Spinal Motion Restriction - Assessment

based on ACS/ACEP/NAEMSP position statement 2018*

Blunt Trauma

Altered Mental Status or intoxication present?

YES

Perform Spinal Motion Restriction
Includes cervical collar and acceptable devices.
Not necessarily a backboard

Acceptable Devices
Ambulance stretcher
Vacuum mattress
Scoop Stretcher
Long Spine Board

NO

Midline neck or back pain and/or tenderness?

YES

Focal neurologic signs and/or symptoms?

YES

Anatomic deformity of the spine?

YES

Distracting injury or circumstance?

YES

Spinal Motion Restriction not necessary

NO

NO

NO

Spinal Motion Restriction not indicated

Penetrating Trauma

Spinal Motion Restriction not indicated


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Spinal Motion Restriction- Application
based on ACS/ACEP/NAEMSP position statement 2018*

Spinal Motion Restriction is Indicated

- Direct patient to limit spine movement
- Apply cervical collar

Patient Position
Always follow local protocols

STANDING
Guide patient to carefully sit then recline on ambulance stretcher

SEATED
(automobile)
Guide and lower patient to long spine board

- Long transport
- Remove patient from board with minimal spinal movement
- Secure patient to stretcher
- Transport

- Short transport
- Patient may remain on board

SUPINE
Assemble scoop stretcher under patient

- Move patient to ambulance stretcher and remove scoop

When Choosing Devices and Transportation Methods Consider:

- POSITIONING
  - Bariatric
  - Respiratory Distress
  - Pregnancy

- LONG TRANSPORT
  - Use a more comfortable device or remove patient from device and use stretcher as SMR

- SHORT TRANSPORT
  - May keep patient on device or use a more comfortable device (vacuum mattress)