

Mouthguard, Taping, Bracing rules for WT Athletes in Competition

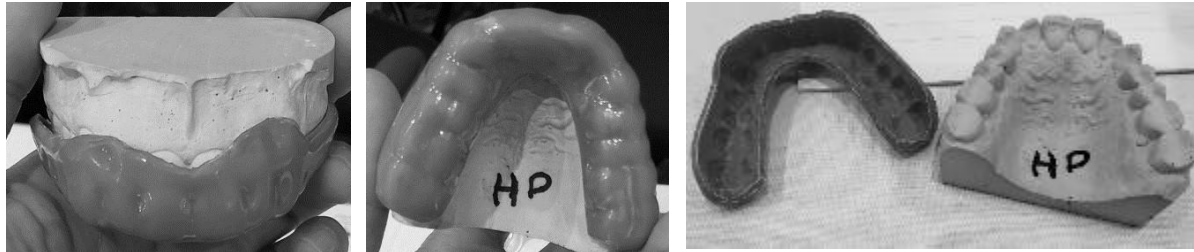
April 24th 2019 (last updated on February 5, 2020)

- ❖ **Principles of Mouthguard, Taping and Bracing**
 - It is to provide athletes with safety protection and injury prevention
 - It must not harm the athlete or the opponent
 - It should not affect the athletic performance or the match result
- ❖ **Piercing:** Any athlete must completely remove piercing in the facial or any body part before entering the inspection area. Otherwise, he/she shall not be allowed to compete.

Mouthguards

- ❖ **Athletes MUST consult his/her dentist for a customized mouthguard before participating in the competition.**
- ❖ **Athletes SHOULD attend their dentist every 6 months for a mouthguard review and dental check-up. Athletes are more susceptible to dental problems like tooth decay.**
 - Colour: limited to “WHITE” or “TRANSPARENT” only.
 - It is mandatory to always wear a mouthguard. **There is no exception.**
 - The thickness of the mouthguard must have at least 4mm thickness in the anterior (front) and 2mm thickness on the occlusal (biting) surface
 - The mouthguard must cover all of the upper teeth (including at least the 1st molar)
 - **IF** the athlete suffers from nausea (gag reflex) the mouthguard may cover ½ of the 1st molar.
 - It must be flexible and constructed from ethylene-vinyl acetate (EVA)
 - Only a custom-made sports mouthguard made by a dentist provides the best protection to the athlete.
 - Athletes must not use mouthguards designed for anti-grinding (commonly called a nightguard or orthodontic splint) which is not designed to protect an athlete from a sports injury.
 - No athlete will be allowed to compete if he/she does not follow the mouthguard regulations.

- **An athlete without braces:** Must wear at least a FULL upper mouthguard covering all the entire upper teeth (including at least the 1st molar) or a lower mouthguard should the player have a Class III occlusion (protruding jaw)



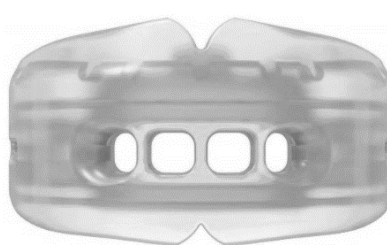
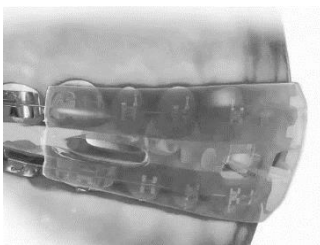


The mouthguard must cover all of the upper teeth (including at least the 1st molar), except wisdom teeth. The thickness must be at least 4mm in the front section and 2mm on the biting surface.

▪ **Athletes with braces**

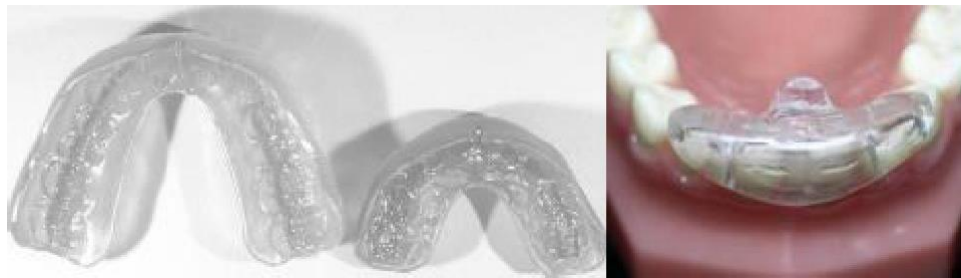
- Should wear the type of mouthguard which feels the most comfortable from options 1-3 below:
- Athletes should have a custom-made mouthguard that can be re-shaped by their dentist regularly to accommodate tooth movements
- Or have a new mouthguard made every two/three months

(1) Double mouthguard for braces (which covers both upper and lower teeth and braces)
This provides the best protection => Strongly recommended



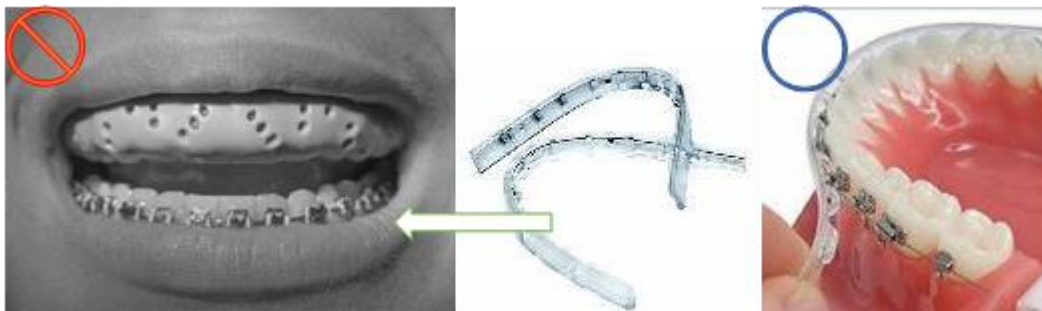
- (2) **FULL upper mouthguard** (which covers including the 2nd molar) **for braces** AND **partial lower mouthguard** (=> Still safe.

Athletes can use (2) if they have severe breathing problems.



* left: Full upper mouthguard and partial lower mouthguard *right: example of partial lower mouthguard

- (3) **Full upper mouthguard** for upper teeth and braces AND **brace tube/shield** for lower **braces**: It temporarily covers exposed braces so that it is at least not going to harm the opponent. However, it has minimal protection for the athlete with braces. **This is the least favourable option.**



Upper braces are well covered but lower braces are not covered. Any brace must be covered

Care of mouthguards

It is essential to care for your mouthguard correctly. Incorrect care will cause deterioration of the mouthguard and it will lose the protective function.

How to care for my mouthguard

- Brush and rinse teeth/mouth before and after wearing
- Don't leave it in a hot car
- Clean it after every match or training session
- Get a secure box to keep it in
- Use an antibacterial solution. While even water is better than nothing, don't just give the mouthguard a quick rinse and think that is enough
- Thoroughly clean your mouthguard at least once a month. At least once a month, it is crucial to deep clean a mouthguard
- Clean your case
- Replace your mouthguard, when needed.

How to keep my mouthguard clean

- Toothbrush. Using a non-abrasive toothpaste and a soft-bristle toothbrush, give your mouthguard a good brush then rinse.
- Hydrogen Peroxide. Disinfect thoroughly using 3% hydrogen peroxide. ...
- Soap and Water. Simply washing your mouthguard with anti-bacterial soap will help keep bacteria at bay.

How do I get my mouthguard to stop smelling?

- Brush the guard thoroughly with baking soda or toothpaste. ...
- Dry it with a soft cloth.
- Rinse out the case or holder.
- After brushing the guard, soak it for ten minutes in a glass of antiseptic mouthwash.
- Dry it with a soft cloth.

Storage of Mouthguard

It should be stored in a clean container that is moisture-free and has air vents. Regular cleaning of the container helps to prevent the spread of bugs, as well. Wash the container using a non-toxic cleaner and warm water and ensure that it is completely dry before placing the mouth guard inside.

❖ Taping and Bracing

- **Taping and Bracing will be strictly checked during the athlete inspection process.**
- The athlete must get inspection and approval of their taping and get the signature on the taping by Commission Doctor before being checked by the inspection referee.
- After commissioned doctor sign on the taping, it must not be opened until the inspection referee check the signature and the athlete finish the match.
- If there is damage on the signature no signature, athlete is not allowed to compete.
- The minimal amount of tape should be used to protect and support an injured joint
- Up to 2 layers of thin foam underwrap is allowed, which it must be covered.
- Up to 4 complete layers of taping (2mm) are allowed for any injury and 2 complete layers (1mm) are allowed for support. **One extra anchor strip on the proximal and distal margins and one extra side hinge strip shall be allowed and not be counted toward the 4 complete layers for specific types of taping if necessary.**
- Taping Color: limited to “white color” or “light brown (or beige) color”
- No abrasive tape is allowed to be exposed. Elastic or Elastikon tape must be covered with one to two layers of white or beige athletic tape so that the tape can be signed by Commissioned Doctor.



- No taping on the knuckles of the fist is allowed.



❖ **Bracing**

- No hard substance (metal, plastic, Velcro strap, etc) is allowed to be used in taping



- Material : Only soft neoprene material is permitted.



- Silicon (or other soft gel) padding around knee cap may be permitted as long as it is soft material and the thickness is less than 6mm (or 0.25 inch).



❖ Padding

- The padding of the dorsum of the foot or hand with soft foam material is allowed only if the athlete has contusion (bruising) or hematoma on the dorsum of the foot.
- Material: Soft foam padding or gauze pad can be used
- Thickness: maximum 1/8 inch (= 4mm) of foam pad or 4 layers of gauze pads.
- It must be maintained as soft when wrapped with minimal tape (up to 2 layers).
- Only two layers of white or beige tape are allowed on the forefoot/arch of the athlete
- The padding must not cover toe or ankle.

