

Spinal Immobilization Guidelines

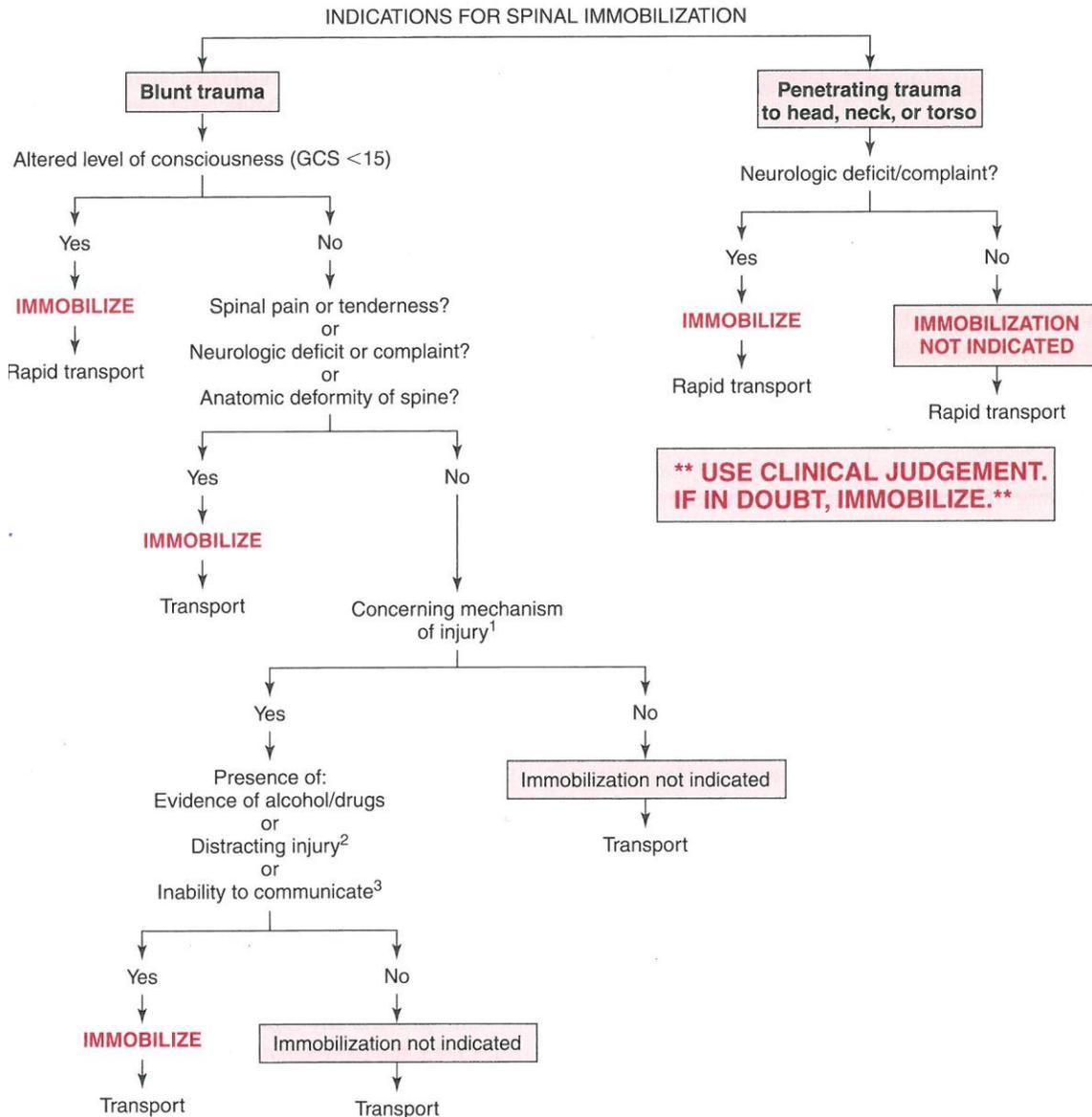
Spinal Immobilization is indicated for trauma patients where there is a suspicion of spinal injury or the patient complains of pain associated with the spinal column. Special consideration should be given when the patient age is <8 or >70 years of age.

The provider may decide to forgo spinal immobilization if the following criteria are met:

- No significant Mechanism of injury
- No loss of consciousness
- No altered level of consciousness (LOC)
- Patient is able to communicate and is a reliable historian
- No signs of intoxication
- No distracting injuries
- No midline back or neck pain with or without movement
- No midline pain or tenderness or deformity present in back or neck upon palpation
- No pain present through full range of motion

Risk of spinal immobilization versus benefits should be weighed in special circumstances such as; prolonged extrication from wilderness setting and technical rescue situations.

Risks include; emesis with airway compromise, pressure sores, extreme patient discomfort. Index of suspicion for injury should be carefully weighed.



1- Concerning mechanisms of injury

- Any mechanism that produced a violent impact to the head, neck, torso or pelvis
- Incidents producing sudden acceleration, deceleration, or lateral bending forces to the neck or torso (moderate to high speed mva, cars vs pedestrian, explosions, etc.)
- Any fall, especially in elderly patients
- Ejection or fall from any motorized or otherwise-powered vehicle (scooters, skateboards, bicycles, motorcycles, motor vehicles, or recreation vehicles)
- Victims of shallow water diving accidents

2- Distracting Injury

- Any injury that may have the potential to impair the patient's ability to appreciate other injuries, (long bone fractures, visceral injuries, large lacerations, degloving injuries, crush injury, large burns, or any other injury causing acute functional impairment)

3- Inability to communicate

- Any patient who for reasons not specified above cannot clearly communicate so as to actively participate in their assessment (speech or hearing impairment, those who only speak a foreign language, small children, etc.)