

## Documentation r/t Spinal Immobilization

### **Routine Prehospital Care Documentation**

- Mechanism Of Injury
- Patient Chief Complaint
- Physical Examination Finding
- Initial Assessment
- Rapid Trauma Examination
- Detailed Trauma Examination

### **Documentation of Rationale to Not Immobilize**

- Mechanism Of Injury is Minor → see #1 below
- Physical Examination (Positives)
- Physical Examination (Negatives)
- Absence of signs of spine injury → see #2 below
- Absence of distracting injury
- Patient was not one of the identified high risk patients → see #3 below

### **#1 Positive MOI - Forces or impact suggest a potential spinal injury**

- High Speed MVC
- Falls Greater than 3x pt.'s body height
- Axial Loading
- Violent situations near the spine
- Stabbing
- Gun shots
- etc.
- Sports Injuries
- Other High Impact Situations
- Consideration to special pt. Population
- pediatrics
- geriatrics
- history of Down's, spina bifida, etc.

### **High Risk MOIs**

- Axial load (i.e., diving injury, spearing tackle)
- High speed motorized vehicle crashes or rollover
- Falls greater than standing height

The presence of one of these MOIs does not always require treatment, but providers should be more suspicious of spinal injury, and immobilize if they are at all worried about the possibility of spinal injury

### **Uncertain MOI**

- Unclear or uncertainty regarding the impact or forces
- Trip and fall hitting head
- Fall from 2-4 feet
- Low speed MVC with minor damage

### **#2 Signs and Symptoms of Spinal Cord Injury**

- Pain
- Tenderness
- Painful Movement
- Deformity
- Soft Tissue Injury in area of spine (Bruise, Laceration, etc.)
- Paralysis
- Paresthesias
- Paresis (weakness)
- Shock
- Priapism

(over)

### **#3 Other High Risk Factors Associated with Spinal Injury**

- Trisomy 21 (Down Syndrome, mongolism)
- Risk of Atlanto-Axial Instability (AAI)
- Age Greater than 55
- Risk of degenerative arthritis of cervical spine
- Degenerative Bone Disease (including osteogenesis imperfecta, or “fragile bones”)
- Risk of “pathological” (disease-related) fractures
- Spinal Tumors
- Risk of “pathological” (disease-related) fractures

Adapted from: Suspected Spinal Injury, New York State Department of Health Bureau of Emergency Medical Services-PowerPoint, May 2008

[http://www.health.state.ny.us/nysdoh/ems/spinal/docs/ny\\_spinal\\_update.pdf](http://www.health.state.ny.us/nysdoh/ems/spinal/docs/ny_spinal_update.pdf)