

When any bleeding (flowing or transferable) occurs, play must stop and the player must leave the court to attend to the bleeding immediately. It must be staunched and covered. Play does not need to stop if blood is visible but not transferable to the opponent or court.

As for injury, there are 3 categories to consider:

Self-inflicted: Stop play. 5 minutes is allowed from the start of treatment. Bleeding must be stemmed and covered. If blood flows again from the same wound, concede the game and fix within the 90 second interval, else concede the match.

Contributed: Stop play. Allow reasonable time to stem and cover. If blood flows again from the same wound, then: (i) if no fault of the player, or contributed, allow reasonable time. (ii) if caused by the injured player, concede the game and fix within the 90 second interval, else concede the match.

Opponent-inflicted – accidental: allow reasonable time. If the player is unable to continue award the match to the injured player. If blood flows again from the same wound, then if no fault of the player, or contributed, allow reasonable time. If unable to continue, award the match to the injured player.

Opponent-inflicted – deliberate or dangerous: if the player is unable to continue play immediately, that is, any treatment is required, award the match to the injured player.

Conceding a game in any situation may only happen once in a match, be it from injury or bleeding.

Clothing with blood on it must be changed before play resumes, and the court must also be cleaned as far as possible and be playable.