

Dear Parents/Guardians,

As part of our ongoing efforts in continuing to provide the best possible care for your athletes, University Health Care Sports Medicine will be conducting ImPACT concussion testing of all contact sports determined by relative risk of acute injury and sanctioned by the Utah High School Activities Association (UHSAA) to include: football, soccer, wrestling, and basketball as well as other sports designated by school officials. **Additionally, we would like to make sure that each athlete has the opportunity to be tested if he/she desires and does not participate in one of the contact sports listed above.** The following will give you more information regarding ImPACT testing and its use in concussion management.

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.

• *What is ImPACT?*

ImPACT (Immediate Post Concussion Assessment and Cognitive Testing), is a software tool which was developed by the University of Pittsburgh Medical Center (UPMC). ImPACT is used in many professional, collegiate and high school sports programs across the country, to successfully diagnose and manage concussions. If an athlete is believed to have suffered a head injury, ImPACT is used to help determine its severity and help monitor the healing process.

• *How does ImPACT work?*

During pre-season, before any physical contact is sustained, an athlete takes a 30-minute computerized test that measures brain processing, speed, memory and visual motor skills. The ImPACT testing procedures are non-invasive and pose no risks to your son/daughter. The results are collected and stored by our athletic trainers and physician. If an athlete experiences a head injury or concussion during the season, he/she is re-tested and the result is compared to the preseason baseline data. Doing this allows physicians to determine the athlete's neurocognitive status and determine when it is safe for the player to return to active sports.

If you would like your son/daughter to be tested please contact your school's athletic trainer or Blake Johnson, MS, ATC-L Associate Director of Sports Medicine, at the University Orthopaedic Center. blake.johnson@utah.edu

Sincerely,





Parents, Coaches, & Staff,

Herriman High School and University Health Care have partnered to provide sports medicine coverage for your student athletes. The mission of the University Orthopaedic Center Sports Medicine Outreach program, in conjunction with the University of Utah College of Health and Athletic Training Education Program (ATEP) is to serve as a sports medicine resource and to provide athletic training services to local area high schools, club sports teams, and athletic events. Resource services include, but are not limited to: prevention, recognition, acute care, and rehabilitation of sports injuries, as well as assistance in obtaining referrals to appropriate specialists. Among those who attend to athletes are certified athletic trainers, physicians, physical therapists, nurses, and other health care personnel in training who may be present or provide patient care as part of their education.

Our goal is to provide the best possible care for your student athletes. We are committed to your sports medicine needs and are excited to work with Jordan High school and the community. Please feel free to contact us with any questions and we look forward to working with you as we continue “Creating the Future of Orthopaedic Care Today.”

Sincerely,



For questions please contact;

Blake S. Johnson MS, ATC

Associate Director of Sports Medicine

University of Utah Orthopaedic Center

590 Wakara Way, SLC UT. 84108

blake.johnson@utah.edu

(O) 801-587-7005 (C) 801-232-6334



**STUDENT-ATHLETE AUTHORIZATION/CONSENT FOR
DISCLOSURE OF PROTECTED HEALTH INFORMATION**

I, _____ (**PRINT STUDENT-ATHLETE NAME**)
hereby authorize the University of Utah Health Sciences Center and its hospitals, clinics,
physicians, and other health care providers to disclose my protected health information
and any related information regarding any injury or illness that may affect my participation in
high school athletics (“Health Information”) to the University of Utah Orthopaedic Center Outreach
Program and it’s administrators, athletic trainers and/or staff, as well as on a need to know basis to
high school coaches and administrators.

I understand that the Health Information disclosed pursuant to this authorization will be
used by these individuals and entities to make decisions regarding my athletic ability and suitability
to compete while I am a student athlete

I understand that my Health Information is protected by federal regulations under the
Health Insurance Portability and Accountability Act (HIPAA) and may not be disclosed without my
authorization under HIPAA. I also understand that once my Health Information is disclosed to a
person or entity who is not governed by federal privacy regulations (for example, a high school
coach) that my Health Information will no longer be protected by federal privacy regulations.

The University of Utah Sports Medicine Outreach program understands that your medical
and health information is personal. Protecting your health information is important. We follow
strict federal and state laws that require us to maintain the confidentiality of your health
information.

This authorization/consent expires upon graduation and/or when I am no longer involved in
high school athletics. However, I have the right to revoke it in writing at any time by sending
written notification to Director of Sports Medicine Outreach, 590 Wakara Way, SLC UT 84108. I
understand that a revocation takes effect on its request date and does not affect any action taken
prior to that date.

Student-Athlete Signature

Parent/Guardian Name

Parent/Guardian Signature

DATE