PARA EQUESTRIAN

MANUAL FOR CLASSIFIERS

FEI Equestrian Events for Athletes with Impairments

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Contents

FOREWARD

This Manual for Classifiers was produced by the FEI Classification Working Group in consultation with the FEI Para Equestrian Technical Committee and FEI Classifiers.

The contents of this Manual has been written with reference to the following documents produced by the FEI or the International Paralympic Committee (IPC):

- FEI Classification Rules
- FEI Para Dressage Rules
- IPC Athlete Classification Code (November 2015)
- IPC International Standard for Eligible Impairments (2015)
- IPC International Standard for Athlete Evaluation (2015)

The FEI Manual for Classifiers applies to:

- Classification personnel carrying out Athlete Evaluation for the purpose of FEI Classification for the Paralympic discipline Para Dressage.
- Classification personnel carrying out Athlete Evaluation for the purpose of FEI Classification for the discipline Para Driving.

It is recommended that Classification personnel carrying out Athlete Evaluation for the purpose of Classification for National Federations follow these procedures.

ACKNOWLEDGEMENT

Acknowledgement is given to Dr Christine Meaden, the author of the Profile System described in this Manual.

1. INTRODUCTION

Classification for Para Equestrian sport was introduced in the lead up to the Paralympic Games in Atlanta. The Profile System was developed by Dr Christine Meaden (PhD) during the early 1990s as part of her PhD research study (unpublished) to develop a standard scoring method for the purpose of Classification. Dr Meaden's research included the collection of data over a 4 year period to develop the baseline scores used to determine the Profile as described in this Manual. Since this time the Meaden Profiling system has been refined and enhanced including the addition of new Profiles and the adjustment to baseline scores to better reflect the requirements of the sport. There has been no further revision of baseline scores since 2012.

Impairment is assessed as described in this Manual. The Meaden Profiling System is then used to classify Impairment into easily recognised Profiles and the grouping of these Profiles into Grades (Sport Class) for competition. The Profiles are versatile but tight, easy to use and understand and are sport specific. The movement and mobility Profiles are based on the ability of the functioning part of the body.

This Classification system will not disadvantage an especially skilled Athlete who may appear to be more able than is actually so.

Dressage and Driving are complex sports. Both sports are built on the premise that two Athletes are competing as one, the Horse and rider or Horse and Driver. In the sport of Para Equestrian, the Horse, like people, come in different shapes and sizes and different athletic ability – all of which may influence the rider's position on the Horse. The aim of Equestrian sports is for the Rider or Driver to demonstrate their skill by influencing the Horse in order to perform the task required, whether it is Dressage movements or Driving the Horse.

When assessing the Athlete for Para Equestrian, much of the assessment is conducted in a sitting position to simulate either the riding or driving position. Balance is assessed in a simulated riding position (sitting) in the assessment room though in some instances it may be necessary to review the Athlete's balance when mounted.

Athletes should be observed during training and competition by the Classification Panel to confirm that the Impairment recorded during the assessment is the same as that seen when riding or driving Classification is not definitive until the Athlete has been observed riding or driving.

For some Athletes an Observation Assessment may be required to assess specific tasks and activities associated with the sport before a Grade and Grade Status can be allocated (Refer to FEI Para Equestrian Classification Rules).

This manual describes the Athlete Evaluation process for Athletes with Physical Impairments.

Classification for Vision Impairment must be conducted by a Classification Panel accredited to carry out such an assessment.

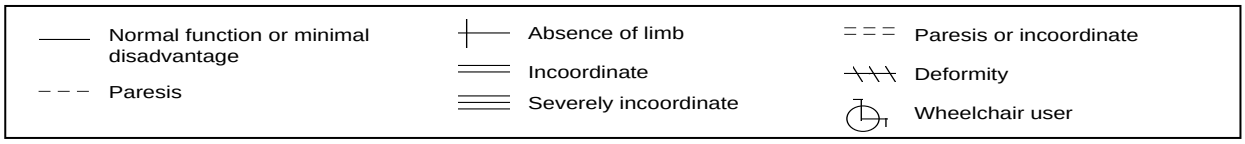
2. ELIGIBLE IMPAIRMENTS

2.1 The Eligible Impairments for Para Equestrian sport.

Impairment	**Description**
Impaired muscle power	Reduced force generated by muscles or muscle groups, such as muscles of one limb or the lower half of the body, as caused, for example, by spinal cord injuries, spina bifida or polio.
Impaired passive range of movement	Range of movement in one or more joints is reduced permanently, for example due to arthrogryposis. Hypermobility of joints, joint instability, and acute conditions, such as arthritis, are not considered eligible Impairments.
Limb deficiency	Total or partial absence of bones or joints as a consequence of trauma (e.g. car accident), illness (e.g. bone cancer) or congenital limb deficiency (e.g. dysmelia).
Leg length difference	Bone shortening in one leg due to congenital deficiency or trauma.
Short stature	Reduced standing height due to abnormal dimensions of bones of upper and lower limbs or trunk, for example due to achondroplasia or growth hormone dysfunction.
Hypertonia	Abnormal increase in muscle tension and a reduced ability of a muscle to stretch, due to a neurological condition, such as cerebral palsy, brain injury or multiple sclerosis.
Ataxia	Lack of co-ordination of muscle movements due to a neurological condition, such as cerebral palsy, brain injury or multiple sclerosis.
Athetosis	Generally characterised by unbalanced, involuntary movements and a difficulty in maintaining a symmetrical posture, due to a neurological condition, such as cerebral palsy, brain injury or multiple sclerosis
Visual Impairment (VI)	Vision is impacted by either an Impairment of the eye structure, optical nerves or optical pathways, or the visual cortex

3. GRADES AND PROFILES FOR ATHLETES: PARA DRESSAGE

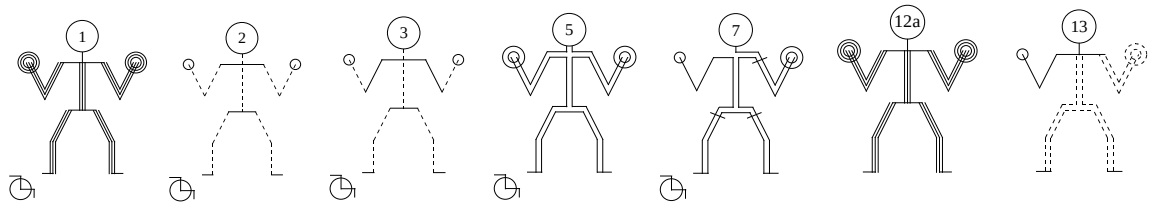
Key:



Grade I Para Dressage

Athletes in Grade I have severe Impairments affecting all limbs and trunk. The Athlete usually requires the use of a wheelchair. They may be able to walk with an unsteady gait. Trunk and balance are severely impaired.

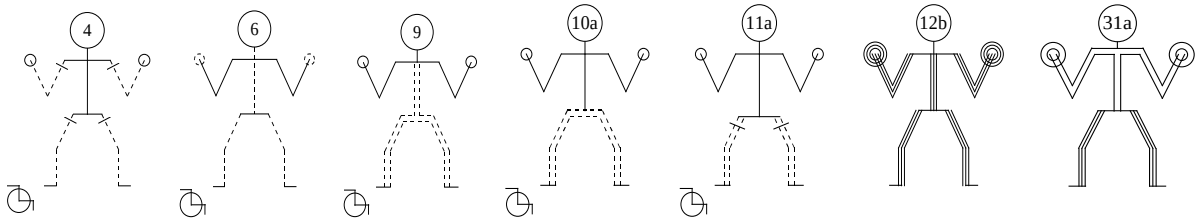
Profiles: 1, 2, 3, 5, 7, 12a, 13



Grade II Para Dressage

Athletes in Grade II have either a severe Impairment of the trunk and minimal Impairment of the upper limbs or moderate Impairment of the trunk, upper and lower limbs. Most Athletes in this Grade use a wheelchair in daily life.

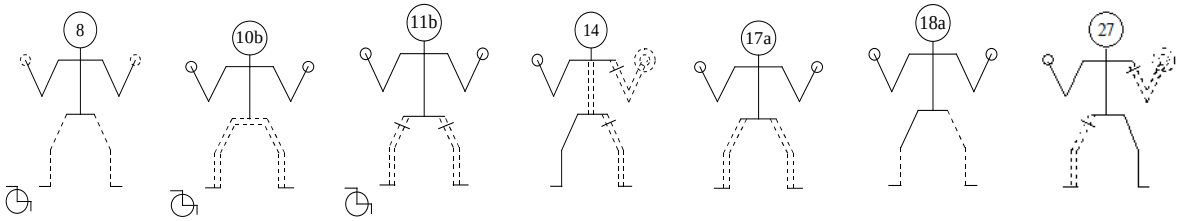
Profiles: 4, 6, 9,10a, 11a, 12b, 31a

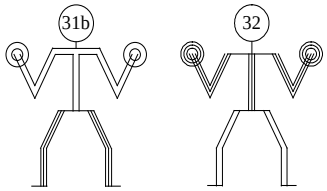


Grade III Para Dressage

Athletes in Grade III have severe Impairments in both lower limbs with minimal or no Impairment of the trunk or moderate Impairment of the upper and lower limbs and trunk. Some Athletes in this Grade may use a wheelchair in daily life.

Profiles: 8, 10b, 11b, 14, 17a, 18a, 27, 31b, 32

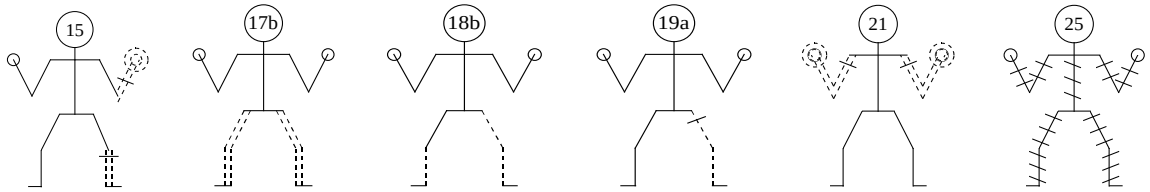


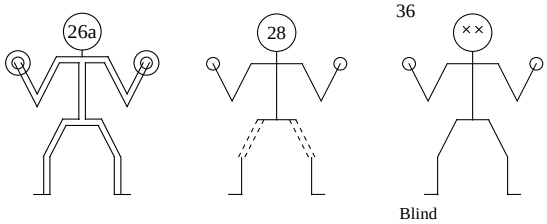


Grade IV Para Dressage

Athletes in Grade IV have a severe Impairment or deficiency of both upper limbs or a moderate Impairment of all four limbs or short stature. Athletes in Grade IV are able to walk and generally do not require a wheelchair in daily life. Grade IV also includes Athletes having a visual Impairment equivalent to B1 with very low visual acuity and/or no light perception.

Profiles: 15, 17b, 18b, 19a, 21, 25, 26a, 28, 36

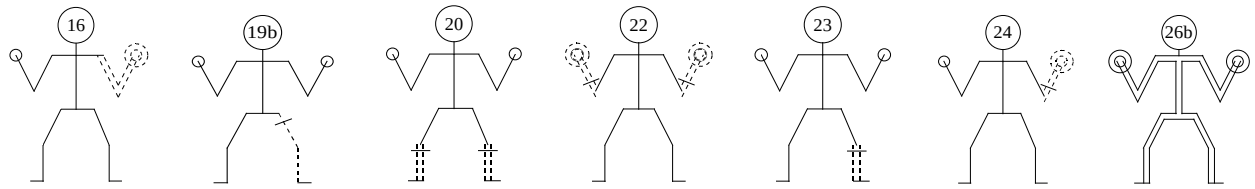


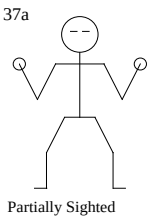


Grade V Para Dressage

Athletes in Grade V have a mild Impairment of movement or muscle strength or a deficiency of one limb or mild deficiency of two limbs. Grade V also includes Athletes with Visual Impairment equivalent to B2 with a higher visual acuity than visually impaired Athletes competing in Grade IV and/or a visual field of less than 5 degrees radius.

Profiles: 16, 19b, 20, 22, 23, 24, 26b, 37a





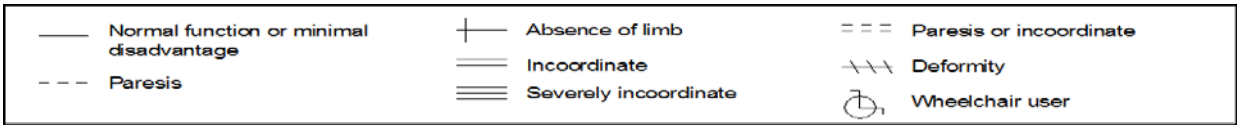
Not Eligible

Profiles: 29, 30, 37b, 38, 42, 48, 39

Please refer to Article 11. Graphical Representation of Profiles for graphic representation.

4. GRADES AND PROFILES FOR ATHLETES: PARA DRIVING

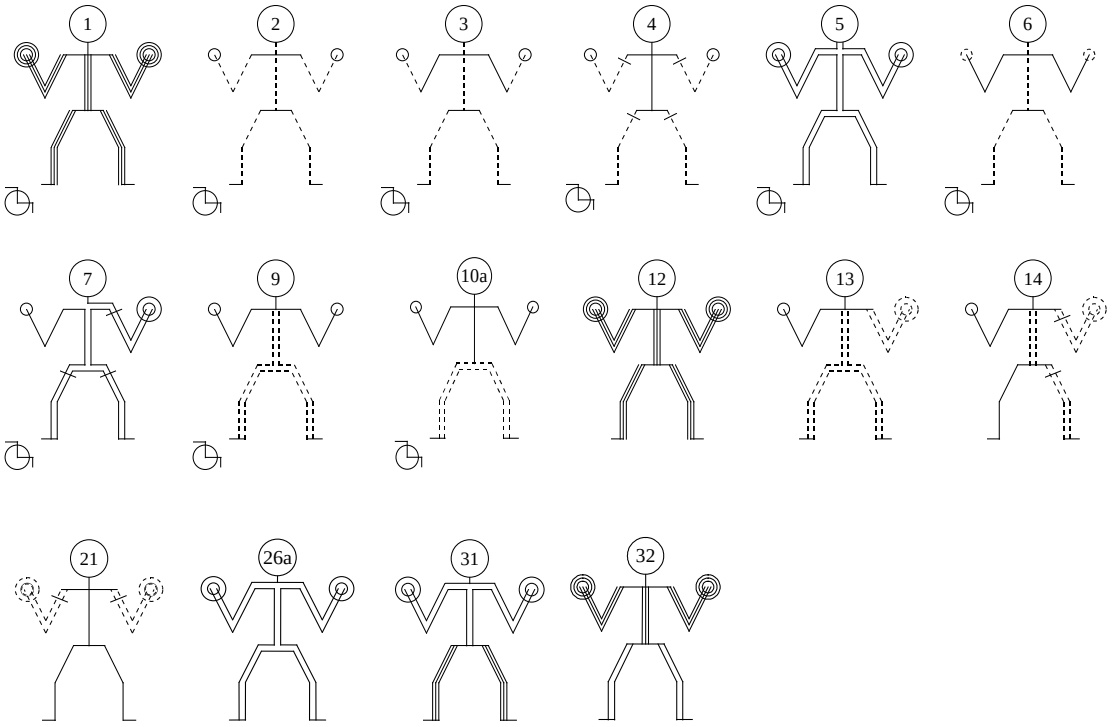
Key:



Grade I Para Driving

Profiles: 1, 2, 3, 4, 5, 6, 7, 9, 10a, 12a, 12b 13, 14, 21, 26a, 31a/b, 32

This Grade includes a range of impairments including: moderate to severe Impairment in all four limbs and trunk and who may or may not be able to walk; moderate to severe Impairment in three limbs and trunk; severe Impairment in two unilateral limbs and trunk; severe Impairment in upper limbs and trunk; severe impairment in upper limbs with mild Impairment in lower limbs; severe Impairment in the upper limbs; Most Athletes in this Grade will use a wheelchair in daily life for some or all mobility.

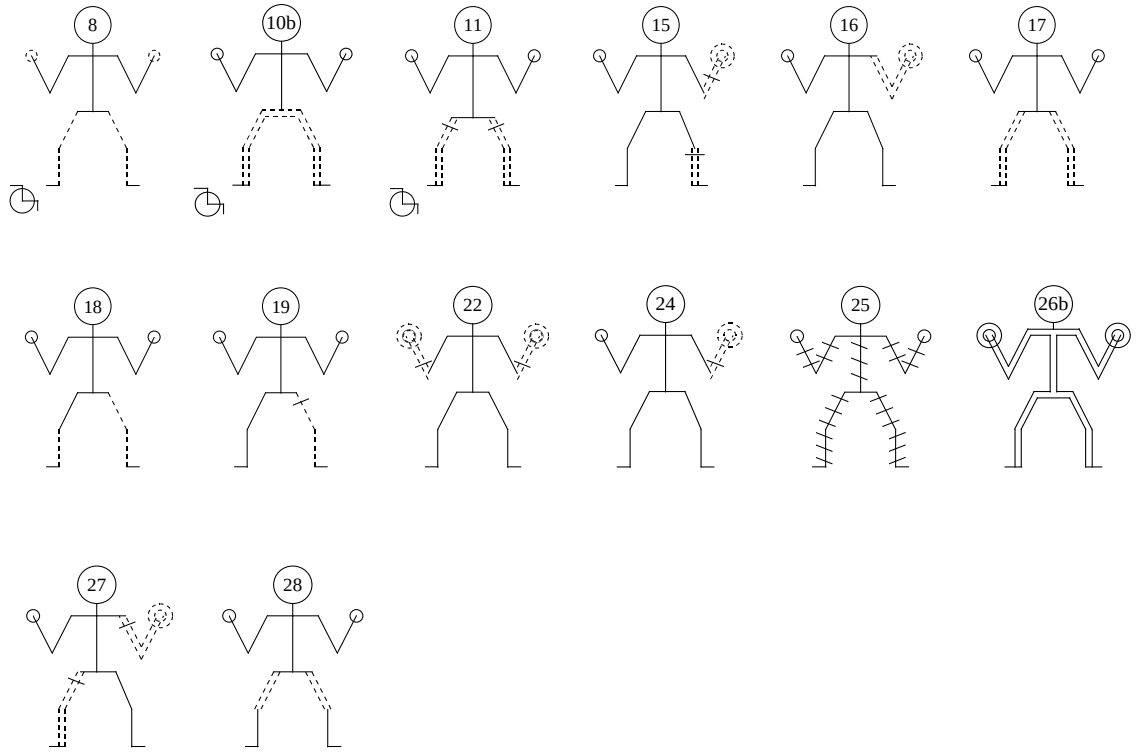


Grade II Para Driving

Profiles: 8, 10b, 11, 15, 16, 17, 18, 19, 22, 24, 25, 26b, 27, 28

This Grade includes a range of Impairments including: mild Impairment in all four limbs and trunk, severe to moderate Impairment in one or two lower limbs; two limbs on the same side; moderate to mild Impairment of one or two upper limbs.

Those in this Grade have less Impairment than Grade I and are considered to be functionally disadvantaged against able bodied Drivers.



Not Eligible

Profiles: 20, 23, 29, 30, 36, 37a, 37b, 38, 39, 42, 48

Please refer to Article 11. Graphical Representation of Profiles for graphic representation

5. CONDUCTING ATHLETE EVALUATION

Athlete Evaluation is conducted by the nominated Classification Panel for the Event and involves:

- Review of the Athlete's medical documentation
- Athlete presentation and interview
- Athlete assessment
    - Physical assessment (bench test);
    - Observation assessment of the Athlete performing specific skills required of the sport during training and/or at first appearance in the Competition for any Athletes requiring observation.

The assessment for the purpose of Classification for Para Equestrian sport has been determined by the physical requirements of Dressage or Driving. For this reason the majority of the assessment is done in a simulated riding position (sitting) as it is not possible to conduct the assessment on the Horse or in the Carriage.

The Classifier should endeavour to conduct the Evaluation in such a way so as to minimise the need for the Athlete to move from one test position to the other.

It is necessary to measure and **record only the relevant Impairment**, whether power, joint range, or coordination. The Athlete's presenting health condition will inform which Impairment is to be measured. There must be medical documentation which supports the presence of any Impairment. For example:

- Muscle Power is measured for conditions resulting in impaired muscle power, for example, spinal cord injuries (SCI)
- Joint Range of Movement - ROM is measured for those with joint Impairment
- Coordination is measured for those with upper motor neuron lesions, for example, cerebral palsy or acquired brain injury.
- A combination of power and coordination may be used for neuromuscular conditions, then using the lowest score to calculate the Profile.

Increments of 0.5 may be used in the following scoring methods.

Other Not Eligible Impairments of hearing or learning can be recorded on the assessment sheet but do not impact the overall result. Nominated compensating aids may be allowed for Athletes presenting with such Impairments.

6. ATHLETE PRESENTATION AND INTERVIEW

The Athlete should be dressed appropriately and bring any devices they use (such as splints) on their body.

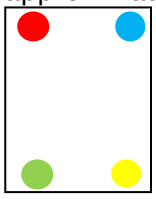
The Classifiers commence the process by:

- Verifying the accreditation of the Athlete and ensuring all documentation is available and complete prior to commencing (Refer to FEI Classification Rules).
- Briefly discussing the Athlete's underlying health condition. If the Athlete also has a health condition that limits or prohibits full effort during the assessment, they may not be appropriate for assessment at that time. The Chief Classifier may reschedule if possible. If the assessment cannot be conducted, a Grade cannot be allocated for Competition.
- Prior to commencing the physical assessment, the interview with the Athlete should include (with reference to the FEI Classification Rules):
    - Documenting information about the Athlete's riding/driving history and current training program/fitness.
    - Providing the athlete with information about the Athlete Evaluation process; this includes that the Athlete will need to be touched by the Classifier, and the Athlete must be able to fully participate throughout the entire assessment process.
    - Reasons why an Evaluation may be suspended, such as pain impacting the Athlete's ability to carry out the required tasks, and the subsequent process.
    - The process if an Athlete is thought to be misrepresenting their skills.
    - Explanation of Profiles, Grade and Grade Status.
    - The process for Protests and Appeals.
    - The use of any assistive devices or compensating aids, including splints, when riding or driving.
    - The process following assessment including the time frame for notification of their Grade and that the Athlete will be observed during training and Competition.

7. EQUIPMENT REQUIRED FOR ASSESSMENT

The Classifier should ensure the following is available to complete a Classification assessment:

- FEI Para Equestrian Classification Rules.
- FEI Manual for Classifiers.
- Access to the FEI Athlete database which contains the Athlete medical documentation.
- FEI Consent for Classification Form to be completed for all Review athletes. For New athletes, this is saved in the FEI Database at the time of their Request for Classification.
- FEI Athlete Evaluation form – either Para Dressage or Para Driving
- Computer/ pencil / pen.
- Goniometer /tape measure.
- A sturdy plinth or assessment bench/massage table – height adjustable if possible.
- Sturdy low back chair without arms and fixed legs (not folding legs or on castors) to be used by the Athlete.
- Small thin cardboard card (approximately 15cm x 10cm) to measure interossei strength.
- A4 size cardboard sheet non-slip on back side. A different coloured circle in each corner approximately 5cm in diameter. To be used for Coordination Test 6.



8. ATHLETE ASSESSMENT

8.1 Balance Testing

Balance testing positions:

- Athlete sitting on a firm surface with feet supported
- Athlete standing with shoes/footwear on, without external or upper extremity support, on a flat, even surface, with their feet approximately 30cm apart

Balance testing techniques will include:
(i) Rhythmic stabilisation technique and
(ii) asking the athlete to reach outside their base of support, to the front and to each side.
This will establish whether the Athlete presents with balance that can be designated as:

- Normal
- Slight Impairment
- Moderate Impairment
- No balance

This is recorded on the Classification Assessment Card by ticking the relevant box.

8.2 Manual Muscle Testing (Power scale) [1]

The reference range of movement for assessment of muscle power is reflective of that required for riding or driving a Horse

Score	Daniels and Worthingham Scale (Summary)		Adaptation for the purpose of Classification in Para Equestrian
0	Zero	No muscle activity	
1	Trace activity	Trace activity but no movement of the limb	Palpation
2	Poor	Muscle can move joint through full range of movement in a position that minimizes gravity.	Through the maximum range of movement required in riding e.g. 45-90 degrees elbow flexion or full range.
3	Fair	Muscle can complete a full range of available movement against only the resistance of gravity, but application of resistance causes movement to break.	Through the maximum range of movement required in riding e.g. 45-90 degrees elbow flexion or full range.
4	Good	Muscle goes through full available range of movement and can tolerate strong resistance without breaking in the end position. When maximum	Through the maximum range of movement required in riding e.g. 45-90 degrees elbow flexion or full range.

[1]References: Daniels, L., Worthingham, C. (1986). *Muscle Testing Technique of Manual Examination* (5th ed.). Philadelphia: WB Saunders Co.
Hislop, H., Montgomery, J. (2007). *Daniels and Worthingham's Muscle testing. Techniques of Manual Examination* (8th Ed). St Louis: Saunders Elsevier.
Tweedy, Sean M., Williams, Gavin and Bourke, John (2010) Selecting and modifying methods of Manual muscle testing for classification in Paralympic sport. *European Journal of Adapted Physical Activity*, *3* 2: 7-16.

		resistance is applied there is a clear break.	
5	Normal	Normal strength-examiner cannot break the finish position at end of tested range (e.g., test elbow flexors by going to full flexion and trying to pull elbow into extension)	This is to be tested at the end of the required range for riding e.g. 90 degrees elbow flexion or end of range.

8.3 Joint Range Scale (ROM)[2]

Where joint Range of Movement (ROM) is the Impairment to be measured, the functional range of movement for each joint is measured and scored using the scale below, as relevant to the range of movement required and described on the Classification assessment form.

Score	Description
0	No movement possible
1	Less than 25% movement possible
2	25% range of movement possible
3	50% range of movement possible
4	75% range of movement possible
5	100% range of movement possible

8.4 Testing Position for Muscle Power and Joint Range of Movement (ROM)

Test Position	
NECK	Sitting on a chair with feet supported, hands resting on the lap
SHOULDER	Sitting on a chair with feet supported, non-testing hand resting on the lap or held in a riding/driving position
ELBOW	Sitting on a chair with feet supported, non-testing hand resting on the lap or held in a riding/driving position
WRIST	Sitting on a chair with feet supported, non-testing hand resting on the lap or held in a riding/driving position
FINGERS	Sitting on a chair with feet supported, non-testing hand resting on the lap or held in a riding/driving position

[2] Blomquist,B et al 1985: Classification System for Swimming

THUMB	Sitting on a chair with feet supported, non-testing hand resting on the lap or held in a riding/driving position
TRUNK	Sitting on a chair with feet supported, not using the hands for support
PELVIS	Sitting on the plinth corner with feet unsupported, not using the hands for support
HIP	Preferred testing to be done in a functional riding/driving position sitting on the plinth corner with feet unsupported; alternate positions include supine, prone with bolster/pillow under the pelvis, or side-lying
KNEE	Sitting on a chair/plinth with feet unsupported; alternate positions are prone or side-lying
FOOT	Sitting on a chair/plinth with feet unsupported, hands resting on the lap
Note: For positions with feet unsupported – if able, the Athlete can sit astride the corner of the plinth with legs abducted	

8.5 Coordination Testing

Coordination scale [3]

Score	Description
0	Activity impossible
1	Severe Impairment; only able to initiate activity without completion
2	Severe Impairment; able to accomplish the activity but in a very unorthodox way with significant unsteadiness and/or extraneous movements
3	Moderate Impairment; able to accomplish the activity, movements are slow, awkward and unsteady
4	Minimal Impairment; able to accomplish the activity with slightly less than normal control, speed and steadiness.
5	Normal performance

The Coordination scale is generally used for those with a neurological condition such as cerebral palsy or brain injury, where muscle testing or joint range of motion does not give a true picture of the Impairment. Coordination is recorded as an overall score for each limb.

Athletes are dressed as they would be for training including boots as applicable. However, removing clothing/orthotics such as shoes/socks is acceptable if the examiner is unable to assess otherwise.

[3] Adapted from O'Sullivan, S; Schmitz, T; Fulk,G - Physical Rehabilitation Sixth Ed, 2014. F.A Davis Philadelphia

The Athlete is in the sitting position for each test - see specific Test for details. Feet should remain in front of the chair and slightly apart. The Athlete should not stabilise their body by hanging on to the chair. The upper limb not being tested should rest lightly on the lap or held in the riding/driving position. The classifier may demonstrate the movement and allow the athlete to practice, no more than a few times; the classifier may help guide the athlete through the movement initially. The testing must be done unassisted, and the classifier may cue the athlete to go as fast and accurately as possible.

The Classifier may demonstrate the movement for the Athlete. The Athlete is able to practice the movement for up to three trials. For testing they are asked to repeat the movements several times slowly and then as quickly as they are able.

8.6 Coordination Tests

Neck - Score using coordination scale.
If it is not possible to test coordination of the neck then test muscle power or range of movement.

Position – Athlete sitting on a chair with feet supported. Hands resting on the lap or held in a riding/driving position.

- Repetitive neck flexion/neck extension,
- Repetitive side flexion to left and then to right,
- Repetitive rotation left to right and right to left

UPPER LIMB COORDINATION TESTS

Test 1 - Finger-Nose - Score entered under 'Test 1'

Position – Athlete sitting on a chair with feet supported. Non-testing hand resting on the lap or held in a riding/driving position.
The examiner holds their index finger out below Athlete's shoulder level. Athlete brings their finger to their own nose and then reaches to the examiner's finger. This is repeated for several trials with the examiner moving their finger several inches either direction forcing the Athlete to reach into several different areas in front of themselves**.**
Note:
For Athlete Evaluation for Para Dressage -all touches occur below shoulder level.
For Athlete Evaluation for Para Driving -all touches occur within full range of movement of the shoulder.

Test 2 - Repetitive pronation/supination - Score entered under 'Test 2'

Position – Athlete sitting on a chair with feet supported. Non-testing hand resting on the lap or held in a riding/driving position**. Elbows** flexed to 90 degrees and held slightly away from the side of the trunk (riding/driving position). The Athlete rotates the unsupported forearm to palm down position (pronation) and then rotates to palm up position (supination). They are asked to repeat this motion several times slowly and then as fast as they are able. R hand to R thigh; L hand to L thigh. This may be done with and without contact to the thigh.

Test 3 - Wrist flexion/extension in mid pronation/supination - Score entered under 'Test 3'

Position – Athlete sitting on a chair with feet supported. Non-testing hand resting on the lap or held in a riding/driving position. The Athlete places their forearm in neutral position between pronation/supination (thumbs on top). The Athlete alternates between wrist flexion and extension. Fingers can be open or closed.

Test 4 - Finger to Thumb - Score entered under 'Test 4'

Position – Athlete sitting on a chair with feet supported. Non-testing hand resting on the lap or held in a riding/driving position. Athlete holds their testing hand in a riding/driving position and touches their thumb and index digit, then thumb and long digit, thumb and ring digit, thumb and little digit, then repeats this sequence. It is acceptable to reverse the order (thumb to fourth, third, second, first digits) prior to repeating the sequence, as long as the sequencing is consistent.

TRUNK and PELVIS COORDINATION TESTS

Trunk Coordination - Score using coordination scale

If unable to test trunk coordination then test power or range of movement.

Position – Athlete sitting feet unsupported, neutral pelvic tilt with arms lightly folded across the chest or in riding/driving position.

- Repetitive thoracic flexion/thoracic extension – ask the Athlete to flex then extend the thoracic spine
- Repetitive thoracic side flexion- ask the Athlete to flex/bend the upper body sideways away from the mid-line
- Repetitive trunk rotation to the left, then to the right - ask the Athlete to rotate to either direction.

Test 5- Pelvic rocking forward/backward - Score entered in the Pelvis section

Position- Athlete sits on the plinth with legs over the edge and feet unsupported, if possible with legs abducted across the corner of the plinth. The Athlete is asked to move the pelvis forward (anterior tilt) and backwards (posterior tilt) alternating quickly. Arms can be lightly folded across the chest or held in a riding/driving position.

May need to test power or range of movement and take the lowest score.

When testing pelvic control test with hips at 45 degrees flexion perched on high seat, or in crook lying on bed. An Athlete with cerebral palsy with flexion Impairment may be able to pelvic tilt at 90 degrees hip flexion, but not when in the riding position.

LOWER LIMB COORDINATION TESTS

Test 6 - Placing heel on four spots / placing toes on four spots - Score entered under 'Test 6'

Position- Athlete sits on a fixed chair with feet on the floor. Hands can be lightly resting in the lap or held in a riding/driving position.

The A4 size card (as above) is placed on the floor in front of one leg at a time, short end of sheet directly in front of foot. The card should be placed so the Athlete is able to reach each corner of the card first with their heel and then repositioned so they are able to reach with their toes. The Athlete is asked to touch the 4 spots in a sequential manner in either direction (clockwise then anticlockwise) as quickly as they can. First is touching with the heel, next is touching with the toes. Score is an average between the performances of the two motions.

Knee internal / external rotation - Score entered under Coordination – Knee

Position - Athlete sits with feet unsupported. Hands can be lightly resting in the lap or held in a riding/driving position. The Athlete is asked to keep the knee still, heel in midline, and then move the lower leg and forefoot (toes) in a horizontal side to side motion.

Test 7 - Tapping of feet and circumduction of ankle - Score entered under 'Test 7'

Position- Athlete sits on a fixed chair with feet on the floor. Hands can be lightly resting in the lap or held in a riding/driving position.

Athlete is asked to tap their foot (ankle dorsiflexion followed by dropping of the forefoot) as quickly as they can. For circumduction, the foot should be unsupported and the Athlete is asked to make a circle with the forefoot; this may be done in both directions.

9. DETERMINING THE RESULT

To determine the result of the Athlete Evaluation bench tests the Classification Panel should follow the steps below:

Step	Task	Section
Step 1	Ensure a score is listed against each body part listed on the Athlete Evaluation Form, including when the body part is not impaired.	
Step 2	Determine the baseline score for each of the six body parts.	Refer Section 10
Step 3	Review the Profile Graphics to determine which graphic/s match/es the Athlete. Athletes who use a wheelchair for some or all of their mobility are illustrated as Profiles 1 through 11; standing Athletes are illustrated as Profiles 12 through 32. Decide on the nearest illustration.	Refer Section 11
Step 4	Review the Profile Definitions to confirm the choice	Refer Section 12
Step 5	Review the Maximum Score allowed for each Profile	Refer Section 13
Step 6	Ensure the Baseline Scores achieved by the Athlete fit within the Maximum Score allowed for the chosen Profile	
Step 7	The Profile number nearest to the Athlete's presenting dysfunction is determined and included onto the Athlete Evaluation form. Where an Athlete's result is borderline between Profiles it may be necessary to: • Reassess the Athlete • Conduct an Observation assessment to assist determining the Profile • Determine the Profile considered to be closest fit. Where this results in the Profile being borderline between two Grades, allocate to the higher Grade and allocate Review status Note: If the Profile allocated by the Classification Panel at an FEI Event is different from that allocated by National Classifiers, the FEI Classification result will supersede the National Classification result.	

10. DETERMINING BASE LINE SCORES

Base-line scores must only be determined by accredited Classifiers.

The base line scores are the sum of the scores for each upper and lower limb, trunk and neck. The base line scores for each profile are listed in Section 13. The scores are not recorded as a flat single dimensional number, but as a cluster of six numbers.

The maximum score for each arm is 80
The maximum score for the neck is 40
The maximum score for the trunk is 60
The maximum score for each leg is 70

Thus an unimpaired body can be represented in the following way:
Left arm - neck - right arm displayed as 80-40-80
Left leg - trunk - right leg displayed as 70-60-70

Maximum score allowed for each part of the body **using 15% loss of Impairment**:

Neck	34	Upper limbs	68
Trunk	50	Lower limbs	60

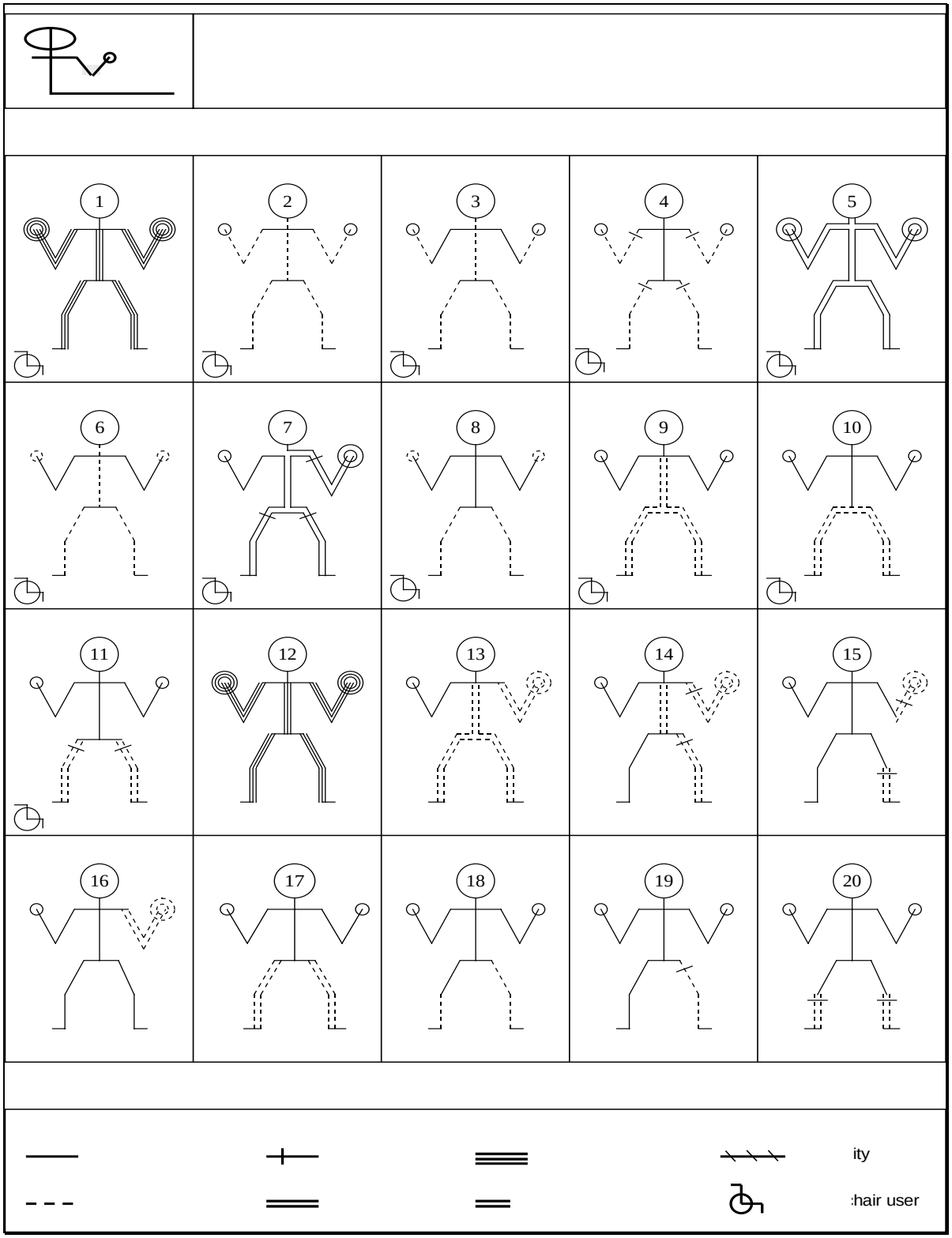
Example 1 - the score for an Athlete with severe left hemiplegia could be:
40-40-80 = Profile 14
40-40-70

Example 2 – the score for an Athlete with SCI and resulting paraplegia could be:
80-40-80 = Profile 11
25-60-25

In both Example 1 and Example 2, the cumulative score for all body parts added is 310. This score does not indicate that the Impairment is in different parts of the body. By calculating and recording the score for each part of the body, as above, the score has more meaning than a flat score of 310 out of 400.

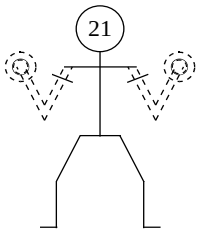
The measurement of the Impairment is recorded at the clinical assessment.

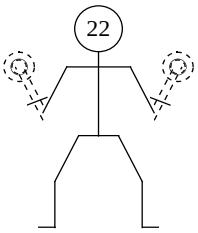
11. GRAPHICAL REPRESENTATION OF PROFILES

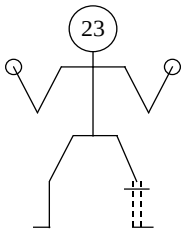


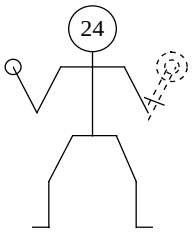
PROFILE SYSTEM

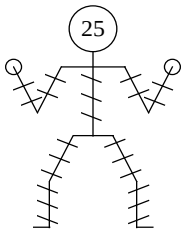
A Graphical Representation

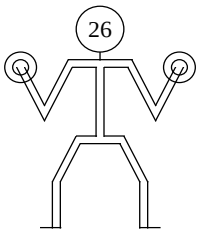


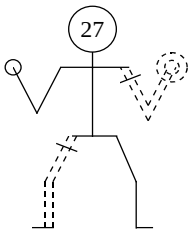


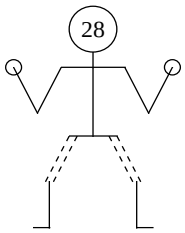


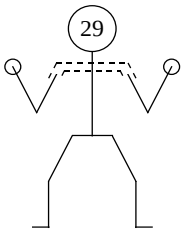


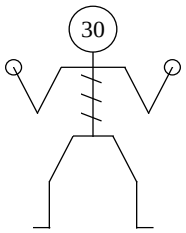


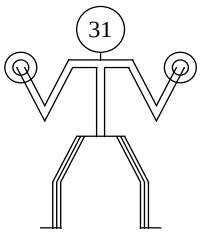


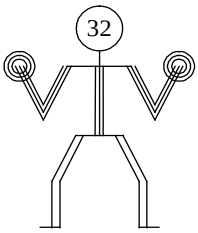




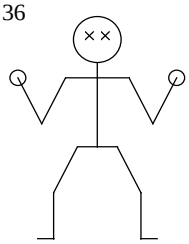






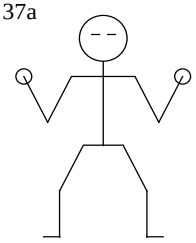


36



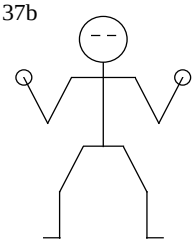
Blind

37a



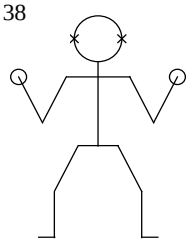
Partially Sighted

37b

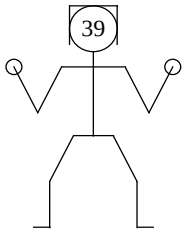


Partially Sighted

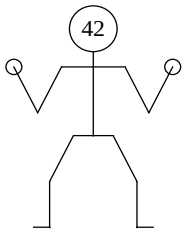
38

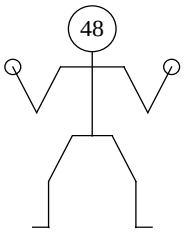


Deaf



Learning Impaired





Normal function or minimal disadvantage

Absence of limb

Severely Incoordinate

Deformity

Paresis

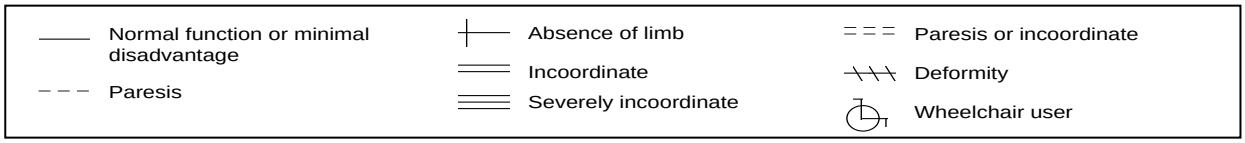
Incoordinate

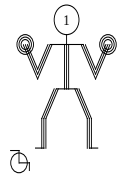
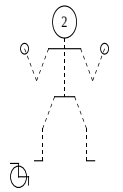
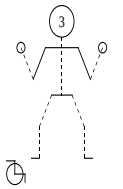
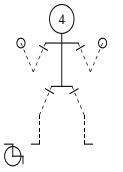
Paresis or incoordinate

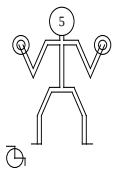
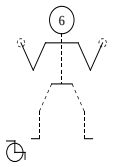
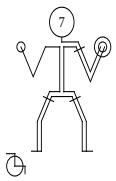
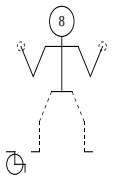
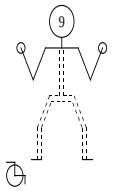
12.PROFILE DESCRIPTION

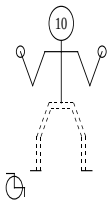
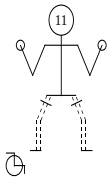
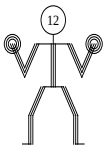
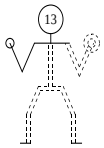
Movement and mobility Impairment:	Profiles 1-32
Sensory Impairment:	Profiles 36-38
Intellectual Impairment:	Profile 39
Other Impairment:	Profile 42
Able Bodied:	Profile 48

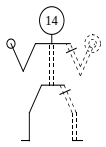
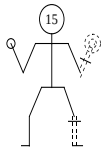
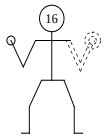
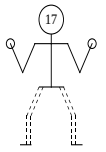
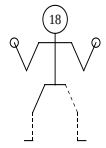
Key

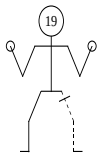
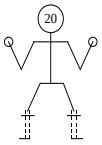
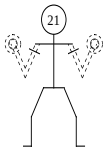
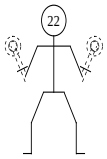
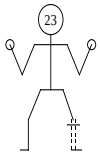
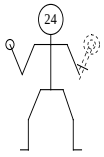


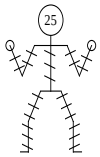
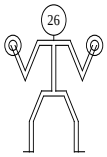
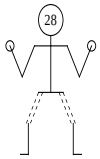
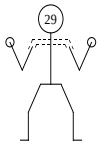
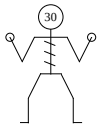
Profile	Graphic	Grade	Description
1		**I**	FOUR LIMBS REDUCED IN FUNCTION: Severe hypertonia, athetosis, ataxia or paresis present in all limbs and trunk. Results in little or no use in all four limbs and very poor trunk control. Needs a powered wheelchair or pushed in a manual wheelchair and personal assistant during daily life.
2		**I**	FOUR LIMBS REDUCED IN FUNCTION: Severe hypertonia, athetosis, ataxia, paresis or Impairment present in all limbs and trunk. Poor control of the trunk and almost no use in four limbs but can bend the elbows. Triceps muscle is non-functional against resistance e.g. complete Spinal Cord Injury (SCI) at C5/6 level. May push a manual wheelchair and may need a powered wheelchair for long distances.
3		**I**	FOUR LIMBS REDUCED IN FUNCTION: Moderate hypertonia or athetosis or ataxia present in all limbs and trunk; poor trunk control; very poor balance and inability to grip and release objects. Complete SCI at C6/7 level. The finger flexors, extensors and intrinsic muscles of the hand may be severely impaired Wheelchair user.
4		**II**	FOUR LIMBS REDUCED IN FUNCTION: Severe hypertonia, athetosis, ataxia, paresis or Impairment present in all limbs; absence of all limbs; almost no use in all four limbs but good trunk control. Mainly use their seat to control the movement of the Horse. May push a manual wheelchair in some way.

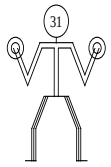
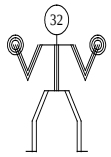
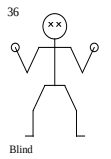
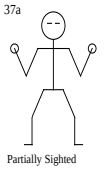
Profile	Graphic	Grade	Description
5		**I**	FOUR LIMBS REDUCED IN FUNCTION: Moderate hypertonia, athetosis, ataxia or paresis present in all limbs and trunk; may have moderate trunk control with difficulty; either with arms or legs. Able to push a manual wheelchair with difficulty using arms or legs. Difficulty controlling the limbs in any activity.
6		**II**	FOUR LIMBS REDUCED IN FUNCTION: Moderate hypertonia, athetosis, ataxia or paresis in lower limbs and trunk with poor trunk control. May have a complete SCI at C8/T1 or moderate quadriplegia. Minimal Impairment in upper limbs with mildly weak hands or lack of control in the arms. Wheelchair user.
7		**I**	THREE LIMBS REDUCED IN FUNCTION: Severe hypertonia paresis, athetosis, ataxia, Impairment or limb deficiency of three limbs. Some difficulty with trunk control. One limb may be only minimally affected and has good function. Wheelchair user and may need to use a powered wheelchair.
8		**III**	FOUR LIMBS REDUCED IN FUNCTION: Moderate to severe hypertonia paresis, athetosis, ataxia, or Impairment of the lower limbs. Minimal hypertonia paresis, athetosis, ataxia, or Impairment in upper limbs with slightly weak hands or arms; the intrinsic muscles of hands may be severely affected. Good trunk control. Wheelchair user.
9		**II**	LOWER LIMBS AND TRUNK REDUCED IN FUNCTION: Severe hypertonia, paresis, athetosis, ataxia or Impairment present in both lower limbs and trunk. Upper trunk control present but no lower trunk control. Complete SCI at T1 – T5 level. Unable to perform a pelvic tilt. Unable to balance when sitting unsupported. Wheelchair user with good use in arms.

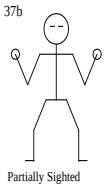
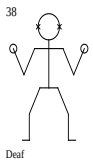
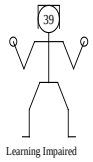
Profile	Graphic	Grade	Description
10		**II** **III**	LOWER LIMBS REDUCED IN FUNCTION: Severe hypertonia, paresis, athetosis, ataxia or Impairment present in both lower limbs and moderate trunk involvement. Complete SCI at T5 – T10 Wheelchair user with good use of arms. **10a:** Unable to move outside own base of support and total sensory loss below umbilicus. Significant difficulty with balance in sitting. **10b:** Able to move outside own base of support and able to perform a pelvic tilt with difficulty. Difficulty with trunk control and unable to use hips to assist trunk movement.
11		**II** **III**	LOWER LIMBS REDUCED IN FUNCTION: Moderate hypertonia, paresis, athetosis, ataxia or Impairment present in both lower limbs and trunk or limb deficiency of both legs. Some control of the hips with good pelvic tilt. Good control of the trunk and arms. SCI at T10 – L3 level. Must have some power in hip flexors and extensors. May stand or walk but uses a wheelchair for activities of daily living. **11a:** Those with bilateral limb deficiency, no prosthesis and residual limb less than 6" (15cm) measured from the greater trochanter. **11b:** Those defined in Profile 11 above including a residual limb longer than 6" (15cm)
12		**I** **II**	FOUR LIMBS REDUCED IN FUNCTION: Severe hypertonia, paresis, athetosis, ataxia or Impairment in all four limbs. Fair to moderate trunk control. Able to walk in an unorthodox way. Balance and co-ordination grossly affected. **12a:** As above with trunk impaired. **12b:** As above with trunk less impaired than in 12a.
13		**I**	THREE LIMBS REDUCED IN FUNCTION: Moderate to severe hypertonia, paresis, athetosis, ataxia or Impairment in three limbs. Trunk control may be fair to moderate. Balance in standing is severely affected. Able to walk but has poor use of three limbs and usually uses a stick in the good hand.

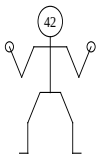
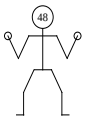
Profile	Graphic	Grade	Description
14		**III**	IPSILATERAL LIMBS REDUCED IN FUNCTION: Moderate to severe hypertonia, paresis, athetosis, ataxia, limb deficiency or Impairment in two limbs on the same side of the body. Trunk is involved. Able to walk and usually can balance unaided only on the non-impaired leg. The asymmetry of the body makes it difficult to balance on the Horse.
15		**IV**	IPSILATERAL LIMBS REDUCED IN FUNCTION: Slight to moderate hypertonia, paresis, athetosis, ataxia, limb deficiency or Impairment in two limbs on the same side of the body. Trunk is involved. Able to walk. Balance on the Horse less affected than Profile 14.
16		**V**	ONE UPPER LIMB REDUCED IN FUNCTION: Severe paresis or hypertonia; total limb deficiency of one upper limb.
17		**III** **IV**	TWO LOWER LIMBS REDUCED IN FUNCTION: Severe hypertonia, paresis, athetosis, ataxia or Impairment in two lower limbs which act more like props. Able to walk with two crutches or sticks. **17a:** No to poor functional pelvic movement. Unable to move out of base of support. Unable to control the Horse from the pelvis. **17b:** Fair to normal pelvic movement and control. Able to control the Horse from the pelvis.
18		**III** **IV**	TWO LOWER LIMBS REDUCED IN FUNCTION: Severe hypertonia, paresis, athetosis, ataxia or Impairment in one lower limbs; moderate to slight Impairment of the other lower limb. Able to walk. **18a:** No to poor functional pelvic movement or control. Unable to move out of base of support. Unable to control the Horse from the pelvis. **18b:** Fair to normal pelvic movement and control. Able to control the Horse from the pelvis.

Profile	Graphic	Grade	Description
19		**IV** **V**	ONE LOWER LIMB REDUCED IN FUNCTION: Severe hypertonia, paresis, athetosis, ataxia or total limb deficiency of one lower limb which is used as a prop. Able to walk. No Impairment present in the other leg. **19a:** An amputee who rides without a prosthesis. Residual limb 6 inches (15cm) or less. **19b:** Paresis or an amputee who rides with a prosthesis. Residual limb longer than 6ins (15cm.) Measured from greater trochanter.
20		**V**	TWO LOWER LIMBS REDUCED IN FUNCTION: Moderate to slight hypertonia, paresis, athetosis, ataxia or total limb deficiency of one lower limb or limb deficiency of part of both lower limbs (50% or less of the lower legs remaining). Able to walk and run.
21		**IV**	TWO UPPER LIMBS REDUCED IN FUNCTION: Severe hypertonia, paresis, athetosis, ataxia, Impairment or total limb deficiency of both upper limbs.
22		**V**	TWO UPPER LIMBS REDUCED IN FUNCTION: Moderate to slight hypertonia, paresis, athetosis, ataxia, Impairment of both arms or limb deficiency of part of both upper limbs -below the elbow. Able to grip reins with or without prosthesis.
23		**V**	ONE LOWER LIMB REDUCED IN FUNCTION: Moderate to slight hypertonia, paresis, athetosis, ataxia, Impairment of one lower limb or total deficiency of one lower limb below the knee with 50% or less of lower leg remaining. May run if fit enough. Amputation through the forefoot is not eligible.
24		**V**	ONE UPPER LIMB REDUCED IN FUNCTION: Moderate to slight hypertonia, paresis, athetosis, ataxia, Impairment of one upper limb or total deficiency of one upper limb below the elbow. Unable to grip rein with one hand.

Profile	Graphic	Grade	Description
25		**IV**	FOUR LIMBS AND TRUNK REDUCED IN STATURE: Short stature due to extreme shortness of limbs. To be eligible for Profile 25, an Athlete must be > 18 years of age. Maximum Height of 129cm
26		**IV** **V**	FOUR LIMBS REDUCED IN FUNCTION: Moderate to slight hypertonia, paresis, athetosis, ataxia, Impairment in all four limbs. Balance and gross co-ordination affected. **26a:** As above, trunk impaired. **26b:** As above, trunk less impaired than for 26a.
27		**III**	TWO CONTRALATERAL LIMBS REDUCED IN FUNCTION: Severe to moderate hypertonia, paresis, athetosis, ataxia, Impairment or total limb deficiency of opposite arm and leg.
28		**IV**	TWO LOWER LIMBS REDUCED IN FUNCTION: Severe to moderate hypertonia, paresis, Impairment in both hips and lower spine. Poor or no pelvic control. Difficulty walking and may have a waddling gait.
29		**NE**	TWO UPPER LIMBS REDUCED IN FUNCTION: Severe to moderate hypertonia, paresis, Impairment in both upper limbs-shoulders.
30		**NE**	TRUNK REDUCED IN FUNCTION: Severe to moderate hypertonia, paresis, Impairment in trunk or neck.

Profile	Graphic	Grade	Description
31		**II** **III**	FOUR LIMBS REDUCED IN FUNCTION: Severe hypertonia, paresis, athetosis, ataxia, Impairment in both lower limbs. Moderate to slight hypertonia, paresis, athetosis, ataxia or Impairment in both upper limbs. Trunk control fair to moderate. Able to walk. **31a:** Trunk involved, no or poor functional pelvic movement and unable to move out of base of support. **31b:** Trunk less involved with fair to good pelvic control.
32		**III**	FOUR LIMBS REDUCED IN FUNCTION - Severe hypertonia, paresis, athetosis, ataxia, Impairment in both upper limbs. Slight hypertonia, paresis, athetosis, ataxia, Impairment in both lower limbs. Trunk impaired. Able to walk.
33-35			AVAILABLE FOR THE INTRODUCTION OF NEW PROFILES
36		**IV**	TOTALLY BLIND. B1 Visual acuity is poorer than LogMAR 2.60 Totally blind. (B1) -no sight in both eyes
37a		**V**	PARTIAL SIGHT. B2 Visual acuity ranges from LogMAR 1.50 to 2.60 inclusive; and/or Visual field that is constricted to a diameter of less than 10 degrees Partially sighted (B2) Athletes who have limited vision in both eyes either in: • How far they can see (visual acuity). • How wide they can see (visual field).

Profile	Graphic	Grade	Description
37b		**NE**	PARTIAL SIGHT. B3 Visual acuity ranges from 1.40 to 1.0 inclusive; and/or a visual field constricted to a diameter of less than 40 degrees Partially sighted (B3) Athletes who have limited vision in both eyes either in • How far they can see (visual acuity). • How wide they can see (visual field).
38		**NE**	DEAF-Defined as a hearing loss of at least 55dB pure tone average (PTA) in the better ear (three-tone pure tone average at 500, 1000 and 2000 Hertz, air conduction, ISO 1969 Standard)
39		**NE**	Athletes with an intellectual Impairment have a restriction in intellectual functioning and adaptive behaviours which affects conceptual, social and practical adaptive skills required for everyday life. This impairment must be present before the age of 18.
40-41			AVAILABLE FOR THE INTRODUCTION OF NEW PROFILES

Profile	Graphic	Grade	Description
42		**NE**	A health condition which cannot be measured through the Classification process and thereby Not Eligible. Examples of such conditions include but is not limited to: - wear and tear on joints due to advancing age - general debilitating disease - obesity - osteochondritis - Intellectual impairment – a restriction in intellectual functioning and adaptive behaviour - skin diseases - sleep related movement disorders - hypermobility of joints - low muscle tone or hypotonia - epilepsy - respiratory conditions - fatigue as in fibromyalgia and myalgic encephalitis - vertigo or dizziness - internal organ dysfunction or absence - IBSA Class B3, and B4 - cardiac/circulatory conditions - hearing Impairment - pain - Reflex Sympathetic Dystrophy or Complex Regional Pain Syndrome
43-47			AVAILABLE FOR THE INTRODUCTION OF NEW PROFILES
48		**NE**	ABLE-BODIED PEOPLE.

13. MAXIMUM SCORE ALLOWED FOR EACH PROFILE

PROFILE 1 GI	35-40-35 25-20-25	PROFILE 13 GI	80-40-50 45-50-45	PROFILE 24 GV	80-40-68 70-60-70
PROFILE 2 GI	45-40-45 20-30-20	PROFILE 14 GIII	80-40-48 70-40-40	PROFILE 25 GIV	60-40-60 50-60-50
PROFILE 3 GI	55-40-55 20-30-20	PROFILE 15 GIV	80-40-68 70-50-60	PROFILE 26a GIV	68-40-68 60-50-60
PROFILE 4 GII	45-40-45 30-50-30	PROFILE 16 GV	80-40-30 70-60-70	PROFILE 26b GV	68-40-68 60-60-60
PROFILE 5 GI	45-40-45 40-50-40	PROFILE 17a GIII	80-40-80 40-40-40	PROFILE 27 GIII	80-40-30 30-60-70
PROFILE 6 GII	68-40-68 20-30-20	PROFILE 17b GIV	80-40-80 40-60-40	PROFILE 28 GIV	80-40-80 50-50-50
PROFILE 7 GI	80-40-45 45-50-45	PROFILE 18a GIII	80-40-80 60-40-15	PROFILE 29 NE	50-40-50 70-60-70
PROFILE 8 GIII	68-40-68 45-60-45	PROFILE 18b GIV	80-40-80 60-60-30	PROFILE 30 NE	80-40-80 70-50-70
PROFILE 9 GII	80-40-80 20-30-20	PROFILE 19a GIV	80-40-80 70-60-15	PROFILE 31a GII	68-40-68 45-40-45
PROFILE 10a GII	80-40-80 20-40-20	PROFILE 19b GV	80-40-80 70-60-30	PROFILE 31b GIII	68-40-68 45-50-45
PROFILE 10b GIII	80-40-80 20-50-20	PROFILE 20 GV	80-40-80 60-60-60	PROFILE 32 GIII	48-40-48 60-50-60
PROFILE 11 GII(a)/GIII(b)	80-40-80 30-60-30	PROFILE 21 GIV	30-40-30 70-60-70	PROFILE 36 GIV	N/A
PROFILE 12a GI	50-40-50 45-40-45	PROFILE 22 GV	68-40-68 70-60-70	PROFILE 37A GRADE V	N/A
PROFILE 12b GII	50-40-50 45-50-45	PROFILE 23 GV	80-40-80 70-60-60		

14. DUAL PROFILES

In some instances Athletes may be allocated two profiles to more accurately describe their Impairment/s. For example, Profile 17b +36 is an Athlete who and has hypertonia in the lower limbs (P17b) and is totally blind (P36) and would compete in Grade III.

Below are listed recognised dual profiles available for allocation in deciding the Grade. Where the combination of profiles is not in the list below, Classifiers should contact the FEI Head Classifier and Classification Working Group who will discuss the assessment results to assist in determining the appropriate Grade.

PARA DRESSAGE DUAL PROFILES

PROFILES	GRADE	PROFILES	GRADE
11 + 24	Grade II	**15 + 23**	Grade IV
14 + 15	Grade II	**16 + 23**	Grade IV
14 + 24	Grade III	**16 + 24**	Grade IV
17b + 16	Grade III	**19b + 24**	Grade IV
17b + 22	Grade III	**20 + 24**	Grade IV
17b + 36	Grade III	**20 +22**	Grade IV
18b + 14	Grade III	**22 + 23**	Grade IV
18b + 24	Grade III	**23 + 24**	Grade V
19b + 21	Grade III		

PARA DRIVING DUAL PROFILES

PROFILES	GRADE
23 + 24	Grade **PD** II

15. COMPENSATING AIDS FOR PARA EQUESTRIAN

The Athlete may use approved Compensating Aids including special equipment needed to ride or drive a Horse. The special equipment must not give them an advantage over other Athletes within the same Grade. All Athletes should be encouraged to ride or drive with as few aids as possible. A list has been compiled to maintain consistency in describing the aids for Para Dressage (16.1) and Para Driving (16.2)

Standard compensating aids are aids or equipment, other than approved saddlery or equipment as outlined in the FEI Dressage Rules, which may be used by the athletes across all functional profiles. Standard compensating Aids are allowed to be used by all Athletes and do not need to be noted on the FEI Master List for Para Dressage, they must be noted on the FEI Master List for Para Driving. The list of standard compensating aids are:

Para Dressage Standard Compensating Aids	
Salute with Head Only (SWHO)	Enclosed Stirrups
Sitting or rising Trot	Magnetic Stirrups
Gloves (optional)	1 Whip
Spurs (optional)	Breast plate and/or neck strap
Saddle – any type	Joined reins on double bridle
Soft Hand Hold	Elastic rein inserts
Deep Saddle	Safety vest (including inflatable)
Elastic bands on stirrups	Knotted Reins/rein stops (one knot per rein)
Para Driving Standard Compensating Aids	
Lap best held by groom	Motor Vehicle to walk the course (MVWC)
Lap belt with quick release mechanism	Salute with Head only (SWHO)
Handbrake	

Profile-specific compensating aids are aids or equipment, other than approved saddlery, which may be used by nominated profiles and must be noted on the FEI Master List following Classification evaluation. These are listed in the summary table of Appendix IV and Appendix V.

Non-Standard compensating aids are aids, other than those above, required by an individual athlete and not described specifically in the Rules. The aid is prescribed specifically for the athlete to enable them to ride the horse without providing an advantage over other athletes within the same Profile or Grade. These aids may include modifications to a Standard or Profile-specific Compensating aid, or a piece of non-Standard equipment custom-made for the athlete.

The Classifiers must only record the Profile-specific Compensating Aids on the Athlete Evaluation Form, to then be recorded on the FEI Classification Master List. If an Athlete requires a Non-Standard compensating aid it is necessary for the Athlete to apply through their NF to the FEI for approval of such an aid prior to use at an Event. Once approved, the aid will be added to the FEI Classification Master List. Classifiers must not approve Non-Standard Compensating Aids.

It is essential that Classifiers refer to the current FEI Para Dressage Rules and FEI Para Driving Rules available on the FEI website regarding the use of Compensating Aids.

15.1 Guide to Profile-specific Compensating Aids used in Para Dressage by Profile

Profile	Grade	Profile-specific Compensating Aids – Para Dressage
1 –6	I or II	raised pommel and/or cantle, seat saver, hard hand hold, 2 whips, looped reins; ladder reins, strap from stirrup leather to girth, strap from stirrup iron to girth, no stirrups; may ride with one hand only, Velcro thigh straps.
7	I	As above and connecting rein bar.
8	III	seat saver, hard hand hold, 2 whips, looped reins; ladder reins, strap from stirrup leather to girth, strap from stirrup iron to girth, one or no stirrups, Velcro thigh straps.
9	II	raised pommel and/or cantle, seat saver, hard hand hold, 2 whips, looped reins; ladder reins, strap from stirrup leather to girth, strap from stirrup iron to girth, no stirrups, Velcro thigh straps.
10a/b	II / III	raised pommel and/or cantle, seat saver, hard hand hold, 2 whips, strap from stirrup leather to girth, strap from stirrup iron to girth, no stirrups, Velcro thigh straps.
11a/b	II /III	seat saver, hard hand hold, 2 whips, strap from stirrup leather to girth, strap from stirrup iron to girth, no stirrups, Velcro thigh straps.
12a/b	I /II	seat saver, hard hand hold, 2 whips, looped reins; ladder reins, connecting rein bar, strap from stirrup leather to girth, strap from stirrup iron to girth, no stirrups, Velcro thigh straps.
13	I	raised pommel and or cantle, seat saver, hard hand hold, 2 whips, looped reins; ladder reins, connecting rein bar, strap from stirrup leather to girth, strap from stirrup iron to girth, no stirrups; may ride with one hand only, Velcro thigh straps.
14	III	seat saver, hard hand hold, looped reins; ladder reins, connecting rein bar, strap from stirrup leather to girth, strap from stirrup iron to girth, no stirrups; may ride with one hand only, Velcro thigh strap on impaired side.
15	IV	Seat saver, looped reins; ladder reins, connecting rein bar, strap from stirrup leather to girth, strap from stirrup iron to girth.
16	V	Connecting rein bar; may ride with one hand only; if the impaired arm is very short, allow rein through a ring attached to the saddle.
17a	III	seat saver, 2 whips, strap from stirrup leather to girth, strap from stirrup iron to girth, no stirrups, Velcro thigh straps.
17b	IV	Seat saver, 2 whips, strap from stirrup leather to girth, strap from stirrup iron to girth, no stirrups, Velcro thigh straps.
18a	III	seat saver, 2 whips, strap from stirrup leather to girth, strap from stirrup iron to girth, no stirrups, Velcro thigh strap on impaired side.

Profile	Grade	Profile-specific Compensating Aids – Para Dressage
18b	IV	Seat saver, 2 whips, strap from stirrup leather to girth, no stirrups, Velcro thigh strap on impaired side.
19a	IV	Seat saver, strap from stirrup leather to girth, one or no stirrups, Velcro thigh strap on impaired side.
19b	V	Seat saver, strap from stirrup leather to girth, Velcro thigh strap on impaired side.
20	V	2 whips.
21	IV	Looped reins; ladder reins; reins through ring attached to the saddle, foot reins.
22	V	Looped reins; ladder reins; connecting rein bar; if arms are very short, allowed reins through ring attached to the saddle.
23	V	-
24	V	Looped reins; ladder reins; may ride with one hand only, connecting rein bar.
25	IV	2 whips, looped reins; ladder reins.
26a	IV	2 whips, looped reins; ladder reins, strap stirrup leather to girth.
26b	V	2 whips, looped reins; ladder reins.
27	III	seat saver, hard hand hold, connecting rein bar, one or no stirrups; may ride with one hand only; Velcro this strap on impaired side.
28	IV	Seat saver, 2 whips.
31a/b	II/III	seat saver, hard hand hold, 2 whips, looped reins; ladder reins, strap from stirrup leather to girth, strap from stirrup iron to girth, no stirrups, Velcro thigh straps.
32	III	seat saver, hard hand hold, 2 whips, looped reins; ladder reins, strap from stirrup leather to girth, strap from stirrup iron to girth, no stirrups.
36 (B1)	IV	Callers. All Visually Impaired Athletes must wear an arm band to indicate their Impairment type to others for safety reasons.
37a (B2)	V	Callers. All Visually Impaired Athletes must wear an arm band to indicate their Impairment type to others for safety reasons.
38	N/A	Sign interpreter
39	N/A	Commander allowed with documentation to substantiate an identified intellectual Impairment.

Note: When an Athlete is unable to use an impaired arm, it may be strapped to the body, or worn in a sling and this should be listed by the classifier on the compensating aids allowed for that athlete.

Note: Velcro thigh straps are not yet present in the summary table in Appendix IV as they do not yet show in the same table in the Para Dressage Rules.

Classifiers must refer to the current FEI Para Dressage or Para Driving Rules in regards to the use of:

- Commanders
- Radio communication
- Sign interpreters for Athletes with hearing Impairment
- Whips
- Spurs
- Saddles
- Velcro

15.2 Guide to Profile-specific Compensating Aids used in Para Driving by Profile

Profile	Grade	Profile-specific Compensating Aids – Para Driving
1-6	1	4-point belt held by groom or with quick release; strap on whip; no or adapted glove/s; whip held / used by groom; brake operated by groom; strap on feet or foot trough; groom holds finger loop
7	I	4-point belt held by groom or with quick release; connecting rein bar; strap on whip; no or adapted glove/s; whip held / used by groom; brake operated by groom; strap on feet or foot trough; groom holds finger loop
8	II	4-point belt held by groom or with quick release; strap on whip; no or adapted glove/s; brake operated by groom; strap on feet or foot trough; groom holds finger loop
9	I	4-point belt held by groom or with quick release; brake operated by groom; strap on feet or foot trough
10a	I	4-point belt held by groom or with quick release; brake operated by groom; strap on feet or foot trough
10b	II	Brake operated by groom; strap on feet or foot trough
11a/b	II	Brake operated by groom; strap on feet or foot trough
12a/b	I	4-point belt held by groom or with quick release; connecting rein bar; strap on whip; no or adapted glove/s; whip held / used by groom; brake operated by groom; strap on feet or foot trough; groom holds finger loop
13	I	Connecting rein bar; strap on whip; no or adapted glove/s; whip held / used by groom; brake operated by groom; strap on feet or foot trough; groom holds finger loop

14	I	Connecting rein bar; strap on whip; no or adapted glove/s; whip held / used by groom; brake operated by groom; strap on feet or foot trough; groom holds finger loop
15	II	Connecting rein bar; strap on whip; no or adapted glove/s; whip held / used by groom; brake operated by groom; strap on feet or foot trough; groom holds finger loop
16	II	Connecting rein bar; strap on whip; no or adapted glove/s; whip held / used by groom; groom holds finger loop
17a/b	II	Brake operated by groom; strap on feet or foot trough
18a/b	II	Brake operated by groom; strap on feet or foot trough
19a/b	II	Brake operated by groom; strap on feet or foot trough
21	I	Connecting rein bar; strap on whip; no or adapted glove/s; whip held / used by groom; groom holds finger loop
22	II	Connecting rein bar; strap on whip; no or adapted glove/s; whip held / used by groom; groom holds finger loop
24	II	Connecting rein bar; strap on whip; no or adapted glove/s; whip held / used by groom; groom holds finger loop
25	II	strap on whip; no or adapted glove/s; whip held / used by groom; brake operated by groom
26a/b	I/II	strap on whip; no or adapted glove/s; whip held / used by groom; brake operated by groom; strap on feet or foot trough
27	II	Connecting rein bar; strap on whip; no or adapted glove/s; whip held / used by groom; brake operated by groom; strap on feet or foot trough; groom holds finger loop,
28	II	Brake operated by groom
31a/b	I	Connecting rein bar; strap on whip; no or adapted glove/s; whip held / used by groom; brake operated by groom; strap on feet or foot trough; groom holds finger loop
32	I	Connecting rein bar; strap on whip; no or adapted glove/s; whip held / used by groom; brake operated by groom; strap on feet or foot trough; groom holds finger loop

16. APPENDICES

Appendix I: FEI Classification Card – Para Dressage

Appendix II: FEI Classification Card – Para Driving

Appendix III: Template letter to Psychologist regarding use of a Commander

Appendix IV: Compensating Aids Table – Para Dressage

Appendix V: Compensating Aids Table – Para Driving

Appendix VI: FEI Classifier Code of Conduct

NOTES REGARDING EVALUATION AND OBSERVATION (include date and name of Classifier entering notes)

STANDARD and APPROVED NON STANDARD COMPENSATING AIDS	

Version: Jan 2024

PARA - EQUESTRIAN DRESSAGE
ATHLETE EVALUATION FOR CLASSIFICATION

Use dark ink if writing and print clearly. **For FEI Classification must be completed in English.**

MR/MRS/MISS/MS		FAMILY NAME:			
GIVEN NAMES:					
D.O.B (dd/mm/yy):					
HOME ADDRESS:					
				Zip/Postcode	
NATION:			FEI Member No		
TELEPHONE:			FEI Classification	☐	
Email:			National Classification	☐	

CLASSIFICATION RESULT

Profile 1	Profile 2	GRADE

Grade Status Allocated

Status	☐ **Review with Fixed Date**	☐ **Review**	☐ **Confirmed**
Review reason	☐ 1. Fluctuating/deteriorating condition		☐ 2.Recent injury
	☐ 3. Borderline result	**Review date:**	

OA by FEI Classification Panel at this competition	☐ Y ☐ N ☐ N/A
Pending OA by FEI Classification Panel at next competition	☐ Y ☐ N ☐ N/A

Athlete Signed Consent Form: Yes ☐

If Grade and/or Profile have changed following this evaluation please note previous result below

Profile 1	Profile 2	GRADE

Date (dd/mm/yy		**Location:**	
Chief Classifier :			
Classifier 2 :			

NAME:				
DIAGNOSIS: Refer to Medical Diagnostic Form for details				
WHEELCHAIR:	No ☐	Yes ☐	Power ☐	Manual ☐
NEEDS EXTERNAL SUPPORT WHEN STANDING			No ☐	Yes ☐
SPECIFY- CRUTCHES, STICKS, AIDS				
ADDITIONAL HEALTH IMPAIRMENTS/DIAGNOSIS				
INTELLECTUAL IMPAIRMENT	No ☐	Yes ☐	Comment:	
EPILEPSY	No ☐	Yes ☐		
HEARING IMPAIRMENT	No ☐	Yes ☐		
OTHER RELEVANT INFORMATION:				
VISION IMPAIRMENT AS ASSESSED BY VI CLASSIFIER	CLASS B1 TOTALLY BLIND ☐ P36 CLASS B2 PARTIALLY BLIND ☐ P37a		Date Classified	

STATIC BALANCE	SIT	STAND	Comment:
NORMAL	☐	☐	
SLIGHT IMPAIRMENT	☐	☐	
MODERATE IMPAIRMENT	☐	☐	
NO BALANCE	☐	☐	

DOMINANT HAND LEFT ☐ RIGHT ☐

Coordination Tests (1-7)	Calculated Scores		
	Left		Right
TEST 1: FINGER-NOSE BELOW SHOULDER	Maximum Score 80	40	80
TEST 2: REPETITIVE PRONATION/SUPIN.	70	60	70
TEST 3: WRIST FLEX/EXT IN MID PRON/SUP.	FINAL SCORE 0.0	0.0	0.0
TEST 4: FINGER - THUMB	0.0	0.0	0.0
TEST 5: PELVIS ROCKING FORWARD/BACK			
TEST 6: PLACING HEEL ON FOUR SPOTS PLACING TOES ON FOUR SPOTS			
TEST 7: TAPPING FEET / CIRCUMDUCTION			

Notes (continue over page if needed):

* Use a dot for decimals	R.O.M for reference	POWER 0-5 L	POWER 0-5 R	RANGE 0-5 L	RANGE 0-5 R	CO-ORD L	CO-ORD R
NECK	0-20 FLEXION						
	0-20 EXTENSION						
	0-20 SIDE FLEXION						
	0-90 ROTATION						
SHOULDER	0-10 RETRACTION					TEST 1 (*7)	
	0-60 FLEXION						
	0-10 ABDUCTION						
	0-45 EXT.ROTATION						
	0-30 INT ROTATION						
ELBOW	45-90 FLEXION						
	90-45 EXTENSION						
	0-10 PRONATION					TEST 2 (*2)	
	0-10 SUPINATION						
WRIST	0-30 FLEXION					TEST 3 (*3)	
	0-50 EXTENSION						
	0-10 RADIAL DEV						
FINGERS	60-90 FLEXION					TEST 4 (*4)	
	90-60 EXTENSION						
	INTRINSICS						
THUMB	0-60 OPPOSITION						
TRUNK	0-30 THOR. FLEXION						
	0-30 THOR. EXTENS						
	0-20 SIDE FLEXION						
	0-45 ROTATION						
PELVIS	0-5 POST TILT					TEST 5 (*2)	
	0-5 ANT TILT						
HIP	0-45 FLEXION					TEST 6 (*8)	
	-45-0 EXTENSION						
	0-40 ABDUCTION						
	ADDUCTION						
	0-15 EXT. ROTATION						
	0-15 INT. ROTATION						
KNEE	0-45 FLEXION						
	45-0 EXTENSION						
	0-15 INT. ROTATION						
	0-25 EXT. ROTATION						
FOOT	0-20 DORSIFLEX					TEST 7 (*4)	
	0-20 P.FLEX						
	0-15 INT.ROTATION						
	0-15 EXT. ROTATION						

NOTES REGARDING EVALUATION AND OBSERVATION (include date and name of Classifier entering notes)

STANDARD and APPROVED NON STANDARD COMPENSATING AIDS	

Version: Jan 2024

PARA - EQUESTRIAN DRIVING
ATHLETE EVALUATION FOR CLASSIFICATION

Use dark ink if writing and print clearly. **For FEI Classification must be completed in English.**

MR/MRS/MISS/MS		FAMILY NAME:	
GIVEN NAMES:			
D.O.B (dd/mm/yy):			
HOME ADDRESS:			
		Zip/Postcode	
NATION:		FEI Member No.	
TELEPHONE:		FEI Classification	☐
Email:		National Classification	☐

CLASSIFICATION RESULT

Profile 1	Profile 2	GRADE

Grade Status Allocated

Status	☐ **Review with Fixed Date**	☐ **Review**	☐ **Confirmed**
Review reason	☐ 1. Fluctuating/deteriorating condition	☐ 2.Recent injury	
	☐ 3. Borderline result	**Review date:**	
OA by FEI Classification Panel at this competition			☐ Y ☐ N ☐ N/A
Pending OA by FEI Classification Panel at next competition			☐ Y ☐ N ☐ N/A
Athlete Signed Consent Form: Yes ☐			

If Grade and/or Profile have changed following this evaluation please note previous result below

Profile 1	Profile 2	GRADE

Date (dd/mm/yy):		**Location:**	
Chief Classifier :			
Classifier 2 :			

NAME:				
DIAGNOSIS: Refer to Medical Diagnostic Form for details				
WHEELCHAIR:	No ☐	Yes ☐	Power ☐	Manual ☐
NEEDS EXTERNAL SUPPORT WHEN STANDING			No ☐	Yes ☐
SPECIFY- CRUTCHES, STICKS, AIDS				
ADDITIONAL HEALTH IMPAIRMENTS/DIAGNOSIS				
INTELLECTUAL IMPAIRMENT	No ☐	Yes ☐	Comment:	
EPILEPSY	No ☐	Yes ☐		
HEARING IMPAIRMENT	No ☐	Yes ☐		
OTHER RELEVANT INFORMATION (including any vision concerns)				

STATIC BALANCE	SIT	STAND	Comment:
NORMAL	☐	☐	
SLIGHT IMPAIRMENT	☐	☐	
MODERATE IMPAIRMENT	☐	☐	
NO BALANCE	☐	☐	

DOMINANT HAND LEFT ☐ RIGHT ☐

Coordination Tests (1-7)	Calculated Scores		
	Left		Right
TEST 1: FINGER-NOSE BELOW SHOULDER	Maximum Score	80	40	80
TEST 2: REPETITIVE PRONATION/SUPIN.		70	60	70
TEST 3: WRIST FLEX/EXT IN MID PRON/SUP.	FINAL SCORE	0.0	0.0	0.0
TEST 4: FINGER - THUMB		0.0	0.0	0.0
TEST 5: PELVIS ROCKING FORWARD/BACK				
TEST 6: PLACING HEEL ON FOUR SPOTS PLACING TOES ON FOUR SPOTS				
TEST 7: TAPPING FEET / CIRCUMDUCTION				

Notes (continue over page if needed):

* Use a dot for decimals	R.O.M for reference	POWER 0-5 L	POWER 0-5 R	RANGE 0-5 L	RANGE 0-5 R	CO-ORD L	CO-ORD R
NECK	0-50 FLEXION						
	0-40 EXTENSION						
	0-20 SIDE FLEXION						
	0-80 ROTATION						
SHOULDER	0-40 EXTENSION					TEST 1 (*7)	
	0-160 FLEXION						
	0-90 ABDUCTION						
	0-30 EXT.ROTATION						
	0-30 INT ROTATION						
ELBOW	0-140 FLEXION						
	140-0 EXTENSION						
	0-30 PRONATION					TEST 2 (*2)	
	0-30 SUPINATION						
WRIST	0-80 FLEXION					TEST 3 (*3)	
	0-40 EXTENSION						
	0-30 ULNAR DEV						
FINGERS	0-FULL FLEXION					TEST 4 (*4)	
	0-FULL EXTENSION						
	INTRINSICS						
THUMB	0-60 OPPOSITION						
TRUNK	0-30 THOR. FLEXION						
	0-30 THOR. EXTENS						
	0-40 SIDE FLEXION						
	0-60 ROTATION						
PELVIS	0-5 POST TILT					TEST 5 (*2)	
	0-5 ANT TILT						
HIP	0-120 FLEXION					TEST 6 (*8)	
	EXTENSION						
	0-40 ABDUCTION						
	ADDUCTION						
	0-45 EXT. ROTATION						
	0-45 INT. ROTATION						
KNEE	0-90 FLEXION						
	EXTENSION						
	0-15 INT. ROTATION						
	0-15 EXT. ROTATION						
FOOT	0-20 DORSIFLEX					TEST 7 (*4)	
	0-40 P.FLEX						
	0-15 INT.ROTATION						
	0-15 EXT. ROTATION						

Template letter to Psychologist

Dear Psychologist,

Regarding: Use of a Commander by an Athlete for Para Equestrian Competition

Please find herewith _____ [insert name of Athlete] who competes in Para Dressage Events at an international level.

In order to compete in Dressage, the Athlete is required to ride a Horse and complete a Dressage test of between 4 and 7 minutes in length depending on the level at which they compete. There are different Grades (I, II, III, IV, V) for Athletes reflecting their level of Impairment and physical status. Grade I being Athletes with the greatest Impairment and Grade IV Athletes with the least Impairment.

A Dressage test comprises a sequence of between 8 to 19 "movements" (depending on the Grade at which the Athlete competes) which are to be ridden at designated points around a Dressage arena (20mtrs x 40mtrs or 20mtrs x 60mtrs). The movements are carried out at a walk and/or trot and/or canter and involve moving from one pace to another while completing the movements. Below is an example of a Grade 1 Novice Dressage test and a Grade III Novice Dressage test. These provide examples of what an Athlete may be required to learn prior to competing and then remember for the period they are competing in front of the judges.

Grade 1 Novice Test	
1. A X	Enter in medium walk Halt, immobility, salute. Proceed in medium walk
2. C HXF FA	Track left Free walk Medium walk
3. A X	Down centre line 10m circle right
4. X	10m circle left
5. XC C	Down centre line Track right

Grade III Novice Test	
1. A X	Enter in working trot Halt, immobility, salute. Proceed in collected trot
2. C B	Track right Half circle right 10m to X Return diagonally to the track at M
3. MCHE E	Working trot Half circle left 10m to X Return diagonally to the track at H
4. CX XA	Half 20m circle right Half 20m circle left
5. A FXH HC	Working trot Change rein in medium trot Working trot

_____ [insert name of Athlete] has been asked to provide you, for your information, with a sample copy of a full Dressage test they would be required to learn specific to their grade.

The Athlete has ample opportunity (possibly weeks or months) to learn and practice the movements required in the Dressage test prior to competing. During an Event, perhaps over two or more days, the Athlete may be required to ride up to 4 (3 set tests and 1 optional Freestyle Test) Dressage tests. The nominated Dressage tests are used consistently at each level with the Athlete only competing at one level. The only exception to this is if the Athlete competes in a Freestyle Competition in addition to the set tests. In this case they have designed their own sequence of movements and then ride them to their chosen music.

_____ [insert name of Athlete] is Classified as Grade _____ and has requested the use of a *Commander* - a person to call out the movements in sequence to the Athlete as they compete.

In this instance this is an exception to the Para Equestrian Rules. All Athletes (except those with an identified intellectual disability or acquired brain injury) are expected to complete their Dressage test from memory under the same conditions and without a commander.

To ensure fairness and equity to all who are competing, those Athletes requesting an exemption to the rule pertaining to commanders are required to produce evidence from a psychologist of a level of permanent memory Impairment that would impact on their ability to remember the sequence of movements required for the duration of the Dressage test. Whilst the Dressage test is completed in a competitive environment, all Athletes within the Competition complete the test under the same conditions.

It is requested that, where possible, a **Wechsler Memory Scale (WMS-IV)** test (or similar) is conducted and a brief report be provided to substantiate this Athletes request for a commander. This confidential report will be held by me as documentation supporting the Athlete's request.

Your time in assisting this Athlete is greatly appreciated

Yours thankfully

FEI Para Equestrian Classifier

Please forward a copy of your report to:

COMPENSATING AIDS FOR PARA DRESSAGE

Profile-Specific Compensating Aids

Profile	Grade	Raised pommel or cantle	Seat saver	Hard (firm) hand hold	2 whips	Foot reins	Looped or ladder reins	Connecting rein bar	Reins through ring on	Strap, stirrup leather to	Strap, stirrup iron to girth	No stirrups	Use of sign language	Callers	Commander
1-6	I/II	•	•	•	•		•			•	•	•			As determined through the Classification process and supporting medical documentation
7	I	•	•	•	•		•	•		•	•	•			
8	III		•	•	•		•			•	•	•			
9	II	•	•	•	•		•			•	•	•			
10a/b	II/III	•	•	•	•					•	•	•			
11a/b	II/III		•	•	•					•	•	•			
12a/b	I/II		•	•	•		•	•		•	•	•			
13	I	•	•	•	•		•	•		•	•	•			
14	III		•	•			•	•		•	•	•			
15	IV		•				•	•		•	•				
16	V							•	•						
17a	III		•		•					•	•	•			
17b	IV		•		•					•	•	•			
18a	III		•		•					•	•	•			
18b	IV		•		•					•		•			
19a	IV		•							•		•			
19b	V		•							•					
20	V				•										
21	IV					•	•		•						
22	V						•		•						
23	V														
24	V						•	•							
25	IV				•		•								
26a	IV				•		•			•					
26b	V				•		•								
27	III		•	•				•				•			
28	IV		•		•										
31a/b/32	II/III		•	•	•		•			•	•	•			
36/37a	IV/V													•	
38	N/A												•		
39	N/A														
On Master List		**Yes**	**Yes**	**Yes**	**Yes**	**Yes**	**Yes**	**Yes**	**Yes**	**Yes**	**Yes**	**Yes**	**Yes**	**Yes**	**Yes**

Standard Compensating Aids
*Not to be listed on the FEI Classification Master List
Salute with head only
Sitting or rising trot
Gloves
Spurs
Saddle-any type
Soft hand hold
Deep saddle
Elastic bands on stirrups
Enclosed stirrups
Magnetic stirrups
1 whip
Breast plate and/or neck strap
Joined rein on double bridle
Elastic inserts in reins
Safety vest (including inflatable)
Knotted Reins/Rein Stops

Non-Standard Compensating Aids.
These are aids or equipment not described in the table on the left. The need for these aids must be supported through the Classification process and the aid approved by the FEI Compensating Aids Panel. See application form on FEI website.
*Must be listed on the FEI Classification Master List once approved.

COMPENSATING AIDS FOR PARA DRIVING										
Profile Specific Compensating Aids										Standard Compensating Aids
Profile	Driving Grade	4-point belt held by groom or with quick release	Connecting rein bar	Strap on whip	No or adapted glove/s	Whip held / used by groom	Brake operated by groom	Strap on feet or foot trough	Groom holds finger loop	**Allowed for all Athletes** *To be listed on the FEI Classification Master List Lap belt held by groom Lap belt attached with quick release mechanism Handbrake Motor vehicle to walk the course (MVWC) Salute with head only (SWHO)
1	I	•		•	•	•	•	•	•	
2	I	•		•	•	•	•	•	•	
3	I	•		•	•	•	•	•	•	
4	I	•		•	•	•	•	•	•	
5	I	•		•	•	•	•	•	•	
6	I	•		•	•	•	•	•	•	
7	I	•	•	•	•	•	•	•	•	
8	II	•		•	•		•	•	•	
9	I	•					•	•		
10a	I	•					•	•		
10b	II						•	•		
11a/b	II						•	•		
12a/b	I	•	•	•	•	•	•	•	•	
13	I		•	•	•	•	•	•	•	
14	I		•	•	•	•	•	•	•	
15	II		•	•	•	•	•	•	•	**Non-Standard Compensating Aids.** These are aids or equipment not described in the table on the left. The need for these aids must be supported through the Classification process and the aid approved by the Para Driving Working Group. *Must be listed on the FEI Classification Master List once approved.
16	II		•	•	•	•			•	
17a/b	II						•	•		
18a/b	II						•	•		
19a/b	II						•	•		
21	I		•	•	•	•			•	
22	II		•	•	•	•			•	
24	II		•	•	•	•			•	
25	II			•	•	•	•			
26a	I			•	•	•	•	•		
26b	II			•	•	•	•	•		
27	II		•	•	•	•	•	•	•	
28	II						•			
31a/b	I		•	•	•	•	•	•	•	
32	I		•	•	•	•	•	•	•	
On Master List		Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	

FEI Classifier Code of Conduct

1. General Principles

1.1. The role of the FEI Classifier is to act as an impartial evaluator in determining an Athlete's Grade and Grade Status. The integrity of Classification in the FEI and the Paralympic Movement rests on the professional conduct and behaviour of each individual Classifier.

1.2. In addition to this FEI Classifier Code of Conduct, all FEI Classification Personnel must at all times adhere to the:

- FEI Officials' Code of Conduct.
- All International Paralympic Committee (IPC) applicable rules including but not limited to IPC Code of Ethics, IPC Athlete Classification Code, IPC International Standard for Classifier Personnel and Training.
- FEI Classification Rules.
- FEI Rules and Regulations pertaining to Para Equestrian sport.

2. FEI Classifier Compliance with the FEI Classifier Code of Conduct

2.1. FEI Classifiers must value and respect the Athletes and Athlete Support Personnel.

- Must respect Athletes and Athlete Support Personnel and be sure that there is a courteous attitude during the classification process.
- Must maintain confidentiality of Athlete information and respect the dignity of the Athletes. In this sense it must comply with the International Standard for Classification Data Protection.
- Must treat Athletes with understanding, patience and dignity.
- Must perform their duties courteously, competently, consistently, and objectively for all Athletes regardless of team or national origin.
- Be open to discussion and interaction with Athletes and Athlete Support Personnel in accordance with the FEI Classification Rules.

2.2. FEI Classifiers must respect the FEI Classification Rules.

- Accurately and honestly represent their qualification, registration /certification/authority to practice in their home nation; and abilities when applying for training and certification, and when accepting classification opportunities at competitions.
- Understand the theory and practical aspects of the FEI Classification Rules and make their best efforts to make them widely known and understood by Athletes and Athlete Support Personnel.
- Continuously seek self-improvement through study of the Sport Rules, Classification Rules, mentoring lesser-experienced classifiers and developing trainee classifiers.
- Act as neutral evaluators in determining Grade and Grade Status for all Athletes.
- Disclose any relationship with a team, Athlete or Athlete Support Personnel that would otherwise constitute an actual, perceived or potential Conflict of Interest.
- The FEI shall have the right to determine, in its sole discretion, whether or not a Classifier has an actual, perceived and/or potential conflict of interest.
- Must not abuse their positions or capacity to obtain advantage or benefits.
- Ensure a level of fitness, physically and mentally, for the tasks required in carrying out Athlete Evaluation.
- Perform classification duties and related responsibilities not under the influence of alcohol or illegal substances.
- Must not assume any other role and responsibility that conflicts with their duties as Classification Personnel at a Competition.

Summary of changes made to this manual:

Date	Change
April 2017	Error corrected to the trunk scores for Profile 7 and Profile 13.
January 2022	Added ladder reins to nominated Profiles.
January 2024	Amended descriptions for testing positions. Added Velcro thigh straps to relevant Profiles.