



# Referee Physician Interaction

## A Dyad Approach to Protect Combatants

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# Examining the “Dyad” as a Management Model in Integrated Health Systems

By Daniel K. Zismer, PhD, and James Brueggemann, MD

## ***5 Success Factors for Physician Administrator Partnerships***

*R Smoldt MBA, D Cortese ,MD*

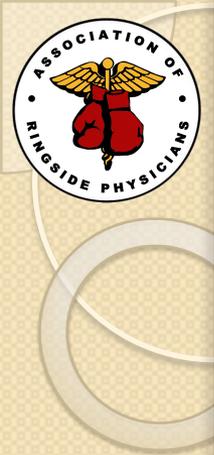
- Physician - administrator jointly lead in an integrated health care system

*Core Value... Patient Safety*

- Referee - Physician Interaction

*Core Value... Fighter Safety*

- **Dyad** (does not guarantee success, if done incorrectly it could lead to confusion)



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## Rationale and Nature Dyads

- Two persons involved in an ongoing relationship or intervention
- Complimentary, minimally redundant
- Collaborate & divide responsibilities

# Success of the Dyad

- Common Core Values
- Willingness to Work Together  
Toward a Common Mission & Vision
- Mutual Respect
- Complimentary Competencies

# Common Core Values

- Most important factor in dyad relationship “*protecting the combatant*”
- If MD & Ref do not share core value the team will not likely be successful
- Ref & MD must have it hearts and minds
- Actions louder than words
- Staff will deduce leadership core value and live it

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PROMOTIONS



WORLDWIDE  
PROMOTIONS  
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# Willingness to Work Together Toward a Common Mission & Vision

- The “Big Idea”
- Clearly defined individual responsibilities and accountabilities
- Be flexible & help each other accomplish those responsibilities
- If it gets too territorial the ideal of leveraging each other’s strengths will be lost



## Clear and Transparent Communication With Each Other and the Commission

- Gain most strength from the dyad need to leverage and build strength on the strengths of the other
- Will not happen with regular & open communication
- Poor communication sign that dyad is not working
- Key ... communicate the mission & value

# Mutual Respect

- Working a fight is not an individual sport (collective actions of the team)
- Team works best in atmosphere of mutual respect
- Ref/MD dyad shows mutual respect so will the whole team
- Respect is earned a big part of earning respect is to respect the view, position and knowledge base of the other
- Neither Referee or MD should assume the view is always the correct one

# Complementary Competencies

- No one person on the dyad is good at everything
- Employing the dyad approach can expand the level of competence
- One is strong where the other is weak
- Referee understands the fight game
- MD understands medicine

## Referee-Physician Dyad What do these positions have in common?

- Core Value (fighter safety)
- Success is tied to each other
- Relationship evolves
- Autonomy is relinquished to the team approach
- Do not publicly blame each other for poor performance



# Making the Dyad Relationship Work

- Significant Regular Communication
- Trust
- Respect
- When one person in the dyad speaks...everyone knows they speak for both



# Commission Rules(vary)

- Referee as sole arbiter of bout
- Physician may stop fight
- Ref & MD individuals that can enter ring/cage
- Referees decision to stop generally more accepted than MD



# Stopping a Fight

- MD generally a lower threshold
- Lack knowledge of punch-taking ability
- Litigation
- Goal: stop before significant threat to life or body part



# Referee

- Your most critical position
- Main point of contact
- Ringside physician seek out the referee before the fight.
- Referee find your physician
- Communicate your findings on pre-bout exams
- Inform of concerns

# Ringside Physician (pre-fight)

- Let referee know your level of experience
- Go over emergency action plan
- Make sure referee knows location of medical team, emergency equipment, equipment, and exit strategy
- Establish a communication system
- Inform fighters of referee/physician/corner communication

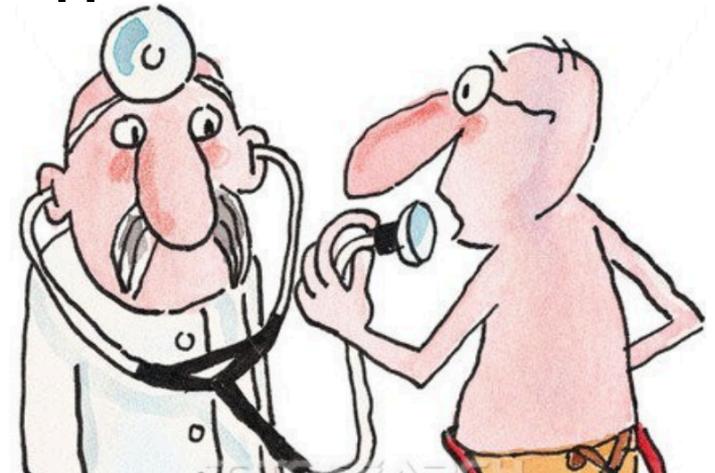
# Referee (pre-fight)

- Find the doctor (they may be shy or not understand)
- Establish a relationship
- Confidence in their medical knowledge
- What to expect if you call them in the ring



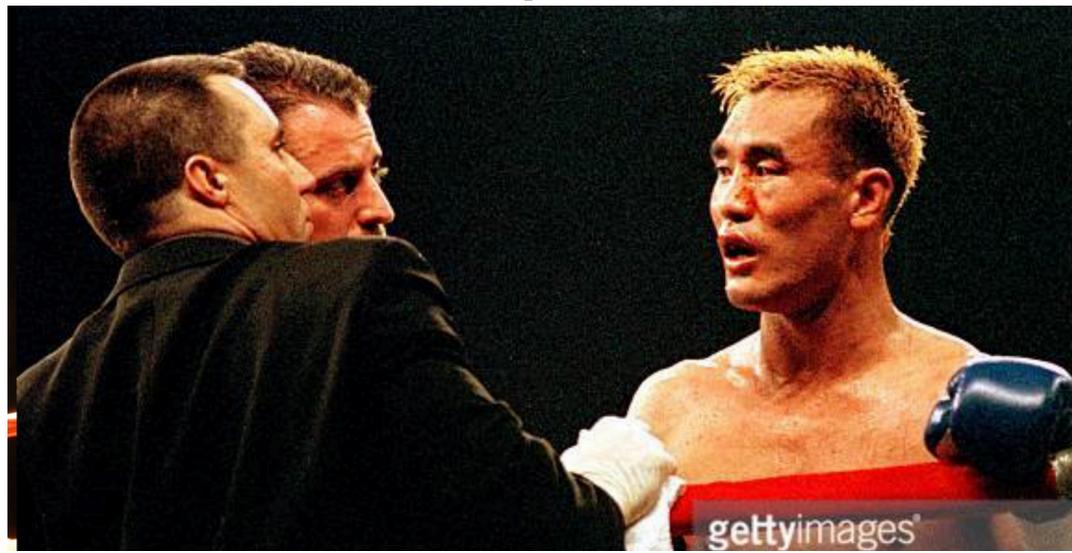
# During the Bout

- Constant Communication
- If you don't understand...Ask?
- MD avoid camera lines, or any gestures that may confuse fighter (you are not part of the show)
- MD communicate to fighter via referee



# The “Minute” between rounds

- This is the fighters time
- Discuss with the referee how the minute will be utilized
- Discuss process for calling a “medical time out”
- TEAM must be adaptable



# Post-bout

- Referee physician de-briefing time
- What went well
- What did not go well
- Publicly support the team
- Privately do not be afraid of criticism
- **EXPERIENCE** (*having the ability to recognize when you made a mistake*)

# PROTECTING THE COMBATANT

## Team Building

- **Physician & Referee**
- **Commission**
- **Trainer**
- **Inspectors**
- **Paramedics**

