ABC 2019 CONFERENCE MEDICAL UPDATE Scottsdale at McCormick Ranch Hotel July 31st, 2019

LEGAL CONSIDERATION IN RINGSIDE MEDICINE

Dr. Michael Schwartz

Co-Chairman - Medical Advisory Committee - Association of Boxing Commissions (ABC)

Chief Ringside Physician - Professional Boxing & Mixed Martial Arts

Mohegan Sun, Foxwoods Resorts & the State of Connecticut

- Several lawsuits every year related to boxing & MMA injuries/deaths
- Generally lawsuits are in excess of \$100 million dollars
- Lawsuits involve time and money, create stress and anxiety and may affect your job and your reputation as an administrator
- I am not an attorney, but as an expert witness in many cases, I have seen first hand what lawyers consider important deficiencies (real or perceived)
- My talk is in no way an effort to judge or criticize any one commission or individual just to review what I have seen to be common issues and deficiencies which may expose you up to legal action.

Lawsuits may occur when a fighter is injured or dies. In general, these suits are brought forth for various reasons/issues.

Most commonly:

- Failure to maintain safe conditions
- Failing to follow standard of care
- Negligence by a commission member
- Improper training of officials
- Inadequate supervision of officials
- Not recognizing potential "red flags"

Commissions having to deal with doctors, medical documents and ringside medicine issues are:

- Time consuming
- Aggravating
- Confusing
- Stressful

BUT IN ACTUALITY...YOU NEED TO RECOGNIZE THAT IT IS THE MOST IMPORTANT ASPECT OF YOUR JOB

WHO IS AT RISK?

- * Physicians
- * Commissions and Commissioners
- Referees
- Inspectors
- Promoters
- Television networks
- Venues
- Sanctioning bodies

Starts with the Medical Release Sharing of information (HIPAA)

MEDICAL INFORMATION RELEASE

AUTHORIZATION TO DISTRIBUTE MEDICAL INFORMATION TO ALL MEMBER COMMISSIONS AFFILIATED WITH THE ASSOCIATION OF BOXING COMMISSIONS (ABC)

I hereby authorize the (NAME OF COMMISSION) to release, disclose and furnish to any other commission or program affiliated with the Association of Boxing Commissions (ABC) any and all of my medical records obtained by the (NAME OF COMMISSION) concerning my licensure as a boxer or MMA contestant including, but not limited to, annual physical examinations, ophthalmological examinations, neurological examinations, negative tests for the HIV virus, Hepatitis B virus, and Hepatitis C virus, drug testing, hospital records, and any other information regarding conditions related to the propriety of my licensure as a boxer or MMA contestant (including history, findings, diagnosis and prognosis).

I understand, and it is agreed, that the signing of this Medical Information Release is optional, and that my declining to sign this document will not result in any adverse action being taken against me by the (NAME OF COMMISSION) or any of the member commissions affiliated with the ABC.

I understand, and it is agreed, that the medical records described herein will not be released for any purpose other than for the purpose of a member commission affiliated with the ABC determining my eligibility to participate in a boxing or MMA contest.

I understand, and it is agreed, that this authorization shall remain in effect for a period of one year from the date it is signed, and is relevant to all medical records described herein whether such records were created prior to, or subsequent to, the date the authorization is signed.

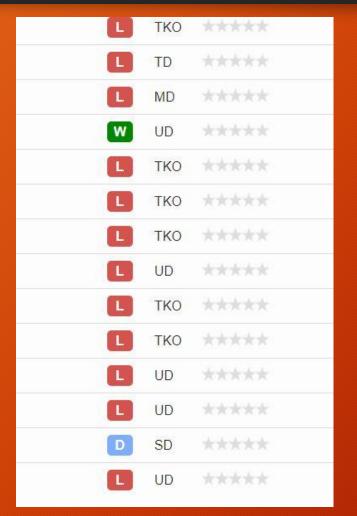
PRINTED NAME OF BOXER OR MMA CONTESTANT

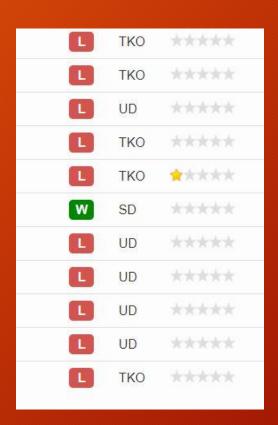
BOXER'S FEDERAL I.D. # OR MMA CONTESTANT'S NATIONAL I.D. #

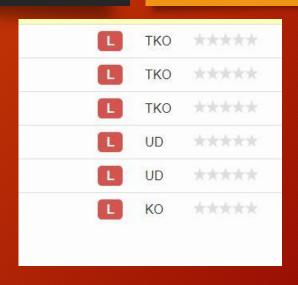
Pre-Event Considerations

- Pre-fight Exams and Forms
- Avoiding poor fighter matchups
- Discussing fighters with other commissions
- Don't allow fighters to fight on suspension (or if they have fought abroad while on suspension in the USA)
- Be aware of a fighter's record and their number of KO's/TKO's
- "Tough kid" philosophy is a recipe for disaster...it had got to stop
- Consecutive losses









Pre-Event Considerations

- Weight loss concerns
- No fighter should be permitted to lose more than 3% of their body weight per week leading up to the fight
- No fighter should be permitted to fight more than 10% below their "normal walking around" weight
- Rapid weight loss
- Allowing fighters who have lost too much weight may be a liability risk.

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Pre-fight Considerations: (forms and pre-fight exams)

- Should be preformed by a doctor (MD or DO)
- Should not be performed by a nurse, nurse practitioner, physician assistant, chiropractor or medical resident.
- Pertinent information must be shared with the fight night physician and commissioner if any issues of concern are identified.
- These include high blood pressure, history of chest pain or exertional SOB, inappropriate weight loss, family history of premature heart disease, medication use, recent injuries, etc..
- Any abnormal findings need to be conveyed to the commissioner or executive director.

• Pre Fight Considerations:

- Appoint qualified ringside physicians
- Not all doctors may be qualified to act as a ringside physicians
- Typical specialties include Internal medicine, family medicine, orthopedics, neurologist, emergency room, critical care, and sports medicine
- Gynecologists, dermatologists, ophthalmologists, podiatrists, etc. may work but must not be the primary physician at ringside.
- Must have some experience in sports medicine.
- This is not an "off the street" specialty. We are dealing with life and death situations
- Don't allow the promoter to appoint the ringside doctor as this might be interpreted as a conflict of interest.

PRE-FIGHT HISTORY FORM

VARY BY JURISDICTION BUT SHOULD BE UTILIZED IN SOME FASION

MUST BE REVIEWED

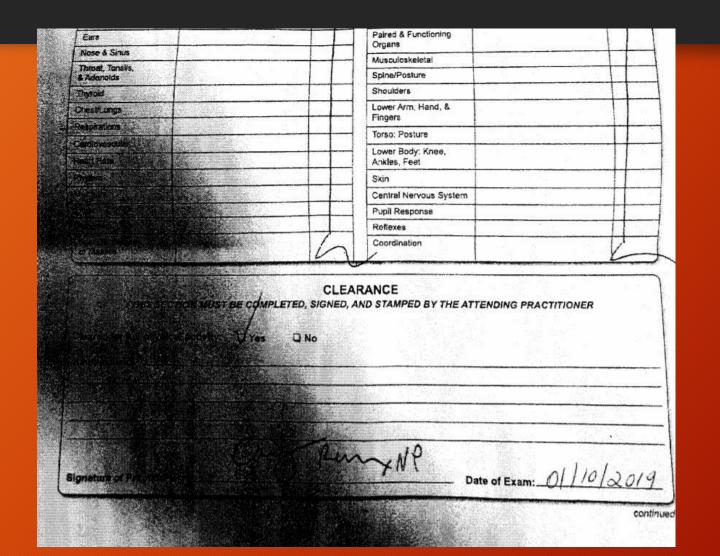


Medical History Form Professional Fight Record: W L D Date of Last Fight: / / If you answer yes to any of the following questions, please explain in the space provided below. 1) Do you have any medical problems? Yes () No () Do you take any medications on a regular basis? Yes () No () 3) Have you taken any medications for any purpose over the past 2 weeks? Yes () No () 4) Have you ever been stopped or knocked out? Yes () No () If yes, please list date: / / 5) Did anyone in your immediate family die from a heart problem before age 40? Yes () No () 6) Do you have any injuries which may affect your ability to fight? Yes () No () 7) Did you injure yourself while training for this fight? Yes () No () 8) Do you wear protective equipment while fighting? (for example-a knee brace) Yes () No () 9) Have you ever had surgery? (including eye or musculoskeletal) Yes () No () 10) Are you taking any vitamins, sport supplements, or herbal medications? Yes () No () Do you ever have any of the following? Dizziness or Fainting? Yes () Yes () No Chest Pains? Yes () No Shortness of Breath? Yes () No Heart Murmur? Yes () No 12) How much weight did you lose leading up to this fight? Please explain all yes answers in space below: I have answered the above questions truthfully and to the best of my knowledge. I know that purposely providing misinformation can result in disciplinary action, loss of my Federal ID #, and fines or suspensions. Fighter Signature: Co-Chairman - Medical Advisory Committee

Pre-fight Requirements: (Standard of Care)

- Should include a Pre-fight PE (by the fighters own PCP), Dilated eye exam, baseline EKG, CT/MRI, Neuro Exam (by a neurologist or neurosurgeon), HIV, Hep B and Hep C
- Should say "OK to fight" some doctors won't write this
- Over 40 should include a yearly MRI and one time stress test
- Allow your physician to require any additional test they deem necessary.
- Some states and tribal nations still don't require many of these tests. (Goes to minimum standard of care)

- Maintain records
- Missing or incomplete medical records increase liability risk
- Allowing fighter's to compete with missing or incomplete records will also increase liability.
- Medical data base is essential to assist commissions.
- Do not accept sub standard medical documentation



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- Try not to over-rule your ringside physician (i.e. requiring additional information or testing)
- If your ringside physician identifies an issue before the fight begins they should bring their concern to the commissioner/executive director who must be fully evaluate and consider the issue before allowing a fighter to compete
- This may include too much weight loss, elevated blood pressure or heart rate, pre-existing cuts or musculoskeletal injuries, signs of concussion sequalae, wheezing, etc..
- No one wants to postpone a bout, but no one wants a potential catastrophe either
- Overruling your doctor may increase your liability exposure

- OTHER:
- Don't violate your own rules (i.e. LASIK)
- Missing pre-fight requirement testing
- Medicals are expired
- Check names, DOB
- Proper doctor's doing the required exams
- Fraudulent medicals
- Wavers for abnormal medical findings may not protect you
- Allowing last minute medicals

- Translator at the pre-fight exam, in the corner during the fight and for the post-fight exam
- Minimum two physicians at ringside at all times if possible. Ideally three doctors are recommended
- Meet with ringside officials (pre-fight commission meeting)
- Document safety protocols are in place

Document Pre-fight safety

PRE-FIGHT CHECK LIST 1) Meet with EMT/Paramedic Team 0 0 2) Local Hospital Notified About The Fight 3) Seating for EMT/Paramedic Team 0 4) Review and Deliver Insurance Forms to EMT/Paramedic Team 5) Review Emergency/Egress Plans with EMT/Paramedic Team 6) Meet with Security Teams at Ringside 7) Conduct Referee Blood Pressures 8) Seating For Ringside Physicians 9) Hand out Post Fight Physical Forms 10) Assure Ambulance is on Site 11) Medical Equipment at or Near Ringside COMMENTS: Physician Name:

- Once the fight begins, referees, inspectors and doctors must work in conjunction to promote ringside safety
- Doctors need to meet with the referees to inform them where they are seated
- Inspectors need to know that the physician should be called into the ring/cage if they notice or hear any medically concerning issues.
- Physicians should be permitted to enter the ring/cage (during the rest period) to better evaluate a fighter.

- Physicians need to be seated at ringside prior to the start of every bout
- Physicians should be seated close to each of the fighter's corners in order to better see and hear the interactions between the cornermen and fighter
- Physicians should check on fighters between rounds if there are any concerns, especially if a knock down has taken place
- Inspectors need to contact the physicians if they note any abnormalities.
- Physicians should not be on their cell phones during a contest unless using them to communicate with others in the back of the house

- Allow "time-outs"
- If the ringside physician wishes to evaluate the fighter the referee must allow for a brief "time-out" after the full minute is given to the corner to work on their fighter.
- The physician should spend no more that 5-10 seconds determining if the fighter can continue
- The physician should then go over to the commissioner to discuss his/her findings if necessary

- Three knock down rule may not be in effect, but if a fighter is down three times, it is incumbent for the ref to be extra cautious if deciding to allow the fight to continue
- Referee should visit each corner after every round to briefly check on the fighter
- Referee must be educated in the pertinent medical signs and symptoms of concussions
- Referee should be aware of the fighter's record and history. Is this their first fight, do they have a habit of taking punches and recovering quickly and have they been stopped in a prior contest
- Must understand when to stop a fight

All of these "learning points" must be emphasized in referee training seminars and conveyed to the refs by the commissioner in the pre-fight commission meeting

- Although the referee may be the only one who can "officially" stop a fight, ABC and commission training must instruct the referee not to over-rule a doctor's decision that a fight should be stopped unless there is extremely compelling evidence to do so.
- Referees must be required to attend seminars to better understand their "medical" role in ringside safety
- Inspectors also must be required to attend seminars from time to time to understand their role in ringside safety as well.

- In the case of a potential life threatening catastrophe, the ringside physician should travel with the fighter in the ambulance
- Having only one doctor may prohibit enabling them from leaving
- This may be interpreted legally as a conflict of interest since leaving the venue would result in the cancelation of the remaining bouts.

- Post fight physical exams must take place on every fighter regardless of outcome
- Post fight forms must be signed by both the fighter and ringside physician
- Inspectors MUST stay with the fighter until they leave the venue even if the fight night has concluded
- Inspectors need to contact the ringside physician or commissioner if there are any changes in the fighter's condition (even after the post fight exam has taken place.)
- Inspectors have no role on determining if a fighter should be sent to the hospital.
- Post fight head injury forms

IMPORTANT MEDICAL INFORMATION

The Mohegan Tribal Athletic Commission considers your health and safety our number one priority. Please review the important medical information below.

The hospital used for medical treatment is Backus Hospital in Norwich, Connecticut. In the event of an emergency, you may be sent to the hospital via ambulance. Insurance forms have already been given to the emergency medical personnel. Should you decide to go to the hospital on your own, please make sure to ask the ringside physician for a copy of this insurance form and present it to the hospital upon your arrival.

Backus Hospital 326 Washington St Norwich, CT 06360 (860) 889-8331

Head Injury Instructions – Should you suffer a head injury or concussion, monitor your symptoms closely to ensure you do not have a more serious head injury. If you experience nausea, vomiting, worsening headaches, an unsteady gait, confusion, difficulty with speech or comprehension of words, persistent dizziness, neck pain or stiffness, heart palpitations, shortness of breath or vision changes, your head injury may be more serious than you originally believed. Because concussions can cause you to become confused, be sure to inform family members, co-workers or others around you that you've suffered a blow to the head and ask them to be on the watch for these symptoms or any unusual behavior.

Recommendations:

- Rest: Rest in bed or do quiet activities for the first 24 hours after the injury. Do not go to work or spend time
 on the computer. Do not watch television or text. The brain can be adversely affected by any activity. Rest
 allows the brain to recover quicker and reduces the risk for long term chronic damage. Do not return to your
 usual routine until all your symptoms have completely resolved.
- Ice: Ice helps decrease pain and swelling. Ice may also help prevent tissue damage. Use an ice pack or put
 crushed ice in a plastic bag. Cover it with a towel, and place it on your injury for 15 to 20 minutes every hour as
 directed. Ice can be used for the first 48-72 hours. After that, heat may be of benefit.
- Limit activity: Slowly return to your normal activities as directed. You may not be able to play sports or do
 activities that may result in a blow to the head. A second concussion can be life threatening if you have not
 recovered from the initial concussion.
- Have someone wake you up at different times during the night as directed: Have the person ask you a few
 questions to see if you are thinking clearly. An example would be to ask your name or your address. It is
 important not to be alone after suffering a concussion.
- Follow up with your personal physician: Always follow up with your personal physician to discuss any issues or concerns you may have should any symptoms persist.

- Don't leave the venue until ALL fighters have left this includes the inspector, ringside physician and commissioner/executive director.
- If they refuse to leave, inform them that the commission is leaving that they are no longer available for any issues which might occur.

CONCLUSIONS:

- You can do everything right, yet lawsuits may still occur.
- To reduce risk, make sure you follow standard of care.
- Document everything.
- Review your regulations and protocols on and on-going basis.
- Work together.
- Recognize that boxing and MMA are dangerous sports and bad outcomes occur regardless of doing everything correctly.
- Do not take short cuts.
- Appoint a chief ringside physician to oversee your medical department.
- Remember, there are cameras everywhere recording everything.
- Perception will be interpreted as reality
- As a commissioner, take an active role in stopping a fight....this is not the 40's or 50's

CONCLUSIONS: (Physician Crisis)

- Many doctors can no longer work due to liability risk.
- Most "Hospital Employed" doctors will rarely be covered for work as a ringside physician.
- Insurance riders are cost prohibitive for doctors.
- Indemnification for Ringside Physicians is essential or else it will become impossible to insure ringside physician participation.
- THIS IS A BIG EMERGING PROBLEM THAT NEEDS TO BE ADDRESSED

• Lawsuits can and WILL happen...assume that they will for every fight and be prepared.

• Questions?

\$100 MILLION IN COMPENSATION

FOR OUR CLIENTS

