

This information is intended to be a generic guide to classification for Para-Cycling. The classification of athletes in this sport is performed by authorised classifiers according to the [Union Cycliste Internationale](#) (UCI) classification rules.

What is the classification process?

Trained classifiers assess an athlete using the UCI classification rules to determine the following:

1. Does the athlete have an eligible impairment type?
An athlete must have a permanent eligible impairment type and provide medical documentation detailing their diagnosis and health condition.
2. Does the athlete meet the minimum impairment criteria for the sport?
Specific criteria applied to each sport to determine if a person's impairment results in sufficient limitation in their sport. This is called the minimum impairment criteria.
3. What is the appropriate class to allocate the athlete for competition?
Classes are detailed in the classification rules for the sport and a classifier determines the class an athlete will compete in.

Which Paralympic impairment groups compete in Para-Cycling?

Athletes are required to have a permanent, eligible impairment and will be required to provide medical diagnostic information about their diagnosis and impairment.

Eligible Impairment Type		Examples of health conditions
Vision Impairment		Reduced or no vision in both eyes caused by damage to the eye structure, optical nerves/optic pathways, or visual cortex of the brain. Includes Albinism, Retinitis Pigmentosa, macular or rod cone dystrophy.
Physical Impairment	Limb deficiency	Amputation from trauma, illness or cancer Limb deficiency from birth
	Impaired Muscle Power	Spinal cord injury, Spina Bifida, Transverse Myelitis, Sacral Agenesis, Spinal Tumours, Erbs Palsy, Muscular dystrophy
	Hypertonia Ataxia Athetosis	Cerebral palsy, acquired brain injury, stroke, brain tumor, Multiple sclerosis, cerebellar ataxia, Hereditary Spastic Paraparesis or other conditions where hypertonia (spasticity, rigidity or dystonia), ataxia or athetosis are present.
	Impaired passive range of movement	Arthrogryposis, Talipes Equinovarus, joint fusions or contractures from chronic immobilisation or trauma.
	Leg length difference	Significant difference in leg length

What is the Minimum Impairment Criteria?

Specific criteria applied to each sport to determine if a person's impairment results in sufficient limitation in their sport. This is called the minimum impairment criteria.

Impairment	Minimum Impairment– GUIDE ONLY	
Vision Impairment	Visual acuity in both eyes with best corrected vision of less than or equal to 6/60 (log MAR 1.0); or visual field restriction of less than 40 degrees diameter in both eyes with best corrected vision.	
Physical Impairment	Limb deficiency	Leg: Amputation of more than half the foot. Arm: Complete amputation of all fingers and thumb.
	Impaired Muscle Power	Loss of muscle power in at least one hand, wrist, elbow, shoulder, hip, knee or ankle.
	Hypertonia Ataxia Athetosis	Hypertonia, ataxia or athetosis in at least one limb.
	Impaired passive range of movement	Movement restriction in at least one elbow, shoulder, hip, knee or ankle joint.
	Leg length difference	Leg length difference of at least 7cm.

Minimum impairment criteria is further detailed in the [UCI Para Cycling Classification rules](#).

What are the Paralympic classes for this sport?

The list below is intended as a guide only. Only authorised classifiers are able to provide a formal classification in a particular sport.

Class	Examples (Guide Only)
Athletes with a Vision Impairment - Tandem	
B	From no light perception in either eye up to visual acuity of 6/60 and/or visual field of less than 20 degrees. Classification is assessed in the best eye with the best correction.

How do I get classified?

Athletes with a vision impairment:

Classification in Australia is organised through the [Australian Paralympic Committee](#).

Class	Examples (Guide Only)
Athletes with a Physical Impairment – Handcycle classes	
H1	<p>Athletes present with one or more of the following: Tetraplegia C6 or above and severe athetosis/ataxia/dystonia; or equivalent impairment. Complete loss of trunk stability and lower limb function. Limited elbow extension, handgrip and asymmetric or symmetric quadriplegia with at least grade 3 spasticity in upper and lower limbs. Competes in a recumbent (lying down) position.</p>
H2	<p>Athletes must present with one or more of the following: Tetraplegia C7/C8 and severe athetosis/ataxia/dystonia; or equivalent impairment. Complete loss of trunk stability and lower limb function. Able to generate force with one or both arms to propel the handcycle. Asymmetric or symmetric quadriplegia with at least grade 2 spasticity in upper and lower limbs. Competes in a recumbent (lying down) position.</p>
H3	<p>Athletes must present with one or more of the following: Paraplegic with impairments corresponding to a complete lesion from Th1 to Th3; or equivalent impairment. Very limited trunk stability. Moderate quadriplegia with/without athetosis/ataxia Severe hemiplegia (non-ambulant) Severe diplegia (non-ambulant) and athetosis/ataxia Neurological impairments with at least grade 1 spasticity in upper limb. Competes in recumbent (lying down) position.</p>
H4	<p>Athletes must present with one or more of the following: Paraplegic with impairments corresponding to a complete lesion from Th11 or below; or equivalent impairment None or limited lower limb function or equivalent impairment which prevents safe use of a conventional bicycle, tricycle or kneeling position in a handcycle. Normal or almost normal trunk stability. Diplegia and athetosis/ataxia/dystonia with minimal upper limb involvement. Hemiplegic with spasticity a minimum of grade 3, lower limb more involved.</p>
H5	<p>Athletes must present with one or more of the following: Paraplegic with impairments corresponding to a complete lesion from Th11 or below. Double below or double through knee amputation. Single leg amputation, minimal impairment below knee amputation. Incomplete loss of lower limb function, with other impairments, which prevent the safe use of a conventional bicycle or tricycle. Hemiplegic with spasticity grade 2, lower limb more involved. Diplegic, lower spasticity grade 2 in both legs. Mild to moderate athetosis or ataxia. Can compete in a kneeling position (legs tucked under).</p>
Athletes with a Physical Impairment – Tricycle Classes	

T1	<p>Athletes must present with one or more of the following: Hemiplegia/double/quadruplegic/hemiplegic, spasticity grade 3 in lower and upper limb; or equivalent multiple impairments. Triplegia lower spasticity grade 3 in both legs. Severe athetosis, ataxia or dystonia. Severe locomotor dysfunction. Polio, peripheral neurological lesions incomplete Spinal Cord Lesion, not able to ride a bicycle. Pedalling/cadence is restricted. Insufficient balance for cycling and tricycle is required.</p>
T2	<p>Athletes must present with one or more of the following: Hemiplegia/double/quadruplegic, spasticity grade 2, lower limb more involved; or equivalent multiple impairments. Diplegic, lower spasticity grade 3 in both legs. Moderate to severe athetosis/ataxia/dystonia. Decreased muscle strength.</p>
Athletes with a Physical Impairment – Bicycle Classes	
C1	<p>Athletes must present with one or more of the following: Neurological: Hemiplegia, spasticity grade 3 in lower and upper limb. Diplegia, lower spasticity grade 3 in both legs. Ataxia and Dyskinesia (Dystonia and Athetosis). Locomotor dysfunction. Poor functional strength in trunk and/or in all extremities. Amputation: Single amputation of leg, above knee, and arm above or below elbow, on same side or diagonal, with or without use of a prosthesis. Double through knee amputation with the use of prostheses. Double amputation below elbow and single amputation above knee, no prosthesis.</p>
C2	<p>Athletes must present with one or more of the following: Neurological: Hemiplegic, spasticity grade 2, lower limb more involved; Diplegic, lower spasticity grade 2 in both legs; Moderate to severe athetosis or ataxia. Decrease in muscle strength: Polio, peripheral neurological lesions, incomplete Spinal Cord Lesion, HMSN, MS. Amputation: Single above elbow amputation with or without use of prosthesis, plus single through knee amputation with the use of prostheses; Double below elbow amputation, plus single through knee amputation with the use of a lower prosthesis; Double below knee amputation with the use of prostheses, plus single above elbow amputation without the use of upper limb prosthesis; Single above knee amputation, no prosthesis, may have a stump support. Comparable Impairments: Multiple impairments (e.g. amputation with neurological impairments), but fluent movement and control of the bike; Limited range of movement of the hip or knee, or muscle weakness such that a functional full revolution of the crank is not possible.</p>

C3	<p>Athletes must present with one or more of the following:</p> <p>Neurological: Hemiplegic, spasticity grade 2, lower limb more involved, grade 1 in upper limb; Diplegic, lower spasticity grade 2 in both legs; Moderate athetosis or ataxia/dystonia.</p> <p>Amputation: Single above elbow amputation without use of prosthesis, plus single below knee amputation with the use of prosthesis; Single through knee amputation with the use of a prosthesis, plus single below elbow amputation; Single through knee amputation with the use of prosthesis; Double below knee amputation with the use of prostheses. Comparable multiple impairments. Limited range of movement of the hip or knee such that a normal function full revolution of the crank is not possible.</p>
C4	<p>Athletes must present with one or more of the following:</p> <p>Neurological: Hemiplegic, spasticity grade 1, lower limb more involved; Diplegic, lower spasticity grade 1 in both legs; Mild to moderate athetosis or ataxia/dystonia.</p> <p>Amputation: Single below knee amputation with the use of prosthesis, plus single below elbow amputation with or without the use of prosthesis; Single below knee amputation with the use of prosthesis; Double below elbow amputation with or without the use of prosthesis that allows as much functional contact as possible to the handlebar. Comparable multiple impairments. Limited range of movement of the hip or knee such that a normal function full revolution of the crank is not possible.</p>
C5	<p>Athletes must present with one or more of the following:</p> <p>Neurological: Monoplegia spasticity grade 1 or more in the affected arm. Plus, clear neurological signs to include: Positive uni or bilateral Hoffman; Noticeably brisk reflexes or clear differences in reflexes, left versus right.</p> <p>Amputation: Single above elbow amputation with or without prosthesis, no functional grip; Single below elbow amputation with the use of a prosthesis.</p> <p>Minimum Impairment: Amputation of all fingers and thumb (through MCP) or amputation of more than half foot (forefoot). In the case of a single above elbow amputation, below elbow amputation or a single upper limb dysmelia, the minimal impairment is met if all fingers and the thumb of one hand are missing through the MCP joint or other impairments that are equivalents, without a functional grip. As a proof of the loss of functional grip, the affected athlete will not be able to operate handle-bar mounted gear and brake levers with the affected or impaired limb. Comparable multiple impairments.</p>

How do I get classified?

Athletes with a physical impairment:

Classification in Australia is organised through [Cycling Australia](#).

Athletes with a vision impairment:

Classification in Australia is organized through the [Australian Paralympic Committee](#).

Where do I find out further information?

National	Cycling Australia E: info@cycling.org.au P: +61 3 9998 6810	Australian Paralympic Committee E: classification@paralympic.org.au P: +61 8 8415 6803
International	UCI	