

## PARACANOE PROVISIONAL CLASSIFICATION FORM - KAYAK

### SECTION 1: ATHLETE DETAILS

NAME: \_\_\_\_\_ D.O.B.: \_\_\_\_\_ M / F

ADDRESS: \_\_\_\_\_

\_\_\_\_\_ STATE: \_\_\_\_\_ P/CODE: \_\_\_\_\_

EMAIL: \_\_\_\_\_ MOBILE: \_\_\_\_\_

MEDICAL DIAGNOSIS: \_\_\_\_\_

DESCRIPTION OF PRIMARY DISABILITY: \_\_\_\_\_

ASSOCIATED / ADDITIONAL DISABILITY: \_\_\_\_\_  
(e.g.: spinal deformity)

Ability to walk: Y / N      Crutches: Y / N      Wheelchair: Y / N (Electric / Manual)

How long have they been involved in Canoeing / Paracanoeing: \_\_\_\_\_

Does the athlete have an accredited coach / trainer in the sport: Y / N

If yes, details: \_\_\_\_\_

No. of training sessions per week: \_\_\_\_\_ Ave. length of sessions: \_\_\_\_\_

Cross training / weights etc.: Y / N      Type of training: \_\_\_\_\_

Previous sport / level of participation: \_\_\_\_\_

**SECTION 2: THERAPIST / DOCTOR DETAILS:**

TESTED BY (NAME): \_\_\_\_\_ SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_ CONTACT NO.: \_\_\_\_\_

EMAIL: \_\_\_\_\_

CLINIC ADDRESS: \_\_\_\_\_

**SECTION 3: GENERAL MEDICAL INFORMATION:**

Please list any orthopaedic or surgical procedures that may be relevant e.g. spinal fusion, tendon transfer, tendon release etc.:

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Medication (please list including dosage):

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**SECTION 4: SITTING BALANCE:**

PLEASE CIRCLE:      NORMAL                  FAIR                  POOR                  NONE

**SECTION 5: PHYSICAL ASSESSMENT – LEGS:**

Only the Muscle strength scores (middle section) are used for the ICF Paralympic Classification System. An athlete will score 2 for Muscle Strength if they have strength against resistance, and 50% or more of the sports specific ROM. Passive ROM, through the ranges shown on the score chart is tested prior to strength testing to confirm available ROM.

| Functional Assessment        | Muscle Strength through sports specific ROM (0 - 2 Scale) |            | Medical classifier's comments and observations |
|------------------------------|---|------------|--|
|                              | RIGHT   | LEFT       |  |
| <b>LOWER LIMBS</b>           |   |            |  |
| <b>HIPS</b>                  |   |            |  |
| Flexion 75° - 110°           |   |            |  |
| Extension 110° - 75°         |   |            |  |
| <b>KNEE</b>                  |   |            |  |
| Flexion 0° - 55°             |   |            |  |
| Extension 55° - 0°           |   |            |  |
| <b>ANKLE</b>                 |   |            |  |
| Plantarflexion 0° - 40°      |   |            |  |
| Dorsiflexion 40° - 0°        |   |            |  |
|                              |   |            |  |
| Leg Press                    |   |            |  |
| <b>TOTAL LOWER LEG SCORE</b> | <b>/14</b>  | <b>/14</b> |  |

Total number of points scored = / 28

|   |                             |                               |
|---|-----------------------------|-------------------------------|
| <b>Does athlete meet minimal eligibility criteria?</b><br>(loss of 4 points on one limb), if NO – the athlete is classed as Not Eligible (NE) | <b>YES</b>                  | <b>NOT ELIGIBLE (NE)</b>      |
| <b>Which cluster does this score fit into (please tick):</b>  | CLUSTER 1<br>(0 – 2 points) | CLUSTER 2<br>(3 – 17 points)  |
|   |                             | CLUSTER 3<br>(18 – 24 points) |

*NOTE: This cluster number needs to be added to the cluster numbers for the Trunk Assessment and the on-water observation to give the athlete an overall score.*

**SECTION 6: PHYSICAL ASSESSMENT - TRUNK:**

| Manual Muscle Tests         |               |
|-----------------------------|---------------|
| Test                        | Score (0 – 2) |
| Trunk Flexion               |               |
| Trunk Rotation to Right     |               |
| Trunk Rotation to Left      |               |
| Trunk Side Flexion to Right |               |
| Trunk Side Flexion to Left  |               |
| Trunk Lumbar Extension      |               |
| Trunk and Hip Extension     |               |

...../14

| Functional Trunk Tests                    |               |
|---|---------------|
| Test                                      | Score (0 – 2) |
| <b>Static</b>                             |               |
| Upright sitting (arms crossed)            |               |
| Upright sitting (shoulders flexed)        |               |
| Upright sitting (shoulders extended)      |               |
| Upright sitting (right shoulder abducted) |               |
| Upright sitting (left shoulder abducted)  |               |
|   | ...../10      |
| <b>Dynamic</b>                            |               |
| Active trunk flexion                      |               |
| Active trunk extension                    |               |
| Active trunk rotation to right            |               |
| Active trunk rotation to left             |               |
| Active trunk side flexion to right        |               |
| Active trunk side flexion to left         |               |
|   | ...../12      |
| <b>Perturbation Response</b>              |               |
| <b>Flex against Resistance</b>            |               |
| <b>Extend against Resistance</b>          |               |
| Resistance to right rotation              |               |
| Resistance to left rotation               |               |
| Resistance to right side flexion          |               |
| Resistance to left side flexion           |               |
| Trunk push into flexion                   |               |
| Trunk push into extension                 |               |
| Trunk push into right rotation            |               |
| Trunk push into left rotation             |               |
| Trunk push into right side flexion        |               |
| Trunk push into left side flexion         |               |
|   | ...../24      |

**Before starting the testing on the wobble cushion, ask the athlete to sit up straight and hold the position to make sure the athlete can sit still for 2 seconds. If they are unable to maintain good sitting posture on the cushion do not continue with the testing.**

| Functional Trunk Tests                |               |
|---------------------------------------|---------------|
| Test                                  | Score (0 – 2) |
| <b>Perturbation on Wobble Cushion</b> |               |
| Flex against Resistance               |               |
| Extend against Resistance             |               |
| Resistance to right rotation          |               |
| Resistance to left rotation           |               |
| Resistance to right side flexion      |               |
| Resistance to left side flexion       |               |
| Trunk push into flexion               |               |
| Trunk push into extension             |               |
| Trunk push into right rotation        |               |
| Trunk push into left rotation         |               |
| Trunk push into right side flexion    |               |
| Trunk push into left side flexion     |               |
|                                       | ...../24      |

**Total score for trunk =            /84**

|   |                              |                               |                               |
|---|------------------------------|-------------------------------|-------------------------------|
| Which cluster does this score fit into?<br>(tick one box) | Cluster 1<br>(0 - 16 points) | Cluster 2<br>(17 - 68 points) | Cluster 3<br>(69 - 84 points) |
|---|------------------------------|-------------------------------|-------------------------------|

NOTE: This cluster number needs to be added to the cluster numbers for the Lower limb Function and the On-water Observation, to give the athletes overall score.

**Therapist / Classifier Signature:**

**Therapist / Classifier Name:**

SECTION 7: PA PARACANOE ON-WATER TECHNICAL ASSESSMENT CHART - KAYAK

Athlete Name:

**K1 - ON WATER OBSERVATION**

Observed getting into the boat: Yes  
 Observed paddling away from dock: Yes  
 Observed paddling towards the dock: Yes  
 Observed paddling right to left (L to R): Yes  
 Start observed: Yes

*Intensity should vary from 50% effort to 100% effort*

Equipment passport submitted before competition:

Adapted equipment with paddler in boat (photo):

Adapted paddle (photo):

Athlete holds adapted paddle (photo):

Novice paddler:  Experienced paddler:

|  |  |                       |                    |
|--|--|-----------------------|--------------------|
| Right Leg movement                       | 0<br>Passive or no movement  | 1<br>Partial movement | 2<br>Full movement |
| Left Leg movement                        | 0<br>Passive or no movement  | 1<br>Partial movement | 2<br>Full movement |
|  | FOR 0 POINTS: Athletes may use adaptations and strapping to prevent unwanted movements of paralysed limbs or residual limbs to aid stability in the boat. These adaptations or straps cannot permit any leg movement in hip, knee or foot flexion/extension. |                       |                    |
|  | FOR 1 POINT: Voluntary movement of hip flexion/extension or partial movement of hip and knee flexion/extension. Example: above knee amputee.   |                       |                    |
|  | FOR 2 POINTS: Voluntary movement of hip and knee flexion/extension. Example: below knee amputee  |                       |                    |
| Angle of legs                            | High   | Normal                | Flat               |
| Foot/legs contact with footboard or boat | Yes  | No                    |                    |

|                |   |  |   |
|----------------|---|--|---|
| Balance        | 0<br>Functional Balance is compromised by using the upper trunk only.<br>(Look for: need for straps, high seat) | 1<br>Functional Balance is compromised by using the upper and lower trunk only.<br>(Look for: need for lower backrest, strap around hips/legs) | 2<br>Functional Balance is achieved using the upper and lower trunk and full/partial leg(s)<br>(no need for strapping; regular seat.) |
| Trunk Posture  | 0<br>Backwards/C-shaped   | 1<br>Upright   | 2<br>Forward (Flex)   |
| Trunk Rotation | 0<br>No rotation  | 1<br>Partial rotation  | 2<br>Full rotation  |

|  |                              |  |  |
|--|------------------------------|--|--|
| Trunk Side flexion                                     | 0<br>Both sides, head moving | 1<br>One side                          | 2<br>No side flexion                     |
| Range of stroke motion                                 | Short    Normal    Long      | Symmetrical<br>Yes                  No |  |
| Depth of paddle stroke                                 | Deep                         | Shallow                                | Wide                                     |
| Stroke speed   | Slow                         | Regular                                | Fast                  Able to vary speed |
| Stroke synchronization                                 | Basic                        | Regular                                | Good                                     |
| <b>TOTAL POINTS</b>                                    |                              |  |  |
| Which cluster does this score fit into<br>(Circle one) | Cluster 1<br>0 – 3 points    | Cluster 2<br>4 – 8 points              | Cluster 3<br>9 – 12 points               |

**Therapist / Classifier Signature:**

**Therapist / Classifier Name:**