



MEDICAL GUIDELINES

Introduction to the Ringside Doctor Phases

- **Phase One:** Medical screening the BCR1 – Fit or not fit to box.
- **Phase Two:** Pre-bout medicals, checking no changes or injuries in training or otherwise, carried out during the weigh in window before a competition.
- **Phase Three:** Ringside attendance of the doctor at the competition including treatment administered within the ring/ringside.
- **Phase Four:** Post bout medical assessment, and treatment, if required, of injuries.

Phase Two - Pre-bout medical

Doctors should aim to arrive either at the start of the weigh in or for the last hour of the weigh in i.e., 2 hours before the first bout is due to start (“First Bell”).

On arrival the doctor should report to the Supervisor.

This is to allow enough time to complete the pre-bout checks and have time to check for presence of the mandatory equipment:

- Oxygen cylinder containing at least 360L of oxygen i.e., enough to last 20 minutes at high flow and at least 75% full. Check operational and functional.
- AED – check available ringside and battery not depleted.

Any additional requests to perform occasional re-medicals or new medicals must not take priority over boxers due to compete on the day and when summoned ringside by the supervisor, the doctor must attend promptly.

Please see the following relevant rules from the England Boxing Rule book

- Boxers may wear Kinesiology tape, but this may only be affixed below the waist and to the back of the body.
- Coaches may no longer use Cavilon Cream, Vaseline or Petroleum Jelly on a Boxer; ONLY Non-Petroleum Skin Protective Jelly may be used.
- For both domestic boxing and international boxing, boxers no longer need to be clean shaven.
- A boxer can have a beard and moustache, but either must not cover the neck and must not be longer than 10cm.
- ALL body piercing (including piercings not on the target area) i.e., rings necklaces, bracelets, must be removed prior to the pre-bout medical and for the duration of the bout.
- ALL false nails and false eyelashes must be removed prior to the pre-bout medical and for the duration of the bout.
- Female Boxers may wear a full skin covering including a Hijab if, i. There is a cultural or religious reason for doing so, ii. The supervisor is informed at weigh in.
- The doctor should check the gum shield as part of the pre bout medical – the gumshield should be well fitting and is mandatory for all boxers. If not presented at the pre–bout medical, the boxer will not be deemed fit to box till they return with a suitable gum shield and show the ringside doctor.
- No red or partially red gum shield shall be worn.

Purpose and format of the pre bout medical checks

A new BRC1 type medical examination is not required, and the ringside doctor should take any previous fitness to box as the starting point from the annual medical examination as evidence other systems have been assessed and ok.

The purpose of the pre-bout (Phase 2) medical checks is to ensure that no injuries have occurred during the intervening time i.e., during sparring or training.

The pre bout checks should be confined to these following checks on the day of the contest:

Section	What to look for (doctors to research themselves for images and further information if not familiar).
BCR1 in date i.e., medical within the last 12 months – medical scan not to be done on the day of the competition.	Check on page 3 or page 4 for either the date of the initial, or subsequent medical examinations, these should have been carried out less than 365 days from the day of the competition.

	If the last medical was over 365 days ago, the boxer cannot compete on that day, even if a medical is carried out. A boxer cannot be “medicaled” and box on the same day.
Ears	Early signs of pre cartilage bruising that may lead to Cauliflower ear if not treated. Blood or clear fluid from the external auditory meatus, burst or damaged ear drum. All would prevent the boxer from competing that day.
Nose	No new fractures. Doctors should make a note of existing/long standing nasal deformity. New fractures, new septal deviation, septal haematomas are all blockers to competing.
Teeth, both with and without Gumshield in place – No red or partially red gum shield shall be worn	No loose teeth, no plates. Missing teeth are ok. No recent dental extractions within 3 months. Tramline braces are ok but only with either a blue single piece gumshield, or a single upper gumshield if the boxer accepts the risk of lacerations to the inside of the lower lip. Two single gumshields will not provide enough space for air entry, so are unacceptable. Active cold sores cannot be present if hoping to compete.
Hands	No recent fractures within 3 months, able to make a fist. No bony tenderness or new swelling/deformity. Abrasions to the skin are usually not a blocker to competition as these are covered by the boxer’s wraps.
Eyes	Boxers often attend with bruising to the sclera, and infra orbital area (black eye). In these cases, check eye movement and for any bony tenderness be aware of risks of retro orbital haematomas.
Ready to box?	Check psychologically ready and willing to participate, particularly for the younger boxing age groups.

Do you have any injuries, illnesses, or temperatures	Boxers should not compete with a temperature, active illness, or injury that prevents them from defending themselves at all times.
Female boxers:	Pregnancy declaration should be signed by female boxers as a form for the season signed annually attached to the back of the BCR1 card. If not present a form from the supervisor or signature from the boxer (or parent or coach if under 16) in the relevant BCR1 column can be used to document non-pregnancy. A boxer may not box if pregnant.
Fit to box	If the tests above are all passed, the card can be marked as FTB (Fit to box) and initialled by the doctor, in the column next to the date of the current competition.

Medicals should be concluded by the end of the weigh in period.

This allows the doctor time to:

- Check ringside equipment i.e., oxygen and AED present.

Additional medicals should ideally be agreed in advance with the doctor and timings arranged so as not to interfere with the start of the show.

No additional medicals should be performed at Championship shows.

There are rules regarding the latest time boxers can enter the ring, according to age group.

Doctors must aim to be punctual as late starts will have a knock-on effect to the latest start time of bouts and may result in bouts being cancelled.

Order

Boxer sees the Supervisor at the weigh in, then the doctor, then doctor writes FTB if no problems, then initials the BCR1.

The BCR1 is held onto by the doctor.

The cards are then gathered up and handed on to the Recorder.