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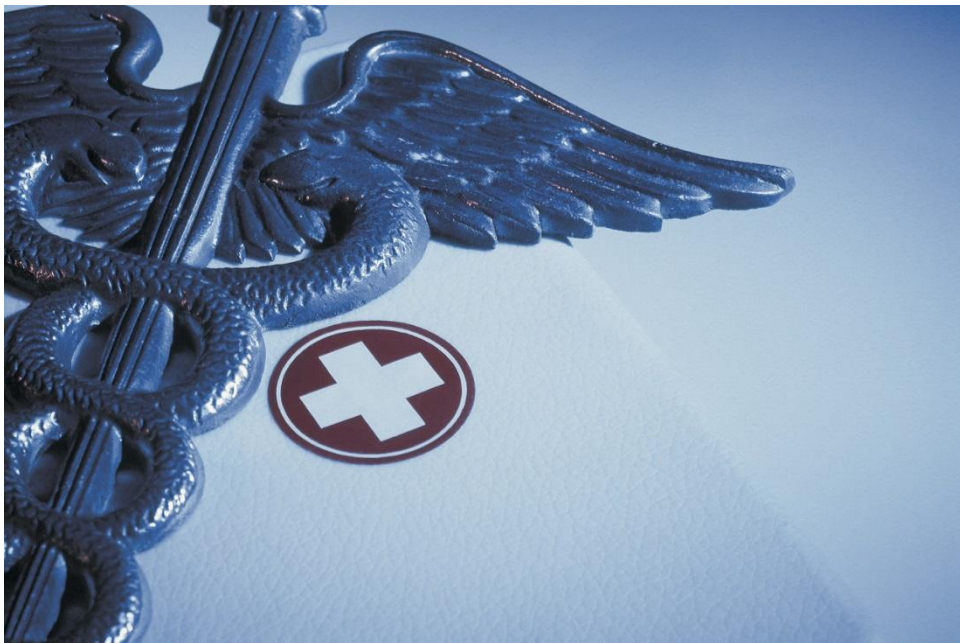
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MEDICAL GUIDELINES

of

European Gymnastics



Edition 2026

EBU

OPERATING EUROVISION AND EURORADIO

SMARTSCORING

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PREAMBLE

~~The responsibility for the medical organisation of a European Gymnastics Competition is incumbent upon the Federation of the organising country.~~

~~In the case of major European Gymnastics competitions, the Federation concerned shall propose to the President of the European Gymnastics Medical Commission the name of a doctor to be entrusted with the responsibility for the competition and this at least 3 months prior to the competition in question.~~

~~The doctor thus designated will be known as the Chief Medical Officer (CMO) of the Organising Committee. He shall submit a medical plan.~~

~~The European Gymnastics Medical Commission reserves the right to intervene on the occasion of official competitions should recommendations not be correctly interpreted or implemented. These rules have to be strictly followed by any Organising Committee under contract with European Gymnastics.~~

These Medical Guidelines are intended to establish a framework for the protection and management of athlete health and safety within the European Gymnastics events. The guidelines aim to ensure consistent medical standards.

In addition to these rules the Local Organising Committee is responsible to follow all applicable local and national regulation regarding emergency and no-emergency care.

The “Medical Organisation of the European Gymnastics Competitions” rules are following the concept of the IOC Medical Code and **World Gymnastics** Statutes.

The masculine gender is used throughout the whole text to refer to both males and females.

ARTICLE 1 **GENERAL MEDICAL PREMISES**

The responsibility for the medical organisation of a European Gymnastics Competition is incumbent upon the Federation of the organising country.

In the case of major European Gymnastics competitions, the Federation concerned shall propose to the President of the European Gymnastics Medical Commission the name of a doctor to be entrusted with the responsibility for the **medical support of the** competition and this at least 3 months prior to the competition in question.

The doctor thus designated will be known as the Chief Medical Officer (CMO) of the **Local** Organising Committee (**LOC**). He shall submit a medical plan **2 months prior to the event to European Gymnastics**.

The European Gymnastics Medical Commission reserves the right to intervene on the occasion of official competitions should **the** recommendations **of the Medical Guidelines** not be correctly interpreted or implemented. These rules have to be strictly followed by any Organising Committee under contract with European Gymnastics.

ARTICLE ~~1~~2 **MEDICAL PREMISES**

~~1~~2.1 **LOC must provide in the area** of the competition and warm-up halls (these being basically in the same place or very close to one another):

- At least one room reserved for medical care at the same level of the competition floor and close to the podium.
- A separate secure space reserved for doping control.

~~1~~2.2 **LOC must provide** in the area of the various training halls (if these be distinct and separate from the complex containing the competition hall).

- At least one room reserved for medical care.
- A separate secure space reserved for doping control

~~1~~2.3 These **medical premises** are for medical use exclusively. They are not to be utilised for meetings, relaxation or resting by the medical staff. Only the medical and anti-doping staff on duty is allowed.

~~1~~2.4 All medical and anti-doping rooms are non-smoking.

ARTICLE 23 THE STAFF

23.1 The Chief Medical Officer (CMO)

- 23.1.1 The Chief Medical Officer (CMO) of the Local Organising Committee (LOC) is designated by the Organising Federation. The CMO should be a physician accredited in Emergency Medicine and/or Sport Medicine with appropriate Professional Medical Indemnity Insurance valid for the region and the period of the European Gymnastics Event. He is responsible to provide the necessary and adequate medical coverage for the Event. A CMO nomination must be submitted 3 months before the Event to the President of the European Gymnastics Medical Commission for timely coordination.
- 23.1.2 The CMO must provide a detailed Medical Support Plan to the President of European Gymnastics Medical Commission at least 2 (two) months before the Event. The Medical Support Plan form to be filled by the CMO is attached in the Appendices (annex 1).
- 23.1.3 The CMO must liaise with the respective National Health System to provide medical cover for the spectators according to the country's legislation without European Gymnastics approval or affiliation being necessary.
- 23.1.4 The CMO of the Organising Committee must have an accreditation for all zones, i.e. access to all levels of training and to the competition area at all times.
- 23.1.5 During the competition there will be designated seating for the CMO in the competition area near the seats of the Local Organising Committee.
- 23.1.6 It is the responsibility of the CMO to ensure that during all dates of the Event a Physician is present and in contact with the First Aid Stations.
- 23.1.7 It is the responsibility of the CMO to ensure that the designated medical room and First Aid Stations is staffed with appropriately qualified medical personnel from the beginning of training until the end of the competition. It is mandatory to ensure medical presence at all training and competition halls, including during the warming-up periods.
- 23.1.8 It is the responsibility of the CMO to record all medical events (injuries or illnesses) using the official form from the European Gymnastics Medical Commission (Annex 2: Injuries/Illnesses Form). The form must be filled in by the CMO or the Event Physician and signed by the involved athlete or legal representative. The form is submitted to the European Gymnastics Official Doctor at the end of the Event.

23.2 The Event Physician

23.2.1 An Event Physician may be designated by the CMO to assist him in the medical support of a large Event.

23.2.2 The Event Physician should be properly accredited with appropriate Professional Medical Indemnity Insurance valid for the region and the period of the European Gymnastics Event. He is responsible to provide medical coverage for the Event.

23.2.3 It is the responsibility of the Event Physician and/or CMO to record all medical events (injuries or illnesses) using the official form from the European Gymnastics Medical Commission (Annex 2: Injuries/Illnesses Form). The form must be filled in and signed by the involved athlete or legal representative. The form is submitted to the European Gymnastics Official Doctor at the end of the Event.

23.3 The First Aid Station Crew

23.3.1 The First Aid Station Crew should be accredited paramedics with appropriate Professional Medical Indemnity Insurance valid for the region and the period of the European Gymnastics Event. The crew is responsible to provide emergency medical care for the event in cooperation with the Event Physician or the CMO.

ARTICLE 34 MEDICAL EQUIPMENT AND MEDICATIONS

34.1 First Aid Station Equipment

34.1.1 The necessary number of First Aid Stations should be estimated according to the number of participating gymnasts, their eventual dispersion and multiplicity in the training and competition halls.

34.1.2 At least one First Aid Station should be deployed in the competition area and one in the training halls.

34.1.3 The location of First Aid Stations should be clearly noted in the Medical Support Plan.

34.1.4 During the competition, the first aid station with emergency medical equipment located in the competition area must have a clear view and access to the Podium.

34.1.5 Each First Aid Station should be composed of the following minimum equipment:

- One medical table for examination

- First aid splints and collars to immobilize upper and lower leg fractures and spinal injuries
- Spinal board with neck immobiliser
- An Automated External Defibrillator (AED)
- One portable oxygen unit with mask
- Ventilation equipment (AMBU)
- Blood pressure monitor and stethoscope
- Simple wound care (disinfectant, povidone, creams, bandages)
- Simple medications (ointments, simple painkillers, eye drops, NSAIDs, antacids).
- Taping and elastic bandages
- One stretcher
- One wheelchair
- Communication equipment to report to the CMO (Telephone - walkie talkie).

34.2 Medical Room Equipment

34.2.1 The Medical Room must provide separation by screens for males and females. Most medical assessments and treatments should be easily observable by all, but if it requires privacy, then an adult chaperone is required for safeguarding the athlete at all times.

34.2.2 The Medical Room should be composed of the following minimum equipment:

- At least one medical table for examination
- At least one massage table
- Screens to provide privacy during exam
- Office desk with 3 visitor chairs
- One locker to store equipment and medications
- Splints and collars to immobilize upper and lower leg fractures and spinal injuries
- ECG monitor with Defibrillator
- Portable oxygen and masks
- Ventilation equipment (AMBU)
- Intubation equipment
- Aspiration equipment
- Blood pressure monitor and stethoscope
- IV equipment and perfusion liquid (N/S, Ringers, Glucose)
- Emergency medications (ACLS list)
- Basic medications for common respiratory musculoskeletal and gastrointestinal diseases
- Wound care including minor wound stitching, eye and ear drops
- Taping and elastic bandage
- Stretchers and wheelchairs

- Communication equipment (to report to the CMO (Telephone - walkie talkie)).

34.2 Physiotherapy Equipment

- 34.2.1 At least two massage tables must be available at each training hall for use by the Delegations.
- 34.2.2 A refrigerator or ice machine with ice must be available at all times in good quantity, along with appropriate containers for carrying ice. The ice machine must be in close proximity to the training and competition halls or near the first aid station.
- 34.2.3 Specialised physiotherapy equipment (TENS, ultrasound, massage guns, etc) under the care of a LOC physiotherapist may be located at the medical room.

34.3 Doping Control Room

- 34.3.1 This room shall include a waiting area with seats, an interview room and toilets. The toilets shall be large enough to accommodate the DCO or chaperone who will witness the passing of the urine sample. A minor athlete may be escorted by an adult representative to ensure safeguarding. ~~when the athlete is ready to provide it and the athlete representative~~
- 34.3.2 The equipment provided should be in accordance with the International Standard for Testing and the WADA Sample Collection Guidelines.

34.4 Prescription and first aid medications

- 34.4.1 First aid medication for emergencies must be provided on a free basis by the Local Organizing Committee
- 34.4.2 Small quantities of general use medications (eg NSAIDs, skin ointments, painkillers, gastrointestinal and respiratory medications) for the athletes and the members of the delegations should be provided by the LOC. The disposal and the diagnosis is to be documented in the Injury/Illness form by the First Aid Station crew or the Event Physician or the CMO.
- 34.4.3 For other medications, the CMO or Event Physician of the Organising Committee may provide a courtesy prescription according to the local legislation if possible and medically appropriate. Medication under this prescription is to be paid for by the gymnast or the respective federation. The prescription and the diagnosis is to be documented in the Injury/Illness form by the CMO / Event Physician.

- 34.4.4 Disinfectant products, with both bacterio-static and viro-static properties, for the gymnasts and apparatus **should be available in both the training and competition halls.**

ARTICLE 45 SAFEGUARDING AND MEDICAL STAFF

- 45.1 The Local Organizing Committee must develop policies and procedures for recruiting medical staff and medical volunteers working with children and adult athletes. The LOC should insist that all medical staff/volunteers have an athlete-centered approach, creating a safe environment where all can participate without harassment or abuse.
- 45.2 **The LOC should** designate a medical staff member (preferably the CMO) to be the lead safeguarding advocate for the medical team and the liaison for medical with the Competition Safeguarding Officer. The LOC together with the Safeguarding Officer should:
- 45.2.1 **Prepare** an education program for all medical staff/ volunteers on safeguarding athletes and all participants.
- 45.2.2 Teach the medical staff/volunteers how to raise concerns about unacceptable or questionable behavior by anyone (coaches, officials, staff, volunteers, other athletes).
- 45.2.3 Educate the medical staff/volunteers about the safeguarding plan and guidance around transport, housing, changing areas, training, FOP, and medical treatment

ARTICLE 56 EMERGENCY PROCEDURES

- 56.1 **At least one** medically equipped vehicle must be available and present at all times at the **competition** venue for intervention and emergency transport **of injured/ill athletes and/or members of the delegations**
- 56.2 **In case of remote training venues at least one properly** equipped vehicle must also be present at all training times and available for intervention and emergency transport.
- 56.3 Medical support of spectators and/or venue and LOC staff should be arranged according to the provisions of the National EMS System.
- 56.4 The LOC is directly responsible to organise the best optimum condition for the fastest and safe transport, including easy access to the venues. **The location of ambulance stations and the routes of medical transport should be clearly stated in the Medical Support Plan**

- 56.5 The CMO must make prior arrangements with an appropriate medical centre in order to provide access to medical specialties (eg dentists, cardiologists, ophthalmologists etc), laboratory exams and medical imaging (including ultrasound CT and MRI) when requested by a Team Physician. The address of the designated medical center (private or public), as well as the person that will act as point of contact and his contact phone and email must be provided in the Medical Support Plan.
- 56.6 The CMO must establish a clear plan of transport of emergencies to a tertiary hospital for immediate care, including emergency surgery and hospitalisation. The hospital must be able to treat all major medical emergencies without the need for further transport. The Hospital should be clearly stated in the Medical Support Plan together with necessary contact details of the liaison office/person.
- 56.7 If the medical center of the tertiary hospital is not able to provide a translator, the organising committee will arrange for a translator or an accompanying person for the injured athlete while outside medical care is required.

ARTICLE 67 DELEGATION MEDICAL TEAMS

- 67.1 The European Gymnastics/World Gymnastics regulations foresee within each delegation the official accreditation of certified medical personnel. These accreditations cannot be used by non-medical personnel.
- 67.2 Accredited delegation medical personnel may make use of the on-site medical facilities and the equipment provided by the LOC with the prior agreement of the CMO. The number of medical personnel to be accredited will be determined by the format of the competition (see European Gymnastics Technical Regulations and Accreditation Regulations).
- 67.3 European Gymnastics Medical Commission members may be accredited either from European Gymnastics or by their National Federation but not by both and they should act according to the role accredited.
- 67.4 Delegation Medical Teams should make arrangements to bring their own medical supplies taking in account any legal restrictions regarding the transport of medications to the Event Country.
- 67.5 During competition, delegation medical doctors and paramedical staff should remain seated in the places provided for that function within the arena area.

- 67.6 In the event of serious accident or any other emergency, the responsibility to take control remains with the CMO or his representative. The CMO may permit the delegation's doctor, or paramedical staff to assist. Upon the CMO's approval, the Team doctor or paramedical staff may treat their gymnasts in the competition area providing they return immediately to their designated places following treatment (see European Gymnastics Accreditation Regulations, regarding the authorized area).
- 67.7 National delegations having no medical staff of their own, may request assistance from the CMO.
- 67.8 It is not recommended that medical doctors or paramedical staff treat gymnasts from other nations unless by previous mutual agreement. -
- 67.9 It remains under the exclusive responsibility of the Federations to ensure that their Team Doctors and Physiotherapists/Masseurs have appropriate Professional Medical Indemnity Insurance in order to treat their Delegation athletes.
- 67.10 In case of an injury or illness that necessitates transfer of an athlete to a medical center or hospital a member of the Medical Team or an Official of the Delegation must accompany the athlete at all times.

ARTICLE 78 ROLE OF THE EUROPEAN GYMNASTICS MEDICAL COMMISSION

- 78.1 The President of the European Gymnastics Medical Commission shall review the timely submitted Medical Support Plan and ensure that the recommendations and obligations detailed in this document are correctly applied. If necessary, he may communicate his observations to the CMO of the LOC so that the latter may take all necessary actions.
- 78.2 The President of the European Gymnastics Medical Commission or his deputy, or a member of the European Gymnastics Medical Commission, or a person delegated by such a member:
- 78.2.1 Must be accredited to all areas.
 - 78.2.2 Verifies the facilities and the organisation of the antidoping tests.
 - 78.2.3 Approves the official medical certificates.
 - 78.2.4 Therapeutic Use Exemption requests have to be submitted to World Gymnastics.

- 78.2.5 May provide his aid, medical advice or assistance to the delegations upon request.
- 78.2.6 In the event of a major risk to the safety or health of a gymnast, the President of the European Gymnastics Medical Commission or his deputy can signify whenever possible in writing, the danger of impending risk to the respective TC/European Gymnastics President or his/her representative and propose the withdrawal of the gymnast from the competition.
- 78.2.7 The president of the European Gymnastics Medical Commission or his representative may report at every moment any deficiency or non-compliance with the medical rules to the president or the general director of European Gymnastics for them to take immediate or later appropriate measures.

ARTICLE 89 MEDICAL RESEARCH

In cases where medical research is proposed by or through the Organising Federation within the framework of the competition, the CMO shall inform and request approval of the European Gymnastics Medical Commission of this circumstance minimum 2 (two) months in advance of the competition, to allow for an examination of such a proposal can be integrated into the workplan.

- 89.1 Approved medical research must comply with the following criteria:
- 89.1.1 Authorisation by European Gymnastics Medical Commission
 - 89.1.2 Development of gymnastics science
 - 89.1.3 Research is in connection with current research programmes of European Gymnastics
 - 89.1.4 Research protocol provided to all European Gymnastics participating Federations
 - 89.1.5 Results of the medical research must be provided to the European Gymnastics medical commission within 6 months.
- 89.2 Upon approval by European Gymnastics, the researchers must:
- 89.2.1 Get the authorisation of the National Federation of the gymnasts concerned
 - 89.2.2 Limit the time required for the tests, use non-invasive procedures, ensure tact and discretion, respect the athlete's privacy and modesty and avoid disturbing preparation for the competition

- 89.2.3 Accept that individual approval will be voluntary and used as anonymous
- 89.2.4 Imperatively make the results of these investigations available to the European Gymnastics Medical Commission in a pre-publication format 6 months before publication
- 89.2.5 In cases of conflict with a proposed medical research program priority will be given to the European Gymnastics medical research program.
- 89.3 Within these clearly defined conditions the European Gymnastics Medical Commission can only encourage this type of initiative and is ready to provide assistance. Assistance from the Organising Committee would be highly appreciated.
- 89.4 Any contact with media (TV, radio, newspaper, internet, Facebook, twitter and similar) is STRICTLY PROHIBITED about the health, welfare, injury, treatment, doping control or research on gymnasts without the express permission of the European Gymnastics Medical Commission President, the European Gymnastics Director or their representatives.

ARTICLE 910 INJURY/ILLNESS FORMS AND REPORTS

- 910.1 The LOC and Chief Medical Officer must make every effort to complete an injury or illness report form for every affected athlete.
- 910.2 The injury/illness form is completed by a LOC physician and the information needs to be completely filled out and legible in English or French.
- 910.3 The Form must be signed by the athlete or his legal representative in order to allow for his personal data to be handled appropriately by European Gymnastics according to the GDPR legislation. All information will be strictly confidential and used only to document the athlete medical event for any legal reason and to assist the European Gymnastics Medical Commission to evaluate and prevent future injuries or illnesses
- 910.4 The Forms must be handed to the European Gymnastics Official Doctor at the end of the Event. In case a European Gymnastics Official Doctor is not present, then this information must be sent by the CMO of the Organising Committee, under confidential mail, to the European Gymnastics Office immediately at the end of the competition. A template of the Injury/Illness Form is provided in the end of the Guidelines (annex 2).

- 910.5 An athlete or his representative or other affected member of a delegation may request an official medical report for an athlete or delegation member regarding his injury/illness and treatment received during the event for any medical, legal or insurance use. In order to provide the athlete or delegation member with a text document the EG Official Doctor, **if requested by the Delegation**, prepares a medical report based on the data available from the Injury/Illness Form signed by the LOC physician. A template of the Athlete/Delegation Member Medical Report is provided in the end of the Guidelines (**annex 3**).
- 910.6 The European Gymnastics Official Doctor at the end of the Event fills the European Gymnastics Official Medical Report of the Event providing in detail all relevant medical encounters and doping tests. A template of the European Gymnastics Official Doctor Report is provided in the end of the Guidelines (**annex 4**).

ARTICLE ~~10~~11 **DOPING CONTROL**

~~10~~11.1 **World Gymnastics** Anti-Doping Rules, the WADA Code, the International Standards and all related rules and regulations are implemented during European Gymnastics Events.

~~10~~11.2 **Injections (No-Needle Policy)**

~~10~~11.2.1 **World Gymnastics** Anti-Doping Rules **on injections are implemented during European Gymnastics Events.**

~~10~~11.2.2. During European Gymnastics competitions and events (from 24 hours before the start of the first practice through to 24 hours after the end of the last competition and event), any injection to any site of an athlete's body of any substance:

~~10~~11.2.2.1 Must be medically justified. Justification includes physical examination by a certified medical doctor (M.D.), diagnosis, medication, route of administration and appropriate documentation;

~~10~~11.2.2.2 Must respect the approved indication of the medication = no off-label

~~10~~11.2.2.3 Must be administered by a certified medical professional unless authorized by the European Gymnastics Doctor or official Local Organising Committee Doctor

~~10~~11.2.2.4 Must be reported immediately and in writing not later than 24 hours afterwards to the European Gymnastics Doctor or official local organizing committee Doctor (except athletes with a valid TUE for this competition). The report must include the diagnosis, medication and route of administration.

- ~~10~~11.3 The disposal of used needles, syringes and other biomedical material which may affect the security and safety of others, including blood sampling (e.g. lactates...) and other diagnostic equipment shall conform to recognized safety standards.

ARTICLE ~~11~~12 PREVENTION OF VIRAL DISEASES (AIDS, VIRAL HEPATITIS, etc.)

~~11~~12.1 During the competition

~~11~~12.1.1 Cleaning of the gymnast.

If blood is on the body or attire of the gymnast, it is the responsibility of the head of the Jury at the closest table-station to request correction. The head of the Jury will ensure that the gymnast is protected and the blood is removed. This task has to be performed by one person of the medical staff of the delegation. If not present, it shall be done by the medical staff of the competition area.

~~11~~12.1.2 Cleaning of the apparatus.

If blood is on an apparatus or common equipment, it is the responsibility of the head of the Jury at the closest table-station to request correction. The head of the Jury will ensure that other gymnasts are protected and the blood is removed. The medical staff of the competition area will clean the apparatus and shall use an appropriate cleaning product.

~~11~~12.2 During the training sessions

~~11~~12.2.1 Cleaning of the gymnast.

If blood is on the body or attire of the gymnast, it will be up to the national federation medical staff or, if not present, to the medical staff responsible of the hall to ensure that the gymnast is protected and the blood is removed.

~~11~~12.2.2 Cleaning of the apparatus.

If blood is on an apparatus or common equipment, it is the responsibility of the medical staff of the hall to clean the apparatus or common equipment, using an appropriate cleaning product.

- ~~11~~12.3 The gymnast and/or his coach are hereby equally responsible for making known all sores, wounds and traces of blood to the Organising Committee medical staff.

ARTICLE 1213 ENVIRONMENTAL CONDITIONS

1213.1 Sound level

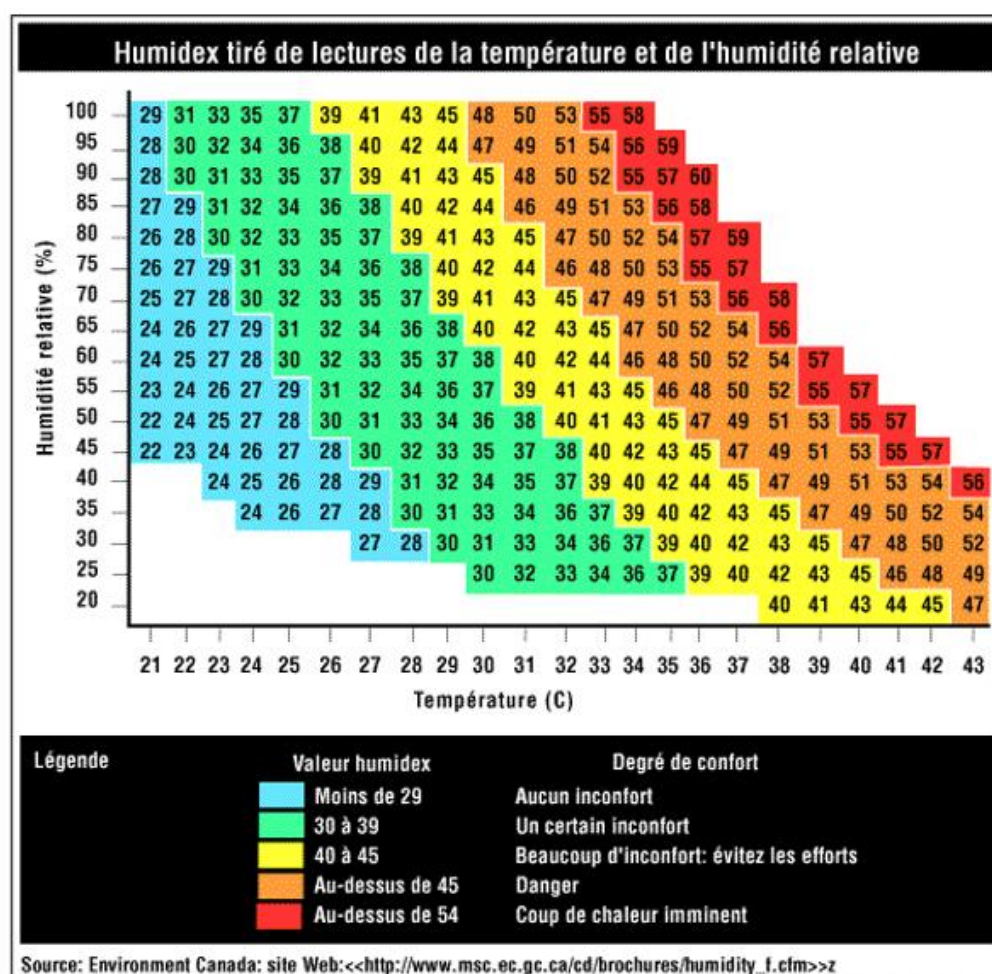
The sound level (music and announcements) must be lower than 80 dB at a frequency of 1.000 Hertz (Hz) measured on isosonic curves.

1213.1.1 The verification / control will be carried out by the Organising Committee Technicians and by the European Gymnastics Medical Commission, if deemed necessary. The sound level check will be done by a sonometer placed near the judges.

1213.1.2 It will be the duty of the technician responsible for sound to ensure that the sound level is kept within the above-mentioned limit. He is to deny any intervention or entreaty other than from European Gymnastics.

1213.2 Humidity and Temperature: Heat index score recommendation

European Gymnastics recommends a calculated heat index score (Temperature vs humidity) equal to or less than 39 score. Score can be calculated using the chart below (Source: Canadian Center for Occupational Health and Safety)



ARTICLE ~~13~~14 JEWELLERY - OBJECTS - ATTIRE - HAIR

- ~~13~~14.1 The wear of any kind of jewellery or objects (necklaces, earrings, rings, piercing, watch...) uncovered by competition or training attire and that can be dangerous is forbidden.
- ~~13~~14.1.1 Exceptionally and temporarily, if the jewellery cannot be taken away immediately, one can tolerate that it be covered by adapted tape in order to avoid any risk of wound.
- ~~13~~14.2 The gymnast must look that his/her attire be in conformity with the traditional standards, in training and competition (classical warm-up suit, t-shirt, leotard, pants, shorts, etc.), and that no additional attire can provoke an accident.
- ~~13~~14.3 The gymnast must also be careful that her hair is well attached.
- ~~13~~14.4 These rules are applicable in all competition disciplines. The persons authorized to conduct verification as well as the sanctions are written in the respective Codes (if applicable).

ARTICLE ~~14~~15 INSURANCE - ACCIDENTS - MEDICAL COSTS

~~14~~15.1. Local Organising Committees (LOC)

- ~~14~~15.1.1 LOC must take out their own civil liability insurance.
- ~~14~~15.1.2 LOC are requested to verify the validity of the National Federations insurance and medical assistance contracts at the accreditation time, along with their coverage. In the case of inadequacies or doubt, the organiser may suggest that federation or delegation members take out a temporary policy upon arrival. In any case, the federation has to ensure its insurance coverage.
- ~~14~~15.1.3 LOC must provide at the minimum the following:
- ~~14~~15.1.3.1 Local transportation, possibly in a specialised medical vehicle, to examination locations and the cost of emergency transportation or related to an emergency;
- ~~14~~15.1.3.2 Basic medical treatment given by the competition's official medical team, such as medical consultations, basic care, massage, electro-physical therapy, etc.;

~~14~~15.1.3.3 Medication, supplies, necessary bandaging for basic care administered directly by the Local Organising Committee's medical team for a limited time and quantity;

~~14~~15.1.3.4 Means to facilitate delivery of medical supplies and prescriptions.

~~14~~15.2 National Federations

~~14~~15.2.1 National Federations participating in competitions out of their home countries are responsible for medical insurance costs for all members of their delegations (illness, accident and repatriation). Intended for competitions, this rule is valid by extension for all gymnastics events and training sessions. (~~Article 12/10 in~~ As per the World Gymnastics Technical Regulations).

~~14~~15.2.2 The insurance policy must cover at least the following, keeping in mind the costs of care and medical and surgical treatment in the respective country:

~~14~~15.2.2.1 Treatment, examinations, medical and surgical operations;

~~14~~15.2.2.2 Hospitalisation costs

~~14~~15.2.2.3 Repatriation of a delegation member with respect for the medical needs of the patient (this may include making a medical escort available)

~~14~~15.2.2.4 In the case of a serious accident, roundtrip transportation and accommodation costs for a parent to the competition site

ARTICLE ~~15~~16 GYMNASTICS FOR ALL EVENTS

~~15~~16.1 The LOC should arrange for the medical support of the participants upon the official arrival day of the delegations until the end of the official departure day, during and outside the training and performance periods, on site and out of the site of the training and performances.

~~15~~16.2 In particular, the LOC should arrange for the following:

~~15~~16.2.1 Oversee the safety of sports facilities, accommodation, food and public health conditions.

16.2.2 Delegate a CMO responsible for medical support of the Event

- 16.2.3 Prepare with the CMO a detailed Medical Support Plan in cooperation with the local authorities and the EMS services according to National legislation requirements.
- 16.2.4 Request assistance by the European Gymnastics Medical Commission if needed in preparing a Medical Support Plan at least six (6) months prior to the event, for finalisation at least two (2) months before the event.
- ~~15~~ 16.2.5 Ensure cooperation with local hospitals, government Civil Protection Services and medical NGOs:
- 16.2.6 Arrange for a medical communication and command center in cooperation with local EMS or Civil Protection services
- ~~15~~ 16.2.7 Organise, and properly staff and equip first aid stations strategically located to ensure care and easier access in case of injury or illness
- 16.2.8 Submit a detailed Medical Support Plan to EG Medical Commission at least two (2) months prior to the event.
- 16.2.9 Establish safe traffic zones and evacuation routes in cooperation with local authorities and police
- 16.2.10 Implement a system to record injuries and illnesses
- 16.2.11 Prepare and submit a report to European Gymnastics Medical Commission with lessons learned and medical event statistics.

ARTICLE ~~16~~17 CONCLUDING PROVISIONS

Any issue not covered by these regulations shall be submitted to the European Gymnastics Medical Commission for evaluation

These regulations have been adopted by the European Gymnastics Executive Committee during the meeting on 31.01 – 01.02.2026 in Lausanne.

EUROPEAN GYMNASTICS

Dr. Farid GAYIBOV
President

Odysseas Paxinos MD, PhD, FACS
President of the Medical Commission

ANNEXES

1. LOC Medical Support Plan Check List
(to be submitted to European Gymnastics 2 months before the event the latest)
2. Injury and Illness Form
(to be completed on site by LOC Doctor or DEL medical staff)
3. Athlete / Delegation Member Medical Report
(to be completed by official European Gymnastics Doctor on site at the event upon official Delegation request)
4. EG Official Doctor Report
(to be completed by official European Gymnastics Doctor the latest until 30 days after the event)