



Review Year: _____

Status: N R C

Protested: P

CLASSIFICATION EVALUATION SHEET for Athletes with Functional Impairment

FAMILY NAME: _____

GIVEN NAME: _____

DATE OF BIRTH (dd/mm/yyyy): _____ GENDER: MALE / FEMALE

CITY/STATE/COUNTRY: _____

Diagnosis + Associated Diagnosis: _____

_____ Since _____

Progressive: Yes/No

Ability to Walk: Yes/No Crutches/Aids: Yes/No Wheelchair: Yes/No

Accredited Coach/Trainer: Yes/No

How long involved in Competitive Swimming: _____

No. of Training Sessions per week: _____

Length of each Training Sessions: _____

Cross Training: YES/NO Type: _____

No. of Competitions within the past 12 months: _____

Testing Place, Date _____ CLASSES: S SB SM

MEDICAL TESTER'S SIGNATURE

TECHNICAL TESTER'S SIGNATURE

SWIMMER'S SIGNATURE

Printed name:

Printed name:

Codes for Exceptions: _____

Assistance required for start: Yes/No
Assistance required to enter and exit the water: Yes/No

Start: _____

Freestyle: _____

Backstroke: _____

Butterfly: _____

Breaststroke: _____

Comments: _____

BENCH TEST	Coordination Muscle Test		Contracture ROM	
	RIGHT	LEFT	RIGHT	LEFT

UPPER LIMBS

Shoulder	S	SB	Flexion				
	S	X	Extension				
	X	X	Abduction				
	S	SB	Adduction				
	S	X	Ext. Rot				
	S	SB	Int. Rot				
Elbow	S	SB	Flexion				
	S	SB	Extension				
	S	SB	Pronation				
Wrist	S	SB	Flexion				
	S	X	Extension				
	X	SB	Uln. Abn				
Finger	S	SB	Flexion				
	S	SB	Extension				
	S	SB	Adduction				
TOTAL S							
TOTAL SB							

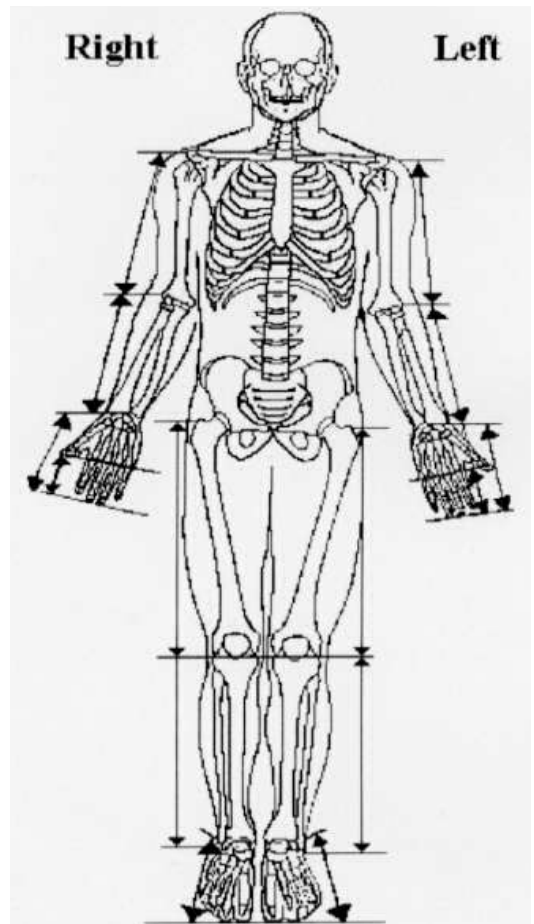
Dive Start and Push-off : S and SB Strokes

Start in water with assistance	0 points
Start in water without assistance	1-2 points
Falls into the water	1-2 points
Poor functional dive with one leg	3-4 points
Poor functional dive with both legs	5-6 points
Good functional dive with one leg	7-8 points
Good functional dive with both legs	9-10 points
Dive with one non-functional arm <i>(dragging or above elbow amp)</i>	9 points
Dive with non-functional arms <i>(dragging or above elbow amp)</i>	7 points
No push-off with legs possible	0 points
Push-off only with any single joint	1-2 points
Poor functional push-off with one leg	3-4 points
Poor functional push-off with both legs	5-6 points
Good functional push-off with one leg	7-8 points
Good functional push-off with both legs	9-10 points
Turning without arms <i>(dragging or above elbow amp)</i>	7 points
Turning with one arm <i>(dragging or above elbow amp)</i>	9 points

BODY HEIGHT:.....cms

HEAD TO BUTTOCK:.....cms

AMPUTATION



Highlight amputated limb/s (with highlighter and draw in particular features).
Fill in the measurement in cms. of the amputated limb

Lower limb length difference in cm:

TRUNK

Trunk	S	SB	Flx. Upper				
	S	SB	Flx. Lower				
	S	SB	Ext Upper				
	S	SB	Ext. Lower				
	S	X	Rotation				
TOTAL S							
TOTAL SB							

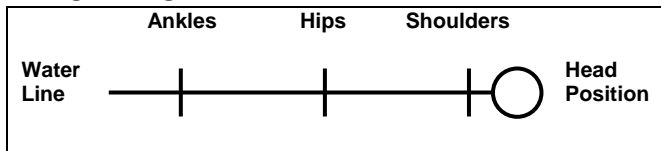
LOWER LIMBS

Hip	S	SB	Flexion						
	S	SB	Extension						
	X	SB	Abduction						
	S	SB	Adduction						
	X	SB	Ext. Rot						
	S	SB	Int. Rot						
Knee	S	SB	Flexion						
	S	SB	Extension						
Ankle	S	SB	Dorsiflex.						
	S	SB	Plantaflex.						
	S	SB	Pronation						
	S	SB	Supination						
TOTAL S									
TOTAL SB									

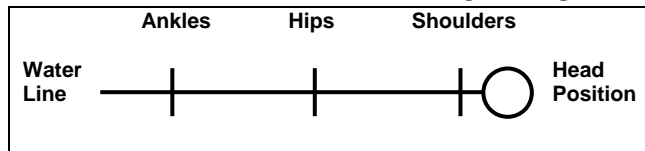
FUNCTIONAL STATUS WATER TEST

BODY POSITION

FACE FLOAT



BACK FLOAT



WATER TEST S – FUNCTIONAL

UPPER LIMBS

TOTAL ARMS FUNCTIONAL			
RIGHT (65)		LEFT (65)	
B	W	B	W

WATER TEST SB - FUNCTIONAL

UPPER LIMBS

TOTAL ARMS FUNCTIONAL			
RIGHT(55)		LEFT (55)	
B	W	B	W

TRUNK

TOTAL TRUNK FUNCTIONAL			
RIGHT (25)		LEFT (25)	
B	W	B	W

TRUNK

TOTAL TRUNK FUNCTIONAL			
RIGHT (20)		LEFT (20)	
B	W	B	W

LOWER LIMBS

TOTAL LEGS FUNCTIONAL			
RIGHT (50)		LEFT (50)	
B	W	B	W

LOWER LIMBS

TOTAL LEGS FUNCTIONAL			
RIGHT (60)		LEFT (60)	
B	W	B	W

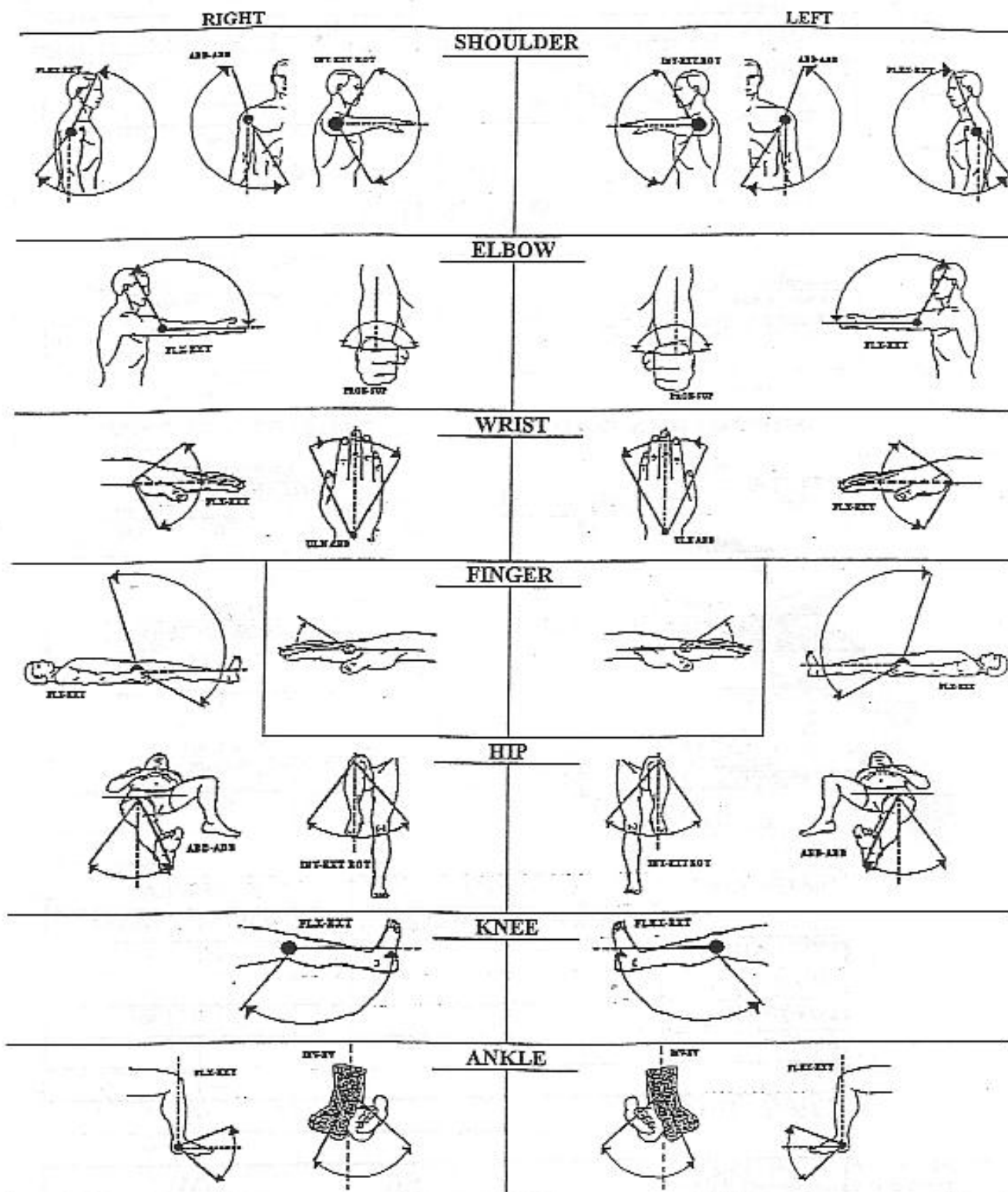
POINTS SCORE

	S-STROKE		SB-STROKE	
	BENCH	WATER	BENCH	WATER
UPPER LIMBS				
TRUNK				
LOWER LIMBS				
START				
TURN				
TOTAL				

CLASSES	S	SB	SM
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Comments:

RANGE OF MOVEMENTS



Points System:

- 0 No joint mobility
- 1 Slight movement completely unfunctional
- 2 25% of the FROMS
- 3 50% of the FROMS
- 4 75% of the FROMS
- 5 Functional Range of Movement for Swimming (FROMS)

Fill in the start and the end positions of each movement affected and their corresponding degrees in numbers. Mark clearly with a zero (0) if not movement is present.

Highlight the range of movement that is active