



**Sports Medicine Department  
ImPACT Concussion Testing Consent Form**

**Dear Parent/Guardian:**

Southern Therapy Services, Inc. Sports Medicine Department will continue to implement the ImPACT Concussion Test for all high school student athletes in the West GA area. Students that participate in contact sports are required to complete the concussion test. Testing will occur at select times and dates designated by Southern Therapy, your school's athletic department, your Athletic Trainer and/or your school nurse.

Initial testing is the baseline test that will be conducted at each school's computer lab. The only individuals that will have access to the results of this test will be the team physicians, Southern Therapy's Sports Medicine Staff, and/or your team's Athletic Trainer. This is not a pass or fail test. It is strictly to establish a baseline for each student-athlete in case a concussion does occur during an athletic competition.

**What is a concussion?**

A concussion is a mild traumatic brain injury that frequently involves physical and mental symptoms. Approximately 10% of all student athletes in contact sports suffer a concussion during their season. Proper management of the injury is the first step in avoiding long-term complications. Recovery can take days, weeks, or even months to recover from a concussion. Individuals often will experience dizziness, headaches, double vision, memory problems, irritability, and depression. Premature return to play following a concussion can lead to potentially serious consequences.

**What is ImPACT?**

ImPACT is a sophisticated research-based computer test developed to help clinicians evaluate an athlete's recovery following a concussion. ImPACT is a 25 minute neurocognitive test that has been scientifically validated to measure the effects of a sports related concussion. It measures memory (verbal/visual), visual motor, reaction time and impulse control. In the preseason each athlete will be given the baseline test and if a concussion is suspected during the season a follow-up test is administered by Southern Therapy to see if the results have changed from the baseline. The comparison helps to diagnose and manage the concussion. Depending on the severity, follow-up testing can be administered over days or weeks to help clinicians to track the athlete's recovery from the injury.

**If a Concussion is Diagnosed:**

If a concussion has been suspected or diagnosed, the student-athlete must come to Southern Therapy's Carrollton location within 24 to 48 hours post-concussion to be tested. If the results are positive the athlete will begin the Concussion Return to Play Protocol. Once the student athlete's scores have returned to near-baseline and has completed the return to play criteria the athlete will be seen by a team physician to be evaluated and cleared to return to play. Several physicians in the West GA area have been trained in the ImPACT concussion testing procedures. For a list of the qualified physicians you may contact Southern Therapy Services, Inc. at 678-390-6109. Southern Therapy's Sports Medicine Staff or the school's Athletic Trainer will help parents coordinate a time for the student-athlete to see the physician.



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**On the day of the Test:**

On the assigned day, there is a small amount of information in which the student-athlete will need to have on hand. They will need to know if they have ever been diagnosed with a concussion by a physician and the date that it occurred. Other information they will need to know is if the student-athlete has a learning disability. (i.e. dyslexia, ADD, ADHD, colorblindness, reading deficiencies, or any other disability that could affect their ability to perform on a computer-based test)

Thank you,

**Patrick Rothschadl, MS, ATC/L**  
Director of Sports Medicine  
Southern Therapy Services, Inc.  
W: 770-834-7436  
D: 678-390-6109

**PLEASE SIGN AND DATE THE FOLLOWING:**

I understand that the submission to the ImPACT concussion test is a condition of participation in your school's athletic activities. By signing and dating this form, I consent to be tested before my initial sport begins (or the designated date and time set by your school), and will not be allowed to participate until I have completed the ImPACT Test given free of charge by Southern Therapy Services, Inc. Sports Medicine Department.

*I hereby consent to the administration of the ImPACT testing. I also understand that I will be tested again if a concussion occurs or at the beginning of my third year (Junior year for incoming Freshmen) attending your school's athletic programs.*

**Student-Athlete's High School:** \_\_\_\_\_

**Participating Student's Name (Print):** \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Parent/Guardian's Name (Print):** \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_