

When the listed indications are met as outlined in PEAK's document titled the 'Spinal Injury Assessment and Spinal Motion Restriction Guideline' (see Appendix 2), a Qualified Provider<sup>1</sup> may apply spinal motion restriction (SMR) to patients in accordance with the following procedure:

- A. The Qualified Provider has determined that the patient requires SMR.
- B. The Qualified Provider has instructed the patient not to move and/or has provided manual in-line stabilization if required and appropriate to do so taking into consideration the patient's overall condition, the environment in which the patient was found and the readily available resources.
- C. The Qualified Provider has ensured that a cervical collar (rigid or soft) has been appropriately applied as per the following guideline:
  - A rigid cervical collar (RCC) should be applied when possible and appropriate taking into consideration the following factors, such as (but not limited to):
    - 1) Will the application of an RCC expose the patient to harsh elements and potentially cause greater harm to the patient or exacerbate their current condition?
    - 2) Will the application of an RCC cause or require excessive movement of the patient's head/neck and therefore potentially cause greater harm to the patient?
    - 3) Will the following considerations (A to C) hinder the application of an RCC and potentially result in an RCC being applied incorrectly?
      - a. The patient's comorbidities, should any exist, such as (but not limited to): ankylosing spondylosis, rheumatoid arthritis, etc.; **AND**
      - b. The patient's current body position; **AND**
      - c. The environment in which the patient was found.
    - 4) Will the application of an RCC potentially hinder the management of a patient's airway and the provision of BLS airway management (i.e. BVM ventilation, oral suctioning, etc.)?
  - A soft cervical collar (SCC) may replace an RCC if any of the above factors exist and the following criteria is met:
    - 1) The SCC must be sized and applied as per PEAK's training guidelines (see Appendix 1 – SCC Sizing and Application Procedure); **AND**
    - 2) The SCC must clearly identify that the patient is spinal motion restricted as depicted in the following figure.



<sup>1</sup> Qualified Provider - an individual who has received specific PEAK training.

# SPINAL MOTION RESTRICTION APPLICATION PROCEDURE

SCCs are used to physically and consciously acknowledge, by patients and providers, the potential for cervical spinal injury. In other words, the use of a SCC is to remind the patient not to move and to alert responder and other healthcare providers that may come in contact with the patient that the patient is spinal motion restricted.

While RCCs limit cervical spine movement, evidence has proven that they do not 'immobilize' the spine as once thought. In fact there is a lack of evidence to prove that spinal immobilization prevents secondary spinal cord injury caused by post-injury movement. There is evidence however to support the assertion that RCCs can lead to significant complications and morbidity when used to attempt to 'immobilize' the spine.

- D.** Provide SMR utilizing one of the following 4 devices (listed in order of preference):
1. Vacuum Mattress
  2. CombiCarrier®
  3. Scoop/Clamshell Stretcher
  4. Long Spine Board (note: LSBs are designed for extrication purposes, not patient transport)