

SPINAL MOTION RESTRICTION DEVICE REMOVAL DEVICE REMOVAL PROCEDURE

When the listed Indications are met, Contraindications are ruled out and Conditions achieved as outlined in the Spinal Motion Restriction Device Removal Procedure – Pre-Removal Checklist, a Qualified Provider¹ may remove a spinal motion restriction device (i.e. long back board, scoop stretcher or vacuum mattress) from beneath a spinal motion restricted patient who has been transported to an appropriate facility (ski patrol hut/clinic, infirmary or similar facility) in accordance with the following procedure:

- A. Ruled out contraindications
- B. Placed a flannel blanket or other 'transfer blanket' on bed
- C. Ensured that a cervical collar has been appropriately applied
- D. Instructed patient not to move
- E. Instructed patient not to assist during the device removal maneuver
- F. Remove spinal motion restriction device in one of the following 3 ways:

1. Long Back Board Axial Removal (preferred method):

Requires (1) Qualified Provider¹ (Lead) and (3) Assistants. Provider maintains manual head stabilization while head restraining straps are removed. Remaining restraining straps are then removed in the following order: chest straps, abdominal straps, pelvic straps, upper and lower leg straps. Assistant #1 is positioned on the left upper chest/armpit area, Assistant #2 is positioned on the right upper chest/armpit area and Assistant #3 is positioned at the patient's feet area. While the Provider stabilizes the patient's head, Assistants #1 and #2 firmly holds the patient at the armpit and waist areas Assistant #3 removes the device by pulling the device out axially from the patient's feet. Once the device is withdrawn manual head stabilization can be replaced with sandbags or similar apparatus.

2. Long Back Board Log Roll:

Requires (1) Qualified Provider¹ (Lead) and (3) Assistants. Provider maintains manual head stabilization while head restraining straps are removed. Remaining restraining straps are then removed in the following order: chest straps, abdominal straps, pelvic straps, upper and lower leg straps. Assistant #1 is positioned at the patient's chest/abdominal area, Assistant #2 is positioned at the patient's pelvic/lower limbs area, Assistant #3 is positioned opposite to Assistant #1 & #2. Patient is then log-rolled in a coordinated fashion. Assistant #3 removes the device and examines the patient's posterior chest, back, buttocks and posterior legs for injury. Patient is then rolled supine in a coordinated fashion. Once the device is withdrawn manual head stabilization can be replaced with sandbags or similar apparatus.

3. Scoop Stretcher:

Requires (1) Qualified Provider¹ (Lead) and (2) Assistants. Provider maintains manual head stabilization while Assistant #1 and Assistant #2 'split' the scoop in the usual fashion and the individual sides are then removed. Once the device is withdrawn manual head stabilization can be replaced with sandbags or similar apparatus.

4. Vacuum Mattress:

Requires (1) Qualified Provider¹ (Lead) and (1) Assistant. Provider maintains manual head stabilization while the Assistant releases the restraining straps. The Assistant then opens the valve and the device auto-inflates. Once the device is inflated (device becomes malleable) manual head stabilization can be replaced with sandbags or similar apparatus.

¹ Qualified Provider - an individual who has received specific PEAK training.