



# Malpractice Issues in Combative Sports: What if any Options do I Have?

## Nicholas Rizzo, M.D., J.D., FACP

- ARP/ACSM Certified Ringside Physician
- Illinois Athletic Commission Advisory Board
- Association of Boxing Commissions, Medical Committee
- Association of Ringside Physicians, Past President
- VADA, Board of Directors
- Association of Combat Sports Commissions, Medical Committee
- [www.RingsideMedicine.com](http://www.RingsideMedicine.com), Editor





# Disclaimer

- The material in these slides and given during this presentation is not legal advice.
- There is no attorney-client relationship created or implied.
- Consult a licensed attorney in your state with any legal questions.
- This presentation presents ideas and scenarios of a hypothetical nature only, solely for the purposes of stimulating academic discussion.



# Two Main Points

1. How do I get malpractice coverage for Ringside Medicine?
2. How do I reduce my exposure?



# What is Malpractice?

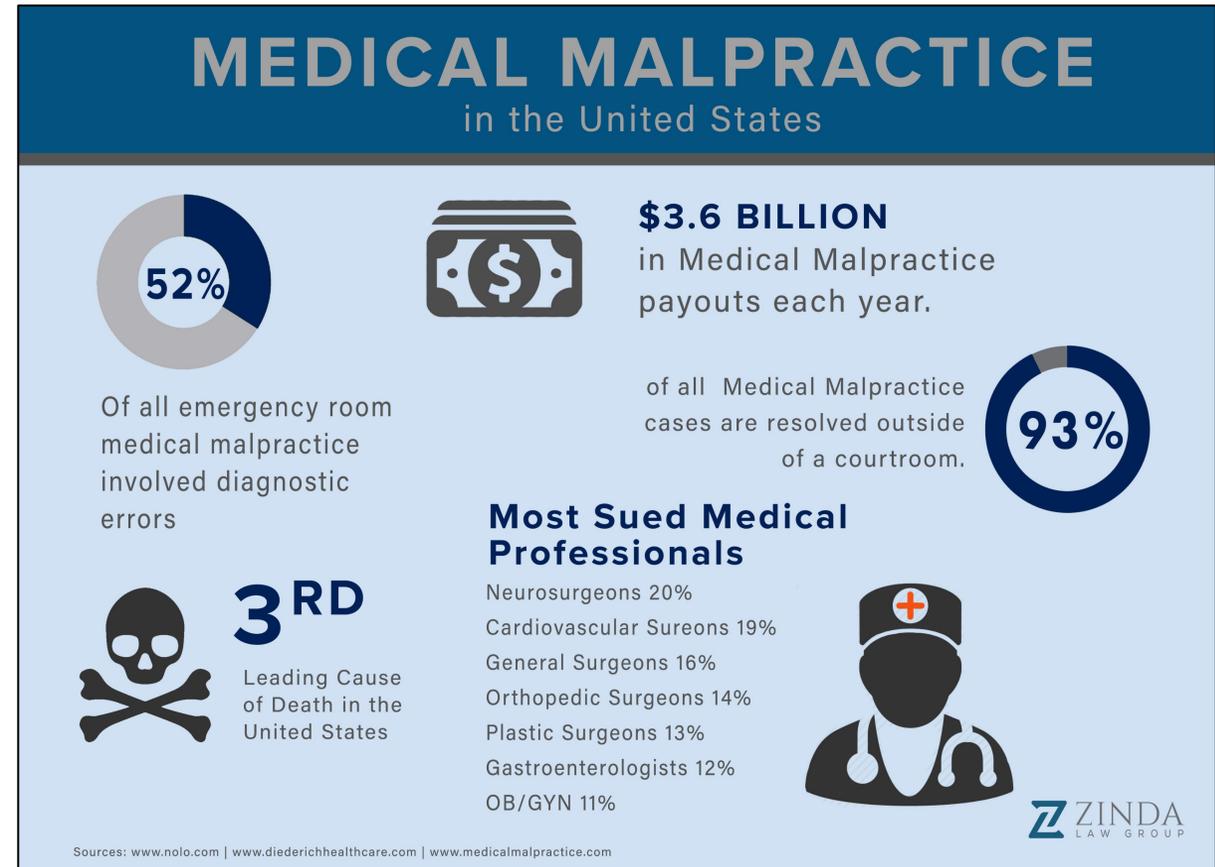
- Medical malpractice is defined as any act or omission by a physician during treatment of a patient that deviates from accepted norms of practice in the medical community and causes an injury to the patient.
- Medical malpractice is a specific subset of tort law that deals with professional negligence.





# What is required to be Malpractice

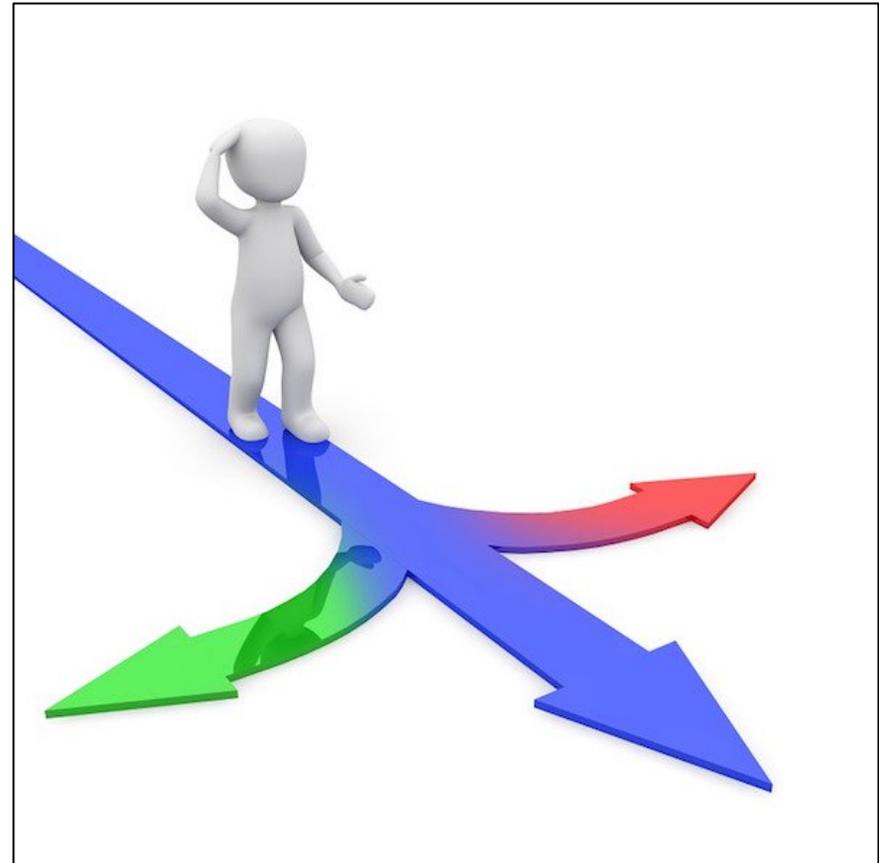
- A doctor-patient relationship existed.
- The doctor was negligent.
- The doctor's negligence caused the injury.
- The injury led to specific damages.





# What Ringside Physicians Do...

- **Medical clearance (pre-bout)**
- **High-level triage in case of injury**
- **Medical evaluation (post-bout)**





# What Ringside Physicians Do...

**Are we treating physicians?**

- Yes and no...





# Doctor-Patient Relationship

- **Pre-bout clearance – Yes, as far as clearance is concerned**
- **Present at the bout in official capacity – Yes, ringside or not**
- **Post-bout exam – Yes**
- **? Treating physician – Maybe**
  - Lacerations
  - Urgent issues
  - Care is transferred to EMS if transported





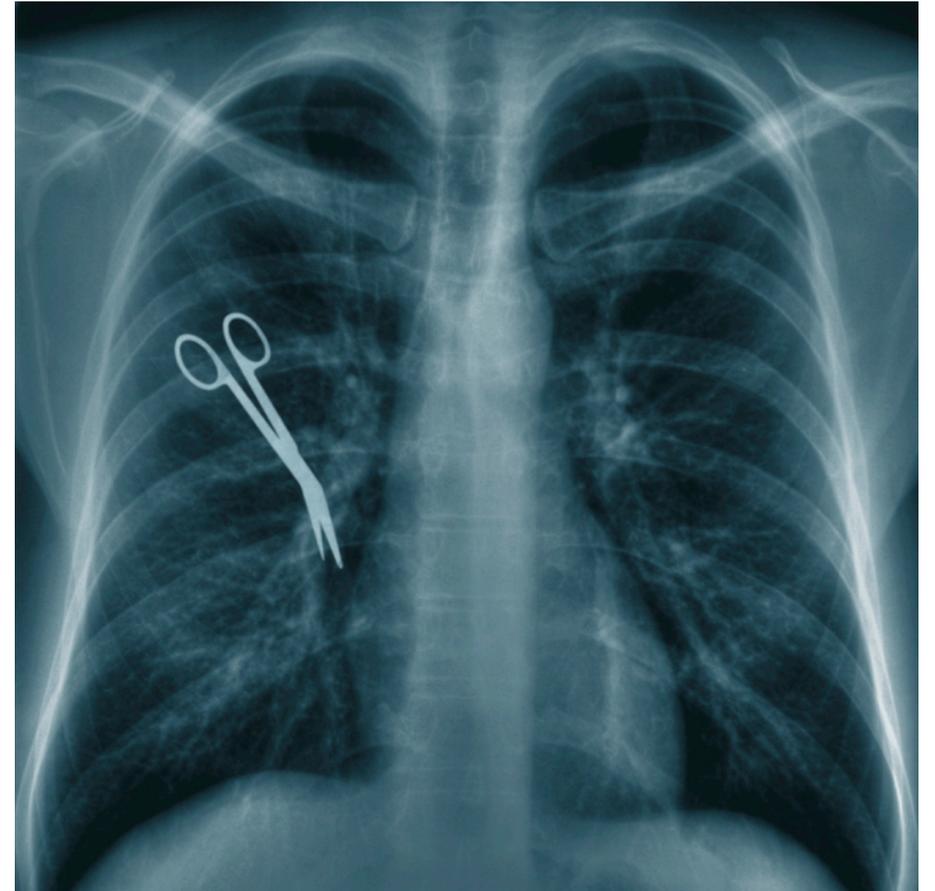
# Negligence

- **Miss a disqualifying or potentially dangerous diagnosis at the pre-bout exam/weigh-in**
  - Abnormal neuro exam, dehydration, hypertension
- **Miss a diagnosis during the bout**
  - Evolving concussion, CNS bleed, anatomy of laceration, dehydration
- **Miss a diagnosis after the bout**
  - Responsible for the fighter until they leave the venue in stable condition
- **Mistreat a diagnosis**



# Negligence Causes the Injury

**The doctor's negligence caused the injury which led to specific damages.**





# Am I Insured?

- Is your state or jurisdiction sovereign?
- Are you in a specialty where malpractice liability insurance covers sporting events? Amateur or Pro?
- Do you have additional policy coverage?
- DON'T take someone's word for it – see it for yourself in writing
- Verify with your liability insurance broker or attorney

I was

I am

I will be

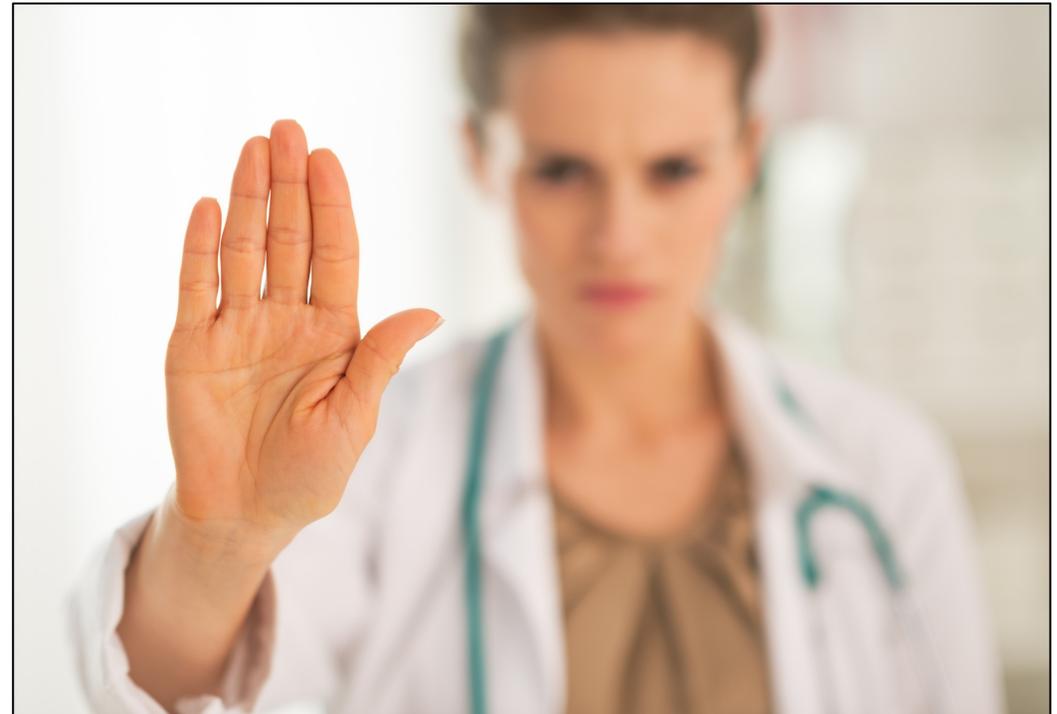
**INSURED**





# Do I have to do this?

- **Don't be afraid to walk away**
- **Don't be afraid to say "No"**
- **Create a win-win with the commission**
- **Don't be pushed around by a promoter**
- **Know the difference between a friend and a buddy**





# Case #1

**A fighter loses consciousness while stepping on the scale. Are you liable?**





# Answer #1

**Probably. Being present at the pre-bout exams could be considered as having established the doctor-patient relationship because you are there in an official capacity, and your duty includes pre-bout clearance. Observation of the fighter can be considered part of the exam.**





## Case #2

**You are one of two ringside physicians. A fighter gets knocked out and is examined in the locker area by the other physician. His injuries sustained in the ring get worse with time. Are you liable?**





# Answer #2

**Probably. As having observed the fighter in the ring when the injuries occurred, you could be considered a responsible party.**





# Case #3

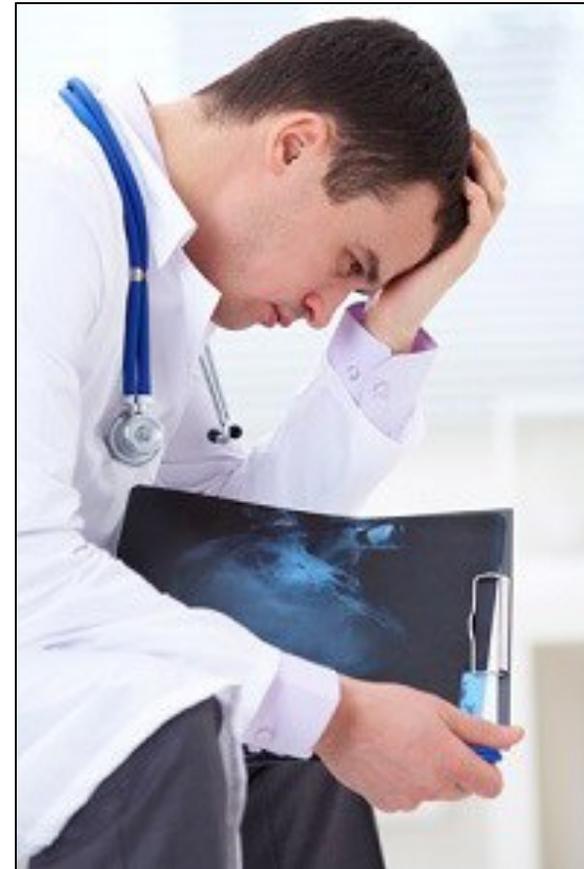
**You are inclined to disqualify a fighter at the pre-bout exam because he cannot do knuckle push-ups without hand pain. He breaks the same hand during the fight. Are you liable?**





# Answer #3

**Likely. There would be a failure to diagnose here in the face of a positive physical exam sign.**





## Case #4

**Same scenario as #3, but you do DQ the fighter. A Promoter is pressuring you to reverse the decision to let him compete as he has had several fighters not make weight and his card now only has a few fights. What do you do?**





# Answer #4

**Keep in mind that your decision is based on medical decision making. Keep considerations like “it’s a title fight”, “I’m rooting for this guy”, etc. out of the picture.**

KEEP YOUR HEAD  
CLEAR! IT  
DOESN'T MATTER  
HOW BRIGHT THE  
PATH IS IF  
YOUR MIND IS  
ALWAYS CLOUDY.



# Case #5

**An official from the fight organization asks you “as the physician” to allow his MMA fighter to use stretch-type ankle wraps. What do you do?**





# Answer #5

- **Refer him to the Commission. Be clear on what are administrative issues/decisions and what are medical issues/decisions.**
- **Do not let an administrative decision change your medical decision.**
- **Recognize when you are a target.**





# Case #6

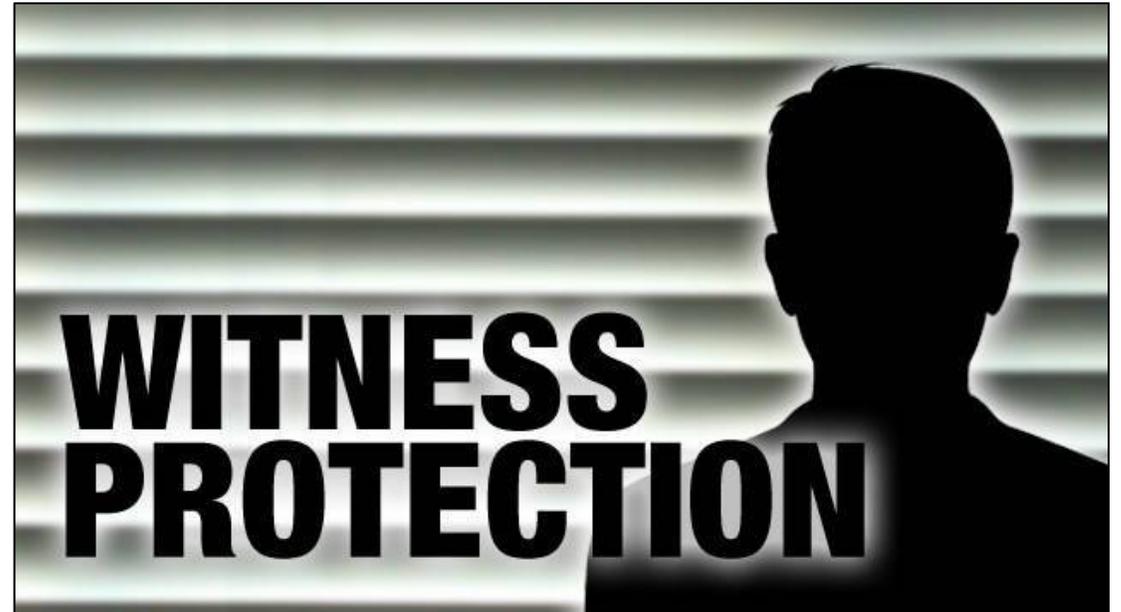
**An inspector tells you that a fighter arrived late for the pre-bout physical and directs you to a locker room. You enter the locker room, and it's a female fighter alone. What do you do?**





## Case #6

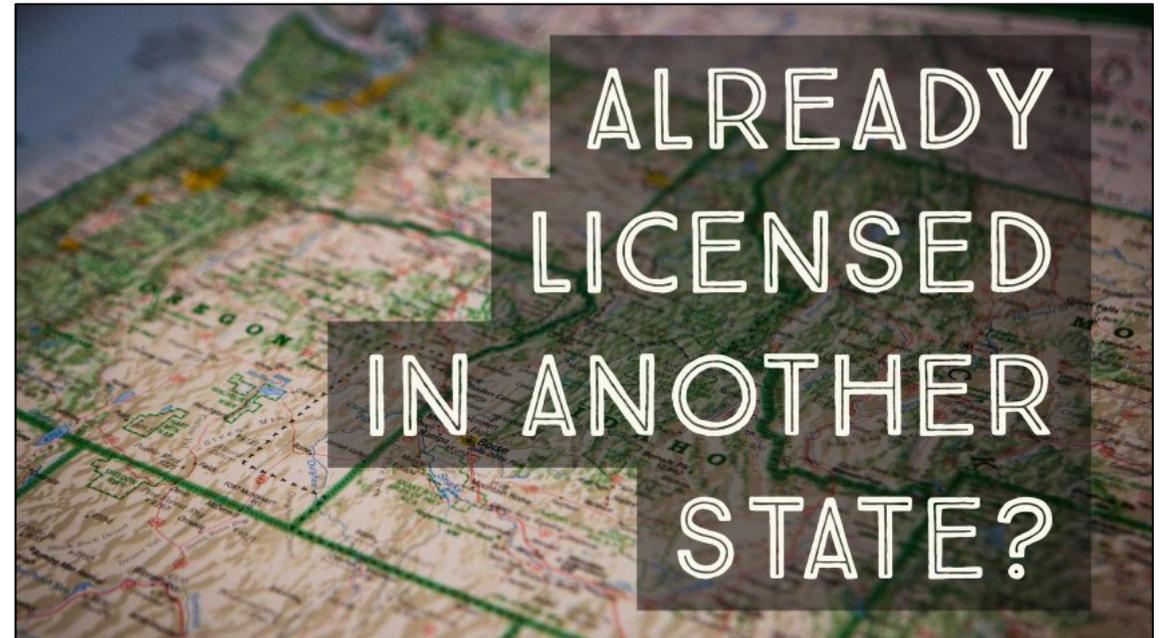
- **Get a chaperone for the pre-bout exam. Get a witness for all exams REGARDLESS OF YOUR GENDER.**
- **Another example... a fighter's corner starts questioning you about an issue and is obviously agitated. Get an inspector to observe the incident and your conversation.**
- **No video or cameras during exams.**





# Case #7

**You are asked to cover a fight in a neighboring state. You are told on the phone that it's a sovereign state and you do not need additional liability insurance. What do you do?**





# Answer #7

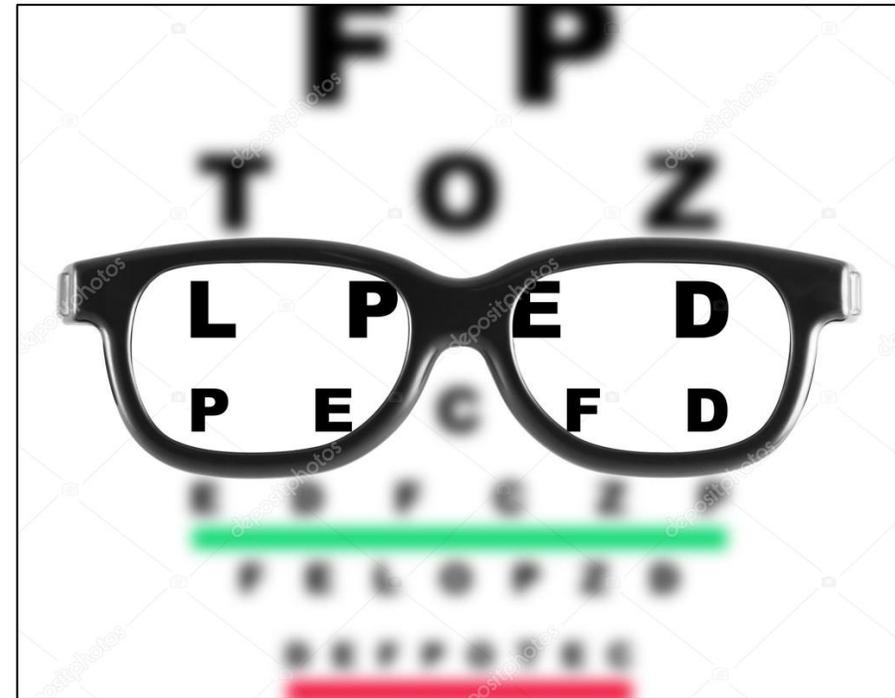
- Do you require a single-event license?
- Are you licensed in that state?
- Your individual malpractice insurance is usually state-based.
- Get the sovereignty clause in writing, or look it up.





# Case #8

**A fighter submits an ophtho clearance exam filled out by an optometrist with 20/200 vision bilaterally. The commission refuses to clear him. He then submits another exam form from an ophthalmologist, documenting 20/20 vision. What is going on? Are you liable?**





# Answer #8

- This is a true story.
- In most states an ophthalmologist is required.
- 20/200 bilaterally is legal blindness and disqualifies the fighter.
- In this case the fighter was legally blind and was now fighting in a state that did not allow contact lenses during bouts. He sent in another fighter about his size, weight, and hair color to do the second exam.
- Valid ID required.
- You could be liable for injury if you were the clearing ophthalmologist that did not require ID.





# Case #9

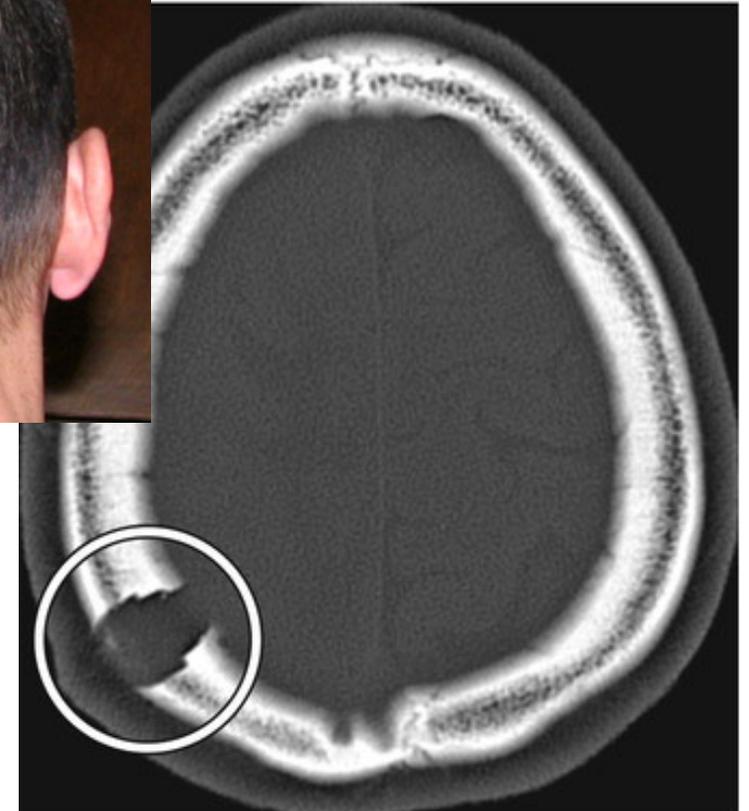
- **This is also a true story.**
- **An MMA fighter presents for pre-bout physical. His record is 7-3. He takes an unusually long time to complete the history part of the pre-bout exam form.**
- **Upon reading the form, the physician notes “brain surgery”.**





# Answer #9

On the ARP-ABC form there is a legal disclaimer that they have to sign. He had not previously disclosed the surgery for a subdural hematoma incurred during a previous pro bout.





# Documentation





# ARP-ABC History Forms

- **Encourage your jurisdiction to adopt these forms**
- **Thorough combat sports history section**
  - Sport record including most recent time knocked out
- **Thorough pre and post-bout evaluation sections with areas for documentation**
  - Area to request and document second evaluations
  - Area to request referral/transport
- **Relevant legal clauses the fighter has to sign**
- ***May be used for your own documentation***



# Prepared is Forewarned

- **One of the best ways to minimize your liability is to be prepared. Arrive early. Establish a working relationship with the referees. Be sure EMS personnel are instructed in protocol. Do the walk-through of the venue, even if you've worked it before. Know where the nearest trauma center is. Establish the roles of your team early on, etc.**
- **Protocols!**



# Focus on your job





# Bottom Lines

- **Know what your role as a Ringside Physician is and isn't**
  - Know what's medical and what's administrative
  - With uncommon exception, you are not a treating physician
- **Know what your state covers and what your individual insurance covers**
  - Get it in writing
  - Have it reviewed
- **Documentation**
  - ARP-ABC forms
  - You are free to do your own documentation such as notes, photographs, etc.
- **An ounce of prevention is worth pound of cure**



# The Biggest Bottom Line

- **Read your policy yourself.**
- **Have your coverage reviewed by a liability insurance broker, and/or your attorney.**
- **Don't take someone's word for it.**



# Questions

Flagship Physicians Insurance  
2250 E. Devon Ave., Ste. 341  
Des Plaines, IL 60018

Sapan Shah, M.D., J.D.

E-mail: [sapan.shah@flagshipphysicians.com](mailto:sapan.shah@flagshipphysicians.com)

Ph: 847-627-5500, Fax: 800-311-7086

Web site: [www.flagshipphysicians.com](http://www.flagshipphysicians.com)



# Thank You

Nicholas Rizzo, M.D., J.D., FACP



[nicholasrizzomd@aol.com](mailto:nicholasrizzomd@aol.com)

[www.RingsideMedicine.com](http://www.RingsideMedicine.com)