

Parkston School District #33-3

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Dear Parent/Guardian,

Parkston School District is currently implementing an innovative program for our student-athletes. This program will assist our team physicians/athletic trainers in evaluating and treating head injuries (e.g., concussion). In order to better manage concussions sustained by our student-athletes, we have acquired a software tool called ImPACT (Immediate Post Concussion Assessment and Cognitive Testing). ImPACT is a computerized exam utilized in many professional, collegiate, and high school sports programs across the country 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 head injury and when the injury has fully healed.

While we understand that not all students run the same risk as others, we do want to offer this opportunity to **all students** grades 7-12. The computerized exam is given to students before beginning contact sport practice, competition or physical education. This non-invasive test is set up in "video-game" type format and takes about 15-20 minutes to complete. It is simple, and actually many students enjoy the challenge of taking the test. Essentially, the ImPACT test is a preseason physical of the brain. It tracks information such as memory, reaction time, speed, and concentration. It, however, is not an IQ test.

If a concussion is suspected, the student will be required to re-take the test. Both the preseason and post-injury test data is given to a local doctor or, to help evaluate the injury. The information gathered can also be shared with your family doctor. The test data will enable these health professionals to determine when return-to-play is appropriate and safe for the injured student. If an injury of this nature occurs to your child, you will be promptly contacted with all the details.

I wish to stress that the ImPACT testing procedures are non-invasive, and they pose no risks to your student-athlete. We are excited to implement this program given that it provides us the best available information for managing concussions and preventing potential brain damage that can occur with multiple concussions. The Parkston administration, coaching, and athletic training staffs are striving to keep your child's health and safety at the forefront of the student athletic experience. Participation in this program is purely voluntary. Please return the attached page with the appropriate signatures. If you have any further questions regarding this program please feel free to contact me at 605-928-3368 ext. 203.

Sincerely,

Shayne McIntosh
Superintendent

Consent Form
PLEASE RETURN AS SOON AS POSSIBLE

For use of the Immediate Post-Concussion Assessment and Cognitive Testing
(ImPACT)

I have read the attached information. I understand its contents. I have been given
an opportunity to ask questions and all questions have been answered to my
satisfaction. I agree to participate in the ImPACT Concussion Management
Program.

Printed Name of Student _____

_____ I would like my child to take part in the ImPACT Concussion Management Program

_____ My child will NOT be taking part in the ImPACT Concussion Management Program

Signature of Student Date

Signature of Parent Date