



**Catholic Schools – Diocese of Wilmington**  
**Baseline ImPACT Testing - The Best Approach To Concussion Management**

Dear Parent/Guardian,

The Catholic Diocese Schools are utilizing an innovative concussion management program for our students and athletes. This program will assist physicians in evaluating and treating head injuries (e.g. concussion). In order to better manage concussions sustained by our students, we have acquired a software tool called ImPACT (Immediate Post Concussion Assessment and Cognitive Testing). ImPACT is a computerized exam utilized by many professional, collegiate, and high schools across the nation to successfully diagnose and manage concussions. If a student is believed to have suffered a head injury, ImPACT is used to help determine the severity of the head injury and when the injury has fully healed. Our goal is to baseline test all 6<sup>th</sup> and 9<sup>th</sup> graders in the 2014-2015 academic year thanks to a generous grant from a local medical provider, Dynamic Physical Therapy Associates.

The exam takes about 25-30 minutes and is noninvasive. The ImPACT 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. 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 leave permanent neurologic deficits or can even be deadly.

For an excellent on-line video of how concussions can affect our athletes, go to <http://vimeo.com/44085404>

If you would like your child to participate, please sign and return this form to your School Nurse. Please feel free to contact me or your school nurse with any questions. I can be reached at [drvschaller@walkinmed.com](mailto:drvschaller@walkinmed.com)

Sincerely,

Vincent E. Schaller, MD, CIC  
Medical Director, Catholic Diocese of Wilmington

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\_\_\_\_ I have read and understood the above information and give permission for my son/daughter to participate in the ImPACT Concussion Management Program.

\_\_\_\_ I do not give permission for my son/daughter to participate in the ImPACT Concussion Management Program.

\_\_\_\_ My son/daughter already had a baseline ImPACT study in the last 2 years at their school (Print school name and address here) \_\_\_\_\_ Grade: \_\_\_\_\_

Printed Name of Student: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Parent: \_\_\_\_\_