



Dear Parent/Guardian,

The Chapin School utilizes an innovative concussion management program for our student-athletes. The program is called ImPACT (Immediate Post Concussion Assessment and Cognitive Testing) and involves an online computerized exam that each student grades 5-12 will take every two years.

If a student is believed to have suffered a concussion, the exam is taken again and the data is compared to the baseline test. This information is then used as a tool to assist the athletic training staff and treating physicians in determining the extent of the injury, monitoring recovery, and in making safe return to activity decisions.

If an injury of this nature occurs, we will be in contact with you. **Post-concussion tests will be taken under our supervision at school.**

Founded by the University of Pittsburgh Medical Center's Sports Concussion Program, this software system is utilized throughout professional sports and has been mandated in the NHL. Used by 18 NFL teams, US Soccer and countless colleges and high schools across the country, it is fast becoming the "Gold Standard" in recognizing and managing head injuries. Additional information can be found at www.impacttest.com.

The exam takes about 25-30 minutes and is non-invasive. The program is basically set-up as a "video- game" type format. It tracks neurocognitive information such as memory, reaction time, brain processing speed, and concentration. For example, in one part of the exam, a dozen common words appear one at a time on the screen for about one second each. The student is then later asked what words were displayed. It is a simple exam and most who take it enjoy the challenge of the test.

One of the reasons concussions are so dangerous is a condition called Second Impact Syndrome. If a student sustains a second concussion before completely recovering from the first, the results can be deadly. At Chapin, we always hold the student's health and safety as our top priority.

Please sign and return the consent form. If you have any questions regarding this program, please feel free to contact me.

Thank you.

Sincerely,

Michelle L. Caywood

Director of Athletics

The Chapin School 212.570.4971

mcaywood@chapin.edu

CONSENT FOR COGNITIVE TESTING and RELEASE OF INFORMATION

I give my permission for (daughter's name) _____ (daughter's date of birth) _____ to have a baseline and a post-concussion ImPACT (Immediate Post-concussion Assessment and Cognitive Test) administered at The Chapin School. I understand that my child may need to be tested more than once, depending upon the results of the test, as compared to my child's baseline test, which will be kept on file at Chapin. I understand there is no charge for the testing.

The Chapin School may release the ImPACT (Immediate Post-concussion Assessment and Cognitive Testing) results to my child's primary care physician, neurologist, or other treating physician, as indicated below. Additionally, we work with physicians and neurologists who are trained in reading ImPact results.

By signing below you give permission for your daughter's results to be released to your daughter's treating physician or an ImPACT trained physician with whom we are consulting, to review your daughter's results.

I understand that general information about the test data may be provided to our Concussion Management Team, for the purposes of providing temporary academic modifications, if necessary.

I give permission for an ImPACT trained physician to review my daughter's ImPACT results:

Name of parent or guardian: _____ Date: _____

Signature of parent or guardian: _____

PLEASE PRINT THE FOLLOWING INFORMATION:

Name of doctor: _____

Name of practice or group: _____

Phone number: _____

Student's home address: _____

Parent or guardian phone numbers (please indicate preferred contact number & time if necessary):

_____ (H) _____ (W) _____ (C)
08/01/15