



Combat Sports Legislation in W.A.

Combat sports in Western Australia is regulated by legislation administered by the Combat Sports Commission (CSC). The CSC register combat sport Contestants, enforce health and safety guidelines, issue contest permits and are responsible for enforcing the combat sports regulatory system (*Combat Sports Act 1987, Combat Sports Regulations 2004*).

Certain requirements for Medical Practitioners exist within the combat sports legislation and the CSC recognise the vital and important role that Medical Practitioners play in this regulatory system.

Stages of Medical Practitioner Involvement

The combat sports regulatory system requires Medical Practitioner involvement. The initial contact that a Medical Practitioner may be with a combat sport Contestant, is for the completion of registration paperwork (Fig.1). Contestants are responsible for selecting their own Medical Practitioner during the registration process. Secondly, Medical Practitioner involvement occurs when a Promoter seeks a permit from the CSC to conduct a combat sports contest. Promoters must nominate and engage an approved Medical Practitioner to work at the contest as a designated *Ringside Medical Practitioner (RMP)*.

Role of Medical Practitioner for Contestant Registration

Contestants are required to register every three (3) years with the CSC. When applying for registration Contestants are required to submit a Certificate of Fitness, serology test results and medical history.

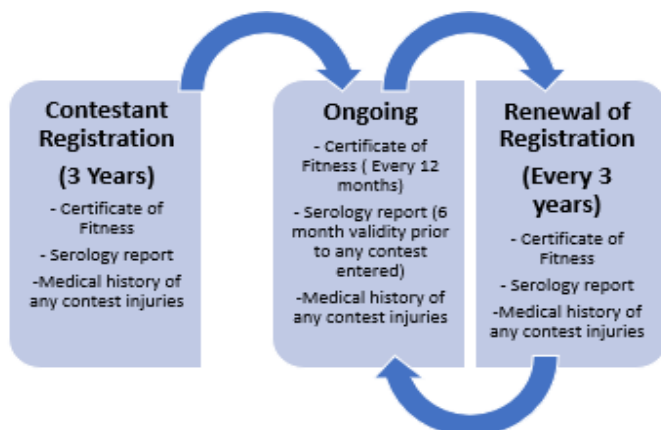


Figure 1: Medical Requirements for Registration

The Certificate of Fitness must be issued by a Medical Practitioner using the CSC approved [Certificate of Fitness Form](#) (Appendix A). When conducting this assessment, the Medical Practitioner should review answers given by the applicant to determine if there are any unacceptable risks, such as:

- Prior head injuries
- Impaired vision
- Mobility impairments
- Extreme/rapid weight loss
- Unmanaged blood borne virus
- Skin infections such as staphylococcus

In addition, the Medical Practitioner will also need to order the following serology tests to be conducted: HIV, Hepatitis B antigen (HBsAG), and Hepatitis C.

Contestants must continue to provide to the CSC a Certificate of Fitness on an annual basis and current serology reports (no more than six (6) months old) prior to any contest they enter.

Engagement of Ringside Medical Practitioner

A Promoter of a combat sport contest must not permit the contest to occur unless an approved RMP is present at the contest. Promoters are required, through CSC permit conditions, to engage and pay for the services of a RMP. Nominated Medical Practitioners must be approved by the CSC to act in the capacity as a RMP. However, the engagement and payment for RMP services is a contractual arrangement between the Promoter and Medical Practitioner, not the CSC. RMP duties are required during three phases of the contest. (Fig.2).

Pre-contest role of Ringside Medical Practitioner

The weigh-in is an official event to establish that each Contestant has met a requisite weight class and must occur at a designated time, up to 24-hours prior to the contest. Weigh-ins are often conducted at a separate venue the night before a contest or can also occur at the same venue on the same day as the contest. Promoter permit conditions require the RMP to be present for the duration of the weigh-in and it is strongly recommended that the RMP conduct pre-contest medicals at the weigh-ins.

All Contestants competing in a contest must complete a pre-contest medical within a 24-hour period prior to the contest. In accordance with *the Combat Sports Act 1987*, the RMP conducting a pre-contest medical examinations must do the following:



1. Inspect Contestant Record Book.
2. Conduct a medical examination.
3. Certify information in the Contestant Record Book.
4. Record the results of the examination on the CSC approved *Pre-contest Examination Form* (Appendix B).
5. Record, if of the opinion, that a Contestant should **not** participate in the contest (based on medical condition).
6. Give the *Pre-contest Examination Form* to the CSC appointee.

- A skin disease
- Any other condition that could be detrimental to either the Contestant or their opponent.

Role of Ringside Medical Practitioner at a Contest

It is strongly recommended that the RMP arrive at the contest venue at least an hour prior to the commencement of the contest.

Key tasks to be completed prior to the first bout commencing, include:

- Test walk ring entry (stairs, enclosure) and conduct venue familiarisation.
- Identify and set up the medical area to handle any medical concerns.
- Check that the medical equipment (including stretcher) is ringside and oxygen delivery system is in good working order.
- Discuss with the Referees (and if available Paramedics) how communication will take place during a bout.
- Attend the Officials meeting.
- Familiarisation with air-horn/sound device usage.

The RMP must be present and preferably seated (ringside) during each bout. No contest, bout or round can commence or continue without the presence of the RMP and any bout in progress must cease should the RMP be required to leave ringside. During bouts, the RMP must remain observant of both Contestants, follow the action in the ring and render medical assistance if required.

The RMP may assess a Contestant during the break, between rounds, (either from the corners apron or inside the ring) and is urged to do so if a knock-down has taken place.

The CSC will provide the RMP with a medical file containing pre and post medical forms and Contestant serology results. The RMP is responsible for conducting a medical examination, completing the *Pre-contest Examination Form* then declaring whether each Contestant is fit or unfit to participate in the contest.

All female Contestants over the age of 16 years must undertake a pregnancy test. The CSC provides RMP's with pregnancy testing kits. The RMP must ensure that eligible female Contestants submit a urine sample and sign the *Pre-contest Examination Form* declaring that the sample provided is theirs.

The RMP may declare any Contestant to be unfit to compete in the contest because of a medical condition. RMP's should consider whether the medical condition would render the Contestant more likely than usual to suffer injury in the normal course of any contest or be less able to adequately defend themselves. This can include (but is not limited to):

- Any sign of use of a prohibited substance or alcohol
- A recent fracture or cut
- Severe dehydration
- An acute illness

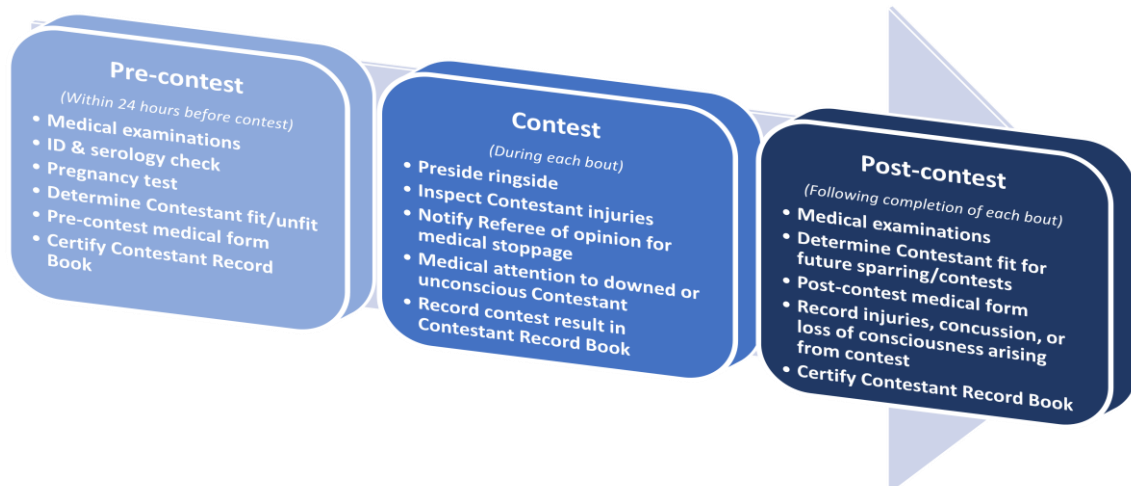


Figure 2: Ringside Medical Practitioner Requirements



The RMP is to advise the Referee, during the break and before entering the ring, if they wish to assess the extent of a Contestant’s injury at close quarters.

In the event of a significantly injured or unconscious Contestant, RMP’s should familiarise themselves with mouth guard removal, oxyviva/stretchers location, emergency chain of command and venue evacuation routes/procedures.

Ringside Medical Practitioner authority to STOP a Contest

The RMP is provided with an air-horn or sound device and at any time during a contest can sound the device to signify to a Referee to terminate a bout. The RMP should direct a Referee to stop a bout if of the opinion the Contestant should not continue to participate **based on their medical condition**. A Referee must discontinue a bout once informed of the RMP’s medical opinion. Consequently, it is the Medical Practitioner who has the ultimate power and authority to stop a contest.

At all times, the wellbeing of a Contestant requiring the urgent assistance of the RMP takes precedence over the commencement of the next round or bout. Having caused a contest to stop, the RMP should enter the ring to render immediate assistance.

RMP’s should consider if the following has occurred to at least one of the Contestants when determining a medical stoppage:

- Health is at risk (i.e. too many hard hits to the head; loss of balance or disorientation)
- Concussion, head injury or suspected head injury
- Receiving undue punishment or inability to defend or avoid further injury
- Exhaustion
- Ruptured ear drum
- Fracture or possible fracture
- Eye damage or surrounding laceration (cuts)

The Referee may directly call the RMP into the ring to examine a cut, nosebleed or other injury for medical determination. Most cuts will not require bout stoppage and a bout can continue at the RMP’s discretion. Medical stoppage decisions regarding possible eye damage or cuts should be individually assessed. Cuts with clinical significance (length, depth, shape, location of cut and source of bleed) or performance consequence (such as bleeding into the eye and reducing vision) should necessitate a stoppage.

Post-contest role of Ringside Medical Practitioner

The RMP must conduct a medical examination of both Contestants, immediately following the completion of a bout, then the approved *Post-contest Examination Form* (Appendix B) must be completed.

If medical treatment is required, the RMP should determine if the treatment is required immediately or at the end of the event. Any medical assistance provided by the RMP is at the discretion of the RMP and may extend to providing treatment in the medical room, such as suturing a cut above the eye.

The RMP must document on the *Post-contest Examination Form* all treatment that is delivered i.e. cut (L) cheek – sutures or #RICE and X-Ray referral – possible (R) ulna fracture.

If, in the RMP’s opinion, a Contestant is not fit to engage in future sparring or contests then the RMP must stipulate a date (period of time) medically suspending the Contestant. If unable to define a period of time, the RMP is to write the type of assessment required (i.e. x-ray /CT) and stipulate that a medical clearance is required prior to commencement of sparring or the next contest.

Prior to recording any suspension periods, the RMP must check previous pages in a Contestant’s Record Book to determine if any prior or reoccurring suspension requires consideration. The RMP is to officially record medical suspension (dates) in both the *Post-contest Examination Form* and the Contestant’s Record Book.

Medical Suspensions

The legislation requires the following mandatory suspension periods if a Contestant is knocked out. The RMP can recommend longer periods of suspension if in their opinion it is required.

First (1 st) time knockout	Minimum of 30 days or longer if directed by the Medical Practitioner.
Second (2 nd) consecutive knockout	60 days following the second contest or longer if directed by the Medical Practitioner.
Third (3 rd) consecutive knockout	90 days following the third contest or longer if directed by the Medical Practitioner

Where a Contestant is unable to continue for reasons (injuries) other than a knockout, the RMP may apply a medical suspension for any period as they see fit.



Combat sport conditions that RMP's should familiarise themselves with include:

- Facial fractures (cheek, orbit, nasal)
- Arterial or excessive venous nosebleed
- Signs of altered consciousness or head injury
- Fracture of hand/wrist or upper/lower limb joint injuries
- Ruptured ear drum
- Fast expanding haematoma

Contestant Record Book

Each Contestant is issued with a *Contestant Record Book* (CRB) upon registration (Fig.3). The CRB contains important medical information and must be inspected by the RMP during medical examinations (both pre and post contest). WA registered Contestants CANNOT compete if they do not supply the RMP with their CRB.



Figure 3: Contestant Record Book (CRB)

It is a legislative requirement for the RMP to certify, in the CRB, that a Contestant is fit to compete in the contest. Following the completion of a Contestants bout the RMP will be further required to record the contest outcome (win/loss/draw) and certify the post-contest medical information before returning the CRB back to the Contestant (Fig.4).

Title:	Decision: <input type="checkbox"/> Win <input type="checkbox"/> Loss <input type="checkbox"/> Draw
Pre-contest medical examination	
I certify that in my opinion, this contestant:	
<input type="checkbox"/> Is medically fit for a combat sport contest.	
<input type="checkbox"/> Is not medically fit for a combat sport contest. If the contestant is not medically fit, complete below:	
In my opinion this contestant should not engage in:	
<input type="checkbox"/> A contest before: / /	<input type="checkbox"/> Sparring before: / /
Signature of Medical Practitioner:	
Print name:	Date:
Post-contest medical examination	
I certify that in my opinion, this contestant is medically fit for a combat sport contest:	
<input type="checkbox"/> YES	
<input type="checkbox"/> NO If the contestant is not medically fit, complete below:	
In my opinion this contestant should not engage in:	
<input type="checkbox"/> A contest before: / /	<input type="checkbox"/> Sparring before: / /
Signature of Medical Practitioner:	
Print name:	Date:

Figure 4: CRB Medical Practitioner Certifications

Equipment Checklist for Ringside Medical Practitioner

Pre-contest Medical Examination:

- ✓ Sphygmomanometer
- ✓ Stethoscope
- ✓ Auriscope/ophthalmoscope
- + Pregnancy tests provided by the CSC

Contests:

- ✓ Basic Doctor's kit
- ✓ Disposable gloves
- ✓ Gauze
- ✓ Pen light
- ✓ Scissors
- ✓ Basic airway equipment
- * To be supplied by Promoter:
- ✓ Oxygen delivery system (Oxyviva)
- ✓ Defibrillator
- ✓ Stretcher
- + Air-horn/sound device provided by the CSC.

Post-contest Medical Examination:

- ✓ Suture kit/local anaesthetic vials/syringes/fine needles and swabs
- ✓ Basic immobilisation – splint/broad arm sling
- ✓ Simple analgesia
- ✓ Bandages and dressings
- + Head Injury and Wound Care advice sheets provided by the CSC.

Expected Conduct of Ringside Medical Practitioner

- Provide accurate and complete information and not provide false or misleading information in response to any request for information that is made for official CSC purposes.
- Consistently act in a professional manner.
- Not knowingly be involved in a Sham contest.
- Not wager on the result of the contest or publicly predict the result of the contest.
- Not consume alcohol or illicit drugs on the day of or whilst at the contest.

How to become an approved Ringside Medical Practitioner

You must be a Medical Practitioner registerable in Australia to become a RMP. As part of the approval process, you will also be required to attend a contest and complete shadow training with an approved RMP.

If you wish to become a *Ringside Medical Practitioner*, please register your interest with the CSC via email: combatsport@dlgsc.wa.gov.au

The information contained in this document is not and should not be regarded as medical or legal advice.



Government of Western Australia
Combat Sports Commission
Certificate of Fitness
Issued under the Combat Sports Act 1987 & Regulations 2016

CSC PREPARE WELL PERFORM BETTER

Certificate of Fitness

PART ONE – To be completed by the examining medical practitioner

Full name of the Contestant: _____

Address: _____

Suburb: _____ State: _____ Post Code: _____

Date of Birth: ____/____/____ Sex: Male Female

I certify that this person is **FIT / UNFIT** (delete one) to compete or participate in a combat sports contest.

Signed: _____ Print Name: _____
Medical Practitioner Medical Practitioner

Provider Number: _____ Date: ____/____/____

Medical practitioner's stamp

Executive Officer:
Combat Sports Commission
Department of Local Government, Sports and Cultural Industries
PO Box 8348, Perth Business Centre, WA, 6849
Phone: 08 6552 804
Fax: 08 6551 9359
Email: combat@scsc.wa.gov.au
ABN: 85 243 853 379

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CSC PREPARE WELL PERFORM BETTER

PART TWO – Medical and Competition History

Division 1 – Personal Details and Competition History (To be completed by the CONTESTANT)

Please use BLOCK LETTERS

FAMILY NAME	GIVEN NAMES	EXAMINATION DATE
RESIDENTIAL ADDRESS		POST CODE
HOME PHONE	MOBILE	
DATE OF BIRTH (dd/mm/yyyy)	GENDER <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE	

1. CAREER HISTORY

Career Results	Wins	Losses	Draws
Amateur			
Professional			

2. HAVE YOU SUFFERED ANY INJURIES WHILE COMPETING? YES NO

3. HAVE YOU HAD ANY HEADACHES, VOMITING OR PROBLEMS WITH SPEECH OR VISION AFTER A CONTEST? YES NO

Division 2 – Medical History
(To be completed by the MEDICAL PRACTITIONER)

	Yes	No		Yes	No		Yes	No
1. Have you at present any: a. illness b. disability			13. Tuberculosis			26. Hepatitis or other jaundice Liver disease		
2. Are you now receiving medicine, drugs, or other treatment			14. Asthma Other lung disease			27. Rupture Hernia Swollen/painful testicles		
3. Has an accident or illness kept you off work for more than one week			15. Deafness Tinnitus			28. Any skin trouble Tendency to bruise or bleed easily		
4. Have you ever had any operations			16. Vision problems Do you wear glasses or contact lens			29. Concussion Severe head injury Loss of consciousness		
5. Have you ever been a patient in any hospital: a. Medical b. Other			17. Fainting attacks Blackouts			30. Knee injury Ankle injury Back injury Other joint injury or dislocation		
Have you ever had or are you now suffering from any of the following?			18. Fits or convulsions Epilepsy Asthma			31. Fractured bones Chipped bones		
6. Rheumatic fever Heart disease			19. Severe headaches Migraines			32. Paralysis (including polio)		
7. Palpitations or pounding heart			20. Nervous trouble Severe depression Mental stress Attempted suicide			33. Any other injury, illness or disability		
8. High or low blood pressure			21. Kidney disease Bladder disease Pain passing urine Blood in your urine Frequent indigestion			34. (Female) Are you pregnant?		
9. Swollen or painful joints (other than through injury)			22. Frequent indigestion					
10. Shortness of breath			23. Ulcer of stomach Ulcer of duodenum Gall bladder trouble Gall stones					
11. Pneumonia Bronchitis or pleurisy Coughing blood Coughing up phlegm			24. Gall bladder trouble Gall stones					
			25. Sugar diabetes					

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CSC PREPARE WELL PERFORM BETTER

Medical Practitioner's Notes on History
(A "Yes" answer to any question requires the medical practitioner to state the question number and comment here)

35. Over the past five (5) years has the Contestant, either occasionally or regularly, taken any stimulants, sedatives, medications or drugs by mouth or by injection?
 YES NO

If "Yes", provide details and, if prescribed by a doctor, include the relevant particulars in question 36 below:

36. Over the past five (5) years has the Contestant had any medical examination, advice, treatment or been in hospital?
 YES NO

If "Yes", provide particulars of each instance (including x-ray, electrocardiogram or other special tests) in the table below:

Date	Name and address of doctor and/or hospital	Reason (if illness or injury, give duration and date of recovery)

37. Details of photographic identification provided to the medical practitioner: Drivers Licence # _____ Passport # _____

PART THREE – Record of Medical Examination prior to Registration/Renewal of Registration
(To be completed by the MEDICAL PRACTITIONER)

Physical Examination	Normal	Abnormal	Physical Examination	Normal	Abnormal
1. a. Head, face, scalp b. Neck R.O.M.			16. Ophthalmoscopic examination		
2. a. Nose deformity b. Nose airway			17. Chest, lungs		
3. a. Mouth, throat b. Speech			18. Heart (if ECH performed, note result in section 8 and enclose F MED 53)		
4. a. Teeth, gums b. Dentures Yes/No			19. Vascular system (include veins)		
5. a. Ears – general b. Ears – hearing			20. Abdomen (include hernial orifices)		
6. Tympanic membranes			21. Endocrine system		
7. Eustachian tubes			22. External genitalia a. Feet b. Limbs R.O.M. c. Gait		
8. Eyes – general			A. Spine b. Trunk R.O.M. c. Posture (standing)		
9. a. Visual fields b. Eye gaze			a. Nervous system b. Cranial nerves		
10. Eye movement					
11. a. Cerebellum function b. Body balance/coordination c. Muscle tone			26. Height: (cm)		
12. a. Muscle strength b. Reflexes			27. Chest: (cm) Exp Ins		
13. Reflexes			28. Waist: (cm)		
14. Skin			29. Urinalysis: Albumin Sugar		
15. Lymphatic system Lymph glands in neck/axillae or inguinal			30. Current weight: (kg) Previous contest weight/class: (kg) Proposed contest weigh/class: (kg)		
			date: _____ date: _____		

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31. Emotional stability

32. Other

33. Identifying marks

34. Frame: Large Medium Small

35. Blood Pressure: Systolic Diastolic

36. Eye Colour:

37. Distant vision: R6 L6 to 6
Near vision: Normal Abnormal

38. Has a MRI Scan been conducted? Yes No
Is the MRI satisfactory? Yes No
Any further testing required? Yes No
Please attach a copy of the radiologist's report.

39. Medical Practitioner's Notes on Medical Examination
(Provide details of any abnormality noted and enter the relevant question number before each comment.)

40. Is any further testing required? YES NO

Neuro/Psychological Examination

41. Is there any evidence of a change in character? YES NO

42. Has the contestant a good memory for recent events and, in particular, recent contests? YES NO

43. Does the contestant follow conversation with attention and intelligence? YES NO

44. Is there any evidence of a tendency to violence outside the competitive arena? YES NO

45. Medical Practitioner's Notes on Neuro/Psychological Examination
(State whether further assessment is required.)

46. Particulars of any Disabilities

Contestant/Participant's Declaration and Release of Medical Information Authorisation

I declare that the information provided in this Certificate of Fitness is true and complete to the best of my knowledge and belief.

I authorise (insert name of MEDICAL PRACTITIONER) _____ to provide personal medical information to the Western Australian Combat Sports Commission for administering the Combat Sports Act 1987 and authorise the medical practitioner to obtain details of my medical records from previous medical practitioners if required.

Contestant/Participant name (print) _____ Signed _____ Date ____/____/____

I have completed the above Medical History and have witnessed the contestant/participant signature.

Medical Practitioner name (print) _____ Signed _____ Date ____/____/____

Medical Practitioners Summary

Name of examined Contestant _____

Do you consider the Contestant to be fit to participate as a Contestant in combat sports contests?
 YES NO Further Assessment Required

Any comments: _____

Signature of medical practitioner _____ Date ____/____/____

Name of medical practitioner (please print) _____

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Normal		Abnormal		Normal		Abnormal	
Skin (including scar tissue)				Pupil size and reaction			
Heart and chest				Fundus (inside eyes)			
Liver and spleen				Vision			
Balance				Hearing			
Tremor				Comprehension			
Co-ordination				Speech			
Cervical spine (esp. ROM – range of motion)				Mouth and jaw incl. TMJ – temporomandibular joint			
Trunk				Nose and nasal passages			
Hands				Upper limbs			
Strength				Lower limbs			
COMMENTS:							

MEDICAL PRACTITIONER'S PRE-CONTEST DECLARATION:

I have sighted this contestant's serology certificate confirming:

HIV negative.
 Hepatitis B antigen negative or immune.
 Hepatitis C negative.

I have also sighted photographic proof of identification.

YES NO

In my opinion, this contestant is / is not (delete one) fit to participate in the proposed combat sport contest.

MEDICAL PRACTITIONER'S NAME: _____ SIGNED: _____ DATE: _____

FEMALE CONTESTANTS AGE 16 & OVER ONLY: Medical Practitioner to certify I confirm that the contestant has undertaken an approved pregnancy test at the time of this examination and that the result is negative. YES NO

CONTESTANT SIGNATURE - I certify that the urine specimen I have provided is mine and that I have not adulterated it in any manner. _____ DATE: / /
 SIGNED: _____

Normal	Abnormal	Comment
Pupil reflexes		
Fundi		
Vision		
Conscious state		
Memory		
Comprehension		
Speech		
COMMENTS:		

MEDICAL PRACTITIONER'S POST-CONTEST DECLARATION:

In my opinion, this contestant:

Is medically fit for sparring and contests: YES NO

Should not engage in any contest before: _____ DATE: / /

Should not engage in any sparring before: _____ DATE: / /

MEDICAL PRACTITIONER'S NAME: _____ SIGNED: _____ DATE: _____