UIPM PARA SPORTS CLASSIFICATION PROCESS

2024



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1 Introduction

The UIPM Para Sports Classification Process for para athletes consists of the following four steps:

1.1 Submission

Medical documentation must be submitted to UIPM within the designated timeframe. Late submissions may result in the inability to be classified.

1.2 Eligibility

Once the documentation is approved, the athlete becomes eligible to attend an in-person classification panel.

1.3 Assessment

The in-person assessment is conducted by two classifiers:

- a. Medical Classifier
- b. Technical Classifier.

1.4 Approval

Once approved, the athlete will automatically be eligible to compete according to the class and status determined by the panel.

2 Submission

All medical documentation shall be provided in English or French. To guarantee the protection of personal data, files shall be submitted to UIPM in electronic form to the secured UIPM Para License portal.

If for any reason this is not possible, before sending a file via email, athletes should contact para@pentathlon.org and a secure alternative will be established.



Medical documentation will be reviewed and evaluated by the UIPM Head of Classification (HoC). If any medical documentation or important information is missing, the athlete and/or National Federation representatives will be required to provide such documentation/video in a timely manner. Failure to provide the required documentation will result in interruption and delays to the ongoing classification process.

4 Assessment

Aspect	Details
Athlete requirements and entitlements	During the classification, the athlete may bring an English interpreter. An interview will be conducted before the start of the physical assessment, where the classifiers will discuss the history and progression of the health condition relevant to the eligibility for Para Pentathlon. If possible, in addition to the submission, the athlete should carry the medical documentation or a copy of it during the classification process.
Physical assessment	The athlete will undergo a physical evaluation on a medical examination table by the Medical Classifier. This evaluation aims to check the health status and disabilities related to the practice of Para Pentathlon. The assessments are different and specific for physical, intellectual, and visual disabilities. In the assessment of an athlete with a physical disability, the medical classifier will evaluate strength and passive range of motion, or coordination in cases of athletes with specific central nervous system injuries. The joints and movements evaluated will be: Neck: Flexion – Extension – Rotation Shoulder: Flexion – Extension – Abduction – External Rotation – Internal Rotation – Protraction / Retraction – Adduction Elbow: Pronation – Supination Trunk: Rotation – Flexion – Extension Fingers: Abduction – Adduction – Thumb Opposition – Flexion – Extension Wrist: Flexion – Extension Elbow: Extension – Flexion – Adduction – Extension – Internal Rotation – External Rotation Knee: Flexion – Extension Ankle: Dorsiflexion – Plantar Flexion

Assessments

Scores will be assigned for each of the joints and movements according to the following criteria:

A - for strength.

The scale has 6 levels from 0-5.

- 0 Total lack of voluntary contraction.
- 1 Faint contraction without any movement of the limb (trace, flicker).
- 2 Contraction with very weak movement through the full available range of movement when gravity is eliminated (poor) or when an athlete has good contraction through a very limited available range which is not functional for the sport.
- 3 Contraction with movement through the full available range of movement against gravity.
- 4 Contraction with full available range of movement against gravity and some resistance (good).
- 5 Contraction of normal strength through the full available range of movement against full resistance.

MUSCLE TESTING (POWER SCALE)

No 0.5 or +/-; that is, an athlete will be rated as a 0, 1, 2, 3, 4, or 5, not a 2.5 or 3.5 for example.

Method of Muscle Power Testing will be assessed according to the *Muscle Testing Techniques of Manual Examination and Performance Testing* (Daniels & Worthingham, 2018).

- B For the evaluation of "range of movement," the athlete's active movement will be assessed. Scores are given by the percentage of movement according to the reference adopted in classifier manual.
- C For the coordination evaluation, when eligible (e.g., brain injury; cerebral palsy; stroke; multiple sclerosis; similar central neurological disorders), a 6-level scale (0-5) will be adopted.
- 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 Range of Motion (ROM) of this movement.

Types of tests: The athlete will undergo functional tests (FT) by the Medical or Technical Classifier, which include:

Aspect	Details
Long sit test (LST)	The athlete sits in a long sit position on the plinth, with legs as straight as possible, considering hamstring impairments (if tight hamstrings are limiting, move the athlete's feet outside the plinth). Support for legs for balance if needed (e.g., short lower limbs or amputations) – take notes in case of any support. The athlete will lean forward approximately 30 degrees – then hold for 3 seconds, then return to upright without using the arms. The athlete will then lean backward approximately 30 degrees without using arms, hold for 3 seconds, then return to upright without using the arms. If the athlete can perform the above movements, the routine will be repeated while providing resistance.
90° squat test	The athlete stands without assistance - squats with 1 or both legs as able to a 90-degree angle at the knee(s) (test with and without prosthesis) - returns to standing position. Balance assistance may be given for safety but must be noted by the Classifier.
Jump test	The athlete stands without assistance – squats to approximately 90 degrees – performs a jump with one or two legs – lands on the ground without assistance. The test can be performed with or without a prosthesis, whichever reflects the athlete's best result. Balance assistance may be given for safety but must be noted by the Classifier.
Grip test	The athlete should keep the torso as upright as possible (the test can be performed sitting if the athlete has any limitations such as the need for a wheelchair). The athlete must lift a 1kg weight held by the hand with the upper limb extended in the shoulder elevation position, in the sagittal plane, until the elevated upper limb holding the weight reaches shoulder height (becoming parallel to the ground), after which the limb must return to the original vertical position. The test will be repeated in the coronal plane with the goal of abducting the upper limb to the shoulder level. The test should be performed with both upper limbs. Any failure should be observed by the Classifier and noted.

Note: The above tests require a yes or no rating, but detailed comments can be included if they assist with evaluations.

Para Sports Classification Classes

5.1 Background on sport classes

For class allocation within Para Pentathlon, the assessment of segments and their respective impairments will be considered. This means that the following segments will be adopted: the spine (trunk control); from shoulder to elbow; from elbow to wrist; more distal than the wrist; from hip to knee, from knee to ankle, and more distal than the ankle as per Figure 1.



Figure 1: Segments used in the classification process.

From Daniels' and Worthingham's Muscle Testing Techniques of Manual Examination. Instead of the classical scoring system of 0 through 5, scores of 0, 1 and 2 will now be considered as 0* (indicating significant impairment), and scores of 3, 4 and 5 will be considered as 1* (indicating less significant or no significant impairment).

To qualify for classification under the classes of physical impairment, the segment will be considered as having a significant impairment (SI) when this segment scores 0, 1 or 2 in coordination, or in strength, or has the active range of motion (AROM) (\leq 49%) or has eligible limb length discrepancy.

To be considered an eligible segment for classification, the segment must exhibit a score of 0* in at least two agonist and antagonist movements simultaneously, such as flexion and extension, or internal and external rotation, where applicable.

For classifying athletes within Para Pentathlon, the following classes have been established based on the assessment of impairments across all body segments.

The classification process will evaluate the full body and capacity of the athlete, even if the full evaluation itself will not change the final class decision.

5.2 Classifications

Classification	Details
PMP 1	Loss of trunk control: athletes who exhibit significant impairments in trunk control.
PMP1a	Athletes with no trunk control (for example, but not limited to, spinal cord injury [SCI]). These athletes demonstrate no power, balance or active range of motion (AROM) during plinth evaluation and fail at the LST, 90° squat test and jump test.
PMP1b	Athletes with poor trunk control, (for example incomplete SCI, bilateral lower limbs amputation with short stump, but not limited to). In the LST, these athletes may show some power, some balance or some AROM. The athlete must fail at the LST, 90° squat test and jump test.
PMP 2	 Athletes with combined impairments affecting both upper and lower limbs. To qualify for this class, an athlete must exhibit significant impairments that meet the following criteria: The athlete must receive a score of 0* (indicating no functional movement - 0,1 or 2 as described by Daniels and Worthingham for coordination or strength or less than 50% AROM or eligible length discrepancy) in at least five of the eligible segments (fig.1). Or the athlete must have a score of 0* (indicating no functional movement - 0,1 or 2 as described by Daniels and Worthingham for coordination or strength or less than 50% AROM or eligible length discrepancy) in at least three of these segments and demonstrate a limitation in trunk control (3 or 4, as described by Daniels and Worthingham for coordination or strength).
PMP 3	Athletes with combined upper limbs impairments. Athletes must meet the following criteria: Exhibit impairments in three or more eligible segments of the upper limbs. These segments are systematically categorised from the shoulder to elbow; from elbow to wrist; and below the wrist (fig.1). The impairment in these segments must be significant (scores 0*).
PMP 4	Athletes with combined lower limbs impairments. Athletes must meet the following criteria: Exhibit impairments in three or more eligible segments of the lower limbs. These segments are systematically categorized from the hip to knee; from knee to ankle; and below the ankle (fig.1). The impairment in these segments must be significant (scores 0*).

Classification	Details
PMP 5	Athletes with significant impairments in their upper or lower limbs.
PMP 5a	Athletes who score 0* in one or more of the following areas: Below the elbow Below the knee Below the wrist and ankle simultaneously Both wrists simultaneously Both ankles simultaneously.
PMP 5b	Athletes who score 0* at the level of the wrist or above, or at the level of the ankle or above.
PMP 6	Visual impairment.
PMP 6a	Matches International Blind Sports Federation (IBSA) B1 criteria, for athletes with severe visual impairment or no vision.
	Corresponds to IBSA B2 or B3 criteria, for athletes with moderate to mild visual impairment.
PMP 6b	For these classes, athletes must provide certification from IBSA or another Paralympic sport (international) utilising the same classification protocol. All medical documentation and the required forms must also be submitted.
	Intellectual impairment.
PMP 7	PMP 7 is based on Eligibility Criteria used by Virtus/PNZ. It is important to note that "Intellectual Disability is a disability characterised by significant limitation both in intellectual functioning and in adaptive behavior as expressed in conceptual, social, and practical adaptive skills. This disability originates before the age of 22.

5.3 Minimal Impairment Criteria (MIC)

An athlete will be considered under the Minimal Impairment Criteria (MIC) if they present a disability based on an eligible health condition in any joint that scores 0, 1 or 2 for strength or coordination, or that shows a reduction in joint range of motion greater than 50% in at least one of the joints tested during this classification process at the level of the wrist or above, or at the level of the ankle or above. Athletes with a proven reduction of lower or upper limbs that is equal to or greater than 10% compared to the contralateral side, will also be considered. In these cases, the athlete will initially be placed in the PMPR5-b class, with the possibility of allocation change according to classification prosses.



Summary and further information

Once the in-person assessment has been completed the para athlete will be classified into one of the above classifications.

A formal classification letter will be written and approved by the Para Pentathlon HoC.

The para athlete will then be classified for the season or event – depending on the timing of their application.

The para athlete can appeal the classification decision within 21 days. Appeals need to be submitted in writing to classification@pentathlon.org.

Further information can be obtained by contacting para@pentathlon.org.



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