Rule 4 SANCTION REQUIREMENTS

4.1 Change in procedure: Approval, LBCs will approve sanctions within their geographic borders for local, state/LBC, regional events and regional and state Affiliated/Group Member Organization events. Sanctions for NGBA, USBA and NLA non-advancing events will be approved by the LBC governing the geographic area in which the event is held.

4.7 Added: LBC Rate card which will be posted on the USA Boxing website outlining fees each specific LBC charges for membership, events, etc.

Rule 5 BOXER’S QUALIFICATION: MEDICAL ASPECTS

5.2 (3 Added: Within specifications, beards allowed for Master Boxers and considered for religious exemption requests

Rule 7 CLASSIFICATION OF BOXERS

7.1 f. The age of a boxer is determined using his/her YEAR of birth (a boxer must be eight (8) years old to become a member of USA Boxing)

7.7 Added: Common Sense Rule providing latitude for weigh-in requirement for unopposed boxers at regional tournaments

Rule 8.2 ELIGIBILITY OF AMATEUR COMBAT SPORTS PARTICIPANTS

8.2 (1 b & c Added: waiver procedure allowing consideration for former amateur combat sports participants to compete as novice boxers, see Appendix K

RULE 9 MATCHED BOUTS

9.2 Added full section on Religious Exemptions

RULE 10 DEVELOPMENTAL BOUTS

Added Appendix I which covers Developmental Bout

RULE 15 DECISIONS

15.2 Added Win by Abandon – ABD

15.3 Added Referee Stops Contest – RSC

15.3(1) Correction – changed ABD to RSC

15.4 Added Referee Stops Contest-Injury – RSC-I

RULE 37 HEADGEAR

37.3 Changed – Headgear will be worn in ALL USA Boxing sanctioned events with one possible exception: 1) In the final of national championships leading to international
competition, USA Boxing may require elite male boxers to compete without headgear in accordance with AIBA Competition Rules.

RULE 41 AFFILIATED ORGANIZATIONS NATIONAL TOURNAMENTS

4.1.1 Added: USA Boxing approved rule modifications will be posted on USA Boxing’s Website

APPENDIX A DUTIES AND GUIDELINES FOR COMPETITION OFFICIALS

7.1 NTO (National Technical Official) will be established beginning January 1, 2018

APPENDIX B - Updated version of the Athlete (boxer) Code of Conduct

APPENDIX C - Updated version of the Non-Athlete Code of Conduct

APPENDIX D - USA Boxing R&R Management System

- Changed: Education/Clinics & Testing - Officials Certification (Levels I, II, and III) will have a duration of two (2) years (24 months); all officials must re-certify every 2 years

- Changed: USA Boxing Master Officials - Master Official criteria has changed; minimum age now 65 with 15 years of service. Members with current Master Official designation will not pay the membership fee but shall begin paying for background screening fees on 11/1/2017. Members receiving Master Official designation beginning 11/1/2017 will pay the full membership/background screening fee

APPENDIX F - Updated Version – Guide for Making Matches at the Local Level

APPENDIX G - FORMS & WAIVERS

- Added: Release to Compete after Lasik Surgery

APPENDIX H - MASTERS BOXING

- Added: With signed release, Master boxers may compete after Lasik surgery

APPENDIX J - ADDED: USA BOXING SANCTION POLICY

APPENDIX K - ADDED: WAIVER REQUEST - Combat Sport to Open Division

APPENDIX M - ADDED: Criteria for all event documents (fact sheet, application, etc.) and Sample Event Poster
Release to Compete with Braces

Boxers who wish to compete with braces are required to have attached to their passports a completed Release to Compete with Braces form. This form requires the written approval of their dentist/orthodontist, parents and/or guardian (if under 18 years of age) and a dentist-molded mouthpiece. This includes upper and/or lower braces. Boxers competing with braces waive the right to dental coverage under the USA Boxing insurance program.

I understand the above rule and give my permission for ________________________________ (Boxer's name) to participate in amateur boxing.

Dentist Approval:

______________________________  ________________________________
Print Name                                    Signature

______________________________  ________________________________
Date                                    State License Number

Parent or Legal Guardian Approval (if boxer is a minor):

______________________________  ________________________________
Print Name                                    Signature  Date

Athlete/Boxer:

______________________________  ________________________________
Print Name                                    Signature  Date
USA BOXING DECLARATION OF NON-PREGNANCY

1. Declaration of non-pregnancy for female boxers aged 18 (eighteen) and older

Date: __________________________
Place: __________________________
Name of Competition: __________________________

I, __________________________ declare that I am not pregnant.

I understand the seriousness of this statement and accept full responsibility for it. In the case that this declaration is subsequently shown to be inaccurate or untrue and I suffer any related injury or damage during the competition, I, on behalf of myself, my heirs, executors and administrators, waive and release any and all claims for damages I may have against AIBA (including its officials and employees), the organizers of the competition (including the Organizing Committee and/or Host Federation) and the competition venue owners for such injury or damage.

Signature of the Boxer

2. Declaration of non-pregnancy for female boxers aged UNDER 18 (eighteen)

Date: __________________________
Place: __________________________
Name of Competition: __________________________

I, __________________________ am one of the parents/legal caretaker of __________________________ (insert name of boxer) and declare, on her behalf, that she is not pregnant.

I understand the seriousness of this statement and accept full responsibility for it. In the case that this declaration is subsequently shown to be inaccurate or untrue and __________________________ (insert name of boxer) suffers any related injury or damage during the competition, I, on behalf of __________________________ (insert name of boxer) her heirs, executors and administrators, waive and release any and all claims for damages she may have against AIBA (including its officials and employees), the organizers of the competition (including the Organizing Committee and/or Host Federation) and the competition venue owners for such injury or damage.

Signature of one of the Parent(s)/Legal Caretaker Acknowledged by [signature of the boxer]
Release to Compete After Lasik Surgery

Boxers who wish to compete after LASIK surgery are required to have attached to their passports a completed Release to Compete After LASIK Surgery form. This form requires the written approval of their ophthalmologist. Boxers competing after LASIK surgery will not be covered under the USA Boxing insurance program for damage to the eyes.

I understand the above rule and give my permission for: __________________________

______________________________

Boxer’s Name

to compete in amateur boxing.

Ophthalmologist Approval:

______________________________

Signature

Print Name __________________________ Date ____________

State License Number __________________________ Date ____________

Athlete: __________________________

______________________________

Signature

Print Name __________________________ Date ____________
Release to Compete with Breast Implants

Boxers who wish to compete with breast implants are required to have attached to their passbooks a completed Release to Compete with Breast Implants form. This form requires the written approval of their plastic surgeon, their primary care provider, and parent and/or guardian (if under 18 years of age). Boxers competing with breast implants will not be covered under the USA Boxing insurance program for damage to the implants, replacement of same or injury occurring from such damage.

I understand the above rule and give my permission for __________ to participate in amateur boxing. (Boxer’s name)

Plastic Surgeon Approval:

<table>
<thead>
<tr>
<th>Print Name</th>
<th>Signature</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date</td>
<td>State License Number</td>
</tr>
</tbody>
</table>

Primary Care Physician Approval:

<table>
<thead>
<tr>
<th>Print Name</th>
<th>Signature</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date</td>
<td>State License Number</td>
</tr>
</tbody>
</table>

Parent or Legal Guardian Approval (if boxer is a minor):

<table>
<thead>
<tr>
<th>Print Name</th>
<th>Signature</th>
<th>Date</th>
</tr>
</thead>
</table>

Athlete/Boxer:

<table>
<thead>
<tr>
<th>Print Name</th>
<th>Signature</th>
<th>Date</th>
</tr>
</thead>
</table>
# Preparticipation Physical Evaluation

**PHYSICAL EXAMINATION FORM**

**Name:** 

**Date of Birth:** 

---

**PHYSICIAN KNOWLEDGE**

- **Cardiovascular:**
  - History of cardiovascular disease or risk factors?
  - Family history of cardiovascular disease or premature death?
  - Any heart murmurs or other abnormal heart sounds?

- **Pulmonary:**
  - History of asthma, chronic bronchitis, or lung disease?
  - Any symptoms of respiratory infection or difficulty breathing?

- **Neurological:**
  - History of head injury, seizures, or other neurological problems?
  - Any symptoms of dizziness, fainting, or blackouts?

- **Musculoskeletal:**
  - History of fractures, dislocations, or other musculoskeletal injuries?
  - Any history of joint pain or stiffness?

- **Metabolic:**
  - History of diabetes, hypertension, or other metabolic disorders?
  - Any symptoms of polyuria, polydipsia, or weight loss?

- **Hematological:**
  - History of anemia, blood disorders, or bleeding problems?
  - Any symptoms of fatigue or pale skin?

- **Endocrine:**
  - History of thyroid problems, diabetes, or other endocrine disorders?
  - Any symptoms of weight gain or loss, changes in appetite?

- **Gastrointestinal:**
  - History of gastrointestinal problems, including irritable bowel syndrome or constipation?
  - Any symptoms of abdominal pain, nausea, or vomiting?

- **Genitourinary:**
  - History of urinary tract infections, kidney stones, or other genitourinary problems?
  - Any symptoms of difficulty urinating, frequent urination, or sexual dysfunction?

- **Psychiatric:**
  - History of mental health disorders, including depression or anxiety?
  - Any symptoms of irritability, aggression, or insomnia?

- **Drug Use:**
  - History of drug or alcohol use, including substance abuse?
  - Any symptoms of impaired judgment or memory loss?

- **Family History:**
  - History of family members with heart disease, stroke, or cancer?
  - Any family history of premature death or genetic disorders?

---

**PHYSICAL EXAMINATION**

- **General Observations:**
  - General appearance, weight, height, vital signs, and overall condition.

- **Musculoskeletal:**
  - Range of motion, strength, endurance, and coordination.

- **Cardiovascular:**
  - Pulse rate, rhythm, and blood pressure.

- **Respiratory:**
  - Breathing pattern, lung fields, and chest expansion.

- **Gastrointestinal:**
  - Abdominal examination, bowel sounds, and rectal exam.

- **Neurological:**
  - Motor function, reflexes, and sensory examination.

- **Skin:**
  - Skin color, texture, moles, and lesions.

- **Other:**
  - Any other abnormalities noted.

---

**MEDICAL HISTORY**

- **Present Illness:**
  - Description of current or past illness.

- **Past Medical History:**
  - List of all previous medical conditions.

- **Medications:**
  - List of all prescribed and over-the-counter medications.

- **Allergies:**
  - List of all known allergies.

- **Operative History:**
  - List of all surgical procedures.

- **Family History:**
  - Description of family health history.

---

**RECOMMENDATIONS**

- **Fitness:**
  - Recommendations for fitness level, exercise intensity, and types of activity.

- **Sports Participation:**
  - Recommendations for sports participation, based on physical examination.

- **Follow-up:**
  - Recommendations for follow-up visits or further testing.

---

**Conclusion:**

- **Clearance to Participate:**
  - Decision regarding participation in physical activities.

- **Recommendations for Restriction:**
  - Recommendations for modification of physical activity.

---

**Signatures:**

- **Physician:**
  - Signature and date.

- **Parent/Guardian:**
  - Signature and date.

---

**Acknowledgements:**

- **American Academy of Pediatrics:**
  - Endorsed by the American Academy of Pediatrics.

- **American College of Sports Medicine:**
  - Endorsed by the American College of Sports Medicine.

- **American Academy of Orthopaedic Surgeons:**
  - Endorsed by the American Academy of Orthopaedic Surgeons.

- **American Medical Association:**
  - Endorsed by the American Medical Association.

- **American College of Cardiology:**
  - Endorsed by the American College of Cardiology.

- **American College of Sports Medicine:**
  - Endorsed by the American College of Sports Medicine.

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**Revised 3/1/2017**

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**Page 64**
Physical Examination Signature Page

I have examined the above-named athlete and completed the preparticipation physical evaluation. The athlete does not present apparent clinical contraindications to participate in the sport(s) as outlined above. A copy of the physical exam is on record in my office and can be made available at the request of the parents. If conditions arise after the athlete has been cleared for participation, the physician may rescind the clearance until the problem is resolved and the potential consequences are completely explained to the athlete (and parents) or guardian.

Name of physician (print/type) __________________ Date __________
Address ________________________________________________ Phone __________
Signature of physician _______________________________ MD or DO

Attach this page to your athlete packet (if possible, keep a copy for your records)
## Categorized Differences
### Between Amateur and Professional Boxing

<table>
<thead>
<tr>
<th>Amateur</th>
<th>Professional</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>1. Organization</strong></td>
<td>All amateur boxing is governed under the jurisdiction of a national or regional governing body (NGB). As an NGB, USA Boxing has jurisdiction over the regulations and rules of competition for amateur boxing in the U.S.</td>
</tr>
<tr>
<td></td>
<td>Many multi-national governing bodies have different sets of rules. Therefore, no single unified body exists, nor is there a singular set of standards, rules and regulations.</td>
</tr>
<tr>
<td><strong>2. Incentives</strong></td>
<td>Amateur boxing uses the same set of rules worldwide. While USA Boxing’s rules continue to follow the international rules, USA Boxing has more stringent rules in some areas for safety.</td>
</tr>
<tr>
<td></td>
<td>These differences exist in the USA, WBC, IBF, etc., and those set by state commissions.</td>
</tr>
<tr>
<td><strong>3. Philosophy</strong></td>
<td>The main objective is to score points. In amateur boxing, the intent of a blow is its effect on the opponent does not count. Therefore, the knockout is the purpose in amateur boxing. A blow that causes a fighter to fall outside the ring counts as a regular loss. A knockout is scored as a single blow and does not necessarily make the bout a winner of the round.</td>
</tr>
<tr>
<td></td>
<td>Added weight is given to a blow based on its impact and effect on one’s opponent. Therefore, the knockout under knockout is an objective in the prog.</td>
</tr>
</tbody>
</table>

### Amateur vs. Professional

<table>
<thead>
<tr>
<th>4. Safety during the competition</th>
<th>a. A form-fitted mouthpiece is required and must be worn at all times; if it falls out, it is replaced immediately</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>b. Headguard is mandatory in the U.S. and in major international competitions.</td>
</tr>
<tr>
<td></td>
<td>c. Boxers receive standing eight counts. This is a safety precaution that gives the referee eight seconds to evaluate the condition of the boxer. Based on his decision, the bout may continue or be stopped.</td>
</tr>
<tr>
<td></td>
<td>d. Certain pro world bodies have recently adopted this rules.</td>
</tr>
<tr>
<td></td>
<td>a. The rule applies to pro contests in certain states, but is not uniform.</td>
</tr>
<tr>
<td></td>
<td>b. Prohibited.</td>
</tr>
</tbody>
</table>
### Amateur vs. Professional

#### Safety (cont'd)

<table>
<thead>
<tr>
<th>Amateur</th>
<th>Professional</th>
</tr>
</thead>
<tbody>
<tr>
<td>d. Injuries — referee stops the action and takes the boxer to the corner for the doctor to examine the injury and get an opinion. Based on the physician's opinion, the bout will continue or be stopped. The physician may suspend the action at his/her discretion, at any point during the match to examine a boxer. The physician may also examine a boxer between rounds. The physician's decision to stop or continue a match is binding.</td>
<td></td>
</tr>
<tr>
<td>e. Measures are standardized by the referee in the ring. Referee caution boxers to let them know that they are violating fundamentals and rules.</td>
<td></td>
</tr>
<tr>
<td>f. Referee will stop the bout if a boxer is out-classed.</td>
<td></td>
</tr>
<tr>
<td>g. If a bout is stopped because of blows to the head, the boxer is not allowed to compete or workout in the gym for a minimum of 30 days.</td>
<td></td>
</tr>
<tr>
<td>h. All amateurs are registered with USA Boxing.</td>
<td></td>
</tr>
<tr>
<td>i. Rules are less strict on injuries that stop a bout — i.e., a boxer will continue to box if his eye is swollen shut or if a cut around the eyes, nose or mouth is badly bleeding.</td>
<td></td>
</tr>
<tr>
<td>j. The use of the head (hitting) is strictly regulated — boxers are cautioned but may be warned or lose points if they continue.</td>
<td></td>
</tr>
<tr>
<td>k. No single system exists; is controlled by local groups.</td>
<td></td>
</tr>
<tr>
<td>l. In cases, but not in all cases. Depends on the state.</td>
<td></td>
</tr>
</tbody>
</table>
Amateur vs. Professional

7. Rounds
Men – Four two-minute rounds, with one minute break in between.
For Junior Olympic boxers, rounds are graduated in length from one minute to two minutes, depending on age group.
Internationally, may use four two-minute rounds; may also do so in U.S.
Senior Women box Four two-minute rounds at American National tournaments but only three rounds when they compete internationally.

Vary considerably.

OVERVIEW
Table 9F-3. Amateur Boxing Guidelines for Return to Training or Competition

<table>
<thead>
<tr>
<th>RSCH</th>
<th>LOC</th>
<th>First Concussion</th>
<th>Second Concussion</th>
</tr>
</thead>
<tbody>
<tr>
<td>30</td>
<td>No LOC</td>
<td>30-day restriction</td>
<td>After an RSCH 30, a 90-day restriction</td>
</tr>
<tr>
<td>90</td>
<td>&lt;2MIN</td>
<td>90-day restriction</td>
<td>After an RSCH 90, a 180-day restriction</td>
</tr>
<tr>
<td>180</td>
<td>&gt;2MIN</td>
<td>180-day restriction</td>
<td>After an RSCH 180, a 365-day restriction</td>
</tr>
</tbody>
</table>
“AIDS Rule”

- If both boxers are bleeding or if one is bleeding and the other has open skin, the bout MAY be stopped. Winner decided on points.
- All equipment, e.g. gloves and headgear, that are used by more than one boxer should be cleaned with 10% bleach.
Disposition of Injured

- Render first aid as a Good Samaritan.
- Instructions for care and or referral should be given in writing.
- This may be written in the passbook. If it is being held, provide additional instructions.
- For head injuries, use the Restriction Affidavit, which has a Head Sheet on the athlete’s copy.
- You may use hand-outs of your own too.
- Talk with family too, if possible, as well a coach.
Disposition cont.

- In an emergency, render aid as a Good Samaritan and call for the EMT service.
- Facilitate transfer to them and be certain Hospital is contacted.
- If boxer is unconscious or if you cannot evaluate spinal integrity, have the boxer transported with full spinal precautions.
Disposition cont.

- It is the coaches responsibility to take the boxer home or to his lodging and pass the information on to parents.
- Use the Refusal of Treatment Form if appropriate.
- If referral is to an ER, call ahead and give report. Boxer may not give a decent Hx.
1.9. Ringside Physicians are responsible for performing Pre-Bout Physical Examinations and Post-Bout Physical Examinations as well as providing attendance, triage and first aid at ringside. Any Licensed Medical Doctor or Licensed Doctor of Osteopathy may do the Initial Medical Certificate (History and Physical Examination) and Annual History & Physical examinations.

1.10. Doctors working in the field of AIBA OPEN Boxing (formerly referred to as Olympic Style Boxing) must always have up-to-date information and be in a position to provide information for others.

2. Disqualifying Conditions

2.1. The examining physician at the Initial Medical Certification or any subsequent Annual Exam or a designated ringside doctor at any sanctioned event may declare a boxer unfit to box for any condition which would endanger that boxer, his opponent or the officials.

2.2. The most important consideration for all of us in this sport is the Safety of the Boxer. It is our goal as doctors, however, to allow as many candidates as possible to compete in boxing as their health and disabilities allow. The Disqualifications listed in previous documents were intentionally left quite open to allow each individual to be judged on his own merits. We have been asked to add more examples which we have done. Conditions specifically noted below are considered virtually absolute. Other abnormalities are to be judged according to each individual’s capabilities. Questions and requests for review may be referred to the Medical Boards by calling the USA Boxing’s national office or directly to either Medical Board President, if

2.3. USA Boxing’s medical guidelines for disqualifying conditions are “evidence of or disclosed history of the following conditions in an initial, annual or pre-bout medical examination”:

2.3.1. Acute and chronic infections including those conditions, but not limited to fever, chest infection, untreated tuberculosis, intestinal infection with potential dehydration/malabsorption, hepatitis, open infected skin lesions (including H. Simplex, MRSA, impetigo, untreated fungal infections, etc.), mononucleosis within the past month, etc.

2.3.2. Severe blood dyscrasias and clotting disorders which include therapeutic anticoagulation
2.3.3. Sickle cell disease
2.3.4. History of Hepatitis B, Hepatitis C or HIV infection
2.3.5. Refractive (Lasik) and intraocular surgery, cataract, retinal detachment
2.3.6. Myopia of more than -3.50 diopters in one or both eyes
2.3.7. Recorded visual acuity in one or both eyes of: uncorrected worse than 20/200; corrected worse than 20/60
2.3.8. Significant congenital or acquired cardiovascular and pulmonary abnormalities including, but not limited to, severe COPD, uncontrolled asthma with potential for hypoxemia, pulmonary hypertension, severe aortic or pulmonary stenosis, myocarditis or pericarditis, recent embolic disease, 3rd degree heart block, atrial or ventricular tachycardia, coarctation of the aorta, unclamped significant patent ductus arteriosus, aortic aneurysm and any of those conditions that have undergone corrective surgery or ablation unless specifically released by a cardiothoracic physician to return to contact/combat sports. Resting BP over 160/100 is considered uncontrolled and a disqualification; however, if the resting BP is over 140/90, the boxer may participate if previous recorded blood pressures have been controlled. Any boxer with persistent BP over 135/85 should be recommended for follow-up with their own personal physician.
2.3.9. Significant congenital or acquired musculoskeletal deficiencies including, but not limited to, spinal fractures, spondylolisthesis, atlantoaxial instability, and the following conditions if they inhibit the boxer’s defense, balance or ability to use the authorized headgear/gloves: loss of thumb or great toe, unstable/subluxing joints
2.3.10. Unresolved post-concussion symptoms, which will need clearance from a qualified licensed physician
2.3.11. Significant neuropsychiatric disturbances or drug abuse
2.3.12. Significant congenital or acquired intracranial mass lesions or bleeding, (benign or smaller CNS lesions require the clearance by a neurosurgeon regarding participation in a contact/combat sport), history of craniotomy, cerebral palsy or hypoxic brain injuries, significant neuropathies which affect balance, sensation, and ability to provide adequate defense
2.3.13. Any seizure activity within the last 3 years
2.3.14. Hepatomegaly, splenomegaly, ascites
2.3.15. Pregnancy
2.3.16. Uncontrolled diabetes mellitus or uncontrolled thyroid disease
2.3.17. Any implantable device which can alter any physiologic process or enhance performance
2.3.18 Women's breast protector which protects anything other than the breast protuberance itself

2.4. Conditions that are not disqualifying to box:

2.4.1. Desensitization must be made aware and the Referee may tap the deaf boxer on the shoulder if necessary to signal “break” or “stop.”

2.4.2. Boxers with dental braces or other orthodontic appliances as long as there is permission to box with Braces or Orthodontic Appliances form attached to the boxer’s passport. Note that this includes the newer permanent retainers in use.

2.4.3. Boxers with non-incarcerated hernias or absence of one testicle or an undescended testicle may participate as long as protective cup is in use at all times (competition and training).

2.4.4. Boxers with breast implants may participate as long as there is permission to box with Breast Implants form attached to her passport.

2.4.5. Sex reassignment (in accordance with IOC regulations): Any “individuals undergoing sex reassignment of male to female before puberty should be regarded as girls and women” (female). This also applies to individuals undergoing female to male reassignment, who should be regarded as boys and men (male).

Individuals undergoing sex reassignment from male to female after puberty (and vice versa) be eligible for participation in female or male competitions, respectively, under the following conditions:

- Surgical anatomical changes have been completed, including external genitalia changes and gonadectomy
- Legal recognition of their assigned sex has been conferred by the appropriate official authorities
- Hormonal therapy appropriate for the assigned sex has been administered in a verifiable manner and for a sufficient length of time to minimize gender-related advantages in sport competitions

Eligibility should begin no sooner than two years after gonadectomy. It is understood that a confidential case-by-case evaluation will occur. In the event that the gender of a competing athlete is questioned, the medical commission shall have the authority to take all appropriate measures for the determination of the gender of a competitor.

3. Medical Examinations

3.1. “Medical Examinations or Exams”, wherever mentioned in the Handbook, include a Relevant History and Physical Exam as outlined below.

3.2. As of January 1, 2014, all USA Boxers are required to have annual medical examinations. This may also be called the Medical Certificate.

3.3. This is to be repeated annually according to date.