What is ImPACT?
ImPACT (Immediate Post-Concussion Assessment and Cognitive Testing) is the most scientifically validated computerized neurocognitive test used by more than **7,400 high schools and 1,000 colleges and universities** to help evaluate and manage suspected concussions. Since 2006, over 7.5 million individuals have taken the ImPACT test.

**ImPACT comes in two forms:**

1. **Baseline Test** – Administered by a physician, nurse, athletic trainer, athletic director, or coach before the start of a sport season, school year, or other activity. Baseline scores are collected and stored on our HIPAA compliant server. ImPACT recommends re-administering the baseline test every two years.

2. **Post-Injury Test** – Administered by a licensed healthcare provider when a concussion is suspected. Test results are compared to baseline scores and/or normative data scores as part of a healthcare provider's assessment of the injury. Multiple post-injury tests may be given to an individual during the course of treatment and rehabilitation.

**Key Facts:**
- ImPACT is supported by a database of clinical research, including more than 250 peer-reviewed and 145 independent studies.
- ImPACT’s industry-leading normative database increases reliability and validity of testing results.
- ImPACT assists qualified healthcare providers in the evaluation and management of concussion.
- ImPACT and its products continue to evolve by incorporating the latest advancements in neurocognitive science and in technology for portability and ease of use.
- ImPACT offers industry-leading educational resources and tools to raise awareness regarding the importance of proper concussion management. Proof of ImPACT's clinical value can be found in many hundreds of clinics and hospitals throughout the United States and around the world.

As part of the Haldane Central School District's concussion policy, ImPACT testing will be administered for all Haldane athletes. All secondary-school athletes are required to take the Baseline ImPACT concussion test every 2 years, in 7th/9th/11th grade, or 8th/10th/12th grade. Please sign and return this form with your sports registration paperwork.

Student Name:__________________________ Student Signature:__________________________
Parent/Guardian Name:___________________ Parent/Guardian Signature___________________
Concussion Procedures of Parents

This document is a brief outline on concussions and the procedure the district follows when a student suffers a concussion.

Concussion Procedure

All secondary-school athletes are required to take the Baseline ImPACT concussion test every 2 years, in 7th/9th/11th grade, or 8th/10th/12th grade.

If a student-athlete suffers a head injury and has signs/symptoms of a concussion the following will occur:

1. The Athletic Trainer/Nurse gives the parent(s) a concussion packet including a Take Home Information Sheet and Physician Evaluation Form.
2. The student will be evaluated by a physician for formal concussion diagnosis.
   a. The student will bring the filled out Physician Evaluation Form to the Nurse or Athletic Trainer.
3. The student will rest from gym and athletics until otherwise directed, and classroom accommodations may be recommended by the physician.
4. Post-injury ImPACT testing should be administered within 48-72 hours of the injury under the direction of the Athletic Trainer, unless otherwise instructed by treating physician.
5. The student will return to the physician for follow-up evaluation.
   a. The second portion of the Physician Evaluation Form should be completed by the physician and returned to the Nurse or Athletic Trainer.
   b. If cleared by treating physician to begin the Return to Play and no symptoms are present for 24 hours, the student will complete the Return to Play Progression.
C. High schoolers/Middle school athletes: supervised by Athletic Trainer.

Any questions regarding concussion management may be addressed to the Athletic Trainer, Meghan Crowe m.crowe2488@gmail.com
Once the athlete is completely symptom-free at rest, and has no symptoms with cognitive stress (i.e. reading or school work), a gradual return to play progression can be started.

All athletes who have been diagnosed with a concussion must complete a Return to Play Protocol that proceeds in a stepwise fashion with gradual, progressive stages. Monitoring of acute signs/symptoms during the activity, and delayed symptoms at 24 hours post-activity should conducted. It is important that athletes pay careful attention to note any recurrence of symptoms (headache, dizziness, vision problems, lack of coordination, etc) both during and in the minutes to hours after each stage. After supervised completion of each stage without recurrence of symptoms, athletes are advanced to the next stage of activity.

An athlete should ONLY be progressed to the next stage if they do not experience any symptoms at the present level. If their symptoms recur, they must stop and rest. Once symptom-free, the athlete returns to the previous stage of the protocol that they completed without recurrence of symptoms. If an athlete has to “restart” twice, consultation with a healthcare provider is suggested.

The athlete and all involved parties should understand that each step should take 24 hours. This means that it will take approximately 1 week to proceed through the full rehabilitation protocol. These stages will be subjective to the athlete and may be altered by the Athletic Trainer.

Stage 1: 20-30 min of cardio activity: walking, stationary bike, very light jog. Weightlifting at light intensity (no bench, no squat): low weight, high reps. Goal: 30-40% of maximum HR

Stage 2: 30 min of cardio activity: jogging at medium pace. Sit-ups, push-ups, lunge walks x 25 each. Weightlifting at moderate intensity. Goal: 40-60% of maximum HR

Stage 3: 30 minutes of cardio activity: running at fast pace. Sit-ups, push-ups, lunge walks x 50 each. Sprint, Sport- specific agility drills in three planes of movement. Resume regular weightlifting routine. Goal 60-80% of maximum HR

Stage 4: Participate in non-contact practice drills. Warm- up and stretch x 10 minutes. Intense, non-contact, sport-specific agility drills x 60 minutes. Goal 80-100% of maximum HR

Stage 5: Participate in controlled contact practice.

Stage 6: Resume full participation in competition.

Athlete Name: ___________________________ Sport: _______________ Date: ___________

Concussion Date: ___________ Cleared by: _______________ Date Cleared: ___________

Symptom Free Since: _______________ Athletic Trainer: ____________________________
<table>
<thead>
<tr>
<th>Stage/Day</th>
<th>Description</th>
<th>Completed/Comments</th>
<th>Supervised by</th>
</tr>
</thead>
<tbody>
<tr>
<td>1:</td>
<td>10 min of cardio activity: walking, stationary bike. Weightlifting at light intensity (no bench, no squat): weight, high reps. Goal: 30-40% of maximum HR</td>
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</tr>
<tr>
<td>2:</td>
<td>30 min of cardio activity: jogging at medium pace. Push-ups, push-ups, lunge walks x 25 each. Weightlifting at moderate intensity. Goal: 40-60% of maximum HR</td>
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<tr>
<td>3:</td>
<td>45 minutes of cardio activity: running at fast pace. Push-ups, push-ups, lunge walks x 50 each. Sport-specific agility drills in three planes of movement. Same regular weightlifting routine. Goal 60-80% of maximum HR</td>
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<td></td>
</tr>
<tr>
<td>4:</td>
<td>Participate in non-contact practice drills. Warm-up stretch x 10 minutes. Intense, non-contact, sport-specific agility drills x 60 minutes. Goal 90% of maximum HR</td>
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<tr>
<td>5:</td>
<td>Participate in controlled contact practice.</td>
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<tr>
<td>6:</td>
<td>Complete full participation in competition.</td>
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