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EXECUTIVE SUMMARY

On November 2, 2013, heavyweight boxer Magomed Abdusalamov sustained a brain injury during a 10-round boxing match against Ismaikel Perez at Madison Square Garden. In the aftermath of the fight, the Inspector General initiated an investigation into the circumstances surrounding Abdusalamov’s injury. Additionally, then-New York Secretary of State Cesar A. Perales formally requested that the Inspector General commence an investigation into whether the New York State Athletic Commission, a division of the Department of State, properly fulfilled its responsibilities as the state agency that regulates boxing in New York State.

During the pendency of this investigation the Inspector General received additional information and complaints. First, the Inspector General received information that Melvina Lathan, the Athletic Commission chair at the time of the bout, and other Athletic Commission staff had received improper gifts from promoters. The Inspector General subsequently received allegations that current Athletic Commission Chair Thomas Hoover engaged in improper conduct in obtaining benefits for a relative and friends.

The Inspector General found that many Athletic Commission practices, policies and procedures were either nonexistent or deficient, specifically those relating to post-bout medical care, tactical emergency plans and communication, and training. The Inspector General also found a lack of appropriate engagement and oversight by Athletic Commission commissioners and its chair as well as potential violations of New York Public Officers Law by current and former chairs of the Athletic Commission.

Policy and Personnel Failures Relating to the Boxing Match

The investigation revealed that Abdusalamov left the arena after the bout on his own accord at approximately 11:50 p.m. Just outside the arena, however, Abdusalamov vomited. When Abdusalamov became ill, his manager found Abdusalamov’s promoter and together they informed Athletic Commission Chair Melvina Lathan that Abdusalamov needed to be taken to a hospital. Lathan directed them to Chief Medical Officer Barry Jordan. In sworn testimony before the Inspector General, Jordan stated that no one impressed upon him that it was an emergency, and he believed Abdusalamov was going to the hospital to have his facial injuries examined. Jordan testified that he advised them to take Abdusalamov to Roosevelt Hospital.
Although there were ambulances at Madison Square Garden available to transport Abdusalamov to the hospital at that time, the Inspector General found that the Athletic Commission lacked a formal tactical emergency plan. Consequently, Athletic Commission staff, the boxers, and their teams were unaware of what steps to take in the event of an emergency after a post-bout examination and in the absence of a physician.

As a result, Abdusalamov’s team lacked any knowledge of the availability of ambulances outside the arena. Instead, Abdusalamov travelled by taxi cab to Roosevelt Hospital. Abdusalamov arrived at the hospital within approximately 15 minutes of leaving Madison Square Garden.

At the hospital, Abdusalamov was diagnosed with a subdural hematoma—a bleed in his brain. Physicians performed emergency surgery and placed him in an induced coma. Abdusalamov remained in a coma at Roosevelt Hospital until mid-December, when he was taken out of the coma, and transferred to a rehabilitation facility at the end of that month. In September 2014, he was discharged from the rehabilitation facility and returned home.

The Inspector General found that the Athletic Commission failed to carry out its responsibilities prior to, during, and after the bout.

First and foremost, the Inspector General found that Melvina Lathan, chair of the Athletic Commission at the time of the bout, failed to ensure appropriate and routine review of Athletic Commission policies and procedures and failed to train staff on the proper response to medical issues that may arise after a fight. Other Athletic Commission commissioners testified before the Inspector General that they were not engaged in an analysis of policies and procedures as required to run the commission properly. Stronger management oversight is crucial.

The Inspector General found that the Athletic Commission did not have a complete post-fight emergency plan in place on the night of November 2, 2013. The inspector assigned to Abdusalamov, Matthew Farrago, should have been trained not to dispense medical advice absent a physician. He also should have been able to notify medical personnel immediately upon finding a potential problem, either by walking to the Athletic Commission’s designated room to inform a staff member stationed there, or by communicating to that person by two-way radio or cellular telephone. In the absence of formal protocol and specific training, Farrago failed to alert a physician, and instead directed Abdusalamov to find a taxi to take him to a hospital of the driver’s choosing. A formal tactical emergency plan should be implemented so that all staff and
Athletic Commission-approved personnel are aware of procedures in the event of an emergency at any time during a boxing event and are prepared to address medical issues at any time during a boxing match through prompt and appropriate referrals.

The Athletic Commission further failed to establish a centralized point for emergency communications or to issue communication devices or emergency directives to its staff, as well as the boxers and their teams. Accordingly, the Inspector General recommends that the Athletic Commission require the presence of staff in its pre-designated event room to establish a centralized point of communication, and must also issue communication devices to its staff and implement emergency communications directives. The Inspector General also recommends that the Athletic Commission establish a formal tactical emergency plan so that all staff and Athletic Commission personnel are aware of emergency procedures and are prepared to address medical issues at any time during a boxing match through prompt and appropriate referrals.

The Inspector General also found that the Athletic Commission failed to implement sufficient procedures surrounding post-fight examinations. While there is no New York statute, Athletic Commission rule, or procedure that mandates post-fight examinations, Athletic Commission physicians testified that it is their practice to examine both fighters in the ring immediately post-bout, and more fully afterward in the locker rooms. Despite the absence of a written requirement to perform the post-fight examinations, the Athletic Commission utilizes a form on which physicians memorialize their conclusions and instructions. The Inspector General, however, found that these forms do not require the physician to identify the severity of the injury and the required level of post-bout care, and are therefore insufficient to identify medical issues that may need to be addressed and that would trigger specific protocols.

The Inspector General found that Chief Medical Officer Barry Jordan bears some responsibility for the confusion that followed after Abdusalamov became ill outside the arena. Jordan had oversight of the medical aspects of boxing and was in a position to address the procedural shortcomings identified in this report, including the post-bout examination requirements and the lack of information provided to boxers regarding post-bout medical care.

Accordingly, the Inspector General recommends that the Athletic Commission and its chief medical officer develop and implement procedures and forms to better document boxers’ post-bout examinations and direct post-bout medical care. Physicians should be required to provide specific detail regarding the extent of a boxer’s injuries and advise the boxer when and
where to obtain post-bout medical care, including whether the boxer should go to a hospital. Additionally, the Inspector General recommends that the Athletic Commission develop standard pre-fight and post-fight physical and neurological examinations.

The Inspector General also found that Athletic Commission staff is inadequately trained to appropriately address medical issues. Although Athletic Commission physicians generally attend an annual training seminar, and the Medical Advisory Board offers some seminars to inspectors, in November 2013 there was no regular training program to educate Athletic Commission staff regarding how to appropriately address medical issues. The Athletic Commission, its executive director, and the medical director should develop such a training program.

The Inspector General further recommends that the Athletic Commission train staff to ensure that proper procedures are followed when completing forms, especially with regard to time-sensitive information such as the temperature of a urine sample when provided. Additionally the Inspector General recommends that the Athletic Commission institute a policy to ensure that all procedural requirements have been met, including the provision of a post-bout urine sample, before a boxer is allowed to leave the arena. The Inspector General notes that the deficiencies and omissions in emergency medical procedures identified in this report should be addressed by the Medical Advisory Board, in conjunction with Athletic Commission physicians, commissioners, and staff.

The Inspector General also found that the Athletic Commission failed to follow the Department of State Language Access Plan and Governor Andrew M. Cuomo’s executive order on language access. The Inspector General mandates that the Athletic Commission provide interpreters for boxers as required by the Department of State Language Access Plan. The forms provided to boxers must also be translated into New York State’s six most common languages, as required by the Language Access Plan.

**Ethical Violations by Athletic Commission Staff**

The Inspector General further found that on the night of the bout, Matthew Farrago, the inspector assigned to Abdusalamov, took unauthorized photographs of Abdusalamov, obtained his discarded hand wraps, and obtained the autographed hand wraps of another boxer to sell for Farrago’s boxing charity. Farrago’s conduct violated the Athletic Commission Code of Conduct, created a conflict of interest with his position as Athletic Commission inspector, and may have
distracted him from directing Abdusalamov to an ambulance or physician after finding blood in his urine. The Inspector General notes that the Athletic Commission has not allowed Farrago to work as an inspector since the Abdusalamov-Perez fight.

During the pendency of this investigation, the Inspector General also determined that then Athletic Commission Chairperson Melvina Lathan and Athletic Commission staff had received improper gifts from promoters. The Inspector General also identified other apparent conflicts of interest by Athletic Commission staff. Lathan’s conduct, and that of her staff, violated Athletic Commission policy and may have violated the New York Public Officers Law. On January 12, 2015, Thomas Hoover was appointed the new chair of the Athletic Commission, and he replaced Lathan as chair of the Commission in June 2015. During the course of this investigation, the Inspector General also received allegations regarding conduct by Hoover that conflicted with his duty to the Athletic Commission. The Inspector General found that Hoover permitted friends and relatives to obtain “credentials” allowing them to attend boxing matches free of charge and recommended that a personal friend apply for an Athletic Commission position, knowing that he was unqualified. In doing so, Hoover may have violated the New York Public Officers Law.

Accordingly, the Inspector General mandates that the Athletic Commission must receive ethics training from the Inspector General and the Joint Commission on Public Ethics.

The Inspector General is referring this matter to the Department of State to take whatever action it deems appropriate against employees identified in this investigation. Additionally, the Inspector General is referring this matter to the Joint Commission on Public Ethics for whatever action the commission deems appropriate.
THE INSPECTOR GENERAL’S INVESTIGATION OF THE ABDUSALAMOV-PEREZ BOUT REVEALED FLAWS IN THE ATHLETIC COMMISSION’S RULES, POLICIES, AND PROCEDURES

INTRODUCTION AND BACKGROUND

The Athletic Commission

The New York State Athletic Commission regulates professional boxing matches and exhibitions within New York State. At the time of the Abdusalamov-Perez match, the Athletic Commission, a division of the New York State Department of State, consisted of three commissioners appointed to three-year terms by the governor with the advice and consent of the New York State Senate. One of the commissioners was designated by the governor to serve as full-time chairperson. On April 14, 2016, Governor Andrew Cuomo signed holistic legislation modernizing New York State’s law governing combative sports. The new law legalizes ultimate fighting in New York State and increases the size of the Athletic Commission from three members to five members. Most notably for this investigation, the new law increases the amount of insurance that promoters are required to provide for professional fighters and also addresses the specific medical needs of professional fighters who sustain life-threatening brain injuries.

Melvina Lathan was appointed Chairperson by Governor David A. Paterson and confirmed by the Senate as a commissioner in 2007; she was designated chairperson in 2008 and served until June 2015, when Thomas Hoover became the chair. Before becoming a commissioner, Lathan served as a boxing judge.

Commissioner Edwin Torres, a retired New York State Supreme Court judge, was appointed in 2008. Commissioner John Signorile, a former amateur boxer, Athletic Commission

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1 See N.Y. Unconsol. Laws § 8901 et seq. On November 2, 2013, New York’s boxing laws were set forth in the Unconsolidated Laws. As discussed in this report, on April 14, 2016, Governor Andrew Cuomo signed new legislation governing combative sports. See S. 05949A (N.Y. 2016). Because the earlier version of the boxing laws was in effect at the time of the events discussed herein, this report will refer to the Unconsolidated Laws, unless otherwise noted.

2 The two additional commissioners have yet to be appointed.

3 At the time of the Abdusalamov-Perez bout, New York Law required promoters of New York boxing matches to provide $7,500 of medical insurance for licensed boxers, and required a $100,000 payment to a boxer’s estate if his death was caused by boxing injuries. See N.Y. Unconsol. Laws § 8928-a. The statute also provided the Athletic Commission with the discretion to increase the minimum amounts; approximately a decade ago, the Athletic Commission raised the minimum medical insurance required to $10,000. The new law increases the minimum amount of insurance required to $50,000, and also requires accident insurance covering “medical, surgical and hospital care with a minimum limit of one million dollars for the treatment of a life-threatening brain injury.” Under the new law, the Athletic Commission has the authority to promulgate regulations to adjust minimum limits.
inspector, and professional boxing judge, was appointed in June 2013. Torres and Signorile both still serve as commissioners.

Pursuant to its enabling legislation, the Athletic Commission is allowed to employ other officers, employees and inspectors as necessary to administer boxing, and “fix their salaries within the amount appropriated therefor by the legislature.” During the period relevant to this investigation, the Athletic Commission employed a small full-time staff. Ralph Petrillo was the director of boxing from in or about 2003 until May 2014. Eric Bentley served as medical coordinator and administered boxers’ medical and medical testing information; he subsequently became the Athletic Commission’s director of boxing. David Berlin was appointed executive director of the Athletic Commission on March 26, 2014, and served as executive director until May 13, 2016. Bentley is now serving as acting executive director.

The Athletic Commission also employs per diem staff at boxing events, including a number of deputy commissioners and inspectors. Deputy commissioners, who function solely as supervisors on the day of a fight, are responsible for various functions, including issuing urine collection kits, inspecting the ring, and confirming the presence of ambulances and a crew of EMTs or paramedics.

The Athletic Commission also employs per diem inspectors, who, according to Athletic Commission policy, are responsible for observing boxers to ensure compliance with Athletic Commission rules, policies, and procedures from the time of the boxer’s arrival until after all Athletic Commission-related activities are completed post-bout. These inspectors receive limited formal training in a seminar setting, but primarily learn their trade by observing more experienced inspectors before working independently. Training subjects include correct hand wrapping and gloving, collection of urine and completion of an Athletic Commission worksheet, checking of equipment and clothing, safety procedures such as proper maintenance of the boxing ring, and ethical considerations such a prohibition against accepting gifts or anything of value from boxers or their camps. Testimony to the Inspector General varied as to whether inspectors are trained to notify superiors or physicians in the event that inspectors encounter a medical issue outside the presence of a physician.

Inspectors may be assigned to multiple fighters on a given fight “card,” or series of matches for which a single ticket allows entry. A fight card may include shorter matches of four

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4 N.Y. Unconsol. Laws § 8902.
or six rounds and longer matches of 10 or 12 rounds. Inspectors are assigned to monitor boxers prior to, during, and after matches, to ensure compliance with Athletic Commission rules and relay information to medical personnel as needed. In a title fight such as the Abdusalamov-Perez bout, an Athletic Commission inspector is assigned to accompany each boxer from the time the boxer arrives at the arena until after the match when the boxer’s gloves and hand tape are removed.

**Medical Personnel and the Medical Advisory Board**

The Athletic Commission employs a part-time chief medical officer, currently Barry Jordan, M.D., who serves as a liaison to the statutorily-mandated Medical Advisory Board; he also reviews boxers’ medical reports and oversees all medical issues during boxing matches. The Athletic Commission also employs ringside physicians on a per diem basis who must be approved by the Medical Advisory Board. In addition to their traditional medical training, ringside physicians testified to the Inspector General that they attend occasional mandatory seminars that cover a variety of boxing-related topics, including neurological injuries, orthopedic injuries, and dermatological issues.

Created by statute, the Medical Advisory Board consists of up to nine members appointed by the governor, each of whom serves a three-year term. Board members must be duly licensed to practice medicine in New York State for at least five years. The statute mandates that the Medical Advisory Board “shall have the power and it shall be the duty of the board to prepare and submit to the commission for approval regulations and standards for the physical examination of professional boxers including, without limitation, pre-fight and/or post-fight examinations and periodic comprehensive examinations.” The statute further requires the Medical Advisory Board to review the credentials and approve the appointment of ringside physicians; develop medical education programs “for all commission personnel involved in the conduct of boxing and sparring matches or exhibitions so that such personnel can recognize and act upon evidence of potential or actual adverse medical indications in a participant prior to or

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6 N.Y. Unconsol. Laws § 8904(2).
during the course of a match”; recommend medical publications on the “medical aspects of boxing” to be maintained by the Athletic Commission and made available to personnel; and advise the Athletic Commission “on any study of equipment, procedures or personnel which will, in their opinion, promote the safety of boxing participants.”

Outside Personnel

Boxing events also involve many professionals who are not directly employed by the Athletic Commission, such as promoters, managers, members of the boxers’ teams, referees, and boxing judges. Athletic Commission rules define promoters as people or corporations who “produce[], arrange[] or stage[]” professional boxing matches. A fight card may be co-promoted by a number of promoters, some of whom may only be promoting one boxer. Promoters must be licensed by the Athletic Commission, and are required to comply with New York State law and Athletic Commission rules. For instance, they are responsible for paying boxers, ringside physicians, judges, referees, and others. Boxing managers, who must also be licensed by the Athletic Commission, represent the boxer’s interests, and are involved in training the boxer and determining against whom the boxer will fight.

A boxer’s team consists of a small number of assistants, including a “corner,” who serves as primary coach during a fight and can terminate a fight by notifying the referee via an inspector. A “cut man” attends to cuts and swelling using prescribed substances and materials. Based on testimony, other members of the boxer’s team perform various duties such as keeping the boxer’s corner of the ring clean and dry, running errands, and in certain circumstances, relevant to this investigation, interpreting.

By statutory and regulatory mandates, referees and boxing judges are selected by the Athletic Commission from a list of those licensed and medically qualified to serve. While they are licensed by the Athletic Commission, they are not employed by the Commission. At least one referee is designated to officiate at each match. Referees, stationed inside the ring throughout the bout, observe boxers, and may deduct points for rule infractions, such as hitting below an opponent’s belt. A referee may also interrupt a fight and stop the clock to have a ringside physician examine a boxer. If “the safety of a participant would be jeopardized by

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7 N.Y. Unconsol. Laws § 8904(3).
8 N.Y. Unconsol. Laws § 8904(5).
9 N.Y. Unconsol. Laws § 8904(6).
10 19 N.Y.C.R.R. § 205.1(m).
continuance,”11 a referee may stop the fight at his or her own discretion or upon the recommendation of a ringside physician. Similarly, a referee has authority to stop a match if “he or she considers that one or both participants are failing to perform according to due standards of effort, ability or conduct . . . .”12 At least three judges score each boxer’s performance in each round of a boxing match. The winner of a round is awarded 10 points, while the loser of the round is awarded fewer points. If a round is closely fought, the loser is awarded nine points, whereas the loser will be awarded eight points if knocked down once, or seven points if knocked down twice.

THE ABDUSALAMOV-PEREZ BOUT

Abdusalamov and his Team

Magomed “Mago” Abdusalamov is originally from Makhachkala, Russia. Before moving to Florida in or about 2011 to box in the United States, Abdusalamov won two championship fights in Russia by knockout. In the United States, Abdusalamov won five boxing matches by knockout. None of the five United States matches lasted past the fifth round.

A native Russian speaker, Abdusalamov speaks limited English. According to the testimony of his manager, Boris Grinberg, Sr., Abdusalamov’s English is “not bad. He understands a lot.” Others who coached him or otherwise worked with him testified that he understood basic boxing instructions and other simple English phrases. To ensure that Abdusalamov could understand more complex discussions and be able to respond, his team assigned his manager’s son, Boris Grinberg, Jr., to interpret for the fight and related events. Grinberg, Jr., speaks both English and Russian fluently. Of note, the Inspector General found no evidence that any Athletic Commission member inquired if Abdusalamov needed the assistance of an interpreter or that the Athletic Commission obtained one.

Abdusalamov’s team also included John David Jackson, who was a coach during Abdusalamov’s training in Florida. Melvin “Chico” Rivas served as his cut man during the bout with Perez, attending to lacerations with a limited variety of permitted treatments. Additionally, Abdusalamov’s brother, Abdusalam Abdusalamov, served as an extra team member at Abdusalamov’s request, for support. Finally, in addition to translating, Boris Grinberg, Jr., was responsible for a variety of ringside duties.

11 19 N.Y.C.R.R. § 211.6.
12 Id.
Pre-fight Medical Review and Weigh-in

At the weigh-in on November 1, 2013, the day prior to the boxing match, the boxers were weighed and underwent the required medical examinations. Perez weighed 236 pounds and stood 6’1” tall, while Abdusalamov weighed 231 pounds and stood 6’3” tall. Both boxers were examined by physicians assigned by the Athletic Commission. Physician Osric King examined Abdusalamov and found no medical issues that would prevent him from fighting. King’s examination included a mental status examination on which Abdusalamov scored 28 out of 30. According to a New York State ringside physician who was not assigned to the Abdusalamov-Perez bout, a score of less than 22 points requires further evaluation for possible cognitive impairment.

During the medical examinations, King administered the “King-Devick”\(^\text{13}\) test to each boxer to establish baseline test times to be compared to the same boxer’s post-bout test times. During a period in 2013, including the time of the Abdusalamov-Perez bout, ringside physicians administered the “King-Devick” test as part of an Athletic Commission pilot program to determine its usefulness in detecting boxer concussions. The test, which has been marketed as useful for diagnosing various medical issues including eye movement and concussions, consists of multiple cards containing series of numbers in different formations, which the test taker must read correctly and as quickly as possible without mistakes. A baseline reading of three cards is timed, and compared to the test taker’s results after a given event. Abdusalamov’s manager, Grinberg, Sr., testified that Abdusalamov read the numbers in English. Abdusalamov’s pre-bout test time was approximately 3.1 seconds quicker than his post-bout test time.\(^\text{14}\)

November 2, 2013 – Preparation for Abdusalamov-Perez Bout

On November 2, 2013, six bouts were scheduled at the Theatre at Madison Square Garden, with a seventh “swing” bout ready in case the bouts ran ahead of schedule. The promoter for the fight card was K2 Productions. Sampson Lewkowicz, who was partially responsible for promoting the Abdusalamov-Perez fight, was a co-promoter. The Abdusalamov-Perez match was a United States World Boxing Council-sanctioned heavyweight title bout scheduled for 10:05 p.m.

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\(^\text{13}\) The King in “King-Devick” is Al King, not Osric King. They are not related.

\(^\text{14}\) As noted later, according to testimony by the doctor who conducted the post-bout tests, this time-differential was not significant enough to warrant concern based on the medical literature regarding concussions.
Athletic Commission inspectors and physicians assigned to work at the arena arrived in the afternoon. Athletic Commission Inspector Matthew Farrago was assigned to Abdusalamov. Farrago, a former professional fighter, had been an inspector for approximately five years as of November 2013. Inspector Ernesto Rodriguez, an English and Spanish-speaker who had been an Athletic Commission inspector for over two years, was assigned to Perez.

The referee chosen by the World Boxing Council, the sanctioning boxing organization for the Abdusalamov-Perez fight, was Benjy Esteves. Esteves has served as a referee since 1982. According to his testimony to the Inspector General, Esteves served as a referee in amateur boxing for 10 years, and became a referee for professional fights in 1992. To become a licensed referee for professional fights in New York, Esteves was required to take a seminar and written test administered by the Athletic Commission. In addition to serving as a referee both in New York and New Jersey, Esteves conducts seminars for other referees. Esteves testified that, as with other fights he referees, he prepared for the November 2 fight by reviewing the fighters’ history on a boxing statistics website and by watching YouTube videos.

On the night of the Abdusalamov fight, according to testimony provided to the Inspector General, Commission Chair Melvina Lathan had a meeting of staff, physicians, judges, and referees prior to the first fight. The meeting was scheduled for 7:20 p.m., and provided basic instructions as to whom to address questions if she or the Director of Boxing were unavailable. Lathan also reminded inspectors to provide certain forms to the appropriate deputy commissioner, and generally stated “what to look for, to stay on top of everything, and to be diligent.”

In addition to Chief Medical Officer Jordan, four physicians were assigned to work ringside and/or backstage on November 2: Avery Browne, Osric King, Gerard Varlotta, and Anthony Curreri. They arranged among themselves who would be responsible for the various positions. For the Abdusalamov-Perez fight, Browne was responsible for the corner from which Perez was boxing and King was responsible for the corner from which Abdusalamov was boxing, while Varlotta was responsible for pre- and post-fight examinations. Curreri was responsible for stitching lacerations and post-fight examinations.

Ringside physicians assigned to the Abdusalamov-Perez fight provided disparate testimony to the Inspector General when asked about the practice of walking the routes that would potentially be used to evacuate injured boxers from the ring to a waiting ambulance in the
event of an emergency. A number claimed they always walk the evacuation route, whereas King testified initially that in arenas such as the Theatre at Madison Square Garden, it is not necessary to walk the route because the ambulance crew and evacuation routes are always the same. When the Inspector General probed as to possible temporary obstructions in the route, King acknowledged the need to walk it for every event.

Varlotta and Curreri testified that they followed standard practice and walked the evacuation route with the ambulance crew and found no issue. The evacuation route is down a wide corridor leading to an open area where an on-call ambulance is stationed. Curreri testified that cellular telephone numbers were also exchanged with the EMS crew. That night two ambulances and five crew members were on-site specifically for the boxing matches to ensure the presence of at least one ambulance in the event the other was required to provide emergency transport. After the matches were over, one of the ambulances left at 12:20 a.m. on November 3, but the other remained until approximately 12:45 a.m. Additional ambulances were on-site for another event at the main arena at Madison Square Garden.

The Athletic Commission’s practice is to designate a particular hospital for each fight card as the destination for injured boxers. While the handbook of the Association of Boxing Commissions recommends that a ringside physician contact the designated hospital, based upon the Inspector General’s investigation, it appears that such contact was not required by Athletic Commission rule or policy, nor was it common practice, at least in New York City. None of the ringside physicians assigned on the night of the November 2, 2013 matches contacted the designated hospital—Roosevelt Hospital—before the bouts.

Athletic Commission records reflect, and testimony supports, that inspectors for Abdusalamov and Perez collected urine from each fighter prior to the match. According to Athletic Commission procedure, all boxers on a fight card must submit a pre-bout urine sample. In title fights, a post-bout urine sample is required as well. Inspectors are responsible for administering and collecting these urine samples from the boxers and completing part of a “forensic drug testing custody and control form” provided by the diagnostic testing service that tests the urine samples for banned substances, including a section regarding the urine sample’s temperature. The urine containers include a temperature indicator, which shows that a urine sample is within the proper temperature range, a measure used to prevent a boxer from submitting another person’s urine to thwart the purposes of the test. The urine sample collection form directs that the collector “read [the] specimen temperature within 4 minutes,” and asks “Is
temperature between 90° and 100° F?” Check boxes for “Yes” and “No, Enter remark” are provided.

The inspectors are also required to complete an Athletic Commission internal form entitled, “NYSAC Inspector Worksheet.” This form acts as a checklist for the inspector and includes, but is not limited to, the inspector’s name, the boxer, the cut man, the glove make, by whom the boxer’s hands were wrapped, who observed the gloving, all of the items the boxer needs for the bout, like a cup, mouthpiece, shoes, ice and water, and who completed the urine sample. Notably, at the time of the November 2013 bout, only one space existed to memorialize the urine collection on the form. Therefore, in a title match, there was no space on the form to record the required post-bout urine sample.

During this investigation, the Inspector General discovered that, despite the directions on the forensic drug testing custody and control form, Eric Bentley, who served as the Athletic Commission’s medical coordinator from August 2009 until the spring of 2014, was prefilling the temperature questions on the urinalysis forms since he was tasked with completing these forms for the inspectors. When confronted by the Inspector General with this deviation from protocol, Bentley acknowledged his conduct. Thus, neither Inspector Farrago nor Inspector Rodriguez completed the temperature section of the urine collection form at the time the respective urine tests were administered; Bentley had already done so. Bentley’s practice of prefilling the temperature sections on the forms raises questions as to the validity of the urine testing for his entire tenure.

Testimony and the Athletic Commission’s “Examination at Arena” form reflect that physician Varlotta examined both Perez and Abdusalamov on the evening of November 2, 2013. According to Varlotta, the examination revealed nothing remarkable. In his testimony to the Inspector General, Varlotta recalled his interaction with Abdusalamov during the pre-fight examination. He testified that Abdusalamov “spoke English fairly well. Enough for me to be comfortable.”

Subsequently, both boxers were observed by their assigned Athletic Commission inspectors as their hands were taped and gloved as required. According to the Athletic Commission’s Inspector Worksheet, a member of Perez’s team witnessed the gloving process. Referee Esteves testified to the Inspector General that he recalled giving basic instructions to Abdusalamov before the fight (such as what to do if his mouthpiece fell out) through an
interpreter, but Abdusalamov “was answering the questions before the interpreter related them to him.

The Bout

At approximately 10:00 p.m., Referee Esteves called the two boxers to the center of the ring for basic instructions, and shortly thereafter, the bell rang signifying the beginning of the first three-minute round. Perez dominated the round at the outset. Abdusalamov did fight back, and some of his blows landed.

During the first round, Perez hit Abdusalamov with a hard left to the face. Slow motion video of the blow\(^\text{15}\) shows that Perez’s left forearm and elbow, not his gloved fist, actually hit Abdusalamov’s face—an illegal contact—but the speed of the blow made it extremely difficult to see during the match, even from a good angle. Due to the boxers’ position in the ring, Referee Esteves was positioned behind Abdusalamov and could not see the illegal contact; he did not call an infraction.

Approximately two minutes into the round, Esteves warned Perez about a near low-blow. Seconds later, Abdusalamov came back at Perez with a combination of punches. With approximately 30 seconds left in the round, an announcer commented that Perez had thrown another low blow. Esteves did not warn Perez or otherwise take any action.

At the end of the round, the fighters returned to their corners. Abdusalamov then observed himself on the big screen television monitor near the ring and touched his face. A review of video and audio from this time reflects a conversation partially in Russian and partially in English. Abdusalamov’s brother asked, in Russian, “What’s up?” Abdusalamov responded in Russian that he thought his cheek was broken, and asked if it was. Grinberg, Jr., and Abdusalamov’s brother responded in Russian that it was not broken, only swollen. When Jackson asked in English what they were saying, Grinberg, Jr., responded in English, “He thinks it’s broken . . . .”\(^\text{16}\) In his sworn interview, Grinberg, Jr., recalled this dialogue to some degree. He did not recall anyone in the corner who discussed stopping the fight and did not, himself, think the fight should have been stopped after the first round. According to the translator for HBO, during the break between rounds, Abdusalamov asked, “Did he break my nose? It looks like I broke my nose. Look at it.” Cut man Rivas testified that he recalled that Abdusalamov


\(^{16}\) The remainder of Grinberg, Jr.’s statement is unintelligible.
thought his nose was broken. By contrast, Inspector Farrago testified that he did not recall hearing any conversations about Abdusalamov’s health, including any comments about broken bones. Farrago additionally noted that “what he was saying was not really understandable, and I don’t recall if [it was translated] to the trainer, who speaks English only.”

One of the HBO announcers compared the fighters’ “Compubox” punch statistics in the first round with the heavyweight average of between 16 and 45 punches per round, noting that both had exceeded the average: Perez threw 96 punches and landed 33, while Abdusalamov threw 59 and landed 19. Throughout the fight, the number of punches thrown and landed was higher than average according to HBO’s statistics. The Inspector General learned that ringside physicians do not have access to these statistics during a match.

As the match progressed, and the fighters continued trading heavy punches to each other’s body and face, Abdusalamov’s face began to swell. From unedited audio and video recordings, it appears that the swelling bothered him after the sixth round, as he used an expletive and asked, in Russian, if his face was swollen. His brother responded in Russian, “Yeah, it is swollen.” From the audio, it does not appear that Grinberg, Jr., translated this brief dialogue for Inspector Farrago. Abdusalamov’s brother continued to provide specific coaching advice, in Russian, to use short punches. Corner man Jackson made the same suggestions in English.

After the seventh round, a laceration became visible over Abdusalamov’s left eye, to which cut man Rivas attended between rounds.

At the beginning of the eighth round, an HBO announcer noted that two ringside physicians had gone to Abdusalamov’s corner after the seventh round and “watched carefully throughout the entire between-round period. They have decided to allow him to come back out in round eight.”

During the ninth round, an HBO commentator noted that Abdusalamov “appear[ed] to have something broken in his face, whether it’s the orbital bone, the cheek bone, or the jaw.” According to Chief Medical Officer Jordan, at his direction, ringside physician King examined Abdusalamov from the side of the ring after that round. Video and audio show that King stood to the left of Abdusalamov on the apron – the part of the boxing ring floor that extends past the

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17 HBO video footage from the break between the seventh and eighth rounds is a close-up image of Abdusalamov. Accordingly, it is not possible to view others surrounding him at the time. Other than King, the physician assigned to Abdusalamov’s corner, it is not clear which physician the HBO announcers might have seen, if any.
ropes – while Inspector Farrago directed Grinberg, Jr., to apply more tape to Abdusalamov’s gloves at the wrist where the tape was coming undone. Rivas attended to lacerations near Abdusalamov’s eyes while Jackson urged Abdusalamov to “[l]et your hands go! Be smart! Move your head! Let your hands go!”

During the tenth and final round, Perez landed a number of hard shots. Abdusalamov landed a number of punches, too, one of which resulted in a laceration near Perez’s right eye in the last 30 seconds of the match. Abdusalamov generally kept his hands up to defend himself throughout the round, and continued moving about the ring. Abdusalamov fought strongly until the end of the fight, making contact with a hook and left punch combination with a few seconds remaining in the match.

Ringside physician King testified that he examined Abdusalamov more than once while the boxer was in the ring, but was not sure in which rounds those examinations took place, or how many times. King testified that he was prompted to go up to the ring’s apron when Abdusalamov developed “a cut over his eye” and “an injury to the side of his face.” King noted, “And at one point, I decided to just take a closer look just to see whether or not there was any extension of the cut or any further damage as far as his face.” King further testified that, during his examinations, he:

[D]iscovered that for the most part the structures in the area seemed to be intact and functional as it should. Specifically, his [Abdusalamov’s] eye movements were pretty much in order in terms of there not being any evidence of a fracture to the eye itself.

I found that he was communicative with his corner. He was alert, focused and didn’t show any signs of needing to – didn’t show any signs of any particular problem or neither any impairment.

King also said that, when he spoke to Abdusalamov, he “got a response, actually, from his brother more than I got a response from him. I vaguely remember that. I can’t say specifically when that occurred in the fight.” King could not recall whether that concerned him at the time.

According to testimony from all four members of Abdusalamov’s team, at no point during the ten-round bout did anyone suggest stopping the fight.

Immediately after the final bell, Rivas examined and cleaned the lacerations on Abdusalamov’s face, while King observed. King then examined Abdusalamov. According to
King, post-fight examinations last “a minute” and involve “reevaluating for any injuries that occurred, if he cut himself or, in this case, if you suspected any swelling around his face, palpating that area to see how comfortable it is for him, asking him whether he has a headache, any dizziness, anything that would require immediate attention.” King testified that he “did all the[se] things . . . and I didn’t feel there was any imminent danger. He seemed very stable. He had no complaints.” King said that he spoke English with Abdusalamov, who appeared to understand what he was saying, and that Abdusalamov did not indicate at any time that his head hurt, or indicate any distress at all. Video footage reflects that King palpated Abdusalamov’s face while Abdusalamov looked in his direction, and the audio recording does not reflect what Abdusalamov said, or in what language. Nonetheless, Abdusalamov did not wince or otherwise appear to express pain during the examination.

After the examination and some further attention from Rivas, Abdusalamov stood up and, from video footage, appeared to be speaking with his brother or others standing next to him for the few minutes before Perez was announced the winner. Abdusalamov’s cheeks, eye area, and nose were swollen, yet at a few points he smiled, and at one point he wiped his nose without exhibiting pain. At some point after the fight ended, both boxers’ gloves were removed and inspected by their respective inspectors. When Perez’s victory was announced, he and Abdusalamov hugged briefly, and Abdusalamov offered a weak smile.

According to Grinberg, Jr., while Abdusalamov was still in the ring, he revealed that he could not make a fist and thought he had broken his hand. Grinberg, Jr., also informed the Inspector General that, at some point after the fight, he discussed the condition of Abdusalamov’s face with him and his brother. They both told him “that it’s pretty normal, there’s some kind of part of the cheek where it goes in, so that puffiness is sometimes normal with wrestlers and boxers.” Grinberg, Jr., also testified without specificity to a post-fight conversation with team members Rivas and Jackson in which Abdusalamov “also mentioned he might have been a little nauseous also. We were discussing him being nauseous. [Rivas] and [Jackson] know a little more, and they mentioned it might be normal . . . .” Grinberg, Jr., emphasized that, regarding Abdusalamov’s medical condition, he and the team were “[n]ot overly concerned. Our main concern was his hand. As a boxer your main tools are your hands, so that’s what we were worried about mostly, his hand.” Nevertheless, during his testimony, promoter Lewkowicz claimed that, before the winner was announced, he told the inspector in the ring, “We should take him to the hospital right away.” Farrago, the inspector assigned to
Abdusalamov, denied that any such statement had been made to him, and no other witness testified to the Inspector General as having heard such a statement.

**Post-Bout Examination and Urinalysis**

Physician Gerald Varlotta testified to the Inspector General that, after the fight, he approached the ring, but stayed outside by the corner. He positioned himself there to “observe from whatever the closest vantage point I could to the ring without needing to go in. . . . I was able to watch the interactions between Mago and Mike Perez.” Varlotta “saw nothing out of the ordinary. They both were responding appropriately and interacting with their corners appropriately, with the announcer and the referee appropriately.” Varlotta further testified that he asked King, the ringside physician standing in the same area outside the ring, whether he had concerns. They discussed the need to suture a cut on Abdusalamov’s face and that his nose might be fractured.

Abdusalamov and his team were the first to leave the ring. They were escorted backstage and upstairs, single file, to his dressing room, led by Varlotta and trailed by Inspector Farrago. The team arrived at the locker room at approximately 11:00 p.m., joined by Abdusalamov’s father and promoter Lewkowicz. Closed-circuit video shows that Abdusalamov’s gait appeared normal and that no one in his entourage appeared agitated or concerned. Cut man Rivas specifically testified that neither Abdusalamov’s brother nor his father seemed upset in any way in the locker room. Lewkowicz recalled a brief discussion in English between Abdusalamov and Jackson in which the boxer said, “I’m sorry, coach,” and Jackson responded, “Don’t worry about it.” Lewkowicz told the Inspector General that he felt no sense of emergency at that time.

In the locker room, Rivas continued to administer to Abdusalamov. Rivas testified, “I said, ‘Let me look at your face,’ and I looked at his cut. I iced his face down. It was swollen so I said, ‘Let me put some ice on your face,’ and he let me do that. Then he stayed calm and relaxed, just talking about the fight.” He did not groan or hold his head. According to Rivas, “His pain was that he lost. That was his pain.” Rivas testified that Abdusalamov said, in English “I can’t believe we lost,” or words to that effect.

Abdusalamov was examined by Varlotta, and then Anthony Curreri, an ophthalmologist, sutured an eyelid laceration. Varlotta said that he reintroduced himself to Abdusalamov, who asked for some time to take off his hand wraps. Varlotta recalled that brief interaction being in English.
Varlotta testified to the Inspector General about the specific steps in his examination. Varlotta first administered the post-fight King-Devick test; Abdusalamov told him he did not need a translator to read the numbers on the test charts. His post-bout reading time, including a half-second addition for each of four errors, was 52 seconds, a 3.1 second differential from his 48.9 second pre-bout total. Varlotta described the results as “a little slower . . . than his baseline, but yet it was not beyond the threshold of concern[.]” which he noted that literature on concussions indicates as being five seconds.

Varlotta then had Abdusalamov stand, and also:

observed his balance in a seated position. I observed his eye motion and commands and observed for any neurological issues [and] check[ed] him to see if there were any intra-abdominal issues. [Abdusalamov] complained about a hand issue. He was able to make a full fist, and there was a concern there was something there that couldn’t be detected clinically. I examined his facial bones and thought that there might be a concern for a nasal fracture.

I provided the boxer and his corner person that was next to him with instructions that both the hand and the nose didn’t seem to be something urgent; that it was something that they could take care of at another point in time. I did counsel them that if there was a need for any of this to be addressed whether it was the hand, the nose or if there was [sic] any symptoms that occurred beyond my discussion with them, that they feel free to go to the hospital.

According to Varlotta, no one from Abdusalamov’s team indicated to him that Abdusalamov wanted to go to the hospital to get his hand x-rayed. Asked if Abdusalamov had indicated that he had a headache, Varlotta testified, “Absolutely not[.]” Nor did Abdusalamov say his head hurt. Varlotta noted to the Inspector General that he “always asks [boxers] about head pain and also headache. Because everybody interprets that all differently. And boxers that do experience a number of punches – you can get head pain separate from headache [sic].”

Ophthalmologist Curreri testified that he arrived in Abdusalamov’s locker room approximately 15 minutes after the end of the match and examined Abdusalamov in preparation for suturing a laceration on his left eyelid. Curreri said that he “palpated the orbital rim, the bony part around his eye, and [he] did not feel any abnormal step-off. So the rim itself was intact. The pupils were equal and reactive. The anterior chamber in front of the eyes were formed. There was no blood.” Curreri found that Abdusalamov had no double vision after asking him to
follow commands, which he was able to do. Due to the swelling in Abdusalamov’s cheek and accompanying pain, Curreri was unable to palpate the zygoma, or cheekbone.

Curreri testified that, when he asked in English if he had any pain in his head, Abdusalamov gestured and replied, “My face.” Curreri also testified that, when he asked one of Abdusalamov’s team to ask Abdusalamov in Russian if he had a headache, Abdusalamov responded that his head did not hurt; only his face hurt. Cut man Rivas, who was attending to Abdusalamov, similarly testified that Abdusalamov indicated that his face hurt, not his head. According to Rivas, Abdusalamov complained that the pressure of the ice applied hurt his face, and alternated taking it off and putting it back on his face.

After administering a local anesthetic, Curreri sutured the eyelid laceration. According to Grinberg, Jr., Abdusalamov teared up during the suturing. Curreri testified that he observed Abdusalamov during the repair, and that Abdusalamov obeyed his commands “to the point where I felt I could repair this laceration with him sitting on the chair, and we did. He sat up, and then at one point, I had him close his eyes and look back, and he did that. And he was actually a very good patient, and I was able to finish my laceration without any problems and rather expediently.” Curreri explained that, when he finished suturing, he gave directions as to the proper care of the laceration repair. Curreri recalled that he gave the directions in English, and recalled the directions being interpreted by a member of Abdusalamov’s team.

Curreri further testified that, while he did not know what Abdusalamov was saying in Russian, he was “having some kind of conversation with other people in the room. Even to the point where he’s using his hands . . . . [g]esturing. It seemed [sic] meaningful conversation.” No one reported to Curreri “that [Abdusalamov] was not making sense or incoherent.”

Accounts from physicians Curreri and Varlotta are largely consistent with the recollections of team members, Grinberg, Jr., and Rivas. Grinberg, Jr., testified that, “[t]he one who did the stitches, he said, ‘In a week, go and take out the stitches.’ I think it might have been the same one who said, ‘Go in a day or two for the broken nose.’ One of the doctors was feeling around, the first one, and the second one came and he was explaining to the first one what he was looking for.” Rivas testified that the physician who sutured Abdusalamov’s laceration “told him that later, when he got back home, to check on his nose[,]” and have the stitches removed. Rivas noted that the physician knew that Abdusalamov lived in Florida, and “asked him when he was
flying back.” The same physician told Abdusalamov to have his hand examined, but did not specify when the examination should be done.

Curreri recalled that, after the suturing, Varlotta remained in the locker room to conduct further medical examination of Abdusalamov. According to Curreri, he told Varlotta, in substance, that Abdusalamov “may have a nasal fracture, and there’s always the possibility of the zygoma [cheekbone fracture] because of the swelling, which we cannot assess, and that [he] would recommend imaging study.” Curreri explained that, because the case involved bony structures, “imaging study” meant a CAT scan. Curreri testified that he asked if Varlotta could complete any remaining tasks, and Varlotta responded, “I got him” or “I got it.” Curreri then departed the locker room.

Varlotta’s account as to who left the locker room first was slightly different. According to Varlotta, he left Abdusalamov’s room following his examination and Curreri sutured his laceration. Varlotta told investigators that he returned briefly to provide Curreri with surgical tools, but did not perform an additional examination of Abdusalamov. Varlotta recalled that, after completing his examination of Perez, he “did look in” on Abdusalamov. An “older gentleman,” told him Abdusalamov was “fine and there’s no problems, and he’s in the bathroom.”

Curreri testified that he proceeded to ringside and completed an Athletic Commission “Accident Report” there. As the “Description of Injury,” Curreri wrote, “Laceration[.]” Under the section “Recommendations[,]” he wrote, “possible nasal/zygoma [cheekbone] f/x [fracture].” For “Final Disposition of Case[.]” he wrote, “To Hospital[.]”

In his testimony, Curreri noted that he had written “‘To Hospital[,]’ which is probably what I discussed with Dr. Varlotta.” When asked whether he directed Abdusalamov to go to the hospital, Curreri told investigators that he could not recall. Asked what “To Hospital” meant to him, Curreri responded, “It means that the boxer is going to need to go to a facility, which would be the hospital, to get imaging study.” Asked if that situation constituted an emergency, he responded, “At [sic] that evening, the answer to that question is no . . . not just for a nasal fracture.” Asked whether a zygoma fracture constituted an emergency, Curreri testified, “You need to address it. I would say you should go to the hospital, but these things need to be

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18 The Athletic Commission form indicates such forms are for “injuries sustained in ring; or any accident or injury occurring before, during or after bout[.]”
addressed by neuroimaging or a CT scan is what I’m saying. And I discussed that with Dr. Varlotta.” According to Curreri, such imaging would “not necessarily” have to be done immediately, but “I would recommend that the injuries be evaluated prior to getting on a plane.”

Asked again to clarify his “To Hospital” comment, Curreri added, “Well, you know, it was what I discussed with Dr. Varlotta for the final disposition.” Asked whether he thought that Varlotta believed, based on their conversation, that Abdusalamov had to go to the hospital, Curreri responded, “Correct.” Curreri further testified that he “left [Abdusalamov] in [Varlotta’s] hands, and the discussion between Dr. Varlotta and Dr. Jordan would occur.”

Curreri said that following Varlotta’s examination of Abdusalamov, he saw Varlotta go to ringside and talk to Chief Medical Officer Jordan. Curreri asserted that he later asked Jordan about his conclusion, “[a]nd he said he’s discussing with Dr. Varlotta[,]” and there was “[n]o conclusion to me, but that he was discussing it with Dr. Varlotta.”

Varlotta also filled out an Athletic Commission Accident Report. On that report, he described Abdusalamov’s injuries as “laceration + Possible Nasal Fx [fracture]” and, in the examination notes:

- suture laceration
- X Ray to R/O [rule out] Nasal Fx

In the recommendation section, he wrote:

- XRay +
- Removal of Sutures 7 days

After later speaking with Jordan at ringside, Varlotta testified that Jordan asked about Abdusalamov’s and Perez’s condition. Varlotta responded, in sum and substance, that they “appear[ed] to be fine.” He then wrote “60 days” in the “Final Disposition of Case” section of the form, indicating that Abdusalamov was not permitted to box for 60 days.

Varlotta further testified that he had partially completed a “Boxer Medical Suspension Notice” for Abdusalamov, on which Jordan wrote “60 days” as the length of the suspension. Specifically, Varlotta said that he placed an “X” in boxes for “laceration” and “head trauma or facial injury.” Varlotta testified that Abdusalamov “did not have head trauma, other than being a participant in a boxing match.” Below that, he wrote, “XRay for Nasal Fx,” and signed his name at the bottom of the form. After Jordan completed his portion of the form, Varlotta
returned to the locker room, gave the form to Grinberg, Jr., to indicate receipt by signing, and gave Grinberg, Jr., a copy.

Jordan testified that he received Curreri’s paperwork that included the phrase, “To Hospital,” which he interpreted as meaning “[t]hat [Abdusalamov] was going to have his nose checked out. Either . . . that night or perhaps when he got back to Florida.” He categorized Abdusalamov’s injuries as described on the Athletic Commission examination paperwork – a possible nose fracture and a zygoma fracture and stitches on his eyelid—as “[a]bsolutely not” an emergency situation. During his testimony, Jordan commented, “This is a common injury. It’s not—a nose fracture is not going to kill you. Cheek fracture is not going to kill you. There’s no serious medical complication that’s going to occur. So this is not—this definitely, absolutely is not a medical emergency.”

Jordan further discussed the “To Hospital” direction on the form, stating that it was his understanding that Abdusalamov “was going to have it [his injuries] evaluated because eventually he’s going to get X-rays.” Jordan asserted that if, by “To Hospital,” Curreri had meant that Abdusalamov needed to go to the hospital in an ambulance, “he would have been put in the ambulance.”

Jordan discussed nasal and zygoma fractures generally, and noted that, “often people don’t do anything for nose fractures until after the swelling has gone down. Some boxers might not even get it repaired until after they finish their boxing career because they may just break it again.” Regarding cheek fractures, Jordan testified that they are a concern only if the fracture affects eye muscles, “and you can tell that clinically because they’ll have double vision. Their eye movements won’t be intact. But this was lower down.” Jordan further commented, “If we sent every boxer that had a swollen cheek or a fat nose to the emergency room by ambulance, we’d . . . have boxers going in the ambulance three and four times a night.” He added that the injuries in question are “very, very common[,]” and “[t]here was nothing here to suggest that there was anything neurological going on.” Jordan noted that Abdusalamov “did not present neurologically when he was in the arena.”

Contrary to all the aforementioned testimony, Abdusalamov’s brother, Abdusalam, testified to the Inspector General that Abdusalamov had complained vociferously about head pain while in the locker room and asked for an MRI. Neither Grinberg, Jr., nor cut man Rivas, however, testified to any such request or behavior.
Similarly, corner man Jackson testified that he had complained to physicians in the locker room that Abdusalamov needed to go to the hospital immediately. Neither Grinberg, Jr., nor Rivas testified to any such request on Jackson’s part.

After the physicians had completed their examinations and left the room, Abdusalamov urinated in a cup for the required post-fight urinalysis. Abdusalamov took a shower and got dressed. In testimony to the Inspector General, Inspector Farrago recalled that Abdusalamov himself poured the urine from the cup into a vial, which Farrago then sealed and placed a tape over the top, according to procedure. According to Farrago, the urine sample appeared to contain blood, as it was tinted red. Rivas recalled that “the inspector said there was a little bit of red. He had blood in his urine.”

Farrago testified that he brought Abdusalamov’s urine sample to the Athletic Commission’s assigned room, which was unattended and unlocked. Farrago placed the sealed sample, which was inside an envelope, in the bag with the other urine samples, and left it in the unattended room. He then returned to the locker room.

According to both Grinberg, Jr., and Farrago, Farrago suggested to Grinberg, Jr., that Abdusalamov go to the hospital to address the issue of blood in the urine. According to Farrago, “In my judgment, he needed to go with a little more sense of urgency. Not immediately.” Farrago noted that blood in a boxer’s urine is not unusual, stating that he had seen it “my whole life.”

While Farrago acknowledged that he was aware that physicians and an ambulance crew were located at ringside, he did not alert them to his concerns about Abdusalamov’s urine. Rather, when one of the members of the team asked how and where to seek medical attention, he suggested that they take a taxi to the nearest hospital. Since none of the assembled group from Florida was familiar with New York, and Farrago—who is also not from New York City—did not know the location of the nearest hospital, he suggested they ask the taxi driver when they hailed the cab.

The Inspector General also learned that after Abdusalamov and his team left Madison Square Garden, Inspector Farrago obtained autographed hand wraps from Gennady Golovkin, the defending champion in the match that followed the Abdusalamov-Perez fight. Farrago

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19 In his testimony, Farrago described the amount of blood differently at different times, e.g., “full of blood”; “clear, but it was heavily red”; and “pink.”
testified that he obtained Golovkin’s hand wraps to sell and to use the proceeds to fund a boxing charity that he runs. Farrago’s focus on obtaining the Golovkin wraps, and other fighting memorabilia discussed below, may have also distracted him from seeking an ambulance or other appropriate medical care for Abdusalamov after finding blood in his urine. Moreover, though Farrago’s charitable aims were laudable, his actions created a conflict of interest with his position as an Athletic Commission inspector, and he had previously been directed to stop taking hand wraps by then Director of Boxing Ralph Petrillo.

**Abdusalamov’s Departure from Madison Square Garden and Travel to Hospital**

Grinberg, Jr., recalled that, “after [Abdusalamov] got dressed, we were sitting there, and I said to Mago, ‘Are you ready to go to the hospital, or I said, ‘Do you want to go to the hospital, and he said, ‘Okay, let’s go.’” When asked whether, at that point, Abdusalamov was acting abnormally, Grinberg, Jr., responded, “No. In the dressing room, no.”

Shortly after 11:45 p.m., Abdusalamov, his brother, his father, and Grinberg, Jr., left the locker room and headed for the nearest exit, along with his team members Rivas, who went into the arena, and Jackson, who ultimately left through a different exit.

Video footage from Madison Square Garden security cameras shows that Abdusalamov walked through the corridors of Madison Square Garden and down the stairs completely on his own, with no physical support. That footage belies witness testimony taken before the Inspector General of Abdusalamov’s brother, Abdusalam, that Abdusalamov needed to be supported by him and their father on his walk to the Madison Square Garden exit, and that “we practically dragged him out to the street.”

The footage also reflects that none of the members of the group was in a rush: they walked single file in the narrow hallway. Rivas left first. On a hallway near the locker room, Grinberg, Jr, stopped to drink from a water fountain. Abdusalamov stopped to wait for Grinberg,

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20 After Farrago’s initial interview, the Inspector General learned that Farrago used his cellular telephone to take two unauthorized photographs of Abdusalamov in his locker room prior to the fight and one unauthorized locker room photograph of Abdusalamov following the fight. Inspector Farrago also returned to Abdusalamov’s locker room after his team left the arena and took Abdusalamov’s wraps, which he found discarded on the floor. Farrago provided this new information during his deposition for Abdusalamov’s lawsuit against Farrago, and the physicians, referee, and promoter of the Abdusalamov-Perez boxing match. In a subsequent interview with the Inspector General, Farrago testified he did not disclose that he had taken Abdusalamov’s photographs and wraps because it did not seem significant at the time of the initial interview. Farrago said that he had no intention of hiding evidence and was unaware of Abdusalamov’s condition when he took his wraps, and that he thought the wraps may increase in value as Abdusalamov’s fighting career progressed.
Jr., and then both proceeded. Abdusalamov’s father also drank at the fountain, while Jackson waited, combing his hair. Both men proceeded down the hallway, while Abdusalamov’s brother filled a bottle with water and then leaned against the wall, drinking from the bottle. Finally, the footage from the arena reflects that, as Abdusalamov descended the stairs, a man was ascending in the opposite direction. Because the stairs were narrow, Abdusalamov moved to his right to avoid bumping into the man as they passed.

The footage further shows that at approximately 11:50 p.m., Grinberg, Jr., Abdusalamov, his brother, and his father walked through the Madison Square Garden lobby at Eighth Avenue and out to the wide sidewalk. As he walked, Abdusalamov zipped up his parka. He and the assembled group walked halfway toward the curb where security bollards line the sidewalk and a number of satellite trucks were parked for the event. On the sidewalk, they were met by a group of others, including Abdusalamov’s manager Grinberg, Sr. Separately, Grinberg, Jr., walked to the corner of Eighth Avenue and 31st Street to hail a taxi cab.

After standing with the group for a minute or so, the footage reflects that Abdusalamov continued to walk slowly towards the curb, where he leaned against a bollard. The others followed him. Approximately two minutes later, Abdusalamov leaned over and, according to testimony of witnesses, vomited. At that point, Jackson, who had left the building separately, met the group and, together, they walked to the corner of Eighth Avenue and 31st Street. The group failed to notice a New York City Fire Department EMS ambulance that coincidentally was stopped behind a satellite truck.

Grinberg, Sr., testified that, after seeing Abdusalamov’s condition, he “ran immediately back” into the arena and found Lewkowicz, the promoter. According to Lewkowicz, Grinberg, Sr., told him that Abdusalamov needed to go to the hospital. Lewkowicz testified that he, in turn, informed Athletic Commission Chair Lathan that they needed to take Abdusalamov to the hospital. According to Lewkowicz, Lathan directed them to Chief Medical Officer Jordan, to whom he reiterated that Abdusalamov needed to go to the hospital.

According to Jordan, “No one told me he [Abdusalamov] was having any problems then, either, and I was under the impression he was just going to have the facial injuries looked at.” Jordan told Lewkowicz and Grinberg, Sr., that Abdusalamov should go to Roosevelt Hospital.

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21 The Inspector General found media assertions that Abdusalamov watched the main event fight were false.
At some point in this discussion, Jordan asked Lewkowicz whether Abdusalamov had taken an anti-inflammatory. Lewkowicz responded that Abdusalamov had not taken that medicine.

At approximately the same time, Grinberg, Sr., saw and waved down Curreri, the ophthalmologist who had sutured Abdusalamov’s eye. He told Curreri that Abdusalamov needed medical assistance, and explained that Abdusalamov was with the others outside, trying to hail a taxi cab. Curreri followed Grinberg, Sr., outside.

In the meantime, Grinberg, Jr., had hailed a cab, and Abdusalamov had reached the corner where it was waiting. At a few minutes before midnight, Abdusalamov, Grinberg, Jr., and Abdusalamov’s brother got into the cab. Curreri exited the arena and encountered Jackson, who pointed to the cab as the last member of the group got into the taxi and it drove off. Grinberg, Sr., followed the taxi in another car with another member of the group.

Abdusalamov’s cab proceeded to Roosevelt Hospital, and arrived within approximately 15 minutes. There, he waited several minutes before being seen by medical personnel. He was ultimately registered at approximately 12:30, and seen by a triage nurse a few minutes later. A CT scan was ordered at 12:40 and performed approximately 15 minutes later. The scan revealed a subdural hematoma, which is “a collection of blood between the covering of the brain (dura) and surface of the brain.” In comparison to concussions, which have immediate effects, subdural hematomas have delayed secondary effects. It should be noted that blood in the urine is not, typically, a symptom of subdural hematoma.

In Abdusalamov’s case, to relieve the pressure from the intracranial bleeding, surgery was performed and a coma was induced, but the mass effect of the hematoma caused secondary trauma to Abdusalamov’s brain. Hospital examinations also revealed a hand fracture, nasal area fractures, and a nondisplaced cheekbone fracture. After the operation, Abdusalamov’s prognosis was listed as “guarded.” He remained in a coma at Roosevelt Hospital until mid-December, when he was taken out of the medically-induced coma, and transferred to a rehabilitation facility at the end of that month. In September 2014, he was discharged from the

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22 According to Grinberg, Sr., he said Abdusalamov needed assistance. Curreri recounted that Grinberg, Sr., told him that Abdusalamov needed to go to the hospital.
23 According to Grinberg, Jr., the taxi driver told him that the nearest hospital was Roosevelt, so they proceeded there. According to Lewkowicz, however, the instruction to proceed to Roosevelt Hospital was given by Chief Medical Officer Jordan, and was relayed to Grinberg, Jr., via his father’s cellular telephone.
24 The Inspector General learned that patients arriving at hospitals by ambulance – connoting an emergency – generally receive priority over patients that arrive by other means.
25 A fractured but nondisplaced bone is cracked, but the bone remains aligned.
rehabilitation facility and returned home. According to media reports, Abdusalamov has regained limited ability to move, speak, and eat, but remains paralyzed on his right side.26

**Physicians’ Meeting After the Bout**

A few weeks after the bout, all of the ringside physicians involved in the boxing match that night—Browne, King, Curreri, and Varlotta—and Chief Medical Officer Jordan assembled at a restaurant in Greenwich Village for dinner and to discuss the match. Those physicians questioned by the Inspector General provided similar testimony about the dinner.

Browne, the ringside physician assigned to Perez’s corner, termed the meeting “informal,” and described the sum and substance of the conversation as “basically is there anything that we can do better in case something like this happens.” Browne added that “it was just basically us throwing around clinical – medical and clinical protocols that we can probably change or add or something of that nature,” and that the group had concluded that “we would probably take a look at the post fight form to have, I think, better documentation.”

Ophthalmologist Curreri described the meeting as a discussion of whether “there was anything in the sequence of what we did that perhaps we could have changed.” Like Browne, Curreri testified that “as a group, the conclusion was perhaps we needed more paperwork to prove—to document better the things that we normally do during the events as proof and also because recollections . . . fade, and you don’t know. So if you have a document it would be better.”

Jordan described the meeting as “quality assurance. I wanted to make sure we didn’t miss anything. I wanted to make sure I asked them what happened that night. And I wanted everybody there so I could hear what everybody was saying and make sure nothing was missed.” King, the ringside physician for Jordan and Abdusalamov, testified that the group came to the conclusion that they had not missed anything. Jordan did testify that he had thoughts and suggestions regarding things that could be done differently in the future, but he did not describe any plans to implement his suggestions. Jordan added that Abdusalamov “didn’t present neurologically while he was in the arena.”

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Relevant Laws, Policies, and Procedures

The Athletic Commission is governed by New York State law, administrative rules it has promulgated, and its Operation and Procedure Manual. Boxers’ medical conditions are reviewed at various times before, during, and after a boxing match. Prior to obtaining a license to fight in New York State, Athletic Commission rules require a boxer to submit proof of a “complete physical examination” that includes “an electroencephalographic examination, electrocardiographic examination, CAT scan, dilated eye examination by a licensed ophthalmologist and laboratory and other tests and examinations as may be required by such physician and/or the commission.”

Upon the Chief Medical Officer’s review of the submitted medical records and a determination that the boxer is fit to box, the boxer is cleared to participate in the “weigh-in” prior to a bout, during which physicians designated by the Athletic Commission administer a full physical and neurological examination. The physician reviews the boxer’s medical charts and medical history prior to the examination, and evaluates the boxer’s motor system, cognition, concentration, and recall. While the Athletic Commission’s procedure manual notes that all boxers must submit to a pre-fight examination during the weigh-in, it does not set forth the requirements for such an examination.

Similarly, the procedure manual directs that boxers undergo another pre-fight examination at the arena prior to their bout, but does not set forth the requirements of that examination. Based upon testimony from ringside physicians and Athletic Commission documents reviewed by the Inspector General, the pre-fight examinations conducted at the arena include the taking of a boxer’s pulse and blood pressure. Boxers are also asked if they are taking medication or are feeling ill and are reexamined by a ringside physician.

New York State Law mandates the attendance of at least one physician at boxing matches; however, Athletic Commission rules give the commission discretion in choosing the number of physicians in particular and in managing boxing matches in general. Specifically, Athletic Commission rules require “two physicians in attendance at ringside, unless otherwise directed or authorized by the commission.” The rules further state, “The number of physicians required to be in attendance at each contest or exhibition, and the type and quantity of medical and emergency equipment and instruments which shall be available at ringside or elsewhere in
the premises, shall be as the commission may prescribe.” Testimony revealed that Athletic Commission practice for a number of years has been to designate at least three, and often four, ringside physicians to boxing matches. The rules also give the Athletic Commission discretion as to the placement of the physicians. When more than two physicians are designated, one physician is assigned to each boxer’s corner during a fight, and any additional physicians are available to examine and, if necessary, care for boxers after a fight.

According to testimony, physicians designated to work during a fight card typically divide up responsibilities themselves, rather than being assigned particular responsibilities by the Athletic Commission. Thus, some physicians may choose to work in the locker room, for example, if they are particularly adept at suturing lacerations. Others assume responsibility for observing boxers in a given corner of the ring.

Ringside physicians are required by State law to terminate matches:

[I]f in the opinion of such physician any contestant has received severe punishment or is in danger of serious physical injury. In the event of any serious physical injury, such physician shall immediately render any emergency treatment necessary, recommend further treatment or hospitalization if required, and fully report the entire matter to the commission within twenty-four hours and if necessary, subsequently thereafter. Such physician may also require that the injured boxer and his manager remain in the ring or on the premises or report to a hospital after the contest for such period of time as such physician deems advisable.  

Athletic Commission rules reiterate this requirement. The Inspector General notes that the terms “severe punishment” and “serious physical injury” are not statutorily defined. Similarly, Athletic Commission rules do not define the terms “serious punishment” or “serious physical injury.” Accordingly, a ringside physician must judge whether a boxer appears unable to defend himself, even though he may not have sustained a serious injury. For example, a ringside physician may find a boxer unable to defend himself if the boxer is too tired to hold his arms up or too tired to move his feet to avoid punches. One ringside physician assigned to the Abdusalamov-Perez fight testified to the Inspector General that fights must also be stopped if a fight is “one-sided, the boxer’s in trouble, showing signs of neurological deficits, any sign of musculoskeletal injury, the shoulder is thrown out or they’ve . . . injured the shoulder. Anything

27 N.Y. Unconsol. § 8926(2).
28 19 N.Y.C.R.R. § 213.6
that will jeopardize the boxer’s ability to defend him or herself.” Physicians assigned to work on
the night of November 2, 2013, and another physician testified that clinical signs of neurological
impairment or pain reflecting possible brain trauma will result in the stoppage of a fight, and the
injured boxer will be sent to the hospital by ambulance. However, there is no medical bright line
to determine when to send a boxer to a hospital by ambulance during or after a bout if the fighter
has not sustained a knockout. If a boxer exhibits such clinical signs of impairment or pain
reflecting brain trauma post-fight, the injured boxer would be sent to the hospital by ambulance.

In addition, state law permits a ringside physician to enter the boxing ring “at any time
during a boxing . . . match . . . and [he] may terminate the match if in his opinion the same is
necessary to prevent severe punishment or serious physical injury to a contestant.” An Athletic
Commission rule similarly empowers the ringside physician to do so. During a match, a ringside
physician may examine a boxer who has sustained an injury to determine the extent of that
injury, and whether the fight must be stopped. For example, a laceration near a boxer’s eye may
result in bleeding into the eye. Although the laceration itself is not considered a medical
emergency, a ringside physician may stop the fight if the blood or swelling restricts the boxer’s
vision. A physician may request additional time between rounds to examine a boxer if the
normal one-minute period is insufficient. In that event, the time clock is stopped until the
examination is complete.

Post-Bout Medical Care

While no statute, rule, or procedure specifically mandates post-fight examinations,
ringside physicians, as noted above, are required to render emergency treatment, recommend
further treatment or hospitalization, and fully report serious physical injury to the Athletic
Commission within 24 hours of the event. Ringside physicians assigned to the Abdusalamov-
Perez fight testified that it is their practice to examine both fighters in the ring immediately post-
bout, and more fully afterward in the locker rooms.

According to testimony, ringside physicians’ standard post-bout practice includes an
examination of boxers for physical injuries, such as broken bones or other internal injuries, and
neurological injuries. Physicians examine bones for a cracking sound known as “crepitus” to
determine the extent of a fracture, and whether bones are displaced. Fractures in the eye area
will be deemed more serious if examination reveals trapping of the eye muscles within a non-
displaced fracture. More serious physical injuries result in different treatment. For example, one
Physician noted that a broken nose would not necessitate sending the boxer to the hospital by ambulance unless it results in “respiratory compromise,” or bleeding that cannot be stopped. Neurological examinations include questions for orientation to time and place, attention, recall, following commands, and watching a boxer’s ambulation to determine whether there is any loss of balance.

However, the Inspector General’s review of Athletic Commission procedures did not reveal any specific procedures in the event that a boxer experiences medical issues while in the locker room but outside of the presence of an assigned physician. Testimony by ringside physicians and Chief Medical Officer Jordan further revealed that no standard practices exist. If a boxer has sustained a laceration, a ringside physician may suture the laceration in the locker room. By statute, a boxer who has been knocked out or who has sustained head trauma during a technical knockout is suspended from boxing, and must undergo medical examinations and surrender his license until reinstated after medical review. A boxer’s injuries determine the length of his medical suspension, which may be of a specific duration for a laceration, or an indefinite period if further examination and specific diagnosis is required, which may necessitate an X-ray or CT scan.

**Emergency Planning**

Athletic Commission practice is to designate a particular hospital, generally a Level 1 trauma center equipped to provide comprehensive medical care, as the destination for injured boxers on a given night of boxing. In limited circumstances, a designated hospital may not itself be a Level 1 trauma center, but be able to transport a patient by helicopter to such a facility. However, there is no law, rule, or procedure that mandates designation of a particular hospital for emergency medical treatment.

State law permits the Athletic Commission to require the presence of an ambulance at the site of any match “or the promulgation of an emergency medical plan in lieu thereof.” Athletic Commission rules require “promoters at all boxing contests or exhibitions [to] have an ambulance with medical attendants available at the site of the event, unless otherwise directed or authorized by the commission.” Athletic Commission procedure tasks deputy commissioners with “ensuring [the] venue has adequate medical personnel, including an ambulance.” According to testimony, for televised boxing matches, two or more ambulances are often stationed onsite to assure that at least one ambulance is available if an ambulance must transport
a boxer to the hospital, because if there is a single ambulance at the venue and it has to leave, the matches will not continue until there is another ambulance on site. No law, rule, procedure or practice dictates that transportation be provided for non-emergency injuries. Thus, for such injuries such as a broken hand, boxers are responsible for their own transportation to a physician or medical facility.

According to testimony, on the day of a series of boxing matches, the assigned physicians are responsible for meeting with the ambulance team or teams to confirm the location of the ambulance, and to walk the route from the ring to the ambulance to assure that it will be possible to evacuate a boxer along that route in the event of an emergency during a match.

By rule, the promoter is to provide a private Athletic Commission room at the boxing arena. While the Athletic Commission is assigned a designated room for staff at such facilities as Madison Square Garden, no procedure or practice mandated that a member of Athletic Commission staff remain there to establish a central point of communication in the event of an emergency, or to safeguard collected urine samples that are delivered there by inspectors. The Athletic Commission did not have an established practice of providing communication devices to staff and did not issue directives regarding communications in the event of an emergency. Thus, at the time of the Abdusalamov-Perez bout, the Athletic Commission did not have any established practice or procedure to ensure efficient and effective emergency communication among Athletic Commission staff in a large facility.

**New York State Language Access Policy**

The Athletic Commission is also governed by the executive order issued by Governor Andrew M. Cuomo on October 6, 2011, requiring executive state agencies to translate “essential public documents,” such as forms and instructions into the six most common non-English languages spoken in New York State, based on United States census data; to provide interpretation services in a person’s primary language regarding agencies’ services and benefits; and to create a language access plan to reflect how the agencies are complying with the executive order.

In response to this order, the Department of State created a Language Access Plan effective October 5, 2012, which, among other directives, specifically required the Athletic Commission to translate certain applications and attachments, written examinations, and other forms. As noted earlier, the forms required to be completed by boxers who wish to compete in
New York State were not translated into Russian, or any other language, as required by the Department of State Language Access Plan, at the time of the Abdusalamov-bout. Accordingly, Abdusalamov, a native-Russian speaker, signed numerous forms that were available only in English. Furthermore, no one at the Athletic Commission offered him interpretive services as required under the Language Access Plan. Instead, Abdusalamov used a member of his team to act as his interpreter with the ringside physicians and others.

The Inspector General also learned that, at the time of the Abdusalamov-Perez bout, the Athletic Commission employed per diem English and Spanish-speaking inspectors, but no Russian-speaking or other foreign language-speaking inspectors. Accordingly, at the time of the bout, inspectors working with boxers who spoke Russian or foreign languages other than Spanish were forced to rely on the boxers’ teams to interpret instructions from the inspectors, answer questions, and relay important details to the inspectors. Whereas an inspector fluent in a boxer’s native language can simply listen to the conversations between the boxer and his team, an inspector dependent on the boxer’s team for interpretation may not receive all the information he needs. For instance, a member of a boxer’s team may not translate every statement of the boxer for the associated inspector due to the chaos of a boxing match, or because the boxer does not want the inspector to learn of an injury that may result in the award of the bout to the opponent. Notably, Abdusalamov’s opponent, Perez, a native Spanish speaker with limited English proficiency, was assigned an inspector who spoke Spanish fluently.

**Department of State Review and Report**

Beginning in August 2012, the New York State Department of State’s Office of Strategic Planning and Evaluation commenced a review of Athletic Commission policies and procedures at the direction of the Secretary of State. The report of that review – issued on November, 1, 2013, one day before the Abdusalamov-Perez fight – noted that the Athletic Commission was the subject of prior investigations by the Inspector General and others, as well as a variety of administrative and other weaknesses. The report recommended filling the long-vacant executive director position; strengthening the Athletic Commission’s policy making function; various administrative changes; and that the Athletic Commission “establish leadership in the area of sports medicine” through cooperation of the chief medical officer and the State Health Department’s leadership. The report also recommended that the Medical Advisory Board “review the current medical standards and policies to ensure they are up to date. Thereafter, the
policies and standards should be presented to the Commission at an open meeting for formal ratification. The Commission should then make available online the adopted medical policies and standards.”

**Deficient Policies, Procedures and Operation by the Commission**

Having served as chairperson of the Athletic Commission for over five years and as the sole commissioner receiving a full-time salary, Lathan was responsible for the daily operation of the Athletic Commission and for its leadership. Thus, she was primarily responsible for the deficient procedures and policies identified in this investigation and for deficient operation and oversight. Testimony revealed that the commissioners did not engage in the kind of analysis of policies and procedures or management that is required to operate a commission properly.

For example, one Commissioner stated that he had no recollection of receiving instructions at any time regarding his responsibilities as a commissioner, other than a general understanding of the need to ensure fighter safety and “the integrity of the sport.” This Commissioner testified that he was unaware of a November 2013 Department of State report denoting certain weaknesses (discussed above). When asked about a variety of Athletic Commission policies addressed in that report, he recalled no discussion of the policies at Athletic Commission meetings, nor did he have an understanding of what the Medical Advisory Board had done during his time as a commissioner. Further, the Commissioner was unaware of certain policies and procedures regarding the safety of boxers, and stated that he was not responsible for training inspectors and judges and that a number of tasks such as the propriety of weigh-ins were the responsibility primarily of the Commission’s Chairperson. Consequently, his testimony reflected a level of disengagement with respect to his direct involvement in matters relevant to this investigation and his responsibilities as a Commissioner.

Another Commissioner demonstrated an understanding of boxing rules and procedures, and did recall reviewing ethics codes and other materials sent to him when he accepted the position, but asserted that he had been ostracized by Lathan, including not being informed of upcoming bouts and being unable to add items to meeting agendas. This Commissioner, however, did admit that he had not taken action to address these points of concern.
Improper Acceptance of Gifts by Commissioners and Staff

During the Inspector General’s review of the Athletic Commission’s policies and procedures, the Inspector General learned of a number of instances in which commissioners and employees received individual and group gifts from licensees.

Lathan testified to the Inspector General that a promoter had given eight bottles of red wine to the commission’s staff in or about Christmas 2013. She also testified that other promoters had provided cake at Christmas time. Former administrative assistant Madeline Brady testified that promoters had provided platters of food to staff at the time of boxing events.

Lathan admitted receiving gift-wrapped earrings in or about 2011 from a promoter. At the same time, Brady received a necklace, and then-Director of Boxing Petrillo received a gift that Brady testified she had overheard identified as earrings. Brady separately received an inexpensive bracelet from a boxer, whom Brady testified that she had “helped him renew his federal ID.”

When questioned by the Inspector General whether it is “proper for any employee to receive any gifts or things of value from promoters or people associated with the fight game[,]” Lathan responded, “Well, a Christmas gift. I didn’t see anything wrong with a Christmas gift.” Brady testified that she recalled that, in response to her expression of concern about receiving gifts, Petrillo said words to the effect of, “it’s no big deal.”

The Athletic Commission Code of Conduct states, in pertinent part, “[n]o employee shall use, attempt to use, or create the reasonable impression of an attempt to use his or her official position to secure unwarranted special treatment or privileges for himself or others.” Moreover, Public Officers Law section 74(3)(d) provides that a state employee shall not use or attempt to use his or her official position to secure unwarranted privileges or exemptions for himself or herself or others. In addition, advisory opinions issued by the Joint Commission on Public Ethics during the relevant time period stated that state employees should not accept gifts of even nominal value from a person or entity that conducts business with a state agency.²⁹

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²⁹ On June 18, 2014, the Joint Commission on Public Ethics issued new regulations regarding gifts to state employees and legislators. See 19 N.Y.C.R.R. § 933. The misconduct discussed here predates their promulgation, however.
Athletic Commission Chair Thomas Hoover’s Conflicts of Interest

During the course of the instant investigation, the Inspector General received complaints regarding the commission that were separate and unrelated to the Abdusalamov-Perez bout. Several of those complaints alleged conflicts of interest on the part of current Athletic Commission Chair Thomas Hoover. Specifically, the complaints alleged that Hoover permitted friends and relatives to obtain “credentials” (i.e., passes allowing admission to boxing events) that allowed them to attend boxing matches free of charge. The complaints also alleged that Hoover recommended that a personal friend apply for an Athletic Commission position, knowing that his friend unqualified.

The Inspector General found that Hoover did, in fact, seek credentials for his son to attend boxing matches on at least two occasions, and on one occasion, his son brought a friend. Hoover disingenuously represented to Athletic Commission staff that both men were potential inspectors. On the first occasion, Hoover directed Athletic Commission Director of Boxing Eric Bentley to give his son, Jason Scott Hoover, and Jason’s friend, Brent Edwards, access to an August 1, 2015, boxing event at the Barclays Center. Hoover did not mention that Jason was his son, and listed Jason as “Jason Scott,” not “Jason Hoover.” Jason Hoover and Edwards attended the August 1 event, using Athletic Commission credentials. Second, Hoover added his son to a credentials list for an October 17, 2015, match at Madison Square Garden. Once again, Hoover added his son to the list as “Jason Scott,” not “Jason Hoover,” and told Bentley that “Jason Scott” was a prospective inspector. The promoter never received the credentials list, however, and Hoover’s son was turned away from the fight. Notably, Bentley testified to the Inspector General that he had never put potential inspectors on credentials lists before Hoover made his request regarding the August 1, 2015, bout, and Berlin testified that he has never had potential inspectors attend a fight.

Hoover’s actions on behalf of Jason Hoover and Edwards deviated from Athletic Commission policies and procedures and potentially violated the Public Officers Law. As set forth above, the Athletic Commission Code of Conduct prohibits employees from using their official positions to secure unwarranted special treatment or privileges for themselves or others. Likewise, Public Officers Law section 74(3)(d) provides that a state employee shall not use or attempt to use his or her official position to secure unwarranted privileges or exemptions for himself or herself or others. In addition, Public Officers Law section 73(14) prohibits state
employees from participating in decisions to hire, promote, discharge, or terminate their relatives.

When the Inspector General asked whether hiring his son would constitute a conflict of interest, Hoover testified that, upon reflection, “it would have been.” Hoover’s use of his son’s middle name rather than their shared last name further suggests that Hoover knew his conduct was problematic. Moreover, Hoover testified that a background in boxing is a prerequisite for becoming a boxing inspector, but said that his son and his son’s friend’s only qualifications for becoming inspectors was that they were “big guys.”

Hoover’s actions regarding his son and Edwards are not isolated incidents. Hoover also sought commission wristbands that would admit two New York State senators to an August 25, 2015, match at MCU Park. Hoover testified that he had spoken to the two senators at his confirmation hearing, and then offered them the opportunity to attend a fight. They subsequently called the commission to arrange an opportunity to attend. Bentley testified that he heard Hoover request four wristbands for a state senator. According to Hoover, the senators “never showed up.”

Hoover also invited a former professional wrestling referee to an October 24, 2015, boxing event at the Paramount Theater in Huntington, Long Island. Hoover testified that the former referee called to congratulate Hoover on his appointment as chairman and noted that an event was coming up, at which point Hoover invited him to attend. Hoover described the former referee as being “one of my officials back in the day.” According to then-Athletic Commission Executive Director David Berlin, the former referee sat between Hoover and a judge near ringside at the event. Ringside seats for the October 24, 2015, event were priced at $200. In September 2015, Hoover attempted to hire Ronald J. Abraham, Jr., a personal friend of Hoover’s and Hoover’s wife, as a judge, even though Abraham’s application reflects that he had no experience in judging boxing. After encouragement from Hoover, Abraham submitted his application to the Athletic Commission on September 8, 2015, with a hand-written cover note to Hoover.

Subsequently, Bentley and Berlin saw Abraham’s name on a list of judges. Neither Bentley nor Berlin recognized the name, so they contacted the Athletic Commission’s community coordinator, who was responsible for licensing, and said that Hoover had directed that Abraham be licensed as a judge. Hoover later claimed in both a conference call at the
Athletic Commission and to the Inspector General that Abraham’s application was a mistake only in the position sought. Specifically, Hoover testified that Abraham had erroneously filled out the paperwork to be a judge, rather than an inspector. Hoover said he offered to train Abraham as an inspector, but he could not be a judge because he lacked the experience. Abraham, however, had no experience pertinent to either position.

**FINDINGS AND RECOMMENDATIONS**

The Inspector General finds that the Athletic Commission must do more to ensure boxers’ safety. Melvina Lathan, the full-time chair of the Athletic Commission at the time of the November 2013 bout, was ultimately responsible for the failure to train staff as to proper procedures in the event that a medical issue arises. Furthermore, she failed to ensure appropriate and routine review of Athletic Commission policies and procedures, the insufficiency of which this investigation has revealed. Having served as chairperson of the Athletic Commission for over five years and as the sole commissioner receiving a full-time salary, Lathan was responsible for the daily operation of the Athletic Commission and for its leadership. Thus, she was primarily responsible for the deficient procedures and policies identified in this investigation and for deficient operation and oversight. Testimony revealed that the commissioners did not engage in the kind of analysis of policies and procedures or management that is required to operate a commission properly. Her failure to engage her fellow commissioners had a deleterious effect on commission operations.

In fact, the Department of State’s finding of numerous deficiencies within the Athletic Commission reflects the chair and commissioners’ passive management of the agency’s activities. Most of the deficiencies noted in the Department of State’s report could have been addressed by the Athletic Commission internally as proactive measures without the need for the Department of State to review and address them.

The Inspector General found that the Athletic Commission did not have a complete post-fight emergency plan in place on the night of November 2, 2013. Inspector Farrago should have been trained not to dispense medical advice absent a physician. He also should have been able to notify medical personnel immediately upon finding a potential problem, either by walking to the Athletic Commission’s designated room to inform a staff member stationed there, or by communicating to that person by two-way radio or cellular telephone. In the absence of formal protocol and specific training, Farrago failed to alert a physician, and instead directed
Abdusalamov to find a taxi to take him to a hospital of the driver’s choosing. A formal tactical emergency plan should be implemented so that all staff and Athletic Commission-approved personnel are aware of procedures in the event of an emergency at any time during a boxing event and are prepared to address medical issues at any time during a boxing match through prompt and appropriate referrals.

Moreover, the Athletic Commission failed to establish a centralized point for emergency communications or to issue communication devices or emergency directives to its staff, as well as the boxers and their teams. Accordingly, the Inspector General recommends that the Athletic Commission require the presence of Athletic Commission staff in its pre-designated event room to establish a centralized point of communication, and must also issue communication devices to its staff and implement emergency communications directives. Notably, at former Executive Director Berlin’s direction, the Athletic Commission instituted a policy requiring that at least one Athletic Commission staff member be present in the Athletic Commission’s assigned room at a boxing match at all times. This staff presence ensures that Athletic Commission staff can report incidents to a “central command” location, and medical or other personnel can be readily notified so that problems can be swiftly addressed.

The Inspector General also found that the Athletic Commission failed to implement sufficient procedures surrounding post-fight examinations. While there is no New York statute, Athletic Commission rule, or procedure that mandates post-fight examinations, Athletic Commission physicians testified that it is their practice to examine both fighters in the ring immediately post-bout, and more fully afterward in the locker rooms. Despite the absence of a written requirement to perform the post-fight examinations, the Athletic Commission utilizes a form on which physicians memorialize their conclusions and instructions. The Inspector General, however, found that these forms do not require the physician to identify the severity of the injury and the required level of post-bout care, and are therefore insufficient to identify medical issues that may need to be addressed and that would trigger specific protocols. Medical documentation must be improved dramatically, so that the recommendations of each physician are clear to others who may be attending to the same boxer-patient. Documentation could provide boxes to be checked by ringside physicians, and provide various standard answers. For example, a physician could check a box that indicates his recommendation to be “Send to hospital by ambulance” or “Non-emergency care required.”
The Athletic Commission must also institute new policies requiring promoters to provide standard instructions for medical care for all boxers. Boxers should also be alerted—in their native languages—as to signs of subdural hematomas and other brain trauma that may occur hours or even a day after their bout. Promoters should provide information to boxers about where to go for both urgent and non-urgent care and should be required to provide transportation for non-urgent care. A boxer from Florida, let alone a foreign country, should not have to determine where to seek care for a broken hand, or what to do if signs of brain trauma appear hours after a bout—on the street, at a restaurant, or in a hotel room in an unfamiliar locale.

The Inspector General found that Chief Medical Officer Barry Jordan bears some responsibility for the confusion that followed after Abdusalamov became ill outside the arena, particularly the apparent miscommunications regarding whether to send Abdusalamov to the hospital. Jordan had oversight of the medical aspects of boxing and was in a position to address the procedural shortcomings identified in this report, including the post-bout examination requirements and the lack of information provided to boxers regarding post-bout medical care. The Inspector General found that while ringside physicians, in practice, routinely conduct post-bout medical examinations, the Athletic Commission procedure manual does not require such examinations. Additionally, the Athletic Commission forms used to memorialize boxers’ injuries do not require sufficient specificity as to the severity of the injury and the required level of post-bout care, including whether and when to go to the hospital. As chief medical officer, Jordan was in a position to recognize these deficiencies and address them.

Accordingly, the Inspector General recommends that the Athletic Commission and its chief medical officer develop and implement procedures and forms to better document boxers’ post-bout examinations and direct post-bout medical care. The Inspector General learned that, at the time of the November 2, 2013, bout, no uniform policy or procedure had been established by the Athletic Commission in the event that an inspector found that a boxer’s urine sample contained any amount of the boxer’s blood. Chief Medical Officer Jordan testified, as did others, that such a finding is not uncommon or necessarily serious, but that he would have expected an inspector who noticed blood in urine to have alerted him or another physician. Yet ringside physicians Curreri, who attended to Abdusalamov, and Browne, who was assigned to Perez, testified that they would send a boxer to the hospital by ambulance in such circumstances.

Yet another deviation from protocol uncovered by the Inspector General occurred when Inspector Ernesto Rodriguez failed to obtain a post-fight urine specimen from Perez. Rodriguez
testified that he “actually went to watch the [next] fight and forgot completely about it.” His failure was not discovered until later in the evening. Due to Rodriguez’s negligence, no post-fight urinalysis of Perez’s urine was performed and the post-fight urinalysis form was not completed. When then-Director of Boxing Petrillo learned of this failure, he took no action to document the missing urinalysis or to determine how the lapse occurred. In fact, when the urinalysis form was sought during the instant investigation, Petrillo informed the Department of State’s counsel that he had “probably” thrown the form away. As noted earlier, the worksheet used by inspectors in November 2013 to assure that all tasks are completed lacked a check-box for the provision of a post-bout urine sample; there was only a single check-box for the collection of a urine sample. That worksheet has now been changed to include check-boxes for both urine samples required for a title fight. While the investigation did not find evidence of a medical connection between the apparent finding of blood in Abdusalamov’s urine and the subdural hematoma he sustained, the Athletic Commission, its executive director, and its chief medical officer must take steps to assure that Athletic Commission personnel, and those licensed by the commission, are prepared to address medical issues—either blood in urine or other complications—by referring them to proper medical personnel swiftly.

In addition, physicians should be required to provide specific detail regarding the extent of a boxer’s injuries and advise the boxer when and where to obtain post-bout medical care, including whether the boxer should go to a hospital. The Inspector General recommends that the Athletic Commission develop standard pre-fight and post-fight physical and neurological examinations. Rodriguez, who neglected to obtain a post-fight urine sample from Perez, has not been assigned to work as an inspector since November 2013. The Athletic Commission should also consider taking appropriate disciplinary action against Rodriguez.

The Inspector General also found that Athletic Commission staff is inadequately trained to appropriately address medical issues. Although Athletic Commission physicians generally attend an annual training seminar, and the Medical Advisory Board offers some seminars to inspectors, in November 2013 there was no regular training program to educate Athletic Commission staff regarding how to appropriately address medical issues. The Athletic Commission, its executive director, and the medical director should develop such a training program.

The Inspector General further recommends that the Athletic Commission train staff to ensure that proper procedures are followed when completing forms, especially with regard to
time-sensitive information such as the temperature of a urine sample when provided. Additionally the Inspector General recommends that the Athletic Commission institute a policy to ensure that all procedural requirements have been met, including the provision of a post-bout urine sample, before a boxer is provided payment and allowed to leave the arena. The Inspector General notes that the deficiencies and omissions in emergency medical procedures identified in this report should be addressed by the Medical Advisory Board, in conjunction with Athletic Commission physicians, commissioners, and staff.

As the November 2013 Department of State report found, the Medical Advisory Board should be more involved in the development and enforcement of Athletic Commission policies and procedures that protect boxers’ medical safety. The board should play a more robust role in analyzing subdural hematomas and related intracranial hemorrhages in boxing in order to provide guidance and inform policy regarding the detection and timely treatment of such injuries, and to the extent feasible, devise and disseminate specific protocols to help mitigate the damage caused by such injuries.

Based upon this investigation, the Inspector General recommends that the Medical Advisory Board’s avenues of inquiry could include analysis of the correlation of secondary issues such as facial fractures to the incidence of intracranial bleeding. Additional diagnostic measures may also be worth considering, especially for boxers who do not speak English as a first language. For example, though it may not have been applicable in Abdusalamov’s case, ringside physicians could use various charts with foreign-language speaking boxers, including pictograms, to identify the location of pain on the body and the level of a boxer-patient’s pain. The Medical Advisory Board should also formulate policies and procedures to address the incidence of blood in a boxer’s urine.

The Inspector General found that the Athletic Commission failed to follow the Department of State Language Access Plan and Governor Cuomo’s executive order on language access. The Athletic Commission must provide interpreters as required by the Language Access Plan to make sure that physicians understand boxers’ medical complaints. Moreover, forms required to be submitted by boxers must be translated into the six most common languages in New York State as required by the Language Access Plan and the executive order. The Inspector General recommends that the Athletic Commission comply with the Language Access Plan and the governor’s executive order and train Athletic Commission staff regarding the requirements of both directives.
Ethical Violations by Athletic Commission Staff

The Inspector General further found that Inspector Farrago violated the Athletic Commission Code of Conduct by taking unauthorized photographs of Abdusalamov and by obtaining his discarded hand wraps, and by further obtaining Golovkin’s autographed hand wraps to sell for his boxing charity. The Code of Conduct requires all Athletic Commission staff to “avoid any appearances of actual instances of impropriety,” and further mandates that “[n]o employee shall use, attempt to use or create the reasonable impression of an attempt to use his or her official position to secure unwarranted special treatment or privileges for himself or herself for others” Farrago’s conduct created a conflict of interest with his position as Athletic Commission inspector and may have distracted him directing Abdusalamov to an ambulance or physician after finding blood in his urine. The Inspector General notes that the Athletic Commission has not allowed Farrago to work as an inspector since the Abdusalamov-Perez fight.

During the pendency of this investigation, the Inspector General also determined that then Athletic Commission Chairperson Melvina Lathan and Athletic Commission staff had received improper gifts from promoters. The Inspector General also identified other apparent conflicts of interest by Athletic Commission staff. Lathan’s conduct, and that of her staff, violated Athletic Commission policy and may have violated the New York Public Officers Law.

During the course of this investigation, the Inspector General also received allegations regarding conduct by current Athletic Commission Chair Thomas Hoover that conflicted with his duty to the Athletic Commission. The Inspector General found that Hoover permitted friends and relatives to obtain “credentials” allowing them to attend boxing matches free of charge and recommended that a personal friend apply for an Athletic Commission position, knowing that he was unqualified. In doing so, Hoover may have violated the New York Public Officers Law.

In light of the Athletic Commission’s responsibility for the health and safety of boxers and the business of boxing and, now, mixed-martial arts in New York State, it is imperative that all Athletic Commission commissioners and staff adhere to the highest standards of ethics and professionalism. The Inspector General is referring this matter to the Department of State to take whatever action it deems appropriate against the employees identified in this investigation. The Inspector General is also referring this matter to the Joint Commission on Public Ethics for whatever action the commission deems appropriate.
Department of State Response to the Inspector General’s Investigation

The Department of State has agreed to and is implementing the Inspector General’s recommendations as set forth above.