

EVALUATION OF THE SAFETY OF C-SPINE CLEARANCE BY PARAMEDICS

CALL NUMBER: _____

DATE OF CALL (YY/MM/DD): ___/___/___

1. INCLUSION CRITERIA (check as applicable)

- ALERT** (GCS 15)
- STABLE** (SBP \geq 90mmHg, respiratory rate 10-24/minute)
- ACUTE BLUNT INJURY** (<48 hours)

Are all the inclusion criteria met?

- YES – CONTINUE** to exclusion criteria
- NO – STOP**; can't use the Canadian C-Spine Rule

2. EXCLUSION CRITERIA (check as applicable)

- Boarded and collared** for reason other than c-spine injury
- Age** <8 years
- Penetrating trauma** from stabbing or gunshot wound
- Acute paralysis** (paraplegia, quadriplegia)
- Known vertebral disease** (ankylosing spondylitis, rheumatoid arthritis, spinal stenosis, previous c-spine surgery)
- Referred** from another hospital

Does the patient have any exclusion criteria?

- YES – STOP**; can't use the Canadian C-Spine Rule
- NO – CONTINUE**

3. THE CANADIAN C-SPINE RULE

START HERE

1. Any ONE **high-risk** factor which mandates immobilization?

- No Yes Age \geq 65 years
- No Yes Dangerous Mechanism*
- No Yes Numbness or tingling in extremities

NO - CONTINUE

2. Any ONE **low-risk** factor which allows safe assessment of range of motion?

- No Yes Rearended in Simple Rearend MVC**
- No Yes Ambulatory at any time at scene
- No Yes No neck pain at scene when asked
(answer "yes" if no pain)
- No Yes No pain during midline c-spine palpation
(answer "yes" if no pain)

YES - CONTINUE

3. Patient voluntarily able to **actively rotate** neck 45° left and right when requested, **regardless of pain**?

- No Yes

YES

NO C-SPINE IMMOBILIZATION

YES – STOP

NO – STOP

C-SPINE IMMOBILIZATION

NO

*Dangerous Mechanism:

- fall from elevation \geq 3 feet/5 stairs
- axial load to head, e.g. diving
- MVC: rollover, ejection, high speed (\geq 100km/h)
- motorized recreational vehicles, e.g. ATV, snowmobile
- bicycle collision with object, e.g. post, car

**Simple Rearend MVC Excludes:

- pushed into oncoming traffic
- hit by bus/large truck
- rollover
- hit by high speed vehicle (\geq 100km/h)

1. According to the *Canadian C-Spine Rule*, would this patient require immobilization? No Yes

2. How comfortable would you be in following the *Canadian C-Spine Rule* for this patient?

- very comfortable comfortable neutral uncomfortable very uncomfortable

3. If you were uncomfortable, please briefly describe why:

4. Will you use the *Canadian C-Spine Rule* when deciding whether or not to immobilize this patient?

- Yes, this patient will be transported with or without immobilization according to the *Canadian C-Spine Rule*.
- No, I am choosing to immobilize this patient, despite the rule indicating immobilization is not required.

5. Was there a language barrier present that hindered your ability to apply the Canadian C-Spine Rule to this patient? No Yes

6. Before transfer of care to the Emergency Department, please ask your patient the following questions:

i) On a scale of 1 – 10 (10 being the highest level of pain), how would you rate your **pain right now**? _____

ii) On a scale of 1-10 (10 being very uncomfortable), how would you rate your **comfort level right now**? _____