

#### **CONSENT FOR RA PARA - ROWER CLASSIFICATION**

### **Explanation:**

For a rower to be eligible to compete in RA National events, the rower must be classified under the RA Classification guidelines.

Failure to cooperate with the Classifiers or failure to complete the classification procedure will lead to ineligibility to compete in the RA National event.

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 RA National events. The rower has the right to withdraw their consent at any time. However, any rower who withdraws their consent will not receive a classification and will not be eligible to compete in RA National events.

By signing this consent form the rower agrees to waive his/her rights to make any claim against the Classifiers, RA or anyone who might then claim against the Classifiers or RA, 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 RA 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 RA identified eligibility criteria and classification procedure.

#### I understand that:

- National classification is for the purposes of Australian domestic competition only.
- International competition requires an International classification and any classification changes supersede
  any national classification. I will be required to provide new and/or additional medical documentation should I
  progress to international level.

## I agree to:

- To answer all questions fully, truthfully and to the best of my knowledge.
- To attempt all activities to the best of my abilities and that failure to give my best effort may be considered cheating. I understand this may result in termination of the classification process.
- To obtain and provide relevant medical documentation as required by classifiers to support my classification.
- To inform my sport should my condition change following classification, if this change may impact upon my class.

I am aware that as an outcome to my classification being completed:

- My classification data and supporting documentation will be stored in a confidential database.
- Relevant information about my classification and supporting medical documentation may be shared with classifiers, consultants and relevant APC and Rowing Australia personnel as required for my involvement in sport.
- My name, state, date of birth, class and status will be made available on the Rowing Australia website.

I understand that, as an athlete, I have the following rights during classification:

## The right to withdraw

My participation in the classification process is voluntary and I have the right to withdraw from the classification process at any time. Signing this form does not change my right to withdraw at any time. I understand that if I withdraw from the classification process I will not be able to be classified and will not be able to compete in Parasport competitions.



# The right to respect and confidentiality

Evaluations will be conducted respectfully and information obtained during the classification process will be treated confidentially.

# The right to challenge a classification decision or process

This should be done through the Rowing Australia process.

Athletes may also refer to Rowing Australia Policy, Rowing Aust Policy and APC Standards for Athlete Evaluation and Protests	
$\hfill \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ $	
By signing below the rower agrees to complete the test honestl	y to the best of his/her ability.
I,(printed name) of	
	(address)
consent to be classified under the RA identified eligibility criteria events.	a and classification procedure for RA National
Email: Pho	one:
I(printed name	e) of
	(address)
(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)	
Name of Witness:	Date:
Signature of Witness:	



## **RA PARA-ROWING CLASSIFICATION** For Classifier's Use Only

Coach: Birth Date:  Diagnosis+ Associated Diagnosis+ other Comments:  Date of Expiry:	Athlete's Name:	Club:	
□ Visual Impairment:	Coach:	Birth Date:	
Intellectual Impairment:	Diagnosis+ Associated Diagnosis+	other Comments:	
□ Physical Impairment: □ Amputee since □ Others Others □ Others Others Rowing Australia Medical Report for Athletes with a Physical Impairment (Mandatory) □ Additional supporting medical information requested by the Classification Panel Progressive: Yes / No Seizures: Yes / No Asthma: Yes / No Ability to Walk: Yes / No Crutches/Prosthesis: Yes / No Wheelchair: Yes / No Length of time rowing as a para - rower: Years Months Para Competition Experience: Years Number of events: Testing Place Date and Time: Classification: Recommended Class: LTA TA AS ID NE Boat Class Eligibility: LTAMix4+ / LTAMix2x Sports Class Status: □ National Provisional □ National Confirmed □ National Review - Review Date and/or Event: If R (Review) or P (Provisional) Status, provide reasons:  Medical Classifier Technical Classifier Athlete	□ Visual Impairment:	IBSA number:	Date of Expiry:
□ Spinal Level Impaired Complete / Incomplete since □ Others □ Others □ Rowing Australia Medical Report for Athletes with a Physical Impairment (Mandatory) □ Additional supporting medical information requested by the Classification Panel Progressive: Yes / No Seizures: Yes / No Asthma: Yes / No Ability to Walk: Yes / No Crutches/Prosthesis: Yes / No Wheelchair: Yes / No Length of time rowing as a para - rower:	☐ Intellectual Impairment:	AUSRAPID/INAS	-FID number:
□ Others □ Rowing Australia Medical Report for Athletes with a Physical Impairment (Mandatory) □ Additional supporting medical information requested by the Classification Panel Progressive: Yes / No Seizures: Yes / No Asthma: Yes / No Ability to Walk: Yes / No Crutches/Prosthesis: Yes / No Wheelchair: Yes / No Length of time rowing as a para - rower:	•		
Rowing Australia Medical Report for Athletes with a Physical Impairment (Mandatory)  Additional supporting medical information requested by the Classification Panel  Progressive: Yes / No Seizures: Yes / No Asthma: Yes / No  Ability to Walk: Yes / No Crutches/Prosthesis: Yes / No Wheelchair: Yes / No  Length of time rowing as a para - rower:	☐ Spinal Level Impaired Complete /	Incomplete since	
Additional supporting medical information requested by the Classification Panel  Progressive: Yes / No Seizures: Yes / No Asthma: Yes / No  Ability to Walk: Yes / No Crutches/Prosthesis: Yes / No Wheelchair: Yes / No  Length of time rowing as a para - rower:	□ Others		
Progressive: Yes / No Seizures: Yes / No Asthma: Yes / No Ability to Walk: Yes / No Crutches/Prosthesis: Yes / No Wheelchair: Yes / No Length of time rowing as a para - rower:	□ Rowing Australia Medical Report	for Athletes with a Physical Impairment (N	Mandatory)
Ability to Walk: Yes / No Crutches/Prosthesis: Yes / No Wheelchair: Yes / No  Length of time rowing as a para - rower:	☐ Additional supporting medical info	ormation requested by the Classification P	Panel
Length of time rowing as a para - rower:	Progressive: Yes / No Seizur	es: Yes / No Asthma: Yes / No	
Para Competition Experience:Years Number of events:  Testing Place	Ability to Walk: Yes / No Crutches/P	rosthesis: Yes / No Wheelchair: Yes /	<sup>'</sup> No
Testing Place	Length of time rowing as a para - ro	wer:Years	Months
Classification: Recommended Class: LTA TA AS ID NE Boat Class Eligibility: LTAMix4+ / LTAMix2x  Sports Class Status: National Provisional National Confirmed National Review - Review Date and/or Event:  If R (Review) or P (Provisional) Status, provide reasons:  Medical Classifier Technical Classifier Athlete	Para Competition Experience:	Years Number of events:	
Classification: Recommended Class: LTA TA AS ID NE  Boat Class Eligibility: LTAMix4+ / LTAMix2x  Sports Class Status: National Provisional National Confirmed National Review - Review Date and/or Event:  If R (Review) or P (Provisional) Status, provide reasons:  Medical Classifier Technical Classifier Athlete	Testing Place	Date and Time:	
Classification: Recommended Class: LTA TA AS ID NE  Boat Class Eligibility: LTAMix4+ / LTAMix2x  Sports Class Status: National Provisional National Confirmed National Review - Review Date and/or Event:  If R (Review) or P (Provisional) Status, provide reasons:  Medical Classifier Technical Classifier Athlete	Classifiers' Comment:		
Recommended Class: LTA TA AS ID NE  Boat Class Eligibility: LTAMix4+ / LTAMix2x  Sports Class Status: National Provisional National Confirmed National Review - Review Date and/or Event:  If R (Review) or P (Provisional) Status, provide reasons:  Medical Classifier Technical Classifier Athlete			
Sports Class Status: National Provisional National Confirmed National Review - Review Date and/or Event:  If R (Review) or P (Provisional) Status, provide reasons:  Medical Classifier Technical Classifier Athlete		TA AS ID NE	
If R (Review) or P (Provisional) Status, provide reasons:  Medical Classifier Technical Classifier Athlete	Boat Class Eligibility: LTAMix4+ / L	ΓΑMix2x	
Medical Classifier Technical Classifier Athlete			
	If R (Review) or P (Provisional) S	atus, provide reasons:	·
			•
	Medical Classifier	Technical Classifier	Athlete

Medical Classifier	Technical Classifier	Athlete
Name:	Name:	Name:
Signature:	Signature:	Signature:

Time and date the athlete was informed of their Classification via Rowing Australia email: \_\_ PRINCIPAL PARTNER P.O. Box 7147, Yarralumla, ACT 2600

## RA PARA-ROWING FUNCTIONAL CLASSIFICATION ASSESSMENT CHART

Athlete's Name:	Club:					
Functional Classification Test	Muscle Strength and/or Coordination (0-5 scale, no +/- scale)				Movement scale)	
Upper Limbs	F	Right	,	Left	Right	Left
	Strength	Coordination	Strength	Coordination		
Shoulders						
Flexion						
Extension						
Elbows						
Flexion						
Extension						
Wrists						
Flexion						
Extension						
Fingers						
Flexion						
Extension						
Total Upper: R(80) L(80)						
Functional Classification	N/	lugala Ctuan ath a	mallon Coondi		Danua of	Mayramant
Test	IVI	uscle Strength a (0-5 scale, ا	no +/- scale)	nation		Movement scale)
Lower Limbs			Left	Right	Left	
	Strength	Coordination	Strength	Coordination		
Hips						
Flexion						
Extension						
Knees						
Flexion						
Extension						
Ankles						
Flexion (Plantarflexion)						
Extension (Dorsiflexion)						
Total Lower: R(60) L(60)						

#### **Scales for Muscular Strength**

- 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 sever 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



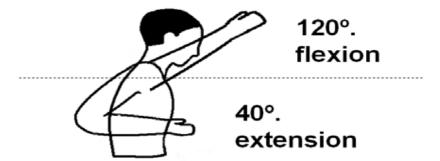
Total number of points: \_\_\_\_\_

Athlete's Name:	C	Club:

## Refer to ROM numbers below for completion of this page.

### Score scale for shoulder's AFROM

 $0^{\circ} - 80^{\circ}$  = 0 points  $81^{\circ} - 100^{\circ}$  = 2 points  $101^{\circ} - 120^{\circ}$  = 4 points  $121^{\circ} - 140^{\circ}$  = 6 points  $141^{\circ} - 159^{\circ}$  = 8 points  $160^{\circ}$  = 10 points



#### **Rower's flexion AFROM**

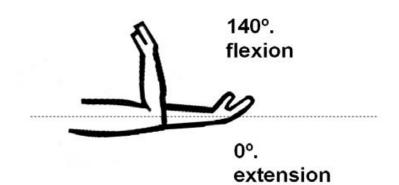
R \_\_\_\_\_ L \_\_\_ **Rower's extension AFROM** R \_\_\_\_ L \_\_\_

**Total shoulder AFROM** 

R \_\_\_\_\_ L \_\_\_\_

## Score scale for elbow's AFROM

 $0^{\circ} - 70^{\circ}$  = 0 points  $71^{\circ} - 89^{\circ}$  = 2 points  $90^{\circ} - 107^{\circ}$  = 4 points  $108^{\circ} - 124^{\circ}$  = 6 points  $125^{\circ} - 139^{\circ}$  = 8 points  $140^{\circ}$  = 10 points



#### **Rower's flexion AFROM**

R \_\_\_\_L \_\_\_

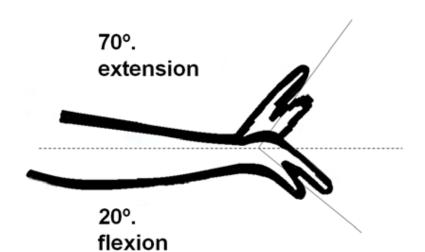
**Rower's extension AFROM** 

R \_\_\_\_\_ L \_\_\_ Total elbow AFROM

R \_\_\_\_\_ L \_

# Score for wrist's AFROM

 $0^{\circ}$  - 45° = 0 points  $46^{\circ}$  - 56° = 2 points  $57^{\circ}$  - 67° = 4 points  $68^{\circ}$  - 78° = 6 points  $79^{\circ}$  - 89° = 8 points  $90^{\circ}$  = 10 points



## **Rower's flexion AFROM**

R \_\_\_\_\_ L \_\_\_ Rower's extension AFROM

Rower's extension AFRON

Total elbow AFROM

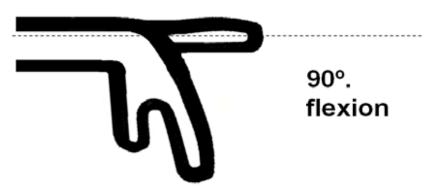
R \_\_\_\_\_ L \_\_\_\_



# 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

# 0°. extension



## **Rower's flexion AFROM**

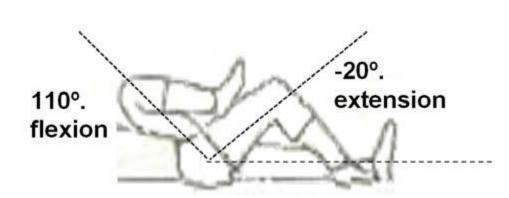
R	L
Rower's ext	tension AFROM
R	L
<b>Total finger</b>	AFROM

# 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 \_\_\_ Rower's extension AFROM R \_\_\_\_ L \_\_\_ Total hip AFROM R \_\_\_\_ L \_\_\_

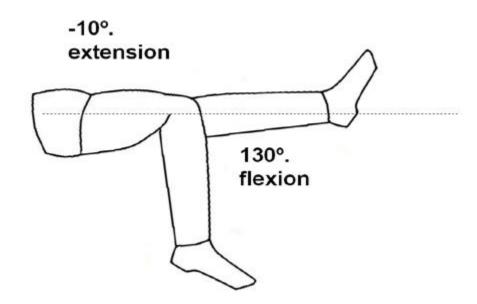


## Score scale for knee AFROM

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 \_\_\_ Rower's extension AFROM R \_\_\_\_ L \_\_\_ Total knee AFROM R \_\_\_\_ L \_\_\_



PRINCIPAL PARTNER

Club: Athlete's Name: 20°. dorsal-Score scale for ankle AFROM 0° - 35° = 0 points flexion 36° - 43° = 2 points 44° - 52° = 4 points 53° - 61° = 6 points 62° - 69° = 8 points 70° = 10 points **Rower's flexion AFROM** R \_\_\_\_\_L \_\_\_ **Rower's extension AFROM** R \_\_\_\_\_ L \_\_ 50°. plantar-**Total ankle AFROM** 

flexion

R \_\_\_\_\_ L \_\_\_\_

Athlete's Nam	ne:	Club:
Minimal Impa (Refer to Para-		unctional Classification Test)
Yes / No		Minimal loss of 10 points on one limb or 15 points across two limbs when assessed using the functional classification test chart.
Yes / No		Minimal loss of 20 points in one limb when assessed using the functional classification test chart (LTAMix2x)
Yes / No		Full loss of three fingers on one hand
Yes / No		Transmetatarsal amputation of one foot
90° Squat Tes	st:	
Pass	Fail	
Comments:		
Long Sit Test		
Pass	Fail	
Comments:		
Additional Co	mments	



# **ERGOMETER TEST AND ON-WATER OBSERVATION**

Athlete's Name:

VEQ (NO	
VEC /NO	
YES / NO	
YES / NO	
YES / NO	
YES / NO	
YES / NO / NA	
YES / NO	
YES / NO	
luation that directed	your technical evaluation?
	YES/NO YES/NO/NA YES/NO YES/NO YES/NO

Club: \_\_\_\_\_

