Classification System of Para-sports

순천향의대 재활의학과 박 지 웅

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- Classification is simply a structure for competition
 - Same as wrestling, boxing and weightlifting,
 - Athletes with disabilities are grouped in classes defined by the degree of function presented by the disability

BRANDON MORENO FLYWEIGHT (56.82kg)

FRANCIS NGANNOU HEAVYWEIGHT (113.64 kg)











Cornerstone of Paralympic Movement
 "To enable Para-Athletes to achieve sporting excellence and inspire and excite the world."

Based on Sportsmanship

"Behaviour in sport that is fair and shows respect to the other players." (Cambridge Dictionary)



Two goals,

- Defines who is eligible to compete in Para-sport and consequently has the opportunity to reach the goal of becoming a Paralympic Athlete
- Groups Athletes into Sport Classes which aim to ensure that the impact of Impairment is minimized, and sporting excellence determines which Athlete or team is ultimately victorious

Not only key for elite sport but also necessary for promoting grassroots participation in Para sports for people with an impairment!



- Classification processes
 - Physical and technical assessment
 - Observation in and out of competition
- Classifiers
 - Individuals to conduct the process of classification
- Since the 1960's, classification systems continue to evol ve to the present day.



WHO IS CLASSIFIER?

- International Standard for Classifier Personnel and Training (Sep. 2016)
- Certification
 - An International Sport Federation (IF) must assess that a Classifier has met the specific Classifier Competencies required to obtain and maintain certification or licensure.
- Entry Criteria
 - Standards set by an International Sport Federation
 - As expertise or experience levels,
 - May include 1) former Athletes or coaches, 2) sports scientists, 3) physical educators, and 4) medical professionals
 - Qualifications and abilities relevant to conduct all, or specific parts of, Athlete Evaluation
 - Vary depending on the sport (e.g., ParaVolley, medical doctor, physical therapist)



INTERNATIONAL CLASSIFIER EDUCATION AND TRAINING PATHWAY MATRIX

Pre-requisites

LEVEL 3 International Classifier

May be a Chief Classifier or International Classifier in any World
ParaVolley controlled events

NOMINATED BY HEAD OF CLASSIFICATION COMMISSION & APPOINTED TO THESE EVENTS BY WORLD PARAVOLLEY MEDICAL DIRECTOR

Attend minimum 2 WPV Zonal Level events as a Level 2 classifier panel members provide evaluation and feedback at each event Minimum 2 years since certified Level 1 Excellent written and spoken English Excellent interpersonal skills

LEVEL 2 Classifier

May be appointed as a Classifier in Zonal controlled events with some restrictions

NOMINATED BY ZONE, APPROVED BY WORLD PARAVOLLEY HEAD OF CLASSIFICATION & APPOINTED BY WORLD PARAVOLLEY MEDICAL DIRECTOR

Written and spoken English competence
Identified by level 1 Educator as potential Level 2
NOT part of Health Care Team for national program for min 2 years
Classify locally for min 6 months since Level 1 attained
Complete logbook (min 5 non amputee cases) and submit to Zonal HoC

LEVEL 1 Classifier

May be a Classifier in National events

APPOINTED TO THESE EVENTS BY NATIONAL FEDERATION/NPC WITH NOTIFICATION TO ZONE HEAD OF CLASSIFICATION

Medical Doctor or Physiotherapist (Qualified Athletes must be retired from WPV Masterlist x 4 years)

WORLD PARAVOLLEY CLASSIFIER TRAINING



Level 2 Classification Course (on line)





HISTORY OF CLASSIFICATION

- CP-ISRA (Cerebral Palsy International Sports & Recreation Association)
- **IWAS-ISMWSF/ISOD** (The International Wheelchair & Amputee Sports Federation-International Stoke Mandeville Wheelchair Sports Federation / International Sports Organization for the Disabled)
- IWAS international governing body (IF) for the paralympic programme sports of Wheelchair Fencing and Wheelchair Rugby as well as Lawn Bowls and Electric Wheelchair Hockey
- IBSA (International Blind Sport Federation)
 CISS (Comité International des Sports des Sourds)
 INAS-FID (International Sports Federation for Persons with Intellectual Disability)



IPC OPERATIONAL STRUCTURE

IPC General Structure

General Assembly

Governing Board

Standing Committees

International
Sports
Federation (IF's)

National
Paralympic
Committees
(NPC's)

International
Organizations of
Sport for the
Disabled (IOSD's)

Regional
Organizations
(RO's)

Management Team Sport Technical Committees

IOSD Sports*

World Para Sports* **IPC Regions**



IPC Classification Code and IS

- <u>Initially</u>, Medical classification based on 'medical evaluation'
- 1980~90, Functional classification focused on 'sport performance'
- <u>2003</u>, IPC Governing Board approved a 'classification strategy'
- <u>2007</u>, Firstly, released IPC classification code & IS
- 2017, Revised IPC classification code & IS
- Focuses on the development of two primary elements:
 - The Classification Code ("the Code")
 - International Standards (IS) to supplement the Classification Code



PARALYMPIC SPORTS (28)

Summer Sports (22)		Winter Sports (6)
Archery Athletics Badminton Boccia Canoe Cycling Equestrian Football 5-a-side Goalball Judo	Rowing Shooting Para sport Sitting volleyball Swimming Table tennis Taekwondo (new 2020) Triathlon Wheelchair basketball Wheelchair fencing Wheelchair rugby	Alpine skiing Biathlon Cross-country skiing Para ice hockey Snowboard (new 2014) Wheelchair curling
<u>Powerlifting</u>	Wheelchair tennis	



Classification Code (Table of Contents)

- 1. Scope and application
- Definition and purpose of Classification in Para-sport
- 3. Classification Personnel
- 4. Athlete Evaluation, Sport Class and Sport Class allocation
- 5. Protests and Appeals
- 6. Intentional Misrepresentation
- 7. Intelligence gathering and investigations

- 8. Data storage and data protection
- 9. Classification Master List
- 10. Education and research
- 11. Changes to Classification Systems
- 12. Governance, roles and responsibilities
- 13. Implementation, Compliance and modifications
- 14. Interpretation of the Code



International Standards (IS)

The Code is complemented by International Standards that provide the technical and operational requirements for classification. Adherence to the International Standards is mandatory for compliance with the Code.

- 1. Eligible Impairments (적격장애)
- 2. Athlete Evaluation (선수평가)
- 3. Protests and Appeals (소청과 항소)
- 4. Classifier Personnel and Training (등급분류사 인력 및 교육)
- 5. Classification Data Protection (등급분류의 자료에 대한 보호)



Athlete Evaluation

HOW DOES CLASSIFICATION WORK?



Athlete Evaluation

- Classification is carried out through a process called "Athlete Evaluation" that comprise procedures for the assessment of athletes and the allocation of Sport Class and Sport Class Status.
- Athlete Evaluation answers three fundamental questions:
- 1. Does the athlete have an Eligible Impairment for this sport?
- 2. Does the athlete's Eligible Impairment meet the Minimum Impairment Criteria of the sport?
- 3. Which Sport Class should the athlete be allocated in based on the extent to which the athlete is able to execute the specific tasks and activities fundamental to the sport?



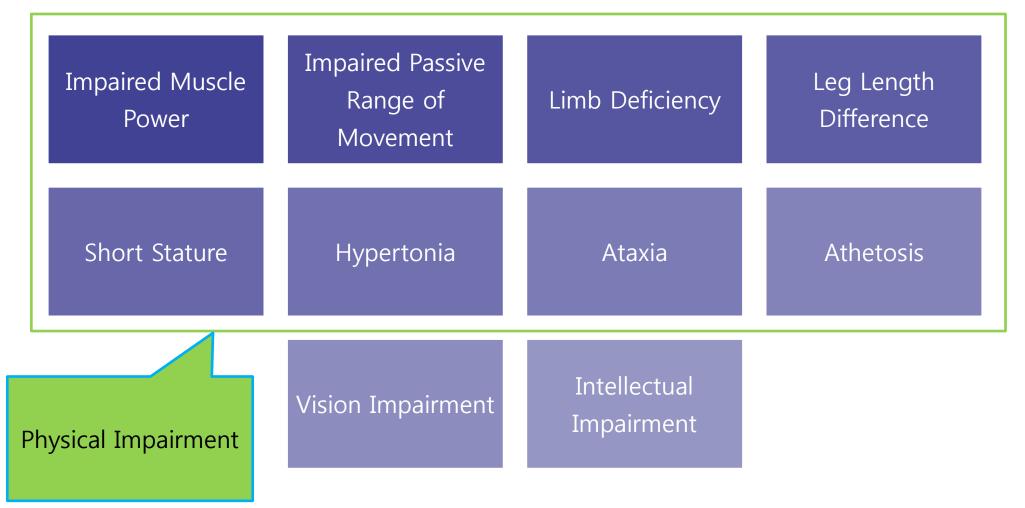
FIRST STEP: Eligible Impairment

 Any athlete wishing to participate in Para sport competition must have an Underlying Health Condition that leads to a permanent Eligible Impairment.

• The Paralympic Movement offers sport opportunities for athletes that have an impairment that belongs to one of ten Eligible Impairment types.



Ten Impairment Types





PARA ATHLETICS, PARA SWIMMING?

Impaired Muscle Power Impaired Passive
Range of
Movement

Limb Deficiency

Leg Length
Difference

Short Stature

Hypertonia

Ataxia

Athetosis

Vision Impairment

Intellectual Impairment



GOALBALL, FOOTBALL 5-A-SIDE, JUDO ?

Impaired Muscle Power Impaired Passive
Range of
Movement

Limb Deficiency

Leg Length Difference

Short Stature

Hypertonia

Ataxia

Athetosis

Vision Impairment

Intellectual Impairment



WHEELCHAIR FENCING, WHEELCHAIR RUGBY?

Impaired Muscle Power Impaired Passive
Range of
Movement

Limb Deficiency

Leg Length Difference

Short Stature

Hypertonia

Ataxia

Athetosis

Vision Impairment

Intellectual Impairment



SECOND STEP: Minimum Impairment Criteria for a sport

- Based on impact of impairments on the sport's activities, how severe an Eligible Impairment must be for an athlete to be considered eligible to compete. (Example)
 - A maximum height defined for athletes with short stature
 - Level of amputation defined for athletes with limb deficiency
- Specific for each sport



- The type and number of sport classes vary depending on the sports
- Only one Sport Class
 - Para ice hockey or Para powerlifting
- Over 50 Sport Classes in Para athletics
 - Different disciplines (running, jumping, throwing events)
 - All 10 Eligible Impairments





Ex) SITTING VOLLEYBALL

- SPORT CLASSES: VS1 and VS2
 - Sport class VS2 is generally less severe than the VS1.
- SPORT-TECHNICAL RULES
 - There can be two athletes with sport class VS2 on the team.
 - One VS2 athlete on the court at a time.
 - The other five athletes must have sport class VS1.



Impaired muscle power	✓	Involuntary movements	✓
Impaired passive range of movement	√	Muscle tension	✓
Limb deficiency	√	Uncoordinated movements	✓
Leg length difference	√	Short stature	
Intellectual impairment		Vision Impairment	



- Similar activity limitation together for competition
- Not necessarily same Eligible Impairment
- In athletics wheelchair racing events,
 - Athletes with paraplegia and leg amputations racing together





- Multi-staged process
 - Physical and technical assessments
 - Observation in Competition
- Repeated classification
 - Progressive nature of some impairments
 - Changes in medical condition
- Minimum of two classifiers
 - Classifiers are trained experts physicians, physiotherapists, coaches, sport scientists, psychologists, ophthalmologist



- Sport Class Status
 - N = New (no international classification before)
 - R = Reviewed (under review)
 - C = Confirmed (permanently classified)
 - FRD = Fixed Review Date (FRD)
- Not Eligible (NE) a kind of classification status



SITTING VOLLEYBALL CLASSIFICATION CHART

Amputation Upper limbUnilateral Amputation of any 4 digits (thumb or fingers)amputation of all five digits (4 fingers and a thumb) at MCP joints on one hand or more proximal amputationAmputation Upper limbBilateral amputation of thumbsamputation of eight digits across both handsBilateral amputation of index and long fingersamputation of first three digits across both handsBilateral amputation of thumbs and index fingersamputation of first three digits across both handsAmputation Upper and lower limbCombination of amputations in upper and lower limbs - 더 심하고 핵심동작에 중한 것을 선택Amputation Lower limb amputations at or more proximal than Equivalent congenital limb deficiencyAll lower limb amputations at or more proximal than Through ankle (no calcaneum)	putation	
Amputation Upper limb (index and long) at MCP joint Bilateral amputation of thumbs Bilateral amputation of index and long fingers Bilateral amputation of thumbs and index fingers Amputation Upper and lower limb Combination of amputations in upper and lower limbs - 더 심하고 핵심동작에 중한 것을 선택 Complete unilateral or bilateral Listranc amputation Amputation I ower limb Amputation I ower limb Amputation I ower limb	putation	
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Bilateral amputation of index and long fingers Bilateral amputation of thumbs and index fingers Amputation Upper and lower limb Combination of amputations in upper and lower limbs - 더 심하고 핵심동작에 중한 것을 선택 Amputation Lower limb Complete unilateral or bilateral Lisfranc amputation Amputation Lower limb Amputation Lower limb Amputation Lower limb	•	
Amputation Lower limb Combination of amputations in upper and lower limbs - 더 심하고 핵심동작에 중한 것을 선택 Amputation Lower limb Complete unilateral or bilateral Lisfranc amputation Amputation Lower limb Amputation Lower limb	•	
Amoutation Lower limb Complete unilateral or bilateral Lisfranc amputation All lower limb amoutations at or more proximal than Amoutation	•	
Amnutation Lower limb		
Amputation Lower IImb Equivalent congenital limb deficiency Through ankle (no calcaneum)		
1	Amputation	
Upper Limb Dysmelia 25% ~ 32% shortening [Dysmelia] 33%~ shortening [Dysmelia] Limb ler	b length difference	
Shortening Lower Limb 7 - 32% Limb ler	b length difference	
Loss of muscle points ONE upper limb Combined loss of 15 muscle points (15~24) (max 70) Impaired Loss of 25 or more;	paired muscle power	
Loss of 3 muscle points in shoulder flexion (muscle grade 0~2) Loss of 20 or more muscle points is in the shoulder [
Loss of muscle points BOTH lower limb 7~15 muscle point loss in one or both lower limbs (max 80) Impaired in one or both lower limbs	Impaired muscle power	
ROM shoulder one side# Shoulder abduction or flexion ≤ 90° available in the range between 0° and 90° abduction or flexion. Impaired	paired passive ROM	
ROM elbow one side## Elbow extension deficit of ≥ 45° Stiffness in 90 degrees flexion or more Impaired	paired passive ROM	
ROM wrist one side### Wrist ankylosed in any position Wrist stiff (ankylosed) in position between neutral to Impaired	paired passive ROM	
(stiff or <5 degree arc of motion) in any position full extension (dorsiflexion) (≤ 5° arc of movement		
ROM fingers one side### Fingers on one hand stiff/afunctional Impaired	paired passive ROM	
ROM hip one side* Hip flexion deficit of ≥ 30 degrees Stiff in any position Impaired	paired passive ROM	
ROM knee one side** Maximum knee flexion is between 45-90 degrees measured from full extension (0 degree) Maximum knee flexion is less than 45 degrees measured from full extension (0 degree) or Stiff in	paired passive ROM	
Stiff (ankylosed) ankle	paired passive ROM	
	sticity / athetosis	



Classification Master List

- Athlete's name, country, Sport Class and Sport Class Status
- Should identify athletes that enter international competitions

ATHN	ID	NAME	FIRSTNAME	BIRTHDATE	COUNTRYC	GENDER	STATUS	CLASST
0000008959	AT-ALB-1-	GJONCA	Acim		ALB	M	PPS	54
0000009290	AT-ALG-2-20121971	BOUDELMI	Fatima	1971-12-20	ALG	F	NPS	53
0000007579	AT-ALG-2-23111971	FOUDIL	Ghania	1971-11-23	ALG	F	PPS	53
0000009340	AT-ALG-2-28071969	TABBENI	Fetiha	1969-07-28	ALG	F	NPS	54
0000009347	7 AT-ALG-2-11051983	KHIAT	Halima	1983-05-11	ALG	F	NPS	54
0000009348	3 AT-ALG-2-29101988	SAIFI	Nacima	1988-10-29	ALG	F	PPS	54
3439	AT-ALG-2-04061981	AZZOUZ	Samia	1981-06-04	ALG	F	PRS	54
3513		SAMIA	Azzouz		ALG	F		54
0000008960	AT-ALG-1-	ABI	Omar		ALG	M	PPS	52
0000009291	I AT-ALG-1-04061986	MEGUEDDEM	Abdelkarim	1986-06-04	ALG	M	NPS	54
0000009292	2 AT-ALG-1-28041967	SALHI	Sihem	1967-04-28	ALG	M	NPS	54
0000009353	3 AT-ALG-1-05071983	OUCHENE	Mohamed	1983-07-05	ALG	M	NPS	54
0000009357	7 AT-ALG-1-15111969	OUGOUR	Kheireddine	1969-11-15	ALG	M	NPS	54
0000008961	I AT-ALG-1-	CHOUARI	Kamel		ALG	M	PPS	54
0000008962	2 AT-ALG-1-	DJEBILI	Sid Ali		ALG	M	PPS	54
0000008963	3 AT-ALG-1-	FREDJ	Karim		ALG	M	PPS	54
0000008964	I AT-ALG-1-	TAOUTAOU	Mohammed		ALG	M	PPS	54
0000008965	AT-ALG-1-	YOUSEI	Abdelkrim		ALG	M	PPS	54
2226	AT-ALG-1-04041983	MAAMAR	Rachif	1983-04-04	ALG	M	PRS	54
0000007611	I	BOUADDA	Mohamed		ALG	M		54
0000008966	S AT-ARG-2-	CHIODI	Ana		ARG	F	PPS	54
0000008968	3 AT-ARG-2-	GRELO	Beatrice		ARG	F	PPS	54
4704	AT-ARG-1-28121961	BASCIONI	Horacio	1961-12-28	ARG	M	PPS	52
0000008969	AT-ARG-1-	HAYLAN	Daniel		ARG	M	PPS	52
0000008970	AT-ARG-1-	MARINO	Leonardo		ARG	M	PPS	52
2036		GOMEZ	Walter		ARG	M		53
2147		TRABUCO	Sergio		ARG	M		53
2150		JIMENEZ-HER	Jorge		ARG	M		53
2181	AT-ARG-1-07031977	MALDONADO	Alejandro	1977-03-07	ARG	M	PPS	54
2514	AT-ARG-1-	SILVA	Pablo		ARG	M	PPS	54
0000008971	I AT-ARG-1-	MARTINEZ	Jose Luis		ARG	M	PPS	54
0000008972	2 AT-ARG-1-	URBANO	Anibal		ARG	М	PPS	54



What is a Protest?

- IPC Code Definition:
 - A protest is the procedure by which a reasoned objection to an Athlete's Sport Class is submitted and subsequently resolved.
- A protest relates to errors or omissions in the process of classification evaluation that:
 - the protesting nation believes has resulted in an incorrect sport class, OR
 - WPV believes may have resulted in incorrect sport class allocation



Who can Protest?

- A Protest may only be made by one of the following bodies:
 - a National Body (only in relation to their own athlete) or
 - World ParaVolley
- Protest Rules
 - IPC International Standard for Protests and Appeals (2017)
 - 'O' Athlete's Sport Class
 - 'X' Athlete's Sport Class Status
 - Not in Sport Class Not Eligible



What is an Appeal?

- According to the IPC:
 - An Appeal is the process by which a formal objection to how Athlete Evaluation and/or Classification procedures have been conducted is submitted and subsequently resolved.
 - An appeal is the means by which a complaint that an International Sport Federation has made an unfair decision during the Classification process is resolved.
 - Whether or not a decision is unfair is determined by an Appeal Panel, and this panel sits separately from the classification Commission



Who can Appeal?

- An Appeal may only be made by one of the following bodies:
 - a National Body; or
 - a National Paralympic Committee

- Judicial Commission CANNOT make a determination about the sport class and sport class status of an athlete.
- It CAN require the Classification Evaluation to be repeated with any procedural errors or omissions corrected

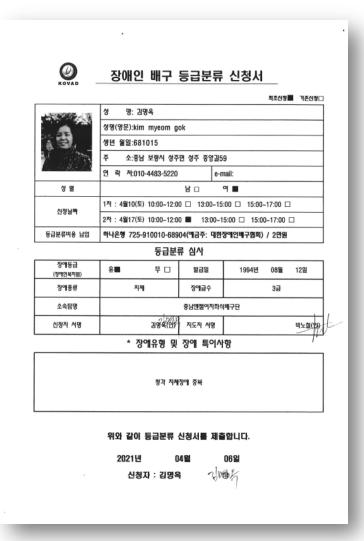


M.O.K. (F/53)

A CASE OF CLASSIFICATION



- Current diagnosis
 - Lt L/Ext weakness and shortening
 - Osteomyelitis of Lt femur and pelvis,
 - S/P Total hip replacement





Overview of Case

Personal Details

Family Name: K**

Given Name: M**** O*

Date of birth: Oct 15th 1968

Place of classification: Cheonan Sports Rehabilitation Center

Date of classification: APR 17 2021

Sports History

- Sports Class: VS1 (New) for sitting volleyball
- Classifiers:
 - 1) Ji Woong Park, M.D. (Level 1 national/regional classifier)
 - 2) Chang Ryeol Lee, PT (Level 1 national/regional classifier)
- Previous Sport Class: none
- Previous Sports Hx: none

Chief Complaints

- Lt. leg weakness and shortening
- Impaired PROM of Lt. hip joint
- Gait disturbance

장애인 좌식배구 등급분류서 (협회제출용) ↩ 대한민국↩ 성(영문) 이름(영문) Myoeng Ok₽ 생년월일﴿ 968년 10월 15일 충남 보령시 성주면 성주 010-4438-52204 2021년 4월 17일 천안장애인종합체육관 등급분류 심사 장 애 등 급↔ 유 V 무 □↩ 발 급 일↩ 1994년 8월 12일4 장 애 종 류↩ (지체)장애↩ 장애 급수↩ 충남엔젤여자좌식배구단리 소속팀명(주소) 지도자 서명↩ 신청자 서명4 김명옥 (인)↩ 박노철 (인)↵ 등급 분류 판정 결과 🛎 Sport Class VS 2 □ VS 1 V∂ Not Eligible □@ R □↩ Sport Class Status₽ Valid Until (if R. N)₽ Equipment used in sport (if any) 심사 내용 Description for the Functional Impairments leg weakness d/t osteomyelitis of femur and pelvis + Hip joint replacement with instability (-I⊬ onset: childhood after adverse effect of injections 2 cm, thigh 41/38 cm 좌식배구 등급분류위원 [서명]

대 한 장 애 인 배 구 협 회~

등급분류위원(Signature, Stamp or Name) 1ster Ji Woong Park MD., PhD. @ 등급분류위원(Signature, Stamp or Name)+



Underlying Health Condition (I)

Past Medical History

- Personal: Right handedness
- Occupation: Housewife
- Premorbidity: Outdoor cane gait d/t Lt. leg weakness
- HTN / DM / hepatitis / Tbc (+/-/-)
- Physical disability classification in S. Korea: Mobility impairment 3 level (Aug 14th 1994)

Current diagnosis

- Lt leg weakness d.t osteomyelitis of femur and pelvis, S/P total hip replacement
- Lt lower limb shortness
- **D. onset:** childhood,**By** adverse effect of injection(?)



Eligible Impairment

Loss of muscle points both lower limbs

Limb Length Difference between right and left legs

 Impaired Passive Range of Movement (PROM) of Lt hip



Functional Test results

Manual muscle testing (MMT)

LOWER LIMBS		Muscular Strength		
	LOWER LIVIDS		Left	
Hip	Flexion	5	2	
	Extension	5	2	
	Abduction	5	2	
	Adduction	5	2	
Knee	Flexion	5	3	
	Extension	5	3	
Ankle	Dorsiflexion	5	4	
	Plantar Flexion	5	4	
Total N	Juscle Points Loss	2	6	

Muscle atrophy

- Thigh circumference (R/L)
 - : $41 \text{cm}/38 \text{cm} \rightarrow 3 \text{cm} \text{ difference}$
- Calf circumference (R/L)
 - : $34 \text{cm}/30 \text{cm} \rightarrow 4 \text{cm} \text{ difference}$
- Electrodiagnostic study (21 APR 2021)
 - Lt. sciatic nerve lesion at or around thigh lesion, peroneal nerve was more involved than tibial nerve, moderate in nature



Electrodiagnostic laboratory Report Joong-Ang Rehab. clinic Dae-cheon dong, Boryung 041-935-9991

Patient: Kim Myeong-Ok Sex: Fernale

Age: 52
Height: cm
Weight: kg
I.D.#: 210422
Ref. M.D.:

Physician: SJ Lee M.D. Test Date: 21/04/22

Motor Ne	erve Study
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Left Peroneal Rec Site: EDB Stim Site	Nerve Lat (ms)
Ankle	NR
Fib.Head	NR

Dur (ms) Area (mVms) Dist (mm) C.V. (m/s)

Left Tibial Nerve Rec Site: AH

Lat (ms) Stim Site Ankle Pop.Fos. 10.6

Dur (ms) Amp (mV) Area (mVms) Dist (mm) C.V. (m/s) 5.0 6.1 11.8 16.3 5.3 370 52.2

Sensory Nerve Study

Left Peroneal Nerve Rec Site: dors.ft

Lat (ms) Stim Site Lower leg NR

Pk Lat (ms) Amp (uV) Dist (mm) C.V. (m/s)

Left Sural Nerve Rec Site: Ankle Stim Site

Pk Lat (ms) Amp (uV)

Dist (mm) C.V. (m/s)

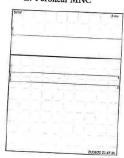
Lat (ms) mid calf 2.0 16.0

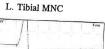
EMG Study

L. Rectus Fem. L. Biceps S.H. L. Tibialis Ant. L. Peroneus Ln. L. Gastroc.Med.H. L. Abd.Hallus L. Fxt Die Br	inc + inc + norm norm	Fibs none none 1 + 1 + none none 1 +	PSW none none 1 + 1 + none none 1 +	Fascics none none none none none none none	Polyph none none inc + inc + none none inc +	MU A norm norm dec dec norm norm	norm norm	Config norm norm poly poly norm norm poly	Pattern norm norm norm norm norm norm	Recruit dec dec dec dec dec dec dec
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page 1 Patient: Kim Myeong-Ok I.D.#: 210422 Test Date: 21/04/22

L. Peroneal MNC







L. Sural SNC



Patient: Kim Myeong-Ok

I.D.#: 210422

Test Date: 21/04/22

Summary/Interpretation: Left sciatic nerve lesion at or around the thigh, moderate in nature.

- more involved of peroneal nerve portion

Functional Test results

Passive Range of Motion (ROM)

LO	WER LIMBS	Range of Motion Left
Нір	Flexion	100
	Extension	0
	Abduction	45
	Adduction	30
Knee	Flexion	135
	Extension	0
Ankle	Dorsiflexion	20
	Plantar Flexion	45

Limb length difference

From the ASIS to the most caudal point of the medial malleolus

- Leg lengths (R/L)
 : 82cm/77cm → 6.1% difference
- Non-eligible [cf. VS2: 7-32%]





Other physical examination

1. Sensory

- Hypesthesia/hypoalgesia (+/+) on Lt anterior calf and foot dorsum
- Anesthesia/analgesia (-/-)
- Paresthesia (-)

2. Spasticity:

- upper 0 / 0
- lower 0 / 0

3. Reflex

- Knee jerk (++/-) Ankle jerk (++/-)
- Hoffman sign (- / -)
- Babinski sign (- / -)
- Ankle clonus (- / -)

4. Functional level

- side rolling: +/+
- come to sit: independent
- sitting balance: G/G
- sit to stand: independent
- standing balance: G/P

5. Gait

Outdoor level cane gait with slight limping

6. Orthosis

Single cane



Observation on court

 Since she was a new player before official registration, court observation could not be performed in the actual game.

 However, she can perform most ParaVolley activities such as, Serving, Digging, Overhead Passing/Setting, Diving, and Moving on court in the sitting position.



Impairment Assessment methods and results

- Loss of Muscle Points both lower limbs (VS1)
 - 1) Manual muscle test (MMT)
 - 26 points loss
 - 2) Muscle atrophy measurements
 - Thigh circumference (R/L): $41 \text{cm}/38 \text{cm} \rightarrow 3 \text{cm}$ difference, Calf circumference (R/L): $34 \text{cm}/30 \text{cm} \rightarrow 4 \text{cm}$ difference
 - 3) Electrodiagnostic study (21 APR 2021)
 - Lt. sciatic nerve lesion at or around thigh lesion, peroneal nerve was more involved than tibial nerve, moderate in nature
- Limb Length Difference between right and left legs (Non-Eligible)
 - 1) Measure leg lengths from the ASIS to the most caudal point of the medial malleolus
 - $82 \text{cm} / 77 \text{cm} \rightarrow 6.1\%$
- Impaired Passive Range of Movement (Non-Eligible)
 - 1) PROM test of Lt hip joint
 - Lt hip flexion 110 degree, Extension 0 degree
 - 2) X-ray imaging test
 - Total hip replacement of Lt hip
 - No definite instrument failure



Rationale for sport class allocation

- Neurological examination, including MMT, and electromyography demonstrated her lower extremity muscle paralysis. And the loss of muscle points was <u>26</u> <u>points</u>, which corresponds to <u>Sport Class VS1</u> for ParaVolley.
- Shortening of the left leg length and impaired passive range of motion were observed, however, the impairment severity was **not** severe enough for **eligible** Sport Class of ParaVolley.



Thank you



