

ADAPTIVE FIGURE SKATING

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### **IMPAIRMENTS THAT CAN BE CLASSIFIED**

#### ***Pain Syndromes***

There is no adjustment for pain-related impairment as it cannot be objectively quantified and the effect of pain on function is subjective. Self-rated pain measures are not regarded as sufficiently objective.

#### ***Cardiovascular System Disorders***

Cardiovascular performance is directly relevant to performance in all ice skating disciplines. The following cardiovascular problems can be classified:

- valvular disease
- coronary artery disease
- cardiomyopathies
- pericardial heard disease
- dysrhythmias
- hypertensive cardiovascular disease
- upper and lower peripheral vascular disease
- pulmonary artery disease

Exercise-induced sinus tachycardia in the absence of evidence of cardiac anomaly or documented arrhythmia will not be classified.

#### ***Pulmonary System Disorders***

Pulmonary system performance is directly relevant to figure skating performance, excluding asthma. Pulmonary function test results will be the critical factor in classification and must be provided pre-and post-bronchodilator.

#### ***Digestive System Disorders***

Digestive disorders are classifiable only where they are substantial such that they significantly interfere with the ability to train and/or compete consistently:

- upper digestive tract disorders
- colonic disorders
- anal disease
- stomas
- liver disease
- biliary tract disorder

- herniations

Obesity is not ratable. Functional gastroenterological conditions are not classifiable (i.e. constipation, diarrhea, irritable bowel syndrome).

### ***Urinary and Reproductive Disorders***

These conditions should not be given a rating, unless it has significant adverse effect on activity of daily living.

Urinary tract disease, stomas, bladder and urethral disease that impacts daily living may be classifiable.

Penile, scrotal, testicular, vaginal, cervical, uterine, fallopian or ovarian disease is not directly relevant to skating and is not classified.

### ***Skin Disorders***

Skin conditions may be classifiable **only** where they significantly affect activities of daily living. No impairment will be awarded for cosmetic impact only.

### ***Blood Disorders***

Blood disorders are relevant to skating and training. The following conditions can be considered:

- anemia
- neutropenia
- leukemia/lymphoma
- HIV
- Platelet disorders
- Hemophilia and bleeding disorders

### ***Endocrine Disorders***

Many of these disorders will not be classified if effects are minor and rarely present. Most disorders are unlikely to leave significant residual symptoms with effective treatment and the impairment scales are heavily influenced by burden of treatment compliance. These conditions should be considered on a case-by-case basis.

### ***Ear, Nose and Throat Disorders***

Hearing loss is ratable.

Vestibular (balance) disorders are ratable.

Facial disorders are ratable only if it negatively affects airway passage.

Tinnitus, mastication (chewing) and voice/speech disorders are not ratable.

## **Visual System Disorders**

Loss of vision related to acuity, light perception and/or field of vision in one/both eyes is classifiable.

Near-sighted/far-sighted vision impairment that is corrected by contacts or glasses is not ratable.

## **Central and Peripheral Nervous System Disorders**

Disorders of cortical function manifesting as developmental delay, mental handicap, impaired IQ and the childhood disorders variously named Asperger / autism/ ADHD can be classified. Such disorders will typically affect global function and often have effects in more than one functional domain.

Isolated dyslexic abnormalities which do not affect global learning and social functioning (typically individuals with a normal or high IQ but specific reading, dexterity or counting deficits) will not be classified in the absence of a clinical history and objective evidence of developmental or neurological impairment.

Intellectual impairment can be considered based on the impact that the impairment has on activities of daily living, as noted in the table below:

| <b>Basic</b>                                        | <b>Intermediate</b>                                     | <b>Advanced</b>                                                           |
|-----------------------------------------------------|---------------------------------------------------------|---------------------------------------------------------------------------|
| rising from bed, transferring to/from chair         | Answering telephone or doorbell                         | Making telephone calls                                                    |
| Dressing                                            | responding to questions about daily activities          | Can make some plans independently                                         |
| Bathing/showering                                   | obeying simple commands                                 | Planning and preparing a simple meal                                      |
| Independent for bladder and bowel function          | following simple routines                               | Takes own medication                                                      |
| personal hygiene/grooming                           | co-operating with others                                | Managing money and shopping independently                                 |
| Eating                                              | Independently mobile indoors                            | Independently mobile outdoors in most                                     |
| care needed almost all of the day in own home       | Care needed for significant portion of day in own home  | Care needed for some activities out of the home and rarely needed at home |
| avoidance of self-harm or harm to others, including | Could use public transport for short, familiar journeys | Driving a car, using public transport                                     |

Some neurologic conditions are classifiable if they have a negative impact on higher levels of function such as an ability to drive:

- episodic loss of consciousness
- sleep disorders

Disorders that affect station and gait, neurogenic bowel/bladder, and neurogenic respiratory function alterations are classifiable.

Different neurological impairments are combined to produce a comprehensive impairment rating that considers the impact of all the impairments on function.

### ***Mental and Behavioral Disorders***

Mental and Behavioral disorders are not classifiable as the impact on skating is not objectively and consistently quantifiable. Moreover, the impact is variable day to day.

### ***Upper Extremities Disorders***

Upper limb function is relevant to skating when there is limitation of function above the level of the wrist, i.e. wrist, forearm, elbow, arm and shoulder disorders can be classified.

### ***Lower Extremities Disorders***

Any disorder that results in loss of limb or function of the lower extremity is classifiable.

### ***Spine and Pelvis Disorders***

Common degenerative conditions are not objectively assessable so cannot be rated, but neurological impairment related to disorders in the spine/pelvis is classifiable.

Congenital disorders such as spina bifida and scoliosis are classifiable based on the impact that the disorder has on the impairment to motion segments of the spine.