WORLD KARATE FEDERATION

MEDICAL RULES

(Version January 2026)

WORLD KARATE FEDERATION

CONTENTS

1. GENERAL DISPOSITIONS.....3

2. POWERS AND AUTHORITIES.....3

4. MINIMUM MEDICAL EQUIPMENT AND STAFF.....4

5. DIRECTIVES.....6

6. MEDICAL CARE OF COMPETITORS DURING AND AFTER BOUT.....7

7. MEDICAL ASPECTS OF THE ORGANISATION OF OFFCIAL EVENTS.....8

WORLD KARATE FEDERATION

1. GENERAL DISPOSITIONS

The Medical Commission (MC) will be composed of three members, from three different National Federations. The Chairman will be appointed directly by EC and must be a Doctor of Medicine. The MC-Chairman may propose to the WKF President and for each Championship, a choice of names for the remaining two members.

The MC will meet prior to every WKF Senior and Junior & Cadet Championships with the medical representatives of WKF countries members attending the Championships.

The agenda of the meeting must include the following topics:

a. Introduction of the local Medical Commission from the host National Federation, who will be in charge of the medical cover of the competition areas

b. Discussion of management of injuries requiring competitors to be withdrawn from competing – including the supervisory role of the MC and local back-up hospital facilities, and of the methodology for injury recording.

c. Discussion on the anti-doping activities of the WKF Senior and Junior and Cadet & U21 Championships.

d. Discussion of the language skills amongst medical staff, in case translation for competitors is required

2. POWERS AND AUTHORITIES

The MC will be in charge of the medical supervision at the Championships. The MC will be in close contact with the other WKF Commissions and with WKF President & General Secretary during the Championships.

The MC will make a report about the Championships and will forward it to the EC through the WKF HQ office.

This report will contain at least statistics on injuries and other medical points of view and suggestions for improvements.

This report will be completed no later than three (3) months after the Championships, and the MC Chairman will be directly responsible for it.

Duly accredited doctors / physiotherapists will be allowed to enter the warm-up area to care for their national athletes. The Organization shall provide a protected area, preferably aside and in all cases out of the view from the competition areas, to allow sufficient privacy for the first care of the competitors. The medical work and decisions on the competition area itself must only be carried out by the local doctors, supervised by the MC, except in specific controversial cases when the local doctors request advice from the MC for whatever problems or doubts that might arise.

- If a local doctor is concerned that a competitor should not continue competing due to injury, the MC should always be informed

- If language difficulties cause communication problems between competitors and Referees and/or local doctors, the MC should always be informed

The MC will meet at the end of each championship's day (also with the local doctors if necessary) to collect experiences and take possible remedial measures.

3. MINIMUM MEDICAL EQUIPMENT AND STAFF

- For the organisation of a WKF event, the following equipment is to be provided free of charge and cost by the host NF,
- One supervising doctor with staff, clearly identified previously to the local doctors and MC, who should remain within reach at every moment during the competition days, with a mobile telephone or equivalent equipment coordinating (and responsible for) the local medical staff taking care of emergencies (ambulance transportation, specialised care location, etc.), and other time consuming tasks.
- A medical table for each two tatamis, positioned to allow the medical personnel quick and ready access to the competition area, and easy visual contact of the referees with the doctors, in case medical assistance is required during a bout.
- At least one medical doctor experienced in karate competition per two tatamis, plus one extra doctor for the First Aid Room and, in any case, enough doctors to make shifts, if necessary, to maintain the medical coverage of the event following WKF standards.
- One medical assistant per tatami.
- Injury recording, according to the MC standards, should be kept at every WKF official event. To accomplish that, either the medical staff at the medical table shall include recording among their duties, or an extra assistant must be assigned for that task by the local organization.
- One dentist on call.
- Guarantee of quick transport (ambulance) to a fully equipped and close hospital in case of a serious emergency, to be operated by specialised para-medic personnel. Although hopefully a rare event, it is important that the host National Federation is fully prepared for an emergency arising in an athlete or in the crowd. Minimal standards should apply as below:

  There should be at least one doctor who is designated as lead clinician in emergency care. He/she should have appropriate training to be able to manage airway, breathing and circulatory problems and be able to safely manage spinal care including the use of spinal board immobilisation. Other medical or paramedic staff should be able to manage immediate basic emergency care being aware of proper spinal care when managing any athlete with suspected neck or head injuries. There should be an appropriately trained ambulance crew on site at all times who can support transfer of critically ill athletes to hospital. The designated hospital should be able to manage athletes with potential spinal, airways, respiratory or circulatory problems.

- Cleaning staff - using either bleach diluted in water or a medical-level disinfectant- to wash out any potentially infectious stains out of the competition /training areas, and appointed personnel who could be required at the referees and/or doctors criteria.

- For each medical table:
  - Basic bandaging equipment (tape of different sizes, cotton and elastic bandages, Steri-strips, adhesive tape, skin-protecting spray and bandage-removal spray, etc)
  - First line equipment to treat lacerations and cuts on site (water, anti-septic solutions, sterile saline solution, haemostatics, tongue depressors, pocket lamps, scissors, dressing gauzes, nose tamponade material, Band-Aids, etc)
  - Enough number of disposable examination gloves to be changed every time another athlete has to be examined or treated
  - Antalgic and first-aid drugs, according to the specific situation and habits of the local doctors, avoiding medicaments included in the WADA list of prohibited substances
  - A mirror and eye-caring solutions
  - Cold sprays and/or crunched ice in plastic bags for single use
  - Paper towels or similar for cleaning and wiping
  - Optionally, otoscope, stethoscope, ophthalmoscope, manometer, retention or inflatable splints and skin staples and/or DermaBond (or similar skin adhesive) are recommended in one of the competition area medical tables, though they should be available at the Infirmary Room outside the competition area.

- Pen and paper, including forms for medical records and injury records (WKF - standard), medical prescriptions, etc.

- In addition to the medical tables and the "in-championship" area meant for the attention of the competitors by the team doctors and physiotherapists, a Medical Room or Infirmary Room equipped for any further assistance to the athletes or delegation members must be provided outside the competition area but inside the sports hall. Full bandaging equipment, First Aid medical equipment, minor surgery kits, I. V. lines and perfusion solutions, local anaesthetics, corticoids for parenteral and local injections, defibrillation equipment, Guedel tubes, laryngeal mask airway or similar, tracheostomy kit (and wide bore needles for emergency needle cricothyroidectomy) and endotracheal tubes with ventilation devices (i.e.: Ambu-bags, oxygen, etc.) first-use drugs, stretchers, cervical immobilization (rigid) collars, a spine board, warming blankets, etc., with a medical doctor and a medical assistant or paramedic fluent in their use are required.

- A Doping-test room with trained personnel according to the WADA/WKF ADR specifications and standards, fully equipped for the number of tests previously decided. Transportation to the nearest WADA approved laboratory must be provided and the WADA/WKF ADR protocol must be strictly followed.

- Certified personnel must be in charge of the doping control procedures, and the Local Organizing committee must contact the sample collection authority (which can be either their National ADO or a private sample collection authority) – to ensure that the testing is conducted at the event in accordance with the applicable rules. With enough time before the Championships, the head of the local doctors will contact their National ADO and the WADA approved laboratory that the host NF decides and will make all the arrangements to perform the required number of tests. The MC will support the testing process where necessary.

- Insurance coverage for the athletes and delegations should be arranged, either directly by each country's delegation well ahead of their arrival to the host country, or through the local organizing committee, but the pertinent information must be sent in advance to each attending National Federation through the local Organizing Committee.

- As a condition for registering for WKF competitions, athletes, or their legal representatives (in the case of minors), must consent to the medical services of the championships and WKF providing any treatment deemed necessary in the event of injury or illness while they are at the competition venue. This consent shall also extend to any further treatment if required following transfer to a clinic or hospital, including surgical intervention, to be carried out by the medical professionals selected by the attending medical services.
- The host NF will commit itself to strictly follow the requirements and conditions contained in the WKF MDR.

4. DIRECTIVES

The MC member's function is to assist the Referee and the medical team of the organising country to decide if a competitor is fit or unfit to continue in the competition or should be retired due to medical reasons.

They assist the national medical officers if necessary and give an opinion as to the injuries received by the competitor in an actual or a previous bout.

They will instruct the local doctors how to fill in the competitor's cards and how to record the injuries in the appropriate forms.

The opinion of the MC is final in these cases. The MC makes sure the medical conformity of the area of competition. The medical attendance of the competition is devoted to the medical team of the organising country.

The MC may assist the doping control process at official Championships, working together with the Sample Collection Authority and anti-doping officials appointed to the championships.

The doping control personnel will be present when samples are taken and will make sure that they are sent as soon as possible to the appropriate laboratory, following the standard protocols.

The MC holds at least one meeting per year, generally prior to the Executive Committee meeting and Congress.

There should be liaison with the RC and TC in order to exchange information on the consequences of Competition Rules changes, and the MC Chairperson will be a member at large of the WKF Rules Commission, with voting privileges to provide opinion, suggestions and even put forward proposals regarding the safety of the athletes and the impact that rules changes might have in that sense.

On the basis of these discussions the MC makes proposals and recommendations to the EC, and Congress with regard to the physical and mental well-being of the athletes, and the safety of the competition.

Each affiliated association shall nominate a medical correspondent with whom the MC may correspond on medical matters.

A representative of the MC will be at the Referee Course, to assist the local medical officers and to listen to the briefing and inform about medical issues.

A representative of the MC will be at the Coach seminar to exchange information about various medical improvements.

A brief report must be made to inform the EC about the upcoming event.

Prior to an event a meeting will take place with the local medical officers to brief them on other matters concerning the use of the 4-grade-scale of injuries:

Grade 1:	Very light injury with no reduction of the athlete´s capacity to win the match or bout
Grade 2:	Light to moderate injury with a small reduction in the athlete´s capacity to win the match or bout
Grade 3:	Moderate to severe injury (although able to continue there is a significant reduction in the athlete's capacity to win the match or bout
Grade 4:	Injury so serious that the athlete is withdrawn from the match or bout or competition

Medical Certificate

Every competitor taking part in an official championship must be medically fit. For this reason a medical examination is essential, and a Medical Certificate must be completed in the original country before the competition. This certificate is not valid for more than one year. If the competitor has sustained a concussion, a serious injury or illness since the last medical certificate was issued a new certificate is necessary.

5. MEDICAL CARE OF COMPETITORS DURING AND AFTER A BOUT

The medical officer in charge of each tatami should be in attendance throughout the competition and should not leave before the end of the last bout.

By entering the championships, the athletes give their anticipated consent to be treated by the local medical team and the WKF MC doctors, as there will be no time to provide a formal informed consent every time that the doctors are called to the tatami by the referees and they allow to use the anonymized information of the injuries and treatment used for further documentation, research and educational purposes.

When during a bout, a competitor has sustained injury, the medical officer has the right to request that the bout be suspended if it is considered for medical reasons the bout should not be allowed to continue.

The Referee must be informed that the bout shall be suspended.

If a competitor is down as a result of a blow or kick and is rendered unconscious, only the Referee and the Medical Officer should remain on the tatami unless the medical officer needs extra help.

A competitor who has suffered (or is suspected of having suffered) a concussion shall be examined by the medical officer immediately afterwards. In case of a concussion, most competitors recover in a few seconds but if the competitor remains unconscious, they must be removed on a stretcher. In all concussion cases the competitor should never be left unattended until they have recovered completely and should be escorted to hospital if necessary.

After a concussion and after the competitor has been moved to the Medical Room he/she should undergo a thorough examination and will not be allowed to fight again until the minimum time for recovery has elapsed, as recommended by the usual medical standards for concussion treatment.

His/her card or identification should be taken to the Official Table, where either the medical or the organization responsible of the tournament will make sure that the competitor is blocked in the WKF official Software Provider system so that he/she could not register for a new tournament until the probation period and the medical requirements stablished in the case have been completed.

PROBATION PERIODS AFTER AUTHENTICATED CONCUSSIONS

One Concussion

A competitor who has suffered an authenticated concussion during a contest or wherein the Referee has stopped the contest due to a competitor having received hard blows or kicks to the head making them defenseless or incapable of continuing, shall not be permitted to take part in competition for a period of at least two weeks after the diagnosis in case of athletes over 18 years of age, and at least 3 weeks in athletes under 17 years of age.

Two Concussions

A competitor who has suffered an authenticated concussion twice in a period of three months shall not be permitted to take part in competition during a period of three months from the second concussion in case of athletes over 18 years of age, and at least 4 months in athletes under 17 years of age.

Three Concussions

A competitor who has suffered an authenticated concussion three times in a period of 12 months shall not be allowed to take part in competition for a period of one year from the third concussion.

Medical certification following on probation period

Before resuming competition, after any of the periods of rest prescribed above, a competitor must be certified by a neurologist as fit to take part in competition again.

6. MEDICAL ASPECTS OF ORGANISATION OF OFFICIAL EVENTS

1. Preliminary stage in the organisation.

   The MC must work out the medical preconditions.

2. Long term preparation for a competition

   The MC must be in contact with the host country medical officer to:

   - Prepare the room for the meeting of the WKF-MC.
   - Prepare the Medical Symposium.
   - Arrange permanent medical care in the training sites and in the sports hall
   - Cooperate with the OC to prepare the essential medical documents (med. cards for weighing, doping-control form, accident report, etc.).
   - Prepare the room(s) for the medical examination furnished with the necessary equipment (couches, lockers, chairs, tables, etc.).

- Prepare a first-aid room in the sports hall (equipped with all items required for first-aid and equipped with a direct telephone line).
- Arrange for transportation by ambulance(s) with personnel.
- Arrange a well-equipped room, following IOC/WADA standards, for doping-control with separate rooms for female and male.
- Ensure that there are sufficient seats for the medical officers and MC, next to the RC and TC.

3. Immediate preparation for an event.

This period covers the last five days prior to be beginning of the event. Special attention should be directed to the following preconditions:

- General medical control will be carried out by the MC in cooperation with the OC and physicians of the host country.
- The medical examination must be done in adequate rooms that fulfil certain conditions.
- Offering enough room for participants.
- Have sufficient coaches and offer the physicians good working conditions.
- Heating (if necessary) lighting and ventilation.
- Enough desks and chairs.
- Ensure the transportation of the members of the MC.
- Assist the preparation of the doping-control that, in every respect, suits the requirements of the Anti-Doping Regulations.
- Finalize the medical Symposium.

4. During the tournament

Keep under control the following:

- Accreditation cards of the competitors.
- Ambulance and medical and first-aid room in the sports hall.
- Smooth running of doping-control.
- Constant contact communication with the OC, RC, TC, and EC.
- Hygiene conditions at the training sites, sports hall, dressing rooms.