

B—incomplete: Sensory but not motor function is preserved below the neurologic level and includes the sacral segments S4 to S5.

C—incomplete: Motor function is preserved below the neurologic level, and more than half of key muscles below the neurologic level have a muscle grade less than 3.

D—incomplete: Motor function is preserved below the neurologic level, and at least half of key muscles below the neurologic level have a muscle grade of 3 or more.

E—normal: Motor and sensory function are normal.

Clinical Syndromes (Optional)

Central cord

Brown-Séquard

Anterior cord

Conus medullaris

Cauda equina

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The injury sustained can affect any of the spinal nerves, and the higher the injury, the more extensive the damage. The child can be left with complete or partial paralysis of the lower extremities (**paraplegia**) or with damage at a higher level and without functional use of any of the four extremities (**tetraplegia**). A high cervical cord injury that affects the phrenic nerve paralyzes the diaphragm and leaves the child dependent on mechanical ventilation.

A mild but equally frightening form of cord trauma is **spinal cord compression**, a temporary neural dysfunction without visible damage to the cord. Complete tetraplegia can result but initially may not be differentiated from serious cord injury.