



The Best Approach To Concussion Management

Dear Parent/Guardian,

Suffield High School is about to begin utilizing an innovative program for our student-athletes. The program is called ImPACT (Immediate Post Concussion Assessment and Cognitive Testing) and it is a computerized exam that the athlete takes prior to the season and if the athlete is believed to have suffered a head injury they re-take the exam to help determine a.) The extent of the injury b.) The location of the injury and c.) When the injury has healed. The system is becoming the “Gold Standard” in recognizing and better managing concussion type injuries. The University of Pittsburgh Medical Center’s Sports Concussion Program is the founding group of this software.

The exam takes about 25-30 minutes and is non-invasive. The program is basically set-up as a “video-game” type format. What it is doing is giving the brain a preseason physical of its cognitive abilities. It tracks information such as memory, reaction time, processing speed, and concentration. It is simple and actually most that take it enjoy the challenge. The exam has gained recognition around the world.

If a concussion is suspected, the test is re-taken. The information is also shared with your regular doctor and a sound decision can be made as to when return-to-play is appropriate and safe. If an injury of this nature occurs I will be in contact with you on all the details, large and small. We have set-up an anonymous identification system so that your child’s anonymity is guaranteed with the study.

I wish to stress that there is no invasive work being done with this program. This gives us the best available information in preventing brain damage that can occur with multiple concussions. The Suffield High School administration, coaching, and athletic training staffs are trying to keep your child’s health and safety at the forefront of the High School athletic experience. Please send the second sheet back, with the appropriate signatures, with your child. If you have any questions regarding this program please feel free to contact me at (860) 668-3289.

Sincerely,

Michael Bosworth

PERMISSION SLIP

For use of the Immediate Post-Concussion Assessment and Cognitive Testing (ImPACT)

I have read the above information. I have been given an opportunity to ask questions and my questions have been answered to my satisfaction. I agree to participate in the ImPACT Concussion Management Program and the research.

Printed Name of Athlete _____ Sport _____

Signature of Athlete _____ Date _____

Signature of Parent _____ Date _____