

World ParaDarts Medical Assessment Form

This assessment must be completed by a suitably qualified Medical Physician
(please read page 2 for the details of the impairments covered)
Please answer all questions/sections (if not fully completed it will be rejected)
And please print all answers so they can be translated easily
The Patient's name
Has been diagnosed with the following disability/health condition
This condition is permanent. Yes/no
Does the patient play in a wheelchair/or standing?
The Patient has the following impairment(s) as described on page 2 of this document (please tick all that apply):
Impaired muscle power
Impaired passive range of motion
Limb deficiency
Leg length difference
Short stature
Hypertonia
Ataxia
Athetosis
The patient has none of the above impairments
Does the patient have permanent central nervous system damage Yes/No
Physicians Comments:
Physicians Signature
Date
Physicians name and address



1. IMPAIRED MUSCLE POWER

Reduced force generated by muscles or muscle groups, such as muscles of one limb or the lower half of the body, as caused, for example, by spinal cord injuries, spina bifida or polio

Includes spinal cord damage as result of injury or a congenital condition. Other examples are transverse myelitis, sacral agenesis, spinal tumours, nerve damage, Erbs Palsy, Muscular dystrophies or other conditions that causes loss of muscle strength or paralysis in the trunk and legs (paraplegia) or legs, trunk and arms (quadriplegia).

2. IMPAIRED PASSIVE RANGE OF MOVEMENT

Range of movement in one or more joints is reduced permanently, for example due to arthrogryposis, Talipes Equinovarus. However, Hypermobility of joints, joint instability, and acute conditions, such as arthritis, are not considered eligible impairments.

Minimal Disability

As a guide the full fusion of one ankle or wrist is the minimum

3. LIMB DEFICIENCY

Total or partial absence of bones or joints as a consequence of trauma (e.g. car accident), illness (e.g. bone cancer) or congenital limb deficiency (e.g. dysmelia).

Minimal Disability

Generally, the amputation must be at least through the ankle or wrist but will be assessed on an individual basis.

4. LEG LENGTH DIFFERENCE

Bone shortening in one leg due to congenital deficiency or trauma. Eg Dysmelia

Minimal Disability

As a guide a length difference of 7cm is considered

5. SHORT STATURE

Reduced standing height due to abnormal dimensions of bones of upper and lower limbs or trunk, for example due to achondroplasia or growth hormone dysfunction.

Minimal Disability

The height for athletes with short stature is a maximum of 145cm

6. HYPERTONIA

Abnormal increase in muscle tension and a reduced ability of a muscle to stretch, due to injury, illness or a health condition or a neurological condition, such as cerebral palsy, brain injury or multiple sclerosis.

7. ATAXIA

Lack of co-ordination of muscle movements due to a neurological condition, such as cerebral palsy, brain injury or multiple sclerosis.

8. ATHETOSIS

Generally characterised by unbalanced, involuntary movements and a difficulty in maintaining a symmetrical posture, due to a neurological condition, such as cerebral palsy, brain injury or multiple sclerosis.