## THE MEDICAL COVERAGE OF A MAJOR CISM EVENT

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I thank you for your invitation to this symposium and because you have given me the opportunity to gather in a short presentation the experiences collected in the organization of the World Military Games in Catania in 2003. I hope I have succeeded in the task assigned to me to create a small reference book useful to whoever wants to find information about the organization of the medical coverage of a major sport event. I have also added information about the financial planning because without money nothing is possible.

2) This is the photo of my arrival in Catania (the ship is not mine) if you look at my relaxed face you can understand that I did not imagine the quantity of work I had to do.

3) Now we can begin the analysis of the organization. To better show the structure of this report I can start saying that the whole organization can be divided in two areas: the medical care and the anti-doping controls; and three time sections: before the beginning of the games, during the games and after the closure ceremony.

4) Before: First of all we need an operation centre where to install the staff according to a hierarchical structure and thus a person first responsible for the whole organization and under him the person responsible for the medical care and the person responsible for the anti-doping controls. The former organizes the activity of the medical doctors and the ambulances at the sport venues and at the places of accommodation. Then he has to alert the hospitals that a great sport event is going to take place in a short time. The latter organizes the work of the anti-doping inspectors and he is responsible for the safekeeping of the materials before and after the taking of samples, this is a very delicate job. These three people begin to calculate the financial planning of the medical coverage.

5) Now, going on with the medical care, we can analyze how to work out the financial planning. The cost of the medical assistance depends on the number of participants and on the number of sport events. According to the number of participants it is necessary to find enough places where to accommodate people. The accommodation can be in barracks (no cost) or in hotels (expensive) but in both we have to provide: medical doctors and nurses 24 hours a day; ambulances have to be placed strategically so that one ambulance can control a large area. At last physiotherapists work according to a time frame.

The medical staff need to be provided with materials such as drugs, medical supplies, medical bags, medical clothes (to be easily identified) and medical printed forms.

Then more athletes more places to accommodate them, more places to accommodate them more medical staff, more medical staff more materials and all this has a cost.

The cost of the medical care depends also on the number of sport events, each has to be planned according to the day, the time, the type of sport and the sport venue.

6) Here I have reproduced an example of my daily timetable. You can see that each sport event is planned with the date, the time and the place. The finals where the anti-doping controls are planned are highlighted in red. There are more sport events taking place at the same time, up to seven in seven different places. It is clear that it is necessary to appoint one or more medical doctors and one or more ambulances for each event.

Back to n. 5. Coming back to this slide we have to point out that some doctors need to have special professional qualifications for example resuscitators for the boxing, traumatologists for the track and field and both for the cycling; only military doctors and ambulances are no cost all the rest is very expensive. In conclusion we can calculate the budget of the medical care on the number of participants and on the number of sport events; we call this budget : budget A.

7) Let's go back to the operation centre and analyse the financial planning of the anti-doping controls. We have to calculate the number of finals for each sport discipline. First of all we have to decide the number of samples according to the CISM rule. We have also to consider the possibility of new records unpredictable but likely in particular competitions. In Catania we had four records: two in life saving and two in swimming. Obviously in these types of competitions we have to provide the inspectors with a greater quantity of anti-doping materials because they have to be ready to cope with extra controls.

The number of anti-doping inspectors depends on the number of finals.

8) The next slide shows my antidoping timetable with the type of sport, the time, the venue, the number of finals of that sport on that day, the number of samples foreseen , and whether there will be men or women finals or both, the quantity of antidoping kits.

Now going back to the previous slide it is clear that the quantity of materials, the delivery service and the cost of the laboratory depends on the number of estimated samples.

In conclusion the cost of materials, delivery service, laboratory plus the inspectors' fees form budget B.

9) To sum up this is the résumé of the costs included in budget A and B. The total budget will be submitted to the organizing committee for approval.

10) Now let's analyse better the organization of the a.d. controls. Let's start from the inspectors.

The team has to be composed of a male inspector or a female inspector or both depending on the type of final if a men or women final or both.

The teams of inspectors have to be given the timetable of the finals and the venues in very good time by means of an official notification to attend.

Let's see the materials. The kits and the delivery cases are to be certified and provided with no breaking seals.

The antidoping forms have to be printed with the logo and the name of the event and have to be composed of four sheets in four different colours (the first for the CISM representative, the second for the anti-doping responsible, the third for the athlete, the fourth for the laboratory) and they have to be written in two or three languages. The anti-doping control stations have to be set up according to the international regulations.

Now we have finished the preliminary phase of the organization and the games are going to start: all medical staff are ready with materials, timetable and their tasks. The next time section is the section where we can reap the harvest of our work. If we have considered everything any kind of unforeseen events will be easily overcome and you can take for granted that there will be a lot. It happened in Catania and fortunately everything went all right.

11) The games have started and now we are in the time section "during". We are in the operation centre and we begin to check the medical care and then the anti-doping controls. The operation centre has to monitor the sport venues, the ceremonies, the accommodation places and the hospitals. For the first two items we need to pay attention to the programme changes due to various factors for example the weather conditions.

12) At the sport venues and at the ceremonies the ambulances and the medical doctors have obviously to be present before the beginning of the event. We have to control their arrival according to the daily timetable. If the doctor or the ambulances have not arrived yet or they have left because of an emergency we need immediately to send a substitute calling up from reserves.

13) As regards the accommodation, the ambulances are necessary above all during the night when all the athletes are present there. The crew of the ambulance should have a bedroom next to the doctor's one, ready to go at any time.

The doctor has to be present full time and both the infirmary and the doctor's bedroom have to be well indicated above all if they are in a hotel. It is necessary to arrange a suitable system of signs at the reception with the number of the doctor's room that should be the nearest possible to the reception.

If an athlete is sent to hospital, it is important to send there a doctor of the organization to collect information and to inform the head of the delegation and generally to monitor the patients in hospital until the discharge.

14) And now let's see the anti-doping controls. We are always in our operation centre and we have to check if the inspectors and the materials have arrived. We do not need to do anything else because the procedures to take the samples are under the inspectors' responsibility.

We have only to wait for the arrival of the inspectors who hand over the forms and the sealed delivery cases ready for the dispatch. We have always to exchange delivery receipts.

Once the delivery cases are in our possession they have to be kept under close supervision in a room with safety device. At last we have to organize the dispatch of the samples to the anti-doping laboratory chosen as soon as possible always with exchange of delivery receipts.

In Catania the delivery cases travelled escorted by a medical doctor captain of the Carabinieri by a private flight and cars. It took four hours from Catania directly to the laboratory in Rome.

All these procedures are extremely important and delicate because in case of a positive sample the lawyers of the athlete will appeal trying to find any kind of inaccuracy or error in the procedures.

15) The games are over after a nice closure ceremony and banquet where we reinforced the medical assistance, but the work in the operation centre goes on. The medical assistance continues with the monitoring of the patients still hospitalised and we have to take care of them until the discharge and the departure. Besides we have to try to collect the statistical data. In a major sport event, the first task is easy the second is very difficult when a lot of medical doctors are present in the different sport venues; in this case it is probable that someone may forget to deliver the medical forms. After the closure ceremony it is very difficult to find them.

16) As regards the anti-doping controls we have to wait for the data from the laboratory hoping they are all negative. The laboratory must send the results to the chief of delegation of the organizing country or to the doctor responsible for the medical coverage. The person in charge will be the interlocutor between the laboratory and the CISM General Secretariat.

If the results are all negative the laboratory results will be sent to CISM with a report.

In case of one or more athletes are positive to the controls we need to identify the athletes through the identification number on the forms. The responsible has to match the number on the report of the laboratory (anonymous) to the number corresponding on the forms containing name and number delivered by the a.d. inspectors after the competition.

Then these forms are sent to the CISM General Secretariat who informs the CISM representative in the athlete's country. The athlete can ask for a repetition of the anti-doping test.