

PATIENT CARE DIRECTIVE

SECTION

SUB-SECTION

Patient Care Delivery

Spinal Motion Restriction

DOCUMENT TITLE

Spinal Motion Restriction (SMR)

DEFINITIONS

APTP:	Advanced Protocol Training Program
Certified Provider(s):	APTP, NUEC (levels 1-3) and/or NUOFA (1 & 3) certified individuals
NUEC:	Non-Urban Emergency Care (levels 1 – 3)
NUOFA:	Non-Urban Occupational First Aid (levels 1 & 3)
PCD:	Patient Care Directive
PEAK:	PEAK Emergency Response Training
Qualified Provider(s):	An individual who has received specific PEAK training
SMR:	Spinal Motion Restriction

RECITALS

1. PEAK is responsible for the content, revision and review of this document.
2. This PCD is applicable to all NUEC (2 & 3) and/or NUOFA (3) Certified Providers.
3. This PCD is applicable to APTP Certified Providers who have received specific PEAK SMR training at the request of their employer as an advanced protocol as part of the APTP.

PURPOSE

1. This PCD is to provide guidance to Qualified Providers for the application of SMR in predominantly (but not limited to) the non-urban environment.

PROCEDURE

1. For patients who meet the indications for SMR as outlined in PEAK's 'Spinal Injury Assessment and Spinal Motion Restriction Guideline'; **AND**
2. The Qualified Provider(s), when indicated, may apply SMR to patients requiring SMR in accordance with the procedures outlined in the 'Spinal Motion Restriction – Application Procedure'.



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Executive Medical Director

EFFECTIVE DATE: October 21, 2017

EFFECTIVE UNTIL DATE: October 21, 2020