

Guideline for Interfacility Trauma Transport Immobilization

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If transporting a trauma patient with isolated spinal fracture(s) and no altered LOC, please refer to the following guidelines:

- 1. If the patient is a known stable cervical spine fracture, a c-collar is only required.
- 2. If it is not known whether the spinal fracture(s) is considered stable or unstable, please call the receiving Neurosurgeon for consultation regarding c-spine immobilization for transport. Ensure that the following information is shared with the receiving neurosurgeon:
 - a. time duration patient has been on the backboard.
 - b. estimated length of transport time

Risks of reimmobilizing every spinal fracture includes:

- a. Worsening neurovascular status
- b. Risk of aspiration from vomiting
- c. Tissue breakdown from prolonged periods of reimmobilization.