be at the appropriate height. What happens to the power output? What happens with the rower's body swing, head control, balance?
 - Test with Prosthesis/Orthosis to Determine Best Functionality of Rower – Document which way shows greater functionality.
 - Rower able to use sliding seat – During the sliding seat test, is the rower able to use his/her legs to propel the boat? With a rower with a CNS disorder, does the slide length change with change in power, or do they become more uncoordinated? Do they improve their power output and slide as would be expected with an able-bodied rower?
 - Rower coordination <30 spm –How does the rower perform the stroke at stroke rates <30 strokes per minute? Consider this over a longer period of time for rowers with CNS involvement.
 - Rower Coordination >30 spm –How does the rower perform the stroke at stroke rates higher than 30 strokes per minute? Does the slide length change? Does their coordination change? Does their power output change? Consider this over a longer period of time for rowers with CNS involvement.
 - Rower Trunk Flexion/Extension – Describe the rower's trunk flexion and extension during the rowing movement. Consider fluidity of movement. Consider range of movement at the trunk. Is the movement coming from the pelvic area, or is it coming from the upper back/shoulder region? Is their movement smooth or jerky?
 - Ability to Maintain Power Throughout Test – If the answer is “no”, documentation must be provided as to WHY power was not maintained during the test.

Likely Conclusions

It is important to always confirm that what is being observed concurs with the medical assessment, or can in some way be attributed to a physical disability. Keep in mind that the rower may not be representing his/her true ability. Also keep in mind that any inadequacies in the ergometer may be due to lack of training, rather than a physical disability appropriate to a particular class.

1. Sliding seat observations (Ask yourself: Do the legs propel the boat?)

- If the rower is able to demonstrate full body swing and utilise at least 50% of the available slide and maintain power over 15-20 strokes, then LTA sport class should be confirmed.
- If the rower demonstrates a significant increase in power when the slide is used then LTA sport class should be confirmed.
- If the rower is able to demonstrate full body swing but is unable to achieve 50% of the slide, or the equivalent compression to that observed in the squat test, (e.g. incapacity to flex one knee) TA sport class should be considered.
- If the rower is able to demonstrate full body swing, and utilize at least 50% of the slide but the power output either drops or increases only marginally over that achieved with the trunk and arms only then TA sport class should be considered.
- In the cases of rowers with CNS impairment an inability to maintain reasonably fluid stroke mechanics at higher stroke rates, along with decreased coordination during the slide portion of the stroke would direct classifiers to assess this rower for fixed seat rowing and consider the TA sport class.

2. Fixed seat observations

- If the rower is able to swing from the hips with the trunk movement away from the backrest of more than 30 degrees **and** maintain the swing over 15-20 strokes **and** do this with enough force to propel the boat, then TA sport class would normally be issued.
- If the rower is unable to swing his/her trunk more than 30 degrees without a strap and maintain it over 10-20 strokes then AS sport class should be considered. If a strap is applied and power output increases, then consider confirming AS sport class.
- If the rower is unable to lean forward from the backrest and return safely without the support of a strap, consider issuing AS sport class.

Detailed documentation of the classifiers' findings is paramount to accurate classification, and should be as complete as possible. The FISA Technical Classifier should record a clear statement on the application form of the rower's functional ability as observed through the ergometer test, having regard to the FISA functional objectives for each sport class as recorded above.

Remember that any time the rower's disability may improve, or their lack of fitness or decreased length of time involved with adaptive rowing may be affecting their classification, they should receive Review Sport Class Status. This will ensure that the rower's status will be reviewed at least once a year. When issuing a Review Sport Class, also include a "Review by" date.

PART THREE: ON-WATER OBSERVATION (not obligatory)

FISA Medical and Technical Classifiers

The medical and technical classifiers will both observe the rower while on the water, while training and/or racing. A translator shall be used to provide instruction to the rower directed by the classifiers. The rower's coach is also encouraged to attend this portion as an observer only. The coach may act as a translator only when another translator is not available.

Materials Needed

- Appropriate boat for rower
- Appropriate rigging for optimum safety that follows the guidelines set out by FISA regarding equipment
- Crew members appropriate to the boat needed for the Sport Class

Objectives

The purpose of on-water observation is to confirm or otherwise that the rower has been placed in the appropriate boat class having regard to FISA's functional objectives for each class.

Process

On-water assessment should be undertaken with consideration given to the water conditions and safety.

The Classifiers may request the rower being classified to perform a range of movements or tests and shall also observe the rower during normal training and racing. The Classifiers shall satisfy themselves as to the correct sport class of the rower concerned. The rower can also be observed at any moment while representing his/her rowing ability. The classifiers shall observe the rower while he/she is aware of being observed, and while he/she is not aware of being observed. If the rower uses a prosthesis or orthosis, this test shall be performed with and without the device.

PART 4: CONCLUSION OF CLASSIFICATION AND COMPLETION OF DOCUMENTATION

Once confirmed with all necessary above tests, the classifiers will jointly determine the "Final Classification" and the recommended sport class and status will be noted on the application form. The application form shall be completed and signed by both classifiers. The classifiers must also print their names legibly. The rower must be informed verbally within two hours of the determination of the sport class and sport class status. The rower must also print and sign his/her name on the form. Both classifiers must agree on the sport class being issued. If after completion of all tests, there is disagreement, the rower shall be issued the more functional sport class and given review status. Remember, if a rower uses a prosthesis or orthosis, that rower shall be assessed with and without the device. Both ways shall be documented, and the more functional sport class will be issued.

An "N" (New) status will be given if the rower is not classified by a FISA International Classification Panel.

A "C" (Confirmed) sport class status will be given if the rower is classified by a FISA International Classification Panel, none of whom are from that rower's country, and the rower's status is not likely to change. The National Federation of a rower whose medical

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status has deteriorated is responsible for requesting a re-classification by submitting the appropriate medical documentation explaining the change in the medical condition. This information shall be submitted to FISA and the Head of Classification.

An "R" (Review) status will be given if the rower is classified by a FISA International Classification Panel and the rower has a progressive disability that may improve, and/or at least one member of the panel is from that rower's country, or there is any question regarding the sport class issued. Review status may also be issued if the rower has a newly diagnosed disability that may change with time. When Review status is issued, be sure to document the "Review By" date on the form. The National Federation is responsible for requesting a re-classification by submitting the appropriate medical documentation explaining the change in the medical condition. This information shall be submitted to FISA and the Head of Classification.

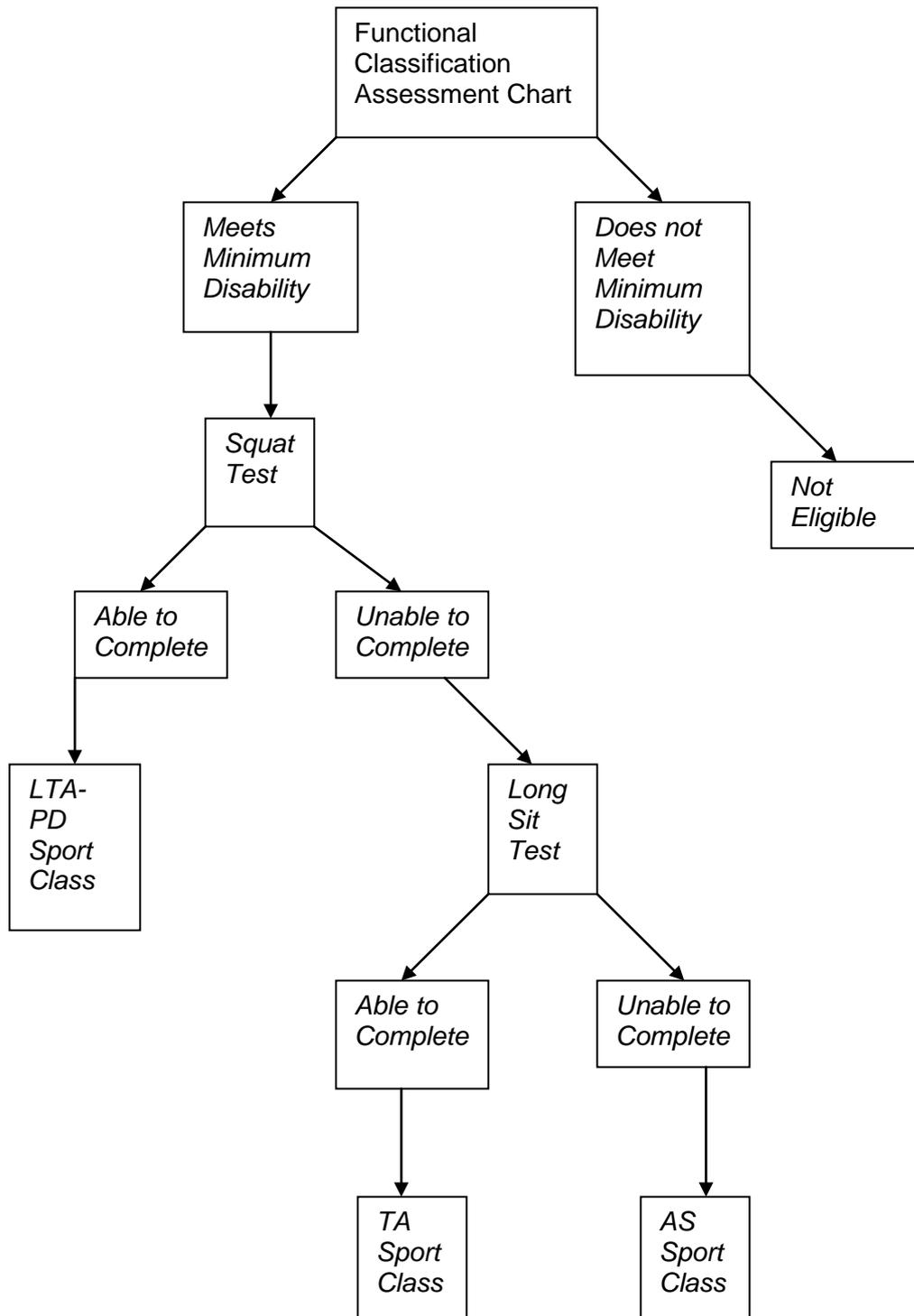
Once complete, all forms are to be forwarded to FISA addressed as follows:

Para-Rowing Classification
FISA, the International Rowing Federation
Maison du Sport International
Avenue de Rhodanie 54
1007 Lausanne
SWITZERLAND
Tel. +41-21-617-8373
Fax +41-21-617-8375

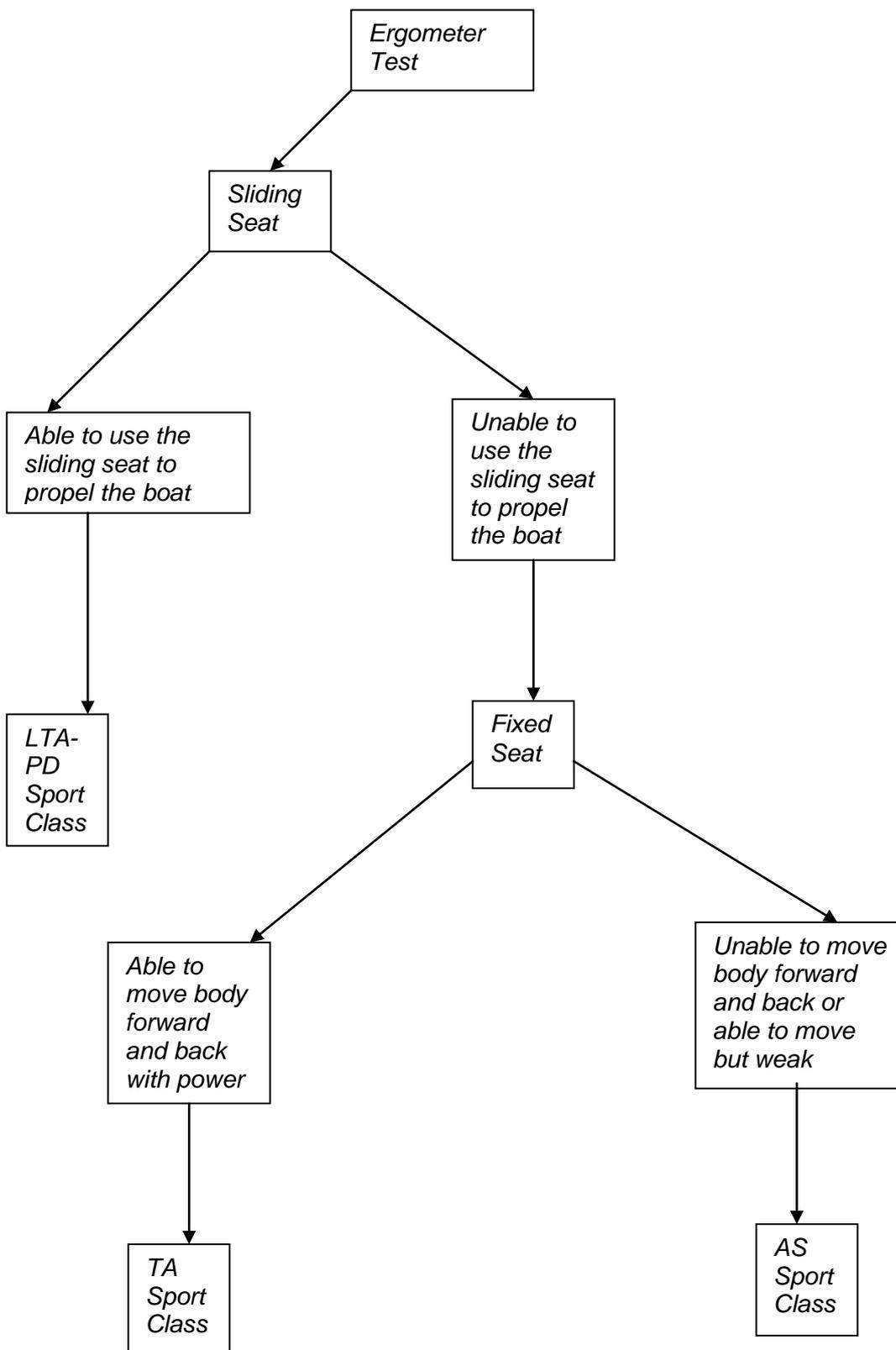
Forms must also be faxed or scanned and sent via email to Daniela.oronova@fisa.org if the rower plans to compete in the World Rowing Championships, International Regatta, Paralympic Qualification Regatta, or Paralympic Regatta, or has been classified as not eligible to compete as a Para-Rower. If the rower plans only to compete in a local or National Competition, the forms should not be forwarded to FISA. Rather, they should be scanned and emailed directly to the FISA Head of Classification at jmorrisonpt@verizon.net.

Copies of all forms should be forwarded to the national federation of the rowers concerned.

FLOWCHART FOR MEDICAL CLASSIFIERS



FLOWCHART FOR TECHNICAL CLASSIFIERS



Appendix 3**TEST INSTRUCTIONS FOR COORDINATION FOR ROWERS WITH CENTRAL NERVOUS SYSTEM DISORDER ONLY**

	Set up	Start position	End position
Finger flexion & extension	Sitting in chair or wheelchair, may be supported at trunk—must feel safe and secure during test	Full finger flexion with palms down	Full finger extension with palms down
Wrist flexion & extension	Sitting in chair or wheelchair, may be supported at trunk—must feel safe and secure during test	Full wrist flexion with palms down	Full wrist extension with palms down
Elbow flexion & extension	Sitting in chair or wheelchair, may be supported at trunk—must feel safe and secure during test	Full elbow extension with palms down, shoulders neutral	Full elbow flexion with palms down, shoulders neutral
Shoulder flexion & extension	Sitting in chair or wheelchair, may be supported at trunk—must feel safe and secure during test	Shoulders flexed to 120 °, elbows flexed	Full shoulder extension, elbows flexed
Knee flexion and & extension	Sitting on plinth or table, may support self with upper extremities—must feel safe and secure during test	Knees at full flexion allowed by plinth	Knees fully extended
Ankle dorsiflexion & plantarflexion	Sitting on plinth or table, may support self with upper extremities—must feel safe and secure during test	Ankles at full plantarflexion	Ankles at full dorsiflexion
Hip flexion & extension	Lower extremity rowing simulation Sitting on chair behind ergometer with feet on sliding seat(s) of 1 or 2 ergometer(s) (no shoes)	Ankles fully dorsiflexed, knees fully flexed, hips flexed to full body compression (simulating catch position)	Ankles plantarflexed, knees extended, hips open (simulating finish position) with or without postural slump

Scoring for coordination is as follows:

Consider symmetry left to right

5= Able to move from start to end positions fluidly and consistently, maintaining full ROM of this movement.

4 = Almost full ROM, with slight spasticity and slight increase in muscle tone and/ or slight coordination problems

3 = Moderate ROM, moderate spasticity, with tone restricting movement and/or moderate coordination problems

2 = Severely restricted ROM, severe spasticity-hypertonic muscle stiffness present and/or severe coordination problems

1 = Very severely restricted ROM due to severe hypertonic muscle stiffness and/or very minimally coordinated movements

0 = No functional movement at all

APPENDIX 4
CODE OF CONDUCT
AUTHORIZED INTERNATIONAL, NATIONAL, AND TRAINEE
CLASSIFIERS

1. Respect the rowers and coaches/teams by
 - i) Showing appropriate awareness of a rower's ability during the classification process and offering assistance only when explicitly asked to do so
 - ii) Respecting the rower's privacy during the classification process and treating their information confidentially
 - iii) Maintaining a courteous attitude during the classification process and officiating of the competition
 - iv) Involving the rower in discussions in matters pertaining to their own classification, technical issues, and explaining the results.
 - v) Handling protests according to the procedures in a fair, non-threatening, and non-arbitrary manner.

2. Respect the rules by
 - i) Precisely following the clearly defined procedures for completing medical and technical classification as set forth by the FISA Para-Rowing Commission
 - ii) Making the procedures clear and transparent to the rower and coaches/team managers
 - iii) Disclosing any relationship with a rower or involvement in a prior classification that may constitute a conflict of interest.

3. Respect the decision making process by
 - i) Treating discussions about a rower's classification as confidential information and refraining from discussing the details of individual rower's classification with any person or national federation.
 - ii) Not criticizing decisions by other classifiers, technical advisors, or FISA officials.
 - iii) Allowing the FISA Chief Classifier to be the spokesperson for final decisions.
 - iv) Recognizing that participants on International Classification Panels are acting for the sport of Rowing and the fairness of the classification process and not for any individual national federation.

CONSENT FOR FISA PARAROWER CLASSIFICATION

Explanation:

For a rower to be eligible to compete in FISA and Paralympic events, the rower must be classified under the FISA Classification guidelines.

Failure to cooperate with or misrepresent him/herself to the Classifiers, or failure to complete the classification procedure may lead to ineligibility to compete in the FISA event, the Paralympic Qualification regatta or the Paralympic Games in addition to any penalties stated in the Classification Regulations and Bye Laws.

The Classification process will be conducted with all due care to limit any discomfort to individual rowers. However, failure to complete the classification process, regardless of pain and/or discomfort, will result in the rower not being classified and therefore not being eligible to compete in FISA or Paralympic events. The rower may withdraw their consent at any time but the process will then not be undertaken and the rower will not be classified and will also not be eligible to compete in FISA or Paralympic events.

By signing this consent form the rower agrees to waive his/her rights to make any claim against the Classifiers, FISA or anyone who might then claim against the Classifiers or FISA, for indemnification for any damages or claims of personal injury or any other claim arising from or in any way related to the classification procedure of the rower. The rower agrees to fully indemnify FISA and the Classifiers should any claim be made against them in any way related to the classification of the rower.

The following is an agreement by the rower, and the rower’s parent/legal guardian where appropriate; consenting that the rower agrees to fully participate in the FISA identified eligibility criteria and classification procedure.

By signing below the rower agrees to complete the test honestly to the best of his/her ability.

I, _____(printed name) of _____(Federation) consent to be classified under the FISA identified eligibility criteria and classification procedure for FISA and Paralympic events.

I _____(printed name of Parent/legal guardian) of _____(printed name of rower) consent to the above on behalf of _____(printed name of rower).

Signature of Rower: _____ Date: _____.

Signature of Guardian: _____ Date: _____.

(Note: Confirmation of guardianship status may be required).

Signature of Witness: _____ Date: _____.

Print witness name and address: _____
_____.

DECLARATION OF MEDICAL CONDITIONS THAT MAY REQUIRE EMERGENCY MEASURES
[Please print all information and complete in English]

Name: _____ National Federation: _____

I, _____, wish to compete in FISA adaptive rowing events.
[PLEASE PRINT FULL NAME]

I understand that FISA requires me to state any known medical conditions that may compromise my safety on the water. I understand that I must state the current management for my condition[s].

(Please print N/A if there are no associated medical conditions)

PERTINENT MEDICAL HISTORY:

Diabetes Heart Disease Cancer Stroke Recent Fracture Asthma Hypertension (high blood pressure)

Autonomic Disreflexia Dehydration Seizures Other _____

Possible Medical Complications:

Steps that must be taken should this arise: _____

Allergies: _____

All medication is as follows: _____

I understand that if I fail to state any known medical conditions and if this condition results in having to perform a rescue, I will automatically be deemed ineligible for the present competition. I also understand that if a condition becomes evident for the first time during competition and is diagnosed at the time, e.g. dehydration, I will still be eligible to compete as long as I observe the recommended management for the condition.

SIGNATURE OF ROWER: _____

SIGNATURE of PARENT/GUARDIAN/WARD [UNDER AGE 18]: _____

SIGNATURE OF WITNESS: _____

PRINTED NAME OF WITNESS: _____

DATE: _____

FISA PARA-ROWING CLASSIFICATION APPLICATION FORM

Please complete in English

Family Name: _____ Federation: _____
Given Name _____ Sex: _____ Date of Birth: (dd/mm/yyyy): _____
Passport Number: _____ Expiry Date: _____

Please attach the following documentation as appropriate to the application:
LTA-VI: diagnostic test documentation (including FISA vision qualification form signed by an ophthalmologist or optometrist).
LTA-PD, TA, AS: Letter from a medical physician with the rower's diagnosis, date of injury, and cause and extent of disability, and other pertinent information, in clear English language.

=====

For Classifier's Use Only

Diagnosis+ Associated Diagnosis+ other Comments:

Visual Impairment: _____ IBSA number: _____ Date of Expiry: _____

Physical Disability:

Amputee _____ since _____

Spinal Level Impaired _____ Complete / Incomplete since _____

Others _____

Documentation of Disability Attached (Mandatory)

Progressive: Yes / No Seizures: Yes / No Asthma: Yes / No

Ability to Walk: Yes / No Crutches/Aids: Yes / No Wheelchair: Yes / No NE

Testing Place & Date: _____ Recommended Class: LTA- _____ TA AS ID

Classifiers' Comment: _____

Length of time rowing as a Para-Rower: _____ Years _____ Months

Para-Rowing Competition Experience: _____ Years **Number of events:** _____

Final Classification: **New** **Review** **Confirmed**

If R (Review) Status, provide reasons: _____

Signature, FISA Classifier (Medical)

Signature, FISA Classifier (Technical)

Signature, Rower

Print Name

Print Name

Print Name

Time Rower informed of Classification: _____

FISA PARA-ROWING FUNCTIONAL CLASSIFICATION ASSESSMENT CHART

Rower Name: _____ **Federation:** _____

Functional Classification Test	Muscle Strength or Coordination (0-5 scale, no +/- scale)		Range of Movement (0-10 scale)	
UPPER LIMBS	Right	Left	Right	Left
Shoulders				
Flexion				
Extension				
Elbows				
Flexion				
Extension				
Wrists				
Flexion				
Extension				
Fingers				
Flexion				
Extension				
TOTAL UPPER: R (80) L (80)				
LOWER LIMBS	Right	Left	Right	Left
Hips				
Flexion				
Extension				
Knees				
Flexion				
Extension				
Ankles				
Flexion (Plantarflexion)				
Extension (Dorsiflexion)				
TOTAL LOWER: R (60) L (60)				

Scales for Muscular strength

Total number of points: /280

- 0 No muscle contraction
- 1 Flicker or trace of contraction
- 2 Active movement with gravity eliminated
- 3 Active movement against gravity through the full range of movement
- 4 Active movement against gravity and resistance through the full range of movement
- 5 Normal power through the full range of movement

Scales for Coordination

- 0 No functional movement at all
- 1 severely restricted ROM due to severe hypertonic muscle stiffness and/or very minimally coordinated movements
- 2 Severely restricted ROM, severe spasticity-hypertonic muscle stiffness present and/or severe coordination problems
- 3 Moderate ROM, moderate spasticity, with tone restricting movement and/or moderate coordination problems
- 4 Almost full ROM, with slight spasticity and slight increase in muscle tone and/ or slight coordination problems
- 5 Able to move from start to end positions fluidly and consistently, maintaining full ROM of this movement

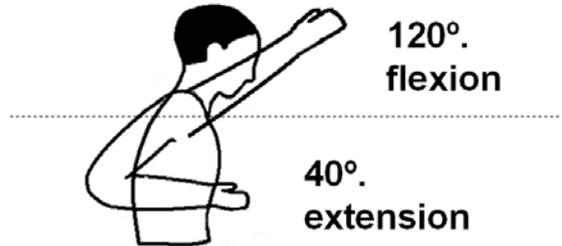
FISA PARA-ROWING FUNCTIONAL CLASSIFICATION ASSESSMENT CHART

Rower Name: _____ **Federation:** _____

Refer to ROM numbers below for completion of this page.

Score scale for Shoulder's AFROM

- 0°-80° = 0 points
- 81°-100° = 2 points
- 101°-120° = 4 points
- 121°-140° = 6 points
- 141°-159° = 8 points
- 160° = 10 points



Rower's Flexion AFROM

R _____ L _____

Rowers Extension AFROM

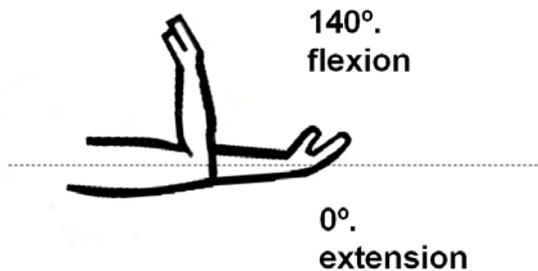
R _____ L _____

Total Shoulder AFROM

R _____ L _____

Score scale for Elbow's AFROM

- 0°-70° = 0 points
- 71°-89° = 2 points
- 90°-107° = 4 points
- 108°-124° = 6 points
- 125°-139° = 8 points
- 140° = 10 points



Rower's Flexion AFROM

R _____ L _____

Rowers Extension AFROM

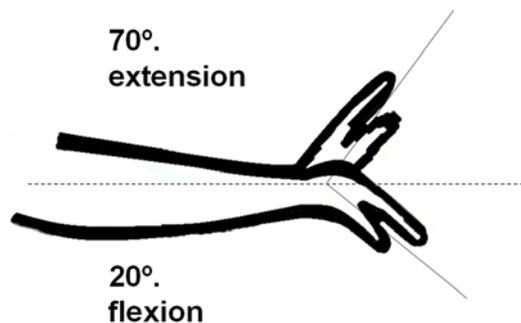
R _____ L _____

Total Elbow AFROM

R _____ L _____

Score scale for Wrist's AFROM

- 0°-45° = 0 points
- 46°-56° = 2 points
- 57°-67° = 4 points
- 68°-78° = 6 points
- 79°-89° = 8 points
- 90° = 10 points



Rower's Flexion AFROM

R _____ L _____

Rowers Extension AFROM

R _____ L _____

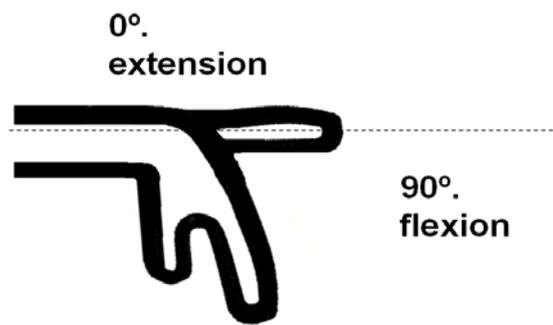
Total Wrist AFROM

R _____ L _____

Rower's Name _____

Score scale for Finger's AFROM

- 0°-45° = 0 points
- 46°-56° = 2 points
- 57°-67° = 4 points
- 68°-78° = 6 points
- 79°-89° = 8 points
- 90° = 10 points



Rower's Flexion AFROM

R _____ L _____

Rowers Extension AFROM

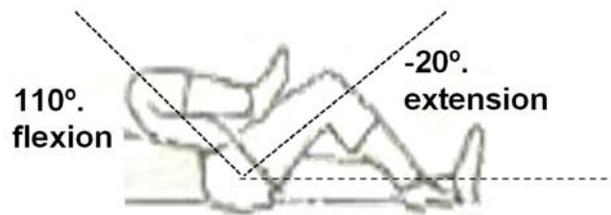
R _____ L _____

Total Finger AFROM

R _____ L _____

Score scale for Hip's AFROM

- 0°-45° = 0 points
- 46°-56° = 2 points
- 57°-67° = 4 points
- 68°-78° = 6 points
- 79°-89° = 8 points
- 90° = 10 points



Rower's Flexion AFROM

R _____ L _____

Rowers Extension AFROM

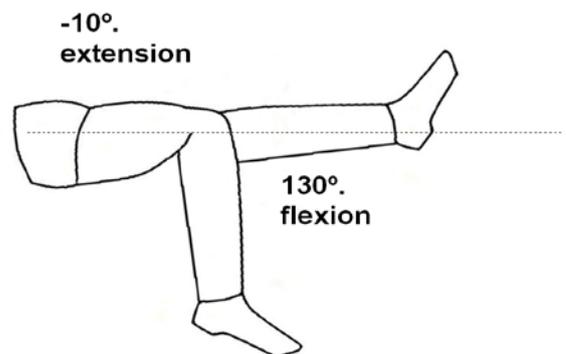
R _____ L _____

Total Hip AFROM

R _____ L _____

Score scale for Knee's AFROM

- 0°-60° = 0 points
- 61°-75° = 2 points
- 76°-90° = 4 points
- 91°-105° = 6 points
- 106°-119° = 8 points
- 120° = 10 points



Rower's Flexion AFROM

R _____ L _____

Rowers Extension AFROM

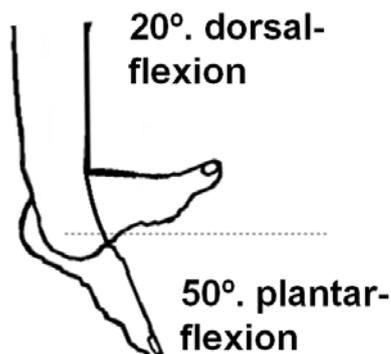
R _____ L _____

Total Knee AFROM

R _____ L _____

Score scale for Ankle's AFROM

- 0°-35° = 0 points
- 36°-43° = 2 points
- 44°-52° = 4 points
- 53°-61° = 6 points
- 62°-69° = 8 points
- 70° = 10 points



Rower's Dorsi Flexion AFROM

R _____ L _____

Rowers Plantar Flexion AFROM

R _____ L _____

Total Ankle AFROM

R _____ L _____

Rower's Name _____ National Federation _____

ERGOMETER TEST AND ON-WATER OBSERVATION

Comments on ergometer test and on-water observation:

(Note: Comments should provide an indication of whether these tests confirm the bench test results and why, and if not, the reason that the ergometer test and/or on-water observation leads the classifiers to confirm a different category).

Protocol	Comments
Describe rower sitting balance	
Evaluation – sliding seat <input type="checkbox"/> Y <input type="checkbox"/> N	
Rower able to use sliding seat <input type="checkbox"/> Y <input type="checkbox"/> N	
Rower coordination < 30 spm	
Rower coordination > 30 spm	
Evaluation - fixed seat <input type="checkbox"/> Y <input type="checkbox"/> N	
Rower trunk flexion / extension	
Evaluation – strapping <input type="checkbox"/> Y <input type="checkbox"/> N	
Test with prosthesis and/or orthosis to determine best functionality of athlete <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A	
Rower able to maintain power throughout test?	
Athlete evaluation time: minutes	
Athlete referred for on-water observation <input type="checkbox"/> Y <input type="checkbox"/> N	
Notes: Was there anything in the medical evaluation that directed your technical evaluation?	

FISA PARA-ROWING

VISION QUALIFICATION FORM

Each visually impaired rower must have this form completed by an Ophthalmologist or Optometrist (as applicable by country). This form is based on the IBSA form and is used to determine the rower's sight classification. It is important to recognise that accuracy of this form is extremely important as the rower's classification is subject to verification by an IBSA Classifier. Supplemental medical documentation should be included.

PERSONAL DETAILS	TO BE COMPLETED BY OPHTHALMOLOGIST			INSTRUCTIONS FOR THE 3-CLASS SYSTEM
Last Name _____	Visual Acuity	With correction:	Without correction:	B1 No light perception in either eye up to light perception but inability to recognise the shape of a hand at any distance or in any direction
First Name _____	RE	_____	_____	
Address _____ _____	LE	_____	_____	B2 From ability to recognise the shape of a hand up to visual acuity of 2/60 and/or visual field of less than 5 Degrees
Nationality _____	Visual Fields (if applicable) - Include copy with application			
Date of Birth Yr ____ Mo ____ Day ____	RE	_____ (degrees)	_____ (degrees)	B3 From visual acuity above 2/60 up to a visual acuity of 6/60 and/or a visual field of more than 5 degrees and less than 20 degrees
Male/Female ___ M ___ F	LE	_____ (degrees)	_____ (degrees)	
Diagnosis _____	Date	Signature of Ophthalmologist or Optometrist		NOTES: 1. All classifications in best eye with best correction 2. Classifications should be done in an ophthalmologic office 3. Finger counting should be done with contrasting background 4. If the classification is based on a visual field defect, the rower must bring a copy of the visual field test. 5. Visual field should be tested with equipment which allows determination in degrees, with a large object.
Extent of Disability _____	Ophthalmologist or Optometrist information:			
Date of Injury _____	Name	_____		
Additional tests	Address	_____		
	Phone	_____		
	Fax	_____		
	Competitor Class	B1	B2	
		B3		

