



*Portage County
Emergency Medical Services
Procedure Guidelines*

Selective Spinal Immobilization

Notes:

- **If ever in doubt whether a spinal injury exists, always immobilize**
- **Follow the spinal immobilization procedures when immobilizing**

Procedure:

- Patients with high risk mechanism of injury as noted below should have cervical collar placed and utilization of spinal precautions (log roll, padded backboard considered)
 - High-speed Motor vehicle crashes (>60mph), rollover, ejection
 - Crashes involving all-terrain vehicles, and snowmobiles
 - Auto vs. pedestrian/bicyclist thrown, run over, or with significant (>20 mph) impact
 - Motorcycle crash >20 mph
 - Axial loading injuries to the spine
 - Falls greater than 10 feet
- **Cervical collar application** should be applied if any of the following is present after trauma:
 - complaint of neck pain or tenderness on exam
 - numbness, tingling, pain or weakness in any extremity
 - distracting injury
 - clinical evidence of alcohol or drug intoxication
 - significant trauma to the head or face
 - history of loss of consciousness
 - altered level of consciousness on exam
- **Backboard application** should be considered if any of the following is present after trauma:
 - complaint of midline back pain or tenderness on exam
 - numbness, tingling, pain or weakness in any extremity
 - distracting injury
 - evidence of alcohol or drug intoxication preventing an accurate assessment
 - multi-system trauma
 - altered level of consciousness on exam
- If backboard is used it should be padded
- Alternatively, a vacuum mattress in place of traditional backboard OR spinal precautions (log roll, head of bed less than 30degrees, minimize spinal movement) can be used without long board