





I. HOW TO TAKE IMPACT:

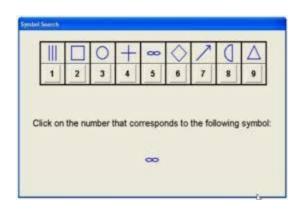
You need a computer that is internet capable, with a flash player and with an external mouse. Plan on 20-30 minutes.

- 1. Type in the address or click this link https://www.impacttestonline.com/schools
- 2. Enter the following code: C76ACF51E6
- 3. Follow the on screen prompts.
- 4. At the end of the test, be sure to hit the button that indicates you have submitted and completed the test ("Submit", "Print to File", "Email this confirmation", etc)
- 5. If you have any problems (not long enough access to a computer, crashes, link won't work etc.) Let me know and I'll find a resolution for you. carvers@westboroughk12.org.

II. What is it?

Impact testing lets us establish a baseline measurement of your "cognitive abilities". Notice it doesn't say "intelligence"! This isn't an IQ test, it's a test for variables like **reaction time**, **verbal memory**, **attention**, **and spatial relations**. All things that can be affected when concussed. We can use these measurements to show if, and how badly, your head injury effects your cognition (should you get one at all).





Screenshots from portions of the test.

We have joined hundreds of other schools in participating in ImPACT through the generosity and effort of the <u>Massachusetts</u> <u>Concussion Management Coalition</u>. Their mission is to bring science, education and community together to prevent and manage concussions.

III. Background: derived from http://impacttest.com/about/background

ImPACT (Immediate Post-Concussion Assessment and Cognitive Testing) is the first, most-widely used, and most scientifically validated computerized concussion evaluation system.

Developed in the early 1990's by Drs. Mark Lovell and Joseph Maroon, ImPACT is a 20-minute test that has become a standard tool used in comprehensive clinical management of concussions for athletes of all ages. ImPACT Applications, Inc. was co-founded by Mark Lovell, PhD, Joseph Maroon, MD, and Michael (Micky) Collins, PhD.

Given the inherent difficulties in concussion management, it is important to manage concussions on an individualized basis and to implement baseline testing and/or post-injury neurocognitive testing. This type of concussion assessment can help to objectively evaluate the concussed athlete's post-injury condition and track recovery for safe return to play, thus preventing the cumulative effects of concussion. In fact, neurocognitive testing has recently been called the "cornerstone" of proper concussion management by an international panel of sports medicine experts.

ImPACT takes approximately 20 minutes to complete. The program measures multiple aspects of cognitive functioning in athletes, including:

Attention span Sustained and selective Non-verbal problem solving Working memory attention Reaction time Response variability

IV. Why take it?

It benefits you for the following reasons:

- 1. Protects your safety even from yourself. Sometimes athletes are surprised at how poorly they perform on this test after they have assumed they're fine.
- 2. Tracking we can see how quickly you are recovering so you can return to play at the earliest safest time.
- 3. Hard data here is a way to have hard data to back you up if you really feel unwell but aren't sure if people believe you.
- 4. Get on my good side by completing the test early and upon request is very helpful to me and I appreciate your effort.

V. Why would my athlete be suspected of having a head injury?

According to <u>Massachusetts State Law</u> all athletes who are witnessed hitting their head and exhibit signs or symptoms of vestibular disturbance, cognitive impairment, head pain, or other systemic effect (like nausea or visual impairment) should be examined by a medical professional and assessed for a sports related concussion. Specific examples of symptoms and their presentation can be found at the <u>Department of Public Health</u>.

VI. What happens when my athlete is suspected of having a head injury at an WHS event?

If it is suspected that your athlete has suffered a head injury the scenario that plays out *generally* looks like this:

- 1. Athlete is removed from play
- 2. Sideline evaluation takes place
- 3. If a head injury is suspected the athlete should be referred to their PCP, neuropsychologist, or other relevant physician.
- 4. That provider will then make an official diagnosis of concussion, head injury, neither or both.
- 5. Once a diagnosis is made the provider can prescribe the athlete with modified academic requirements, modified physical restrictions, neither or both.
- 6. That prescription is delivered to the School Nurse who can then implement the district's <u>Head Injury Protocol</u> which can also be found on our website: <u>whs.westboroughk12.org</u>
- 7. During school personnel that are on the athlete's concussion advisory panel are chosen by the school nurse and can include teachers, counselors, social workers, the athletic director, the fine arts director, or any other staff member deemed necessary to communicate with in order to accommodate your athlete.
- 8. After school personnel on the panel include the athletic trainer, the athletic director and relevant coaches.

*Please keeping in mind: over reporting and an abundance of caution may result in your child *not* being diagnosed by your physician with a concussion.

VII. What happens after my child is diagnosed with a concussion.

- -Your athlete is still to report to practice if it does not produce symptoms or is specifically prescribed.
- -If your athlete is not attending school as a result of diagnosis, they must obtain permission from me to be at practices or games,

-If prescribed academic accommodations last longer than a week or unusually extreme your child may be referred to the Center for Student Success. This office is specifically responsible for assistance for students that have any altered curriculums due to medical need. This can include anything from long hospital stays to acute impaired functioning during class.

-Current standard of concussion rehabilitation may include some very light activity even though symptoms persist.

However, many pediatricians will instruct no activity. It's worth having a conversation with them about it.