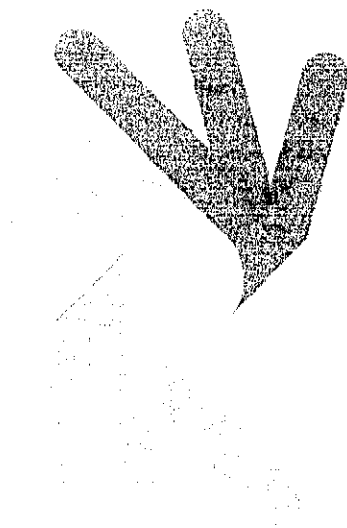


AUDIOGRAM REGULATIONS



International Committee of Sport for the Deaf
528 Trail Avenue
Frederick, Maryland 21701 USA

Version 2.0
Revised – January 2008

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PREAMBLE

The spirit of sport is the celebration of the human spirit, body and mind, and is characterized by the following values:

- Ethics, fair play and honesty
- Health
- Excellence in performance
- Character and education
- Fun and joy
- Teamwork
- Dedication and commitment
- Respect for rules and laws
- Respect for self and other participants
- Courage
- Community and solidarity

ICSD provides the essence of Olympism for the deaf population, with its own motto: "*Equal through sports*".

Only deaf and hard of hearing athletes can compete in the Summer or Winter Deaflympics, World Championships, Regional Championships, and other ICSD-sanctioned competitions.

Also, all Full Members, Associate Members and Regional Confederations will follow these Audiogram Regulations during national and international sport events.

ELIGIBILITY REGULATIONS:

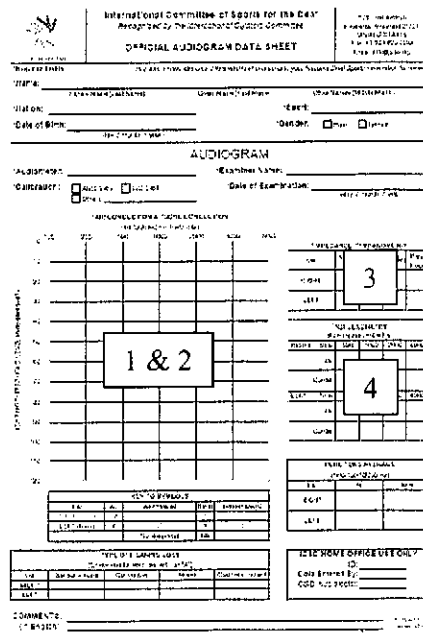
The Summer and Winter Deaflympics bring together deaf athletes of all affiliated National Deaf Sports Federations. Participants in the Deaflympics and ICSD sanctioned competitions must be:

- **Deaf, defined as a hearing loss of at least 55 dB per tone average (PTA) in the better ear (three-tone pure tone average at 500, 1000 and 2000 Hertz, air conduction, ISO 1969 Standard)**
- **Members of an affiliated National Deaf Sports Federation and citizens of that country.**

It is strictly forbidden for a competitor to use any kind of hearing aid(s)/amplification or external cochlear implant parts during competition. It is quite clear that using amplification in sports gives an advantage over those not using it. Therefore it is forbidden in competition.

ARTICLE 1: DEFINITION and PROOF OF DEAFNESS

- 1.1 Deaf is defined as a hearing loss of at least 55 dB PTA in the better ear (3-tone frequency average at 500, 1000 and 2000 Hertz, ISO 1969 Standard). Critical hearing levels between 55-65 dB shall be carefully examined.
- 1.2 Every National Deaf Sport Federation is fully responsible to examine the hearing level of each of its athletes.
- 1.3 Each new athlete must use the official ICSD Audiogram form. The form can be downloaded from <http://www.deaflympics.com/forms/audiogram.pdf>
- 1.4 All Audiogram forms must be filled out entirely for **EACH** ear including:
 1. Air Conduction
 2. Bone Conduction
 3. Tympanograms
 4. Acoustic Reflexes



The image shows the 'Official Audiogram Data Sheet' from the International Committee of Sports for the Deaf (ICSD). The form is titled 'OFFICIAL AUDIOGRAM DATA SHEET' and includes fields for 'Name', 'Date of Birth', 'Date of Exam', 'Examiner', and 'Date of Examination'. It features a large grid for recording hearing levels in dB HL across frequencies of 125, 250, 500, 1000, 2000, and 4000 Hz for both ears. There are also sections for 'Tympanogram' and 'Acoustic Reflex' data. The form is marked with '1 & 2' and '3' and '4' in the respective sections.

- 1.5 All Audiogram forms should be true and personal, and the validity of the forms must be guaranteed by the National Deaf Sport Federation.

ARTICLE 2: SUBMITTING FOR APPROVAL PROCEDURE OF AUDIOGRAMS

2.1 Prior to Competitions:

- 2.1.1 Before submitting a new audiogram, please contact ICSD for your country's latest audiogram list to check and see if your athlete is already in ICSD audiogram database.
- 2.1.2 Prior to any type of ICSD sanctioned events, including Summer/Winter Deaflympics, World Championships, and Regional Championships, all new audiogram forms must be submitted **three (3)** months before the event.
- 2.1.3 All new audiograms will be sent directly to the ICSD home office by National Deaf Sport Federation.
- 2.1.4 When received, the audiograms will be entered into ICSD database, with "NDSF" (National Deaf Sport Federation) code to indicate they were "home tested".
- 2.1.5 If the audiogram form is not filled out in its entirety as defined in 1.4, the audiogram will be entered as "INC" (Incomplete) until re-submitted with FULL information.
- 2.1.6 The audiograms will then be sent to the ICSD audiologist(s) for review.
- 2.1.7 The ICSD audiologist(s) will indicate which ones are approved and which ones are at risk/borderline.
- 2.1.8 The approved audiograms will then have the "NDSF" changed to "ICSD".
- 2.1.9 For those athletes who are "At Risk" with "X" symbol, he/she will be retested by ICSD audiologist.
- 2.1.10 Any athlete that does not meet the 55 dB PTA eligibility criteria will be declared ineligible with "DQ" symbol and cannot resubmit an audiogram for at least two (2) years from the date received.

2.2 On Final Entry Forms:

- 2.2.1 The Final Entry Form will have a column for "athlete ID number".
- 2.2.2 If an athlete's audiogram is already in the ICSD database, the federation will enter the athlete's ID number in the appropriate column. These athletes do not need to submit an audiogram. *See example below:*

Family Name	First Name	Date of Birth	Athlete ID Number
DOE	John	31 Jan 1975	12345
MCKNIGHT	David	5 May 1978	
SHARP	Alfred	10 Dec 1977	22678

Above indicates that **DOE, John** and **SHARP, Alfred** have audiograms in the ICSD database while **MCKNIGHT David** does not have one in the ICSD database.

- 2.2.3 Participation will not be allowed if the audiogram database shows incomplete, indicated by "INC" or ineligible, indicated by "DQ".
- 2.2.4 If the audiogram database indicates that the athlete was examined by NDSF as indicated by "N", then the athlete may be retested by ICSD.

2.3 At the Deaflympics (or other ICSD-sanctioned Competitions):

- 2.3.1 Accreditation will not be granted to those who have not submitted an audiogram.
- 2.3.2 It will be the responsibility of the team leader to reserve a time for the testing of athletes under his/her care.
- 2.3.3 A fee will be imposed for missed appointments.
- 2.3.4 Athletes who leave at the end of the competitions without having been tested in accordance with Audiogram Regulations will be declared disqualified.
- 2.3.5 ICSD reserves the right to test any previously approved athlete any time.

ARTICLE 3: HEARING TESTS DURING COMPETITIONS

- 3.1 ICSD officials and Technical Directors can request an audiogram test during competition. The athlete can be tested just after the last competition of the day or the next day.
- 3.2 The audiologic testing shall not interrupt or change the daily game schedule.
- 3.3 The athlete's team leader shall meet with the ICSD audiologist at the designated time, with the athlete to be tested. Both the athlete and the accompanying person should bring their own passports or identity cards.

ARTICLE 4: RESPONSIBILITY

- 4.1 The individual competitor solely carries the full responsibility to ensure he/she is not wearing any hearing aid(s)/amplification or external cochlear implant parts during competitions.
- 4.2 All athletes will not be allowed to wear any hearing aid(s)/amplification or external cochlear implant parts upon entering any contest or competition venues. All athletes must remove hearing aid(s)/amplification or external cochlear implant parts during the last training prior to competitions.

ARTICLE 5: DISCOVERY

- 5.1 If a competitor is discovered to be wearing hearing aid(s)/amplification or external cochlear implant parts during competition this discovery must immediately be reported to the Technical Director (TD) for the sport in question and to the protest committee. Only accredited team leaders and trainers in the contest concerned have the right to file a protest against the wearing of hearing aid(s)/amplification or external cochlear implant parts.

ARTICLE 6: VIOLATIONS and PENALTIES

6.1 Violations:

- 6.1.1 If a competitor in an individual sport wears a hearing aid(s)/amplification or external cochlear implant parts he/she will be taken out of competition immediately. If he/she competes in different events in this and other sports he/she will be disqualified only in the event the violation was done.

Example A: Track and field: The athlete is entered for 100m, 200m and 400m. He/she is found wearing a hearing aid/amplification during 200m. The athlete will be declared disqualified for 200m and this will have no effect on his/her performance in 100m or 400m. If the violation was done in the relay the whole team will be disqualified from that race.

Example B: Badminton: The athlete is entered for singles, doubles and mixed. He/she is found wearing a hearing aid/amplification in doubles. The athlete will be declared disqualified for doubles only and this will have no effect on his/her performance in singles or mixed. If the violation was done in team contest the whole team will be disqualified from that event.

- 6.1.2 If a competitor in team sports wears hearing aid(s)/amplification or external cochlear implant parts during play his/her team may lose the game by forfeit according to each sport's regulations concerning a forfeit. The player is free to participate in the next game. However, losing a game with a fixed set of figures may sometimes be beneficiary to the team. This must be taken into account and a team must never gain from losing by forfeit.
- 6.1.3 If the competitor repeats the violation, he/she and the team will be taken out of competition immediately, reported to ICSD and disqualified for a fixed time set forth by The Executive Committee.

6.2 Penalties:

- 6.2.1 In case of violations of these regulations, TDs and ICSD Officials will report all violations to ICSD office and all given prizes, awards, medals and diplomas of the disqualified competitor and/or his/her team shall be cancelled. In addition, a fine may be levied.
- 6.2.2 If a National Deaf Sport Federation repeats a violation of Articles 1 or 2 of these Audiogram Regulations more than once ICSD Executive Committee may suspend it from 2 to 4 years for the sport in question.
- 6.2.3 During the ineligibility period the National Deaf Sport Federation and its teams cannot participate in ICSD sanctioned sport events.

Keyword symbols used in audiogram database

- | | |
|------------|---|
| C | – Approved by ICSD audiologist via audiogram form or tested in person |
| N | – Approved by national audiologist "home tested" |
| X | – At risk/borderline |
| DQ | – Disqualify, does not meet 55 dB PTA eligibility criteria |
| INC | – Incomplete, audiogram form not completed. See 1.4 for details |



International Committee of Sports for the Deaf
Recognized by the International Olympic Committee

OFFICIAL AUDIOGRAM DATA SHEET

528 Trail Avenue
Frederick, Maryland 21701
UNITED STATES
Fax: +1 301 620 2990
Email: info@ciss.org

Founded in 1924

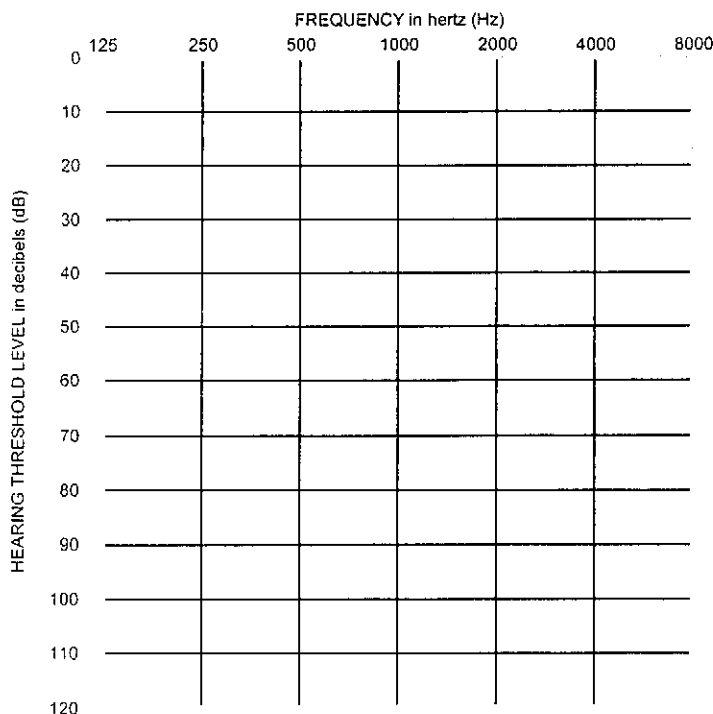
Required Fields PLEASE PRINT OR USE TYPEWRITER and send to your National Deaf Sports Federation for review

Name: _____
Family Name (Last Name) Given Name (First Name) Other Names (Middle Name)
Nation: _____
Date of Birth: _____
(day / month / year) **Sport:** _____
Gender: ☐ Male ☐ Female

AUDIOGRAM

Audiometer: _____ **Examiner Name:** _____
Calibration: ☐ ANSI 1969 ☐ ISO 1964 **Date of Examination:** _____
☐ Other: _____ (day / month / year)

AIR CONDUCTION & BONE CONDUCTION



IMPEDANCE TYMPANOMETRY

Ear	Canal Vol.	Peak Comp.	Gradient	Pres. Peak
RIGHT				
LEFT				

REFLEXOMETRY

Side Equals Probe Ear

RIGHT	Stim	500	1000	2000	4000
Ipsi					
Contra					
LEFT	Stim	500	1000	2000	4000
Ipsi					
Contra					

PURE TONE AVERAGE
(500-1000-2000 Hz)

Ear	Air	Bone
RIGHT		
LEFT		

KEY TO SYMBOLS

Ear	Air	Air-masked	Bone	Bone-masked
LEFT (blue)	X		>	
		No Response	NR	

TYPE OF HEARING LOSS

(Check one for each ear with an "X")

Ear	Sensori-neural	Conductive	Mixed	Cochlear Implant
RIGHT				
LEFT				

ICSD HOME OFFICE USE ONLY

ID: _____
Data Entered By: _____
ICSD Audiologist: _____

COMMENTS: _____
(In English)

Audiogram Form
Revised: 7/2008

www.deaflympics.com/forms/audiogram.pdf



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OFFICIAL AUDIOGRAM DATA SHEET

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Frederick, Maryland 21701
UNITED STATES
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Email: info@ciss.org

Founded in 1924

Required Fields *PLEASE PRINT OR USE TYPEWRITER and send to your National Deaf Sports Federation for review*

Name: _____
Family Name (Last Name) Given Name (First Name) Other Names (Middle Name)

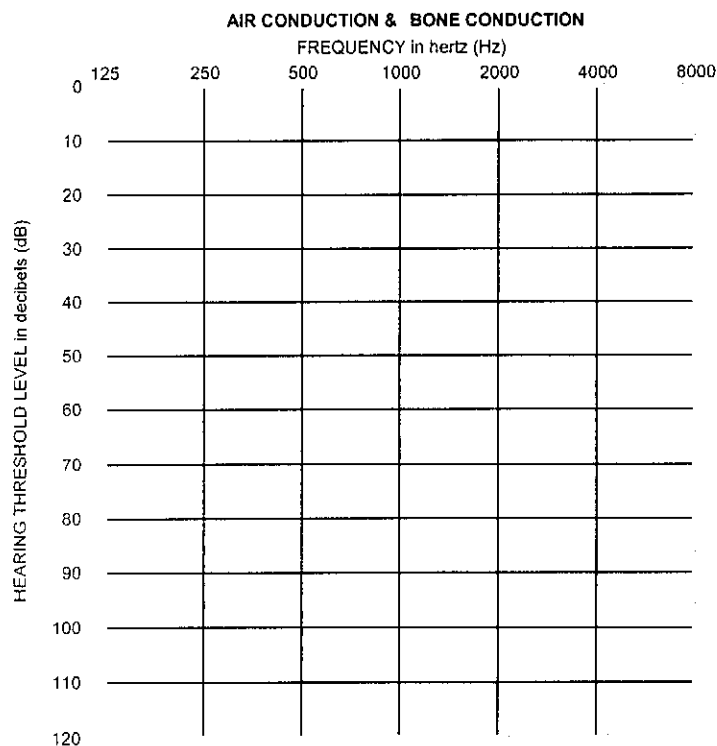
Nation: _____ Sport: _____

Date of Birth: _____ Gender: ☐ Male ☐ Female
(day / month / year)

AUDIOGRAM

Audiometer: _____ Examiner Name: _____

Calibration: ☐ ANSI 1969 ☐ ISO 1964 ☐ Other: _____ Date of Examination: _____
(day / month / year)



KEY TO SYMBOLS				
Ear	Air	Air-masked	Bone	Bone-masked
RIGHT				
LEFT				
No Response			NR	

TYPE OF HEARING LOSS (Check one for each ear with an "X")				
Ear	Sensori-neural	Conductive	Mixed	Cochlear Implant
RIGHT				
LEFT				

IMPEDANCE TYMPANOMETRY				
Ear	Canal Vol.	Peak Comp.	Gradient	Pres. Peak
RIGHT				
LEFT				

REFLEXOMETRY Side Equals Probe Ear					
RIGHT	Stim	500	1000	2000	4000
Ipsi					
Contra					
LEFT	Stim	500	1000	2000	4000
Ipsi					
Contra					

PURE TONE AVERAGE (500-1000-2000 Hz)		
Ear	Air	Bone
RIGHT		
LEFT		

ICSD HOME OFFICE USE ONLY

ID: _____

Data Entered By: _____

ICSD Audiologist: _____

COMMENTS: _____
(In English) _____

*Audiogram Form
Revised: 7/2008*

www.deaflympics.com/forms/audiogram.pdf