Ringside doctor requirements

Contestant safety in combat sport contest settings

The Professional Boxing and Combat Sports Board (Board)’s priority focus on contestant safety requires that ringside doctors, second medical officers, licensed officials and licence holders are aware of the requirements associated with managing contestant safety and injuries at promotions that are supervised by the Board.

## Prior to the start of a contest

It is expected that prior to the start of a contest that ringside doctors will:

* Arrive at least one hour prior to the first bout to allow time to attend the pre-fight meeting with officials and Board members and complete pre-contest contestant examinations.
* Specifically confer with the referee and promoter prior to the promotion about the evacuation plan to ensure rapid transport of injured contestants.
  + - Agree on a clear, pre-determined means, whether by bell, air horn, hammer, prescribed hand signal or another method, by which:

. the medical practitioner can indicate the need for or desirability of a medical examination of a contestant during the contest;

. the medical practitioner can stop the contest; and

. the referee can indicate to the medical practitioner the need for or desirability of a medical examination of a contestant during the contest.

* Undertake a pre-contest examination of each contestant using Form 6, Part A (as found in the Schedule of the Regulations). The form must be completed prior to each contestant’s bout.

# Evacuation plan – timely extraction of injured contestants

A review of the evacuation plan should occur prior to the start of a contest, emphasising the importance of rapid transport to the hospital.

Four key stakeholders are critical in facilitating immediate transfer of an injured fighter:

* Ringside doctor.
* Medical assistant.
* Professional Boxing and Combat Sports Board member.
* Event promoter.

The following responsibilities/accountabilities are required:

Ringside doctor

* Immediate assessment and triage that urgent transport is required.
* Secure airway.
* Supply oxygen.
* Ensure spinal stabilisation (if appropriate).
* Co-ordinate transfer to spinal board ready for evacuation.
* Contact the local hospital (with neurosurgical services) as to the clinical scenario.

Medical assistant

* Aid ringside doctor with stabilisation.
* Provide documentation of events on medical forms including timing of interventions

Professional Boxing and Combat Sports Board member/s

* Call 000 and request urgent ambulance attendance and communicate:
* Unconscious fighter with presumed intracranial injury.
* Urgent ambulance transfer requested (direction to hospital).
* Address of event include exact recommended entrance.
* Name of doctor attending .
* Communicate with ringside doctor (will often require hand off of telephone to ringside doctor).

Licensed promoter

* Ensure observers remain at a safe distance from the ringside doctor and other support staff during resuscitation efforts. This will support the medical team's ability to focus, maintain patient privacy and maintain a safe environment. (The security team should be briefed before the event to ensure they are aware of their responsibilities in the setting of an evacuation).
* Establish a Clear Pathway – a delegate is to be responsible to create a clear pathway from the ring or competition area to the nearest accessible exit.
* Have a security or other personal provide guidance to the arriving ambulance and provide exact directions / instructions.

# Ringside etiquette

The physician etiquette outlined in the Association of Ringside Physician’s *Manual of Combat Sports Medicine* is the minimum standards expected in fulfilling the role of ringside doctor during the contest. It is expected that ringside doctors will:

* Always be aware and focused 100% on the fight and the safety of the fighter.
* Maintain close communications pre, during, and post-bout with referee and trainers. Look for any disqualifying injuries that would impede a fighter from safely continuing to compete.
* Look for any significant change in the fighter as a sign of deterioration or considerable injury.
* Identify cognitive deterioration due to head strikes or trauma.
* Identify critical points in the fight where head trauma, visceral trauma, or significant life or limb threatening injuries could have occurred.
* Enter the ring or cage, between rounds, or during the bouts as requested by the referee.
* Screen the competitors during the bout. If the doctor has concerns, he/ she should notify the referee at the soonest and most adequate opportunity (note in Victoria the ringside doctor has the authority to stop the fight and is provided with a notification method by the PBCSB).
* Examine any competitor that has received multiple blows.
* Examine any competitor that has been subject to a KO or TKO immediately in the ring.

## Post contest

It is expected that ringside doctors will:

* Undertake a post-contest examination for each Contestant using Form 6, Part B at the completion of each bout, and return the form to the Board or its representative.
* Conduct the post-contest medical examination of contestants in an appropriate location, outside the ring/octagon, following completion of each contest. The medical forms must be completed by responding to all questions, completing all boxes, providing written detail where required and ensuring injuries are noted. Reasons for application of suspension periods that are in excess of 15 days, should be provided, particularly where concussions or suspected concussions are diagnosed as this is critical for contestants after care.
* Provide contestants with the concussion handout at the time of the post medical examination. Printed copies of these documents are provided the ringside doctor.

# Code of conduct

Ringside doctors are expected to exhibit exemplar standards at all times and not engage in:

* Violent, threatening, obscene, indecent or abusive language or behaviour.
* Vilification of any kind towards another person.
* Discrimination against another person based on their age, gender or sexual orientation.
* Discrimination against another person based on their race, culture, religion or any other personal characteristic (protected or otherwise).
* Sexual harassment, intimidation or victimisation of another person.
* Competition manipulation and gambling on any activity that you are directly or indirectly connected to.
* Improper use of drugs and medicines.
* Conduct that is detrimental to the reputation or interests of the boxing and combat sports industry.

Failure to comply with the duties and responsibilities may result in the Board’s withdrawal of approval as a ringside doctor.