



Medical Diagnostic Form for Athletes with Intellectual Impairments

To be eligible for World Karate Federation an athlete must have an underlying medical diagnosis (Health Condition) that results in a Permanent and Eligible Impairment. The measurement of impairment conducted during the classification process must correspond to the diagnosis indicated below.

Medical Diagnostic Form will be sent together with the Intellectual Assessment and Diagnostic Report by email to: wkf@wkf.net.

World Karate Federation holds the right to request further information, if additional information is required. The athlete will not be able to undergo classification, until such time as the requested information is provided. **All documents must be provided in English!**

Athlete Information

Family name:	
Given name/s:	
Gender: <input type="checkbox"/> Female <input type="checkbox"/> Male	Date of Birth: (dd/mm/yyyy)

Medical Information – to be completed in **English** by a **registered Medical Psychologist**

(Please circle)

Significant impairment in intellectual functioning (see guidelines for intellectual assessment below)	YES	NO
Significant limitations in adaptive behaviour as expressed in conceptual, social, and practical adaptive skills (see guidelines for intellectual assessment below)	YES	NO
Intellectual disability evident during the developmental period, which is from conception to 18 years of age	YES	NO



Diagnostic Report to be attached:

Evidence to support the above diagnosis **MUST** be attached in **English** for **ALL** athletes:

Psychologist must **provide a report that must be no more than 5 years old** that includes:

- IQ assessment
- Adaptive behaviour assessment
- Age of onset before the age of 18

Please have a look to the **TEMPLATE** below and use it as a guide to create your own diagnostic document.

Medical Psychologist Signature:

I confirm that the above information is accurate	
Doctors Name:	
Medical Specialty:	Registration Number:
Address:	
City:	Country:
Phone:	E-mail:
Signature:	Date:



Guidelines for Intellectual assessment:

A full and detailed athlete assessment should be undertaken by a qualified psychologist to support the diagnosis of intellectual impairment as follows:

Significant impairment in intellectual functioning - must be assessed using an internationally recognised and professionally administered IQ test. WKF recognises the most recently standardised variations of:

- Wechsler Intelligence Scales - WISC (ages 6-16) and WAIS (ages 16-90) including regional variations such as HAWIE, S-SAIS and MAWIE. (Note: WASI is not accepted)
- Stanford-Binet (for ages 2+)
- Raven Progressive Matrices (Note: CPM is not accepted)

Significant Limitations in Adaptive Behaviour - must be assessed using an internationally recognised and professionally administered standardised measure that has been norm-referenced on the general population including people with disabilities e.g. Vineland Adaptive Behaviour Scales, ABAS or AAMR Adaptive Behaviour Scales.

Assessment and reporting should be made in the areas of communication, self-care, self-direction, social/interpersonal skills and ability to respond to life changes and environmental demands.

In countries where no such validated test exists, assessment may be made by rigorous and systematic clinical observations over a period of time, supplemented by additional evidence from records and those who know the person well.

Age of Onset before the age of 18 - must be demonstrated by a full and detailed relevant history including education and family background together with previous IQ assessment reports undertaken before the age of 18 or by a signed declaration from a current psychologist stating clearly the evidence on which the diagnosis is based.

The testing psychologist must **provide a report that must be no more than 5 years old** and:

- Is presented on formal letter-headed paper stating the psychologists name and qualifications, membership number and details of any professional bodies, address, phone/fax number and email.
- Is typed (no handwritten reports).
- States when and where the assessment was done (i.e. date, location)
- States the name and version of the IQ test used, as well as the method of assessment of Adaptive Behaviour.
- Includes general information regarding the athletes background, relevant history and previous assessments.
- Includes a detailed analysis and discussion of IQ and Adaptive Behaviour assessment findings concluding with a clear diagnosis/statement of Intellectual functioning and Adaptive Behaviour.
- Explains any factors which may have affected the results. Particular attention should be paid to cases where there is a large difference between sub-scale IQ scores that may require the full-scale IQ to be interpreted differently or invalidate it. Reporting should follow the guidelines set out in the IQ test manual and detailed analysis and comment should be included.



Template of the Diagnostic Report for athletes with Intellectual Impairments:

A sample report template can be found here. It may be useful when compiling the necessary reports. The template is intended as a guide only, and psychologists may prefer to use their own report format - it is important however that all requested information is presented and the report is tailored to the individual. The whole report has to be in English language!

THIS IS AN EXAMPLE!!

Psychologists Name: Address: Email Address: Phone Number: Psychologist's Qualifications: Membership of Professional Bodies/Membership numbers:																		
Athletes Full Name: Athletes Date of Birth: Date of Assessment: Age at Assessment:																		
<p>1. Introduction</p> <p>Here the psychologist should explain the purpose of the assessment, a description of the assessment tools and methods used (i.e. which IQ and Adaptive Behaviour assessments were used) and why they have been chosen.</p> <p>2. Background to the assessment</p> <p>Here the psychologist should explain any relevant background to the athlete including education, family background, medical background (if relevant to the assessment) and the results of any previous tests. The aim is to build a general picture of the athlete.</p> <p>The psychologist should also explain the athlete's attitude towards the assessment, whether they are accompanied by parents/carer etc, and any issues that may affect the outcome of the assessment.</p> <p>3. IQ Assessment</p> <p>Here the psychologist should explain the results of the assessment commenting specially on each domain. For example, in the WAIS test this would include a summary of Verbal and Performance sub- tests, including scores achieved. The psychologist should explain in detail any significant variation in sub- test scores and the implications for interpretation of the full IQ score, following the instructions in the test manual.</p> <p><u>Scores</u></p> <p>We would also expect a summary of the scores achieved. E.g. (using WAIS IV).</p> <table border="1"> <thead> <tr> <th></th> <th>Standard Score</th> <th>95% confidence range</th> </tr> </thead> <tbody> <tr> <td>Verbal Comprehension</td> <td></td> <td></td> </tr> <tr> <td>Perceptual Reasoning</td> <td></td> <td></td> </tr> <tr> <td>Working Memory</td> <td></td> <td></td> </tr> <tr> <td>Processing Speed</td> <td></td> <td></td> </tr> <tr> <td>Full Scale Score:</td> <td></td> <td></td> </tr> </tbody> </table>		Standard Score	95% confidence range	Verbal Comprehension			Perceptual Reasoning			Working Memory			Processing Speed			Full Scale Score:		
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Processing Speed																		
Full Scale Score:																		



4. Adaptive Behaviour

Here the psychologist should explain how the Adaptive Behaviour assessment was conducted, who was consulted, and then summarise the results of the assessment commenting specifically on each domain.

If the assessment has been carried out by clinical observation it is important that as much information as possible is provided about the assessment. This should include when, where and for how long the individual was observed, what they were doing and the findings of this observation. This should be supplemented by any available records and interviews with people who know them well such as relatives or carers. The source of such additional evidence should be noted in the report. It usually takes more time to assess an individual by observation than through administering a standardised assessment such as the Vineland Adaptive Behaviour Scales, ABAS or AAMR Adaptive Behaviour Scales.

Communication - Score achieved or findings:

The psychologist should provide an interpretation/summary of results/findings in this area

Daily Living - Score achieved or findings:

The psychologist should provide an interpretation/summary of results/findings in this area

Socialisation - Score achieved or findings:

The psychologist should provide an interpretation/summary of results/findings in this area

Motor Skills - Score achieved or findings:

The psychologist should provide an interpretation/summary of results/findings in this area

Overall Adaptive Behaviour Score/Assessment findings. Score achieved or findings:

Here the psychologist will provide a final diagnosis of adaptive behaviour

5. Age of Onset

If the athlete is aged 18 or over at the time of assessment then the psychologist would explain here what evidence is being submitted from before the age of 18, or will provide a statement explaining what evidence they have based their diagnosis on.

6. Final Diagnosis

Here the psychologist will summarise the main findings and will provide a clear final diagnosis. They will also explain whether there are any circumstances that may have affected the test results.

7. Attachments

The psychologist will then attach the summary sheets from the IQ and Adaptive Behaviour assessments.

Signature of the psychologist

Date

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