

FAST RESPONSE SCHOOL OF HEALTHCARE EDUCATION EMERGENCY MEDICAL TECHNICIAN EMT: TRAUMA – LEARNING SHEET



SPINAL IMMOBILIZATION - SUPINE

OBJECTIVE:

Student will demonstrate the proper technique for applying the cervical collar, log rolling a patient onto a spine board, and securing the patient to the spine board.

- 1. Patient.
- 2. Cervical collars (various sizes)
- 3. Long Backboard
- 4. Straps (example: Spyder straps, seatbelts)
- 5. Blankets or other padding material
- **EQUIPMENT:**
- 6. 2" or 3" tape
- 7. Towels or bulky dressing
- 8. Commercially available cervical immobilization device (if available)
- 9. Roller bandage

Supine Technique:

- 1. Takes body substance isolation precautions.
- 2. Directs assistant to place and maintain patient's head in the neutral in-line position.
- 3. Directs assistant to maintain manual immobilization of the head and neck until patient is fully immobilized to backboard.
- 4. Assesses color, motor, sensory, temperature and pulse (CMSTP) in all extremities.
- 5. Assesses neck/C-spine area for any signs and symptoms
 - Tenderness
 - Deformities/Step-off
 - Open wounds
- 6. Securely applies the appropriately sized cervical collar while maintaining spinal alignment and the patient's airway.
- 7. Positions the immobilization device appropriately next to the patient.
- 8. Ensure that adequate personnel are in the appropriate positions to move patient.
- 9. While maintaining spinal alignment, directs assistants to roll patient towards them on the command of the EMT maintaining the cervical spine.
- 10. Patient's posterior is evaluated after being rolled by EMT in control of the torso.
- 11. Positions immobilization device behind patient appropriately.
- 12. While maintaining spinal alignment, directs assistants to roll patient onto long backboard on the command of the EMT maintaining the cervical spine.
- 13. Directs movement of the patient onto the device without compromising the integrity of the spine. If patient is high or low on the backboard, uses an appropriate technique to position the patient.



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- 14. Applies padding to voids between the body and the backboard as necessary.
- 15. Secures torso to device utilizing straps. (If straps are unavailable, 2" or 3" tape or kerlix gauze rolls may be utilized in an EMERGENCY ONLY)

If using Spyder Straps:

- First secure strap closest to shoulders.
- Second secure strap closest to feet.
- Third, starting at the chest, secures straps down rest of torso.
- 16. Evaluate the pads behind the patient's head as necessary.
- 17. The head is secured in a neutral position and secured to the board **LAST** utilizing one of the following techniques:
 - Horseshoe blanket roll
 - Towel rolls
 - Commercially available head securement device (example: Sta-Block, Headbed)
- 18. Secures the patient's legs and arms to the device
- 19. Reassesses color, motor, sensory, temperature and pulse (CMSTP) in all extremities.

CRITICAL CRITERIA

- Did not take or verbalize BSI
- Did not immediately direct or take manual immobilization of the head
- Did not apply appropriately sized cervical collar before ordering release of manual stabilization
- Upon completion of immobilization, cervical collar is wrong size and/or on patient incorrectly.
- Released or orders release of manual immobilization before it is maintained mechanically.
- Back not assessed during the log roll of patient
- Immobilizes head to board before securing the torso.
- Patient manipulated or moved excessively causing potential spinal compromise.
- Head is not in a neutral position upon completion of immobilization.
- Patient moves excessively up, down, left or right on the device after being secured to it.
- Head immobilization allows for excessive movement
- Did not reassess color, motor, sensory, temperature and pulse (CMSTP) before <u>AND</u> after immobilization to the device.
- Chest strap is secured to tightly causing respiratory compromise.
- Failure to manage the patient as a competent EMT
- Exhibits unacceptable affect with patient or other personnel
- Uses or orders a dangerous or inappropriate intervention