

# 1. Asian Kickboxing Confederation (WAKO ASIA)

## MEDICAL GUIDELINE

### PRE-COMPETITION MEDICAL EXAMINATION BY NATIONAL FEDERATION/ASSOCIATION MEMBER

1. Each National Federation/Association member is responsible for health of his competitors.
2. Competitors must have the official consent of Doctor of medicine affiliated to NOC: fit to fight. The athletes participating in Kickboxing sports, should provide a medical certification signed by authorized Doctor of medicine affiliated to their country NOC (counter signed by NOC), in which it is stated that prior to leaving his/her country the athlete was in good physical condition and not suffering from any injury, infection or disability label to affect his/her capacity to compete in Kickboxing competition.
3. The authorized Doctor of medicine affiliated to NOC, among all other examination must proceed the following examines:
  - Skin exam : infection, dermatologic disorders, lesions,
  - Head and face: eyes, nose, ears. Special attention to recent trauma! (Summary of Dental examination) Extremities, with special attention to the hands: bones, joints skin and nails
  - Heart examination (very important!) in consent with the Lausanne Recommendation of the IOC to prevent Sudden Death in Athletes. (See attached). (For more information visit website of the IOC)
  - Each Competitor, prior to leaving his/her country, must have the ECG diagnostic heart tests confirming that he/she is qualify for Kickboxing sport participation. (The ECG diagnostic heart tests is valid for period of one year). Lung exam. (Bronchitis, pneumonia):(these are contraindication for all kinds of competition)
  - Exam of abdomen and genitalia(in male): with the special attention to testicle!Neurological examination: facial nerve, index-nose, Romberg etc.  
If one of theses examinations is positive, the athlete is not allowed to compete and can not be declared fit to fight.
4. All necessary examination described above and any other additional examination and all results need to be registered by Doctors of medicine affiliated to NOC conducting the examination and keep in written document.
5. In addition every contestant must have medical examination from the place set by Organizing Committee and must have medical examination and weigh-in before each day of the competition (for Ring Sports).

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## 2. Medical Form

### ASIAN KICKBOXING CONFEDERATION (WAKO ASIA)

#### MEDICAL FORM

NOC Code		NOC Name		<input type="checkbox"/> Passport / <input type="checkbox"/> Identity Card No:	
AD Number	Family Name	Given Name	Korean Characters	Nationality/Citizenship	
Event / Weight category	Pulse(min)	Blood Pressure (mmHg)			
Skin exam	Infection Dermatologic disorders lesions				
Head and Face	Any bruises, scars, swellings or tenderness				
Eyes	Pupils, Right	Cornea Left			
	Distance vision: Right	Distance Vision: Left			
Ears	Hearing Right	Hearing Left			
Throat					
Nose					
Teeth	(summary of dental examination)				
Neck	Is it freely movable and without pain? Evaluation of lymphatic glands & thyroid				
Chest:	Any deformities				
Lungs					
Heart	Rhythm Size				
Extremities	With special attention to the hands: Bones joints skin nails				
Lung exam					
Neurological examination					
Locomotor System	Any scars, tenderness, swellings, muscular atrophy, restrictions or laxity of joints, any deformities of the back of restriction of spinal mobility?				
Nervous System	Any tremors of eyelids, tongue or outstretched fingers?				
Genitalia	Absent or undescended testicle, hydrocele, Varicocele, inguinal or femoral hernia?				

DECLARATION: "I, the undersigned, declare on my honor that I am eligible and fulfil the Conditions stipulated by the Rules of the Asian Kickboxing Confederation"

#### SIGNATURE OF DOCTOR

SIGNATURE AND SEAL OF PRESIDENT OR SECRETARY GENERAL OF NOC	(DD/MM/YY) DATE	SIGNATURE AND SEAL OF PRESIDENT OR SECRETARY GENERAL OF NATIONAL FEDERATION/ASSOCIATION MEMBER	(DD/MM/YY) DATE
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"This form must be typed and must be presented by athletes during Medical examination and weigh-in"

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### 3. Checklist

## Sudden Cardiovascular Death in Sport

### LAUSANNE RECOMMENDATIONS

Under the umbrella IOC Medical Commission

10 December 2004

#### PREPARTICIPATION CARDIOVASCULAR SCREENING

"Sudden death" in sport has to be fully appreciated. The leading cause (more than 90%) of non-traumatic sudden death in athletes is related to pre-existing cardiac abnormality.

For the purpose of this recommendation, sudden cardiovascular death is defined as follows:

Death occurring within one hour of the onset of symptoms in a person without a previously recognised cardiovascular condition that would appear fatal: this excludes cerebrovascular, respiratory, traumatic and drug related causes.

The purpose of this recommendation is to identify, as accurately as possible, athletes at risk in order to advise them accordingly.

Step 1: For all participants at the beginning of competitive activities until age 35 years	Potentially detectable cardiovascular Conditions
<p><b>Personal history:</b> Questionnaire by examining physician</p> <ul style="list-style-type: none"> <li>• Have you ever fainted or passed out when exercising?</li> <li>• Do you ever have chest tightness?</li> <li>• Does running ever cause chest tightness?</li> <li>• Have you ever had chest tightness, cough, wheezing. Which made it difficult for you to perform in sports?</li> <li>• Have you ever been treated / hospitalized for asthma?</li> <li>• Have you ever had a seizure?</li> <li>• Have you ever been told that you have epilepsy?</li> <li>• Have you ever been told to give up sports because of health problems?</li> <li>• Have you ever been told you have high blood pressure?</li> <li>• Have you ever been told you have high cholesterol?</li> <li>• Do you have trouble breathing or do you cough during or after activity?</li> </ul>	<p>Any cardiovascular Condition</p>

<ul style="list-style-type: none"> <li>• Have you ever been dizzy during or after exercise?</li> <li>• Have you ever had chest pain during or after exercise?</li> <li>• Do you have or have you ever had racing of your heart or skipped heartbeats?</li> <li>• Do you get tired more quickly than your friends do during exercise?</li> <li>• Have you ever been told you have a heart murmur?</li> <li>• Have you ever been told you have a heart arrhythmia?</li> <li>• Do you have any other history of heart problems?</li> <li>• Have you had a severe viral infection (for example myocarditis or mononucleosis) within the last month?</li> <li>• Have you ever been told you had rheumatic fever?</li> <li>• Do you have any allergies?</li> <li>• Are you taking any medications at the present time?</li> <li>• Have you routinely taken any medication in the past two years?</li> </ul>	
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The recommended investigations should be repeated at least every second year.

<b>Step 1: For all participants at the beginning of competitive activities until age 35 years</b>	<b>Potentially detectable cardiovascular Conditions</b>
<p><b>Family history:</b> Questionnaire by examining physician</p> <p>Has anyone in your family less than 50 years old:</p> <ul style="list-style-type: none"> <li>• Died suddenly and unexpectedly?</li> <li>• Been treated for recurrent fainting?</li> <li>• Had unexplained seizure problems?</li> <li>• Had unexplained drowning while swimming?</li> <li>• Had unexplained car accident?</li> <li>• Had heart transplantation?</li> <li>• Had pacemaker or defibrillator implanted?</li> <li>• Been treated for irregular heart beat?</li> <li>• Had heart surgery?</li> </ul> <p>Has anyone in your family experienced sudden infant death(cot death)?</p> <p>Has anyone in your family been told they have Marfan syndrome?</p>	<p>Inherited cardiomyopathy such as hypertrophic, arrhythmogenic RV, dilated</p> <p>Inherited heart rhythm problem such as cardiac ion channel diseases(long and short QT syndrome, Brugada syndrome, Lenégre disease, catecholaminergic polymorphic VT)</p> <p>Connective tissue disorders</p>
<p><b>Physical examination:</b></p> <p>General:</p> <ul style="list-style-type: none"> <li>-Radial and femoral pulses</li> <li>-Marfan stigmata</li> </ul> <p>Cardiac auscultation:</p> <ul style="list-style-type: none"> <li>-Rate / rhythm</li> </ul>	

-Murmur: systolic / diastolic -Systolic click Blood pressure	
<b>Diagnostic tests:</b>  12-lead rest ECG: (after the onset of puberty)	Rhythm, conduction or repolarization abnormalities

The recommended investigations should be repeated at least every second year.

**Step 2 :** Selected cases with positive personal history, family history of potentially inherited cardiac disease, or positive physical or ECG findings in Step 1 require further evaluation by an age-appropriate cardiac specialist to qualify the athlete for sport participation.

Further evaluation may include trans-thoracic echocardiography, maximal exercise testing, and 24-hour ECG monitoring. Additionally non-invasive screening of family members may provide valuable information about inherited cardiovascular disease.

Prior to the test, the athlete and, for minors, his/her legal representatives are entitled to receive the proper information on the nature and objectives of the test, and on the medical consequences in case of positive results, in particular the need for further investigation, as well as the preventive and therapeutic measures. The athlete and his/her legal representatives should also be informed on the financing of the test and the medical follow up.

Special care should be taken to protect the privacy of the athlete. The results should be transmitted solely to the athlete and his/her legal representatives.

## 4. MINIMUM EXAMS AND INSTRUMENTALS ASCERTAINMENTS FOR THE RELEASE OF MEDICAL CERTIFICATE FOR KICKBOXING DISCIPLINES

### Ring disciplines:

#### Mandatory:

- Medical history
- Complete physical exam, included, but not limited to, cardiovascular system (heart auscultation, blood pressure, pulses)
- Rest electrocardiogram

#### Optional (recommended):

- Stress electrocardiogram (mandatory from 2023)
- Eye exam included a dilated ophthalmological examination of fundus oculi, administered by a licensed ophthalmologist (mandatory from 2023)
- Neurological exam administered by a licensed neurologist or neurosurgeon
- Blood Work (for Kickboxers aged 18 and older): HIV, Hepatitis B Surface Antigen, Hepatitis C Antigen (mandatory from 2023)

### Tatami disciplines:

#### Mandatory:

- Medical history
- Complete physical exam, included, but not limited to, cardiovascular system (heart auscultation, blood pressure, pulses)
- Rest electrocardiogram

#### Optional (recommended):

- Stress electrocardiogram for Kickboxers aged 35 or more In Master class (veteran) competitors it is mandatory to reach a heart rate than 90% of their theoretical maximum (220 minus age in years) (mandatory from 2023 - independently from age)

### Forms:

#### Mandatory:

- Medical history
- Complete physical exam, included, but not limited to, cardiovascular system (heart auscultation, blood pressure, pulses)
- Rest electrocardiogram

#### Optional (recommended):

- No more tests are suggested

These are the minimum requirements for the release of a Medical Certificate for Kickboxing disciplines. It can be implemented case by case, following National laws and National Federation's Medical Rules.

The maximum length validity for a **Medical Certificate**, independently from the Kickboxing disciplines is **one (1) year**.