

Spinal Immobilization-Seated

1. Direct partner to establish and maintain neutral spinal alignment
2. Check circulation, motor function, and sensation in all four extremities
3. Apply cervical collar
4. Position short device
5. Secure short spinal device to patient's torso according to manufacturer's recommendations
6. Secure short spinal device to patient's head to assure neutral cervical spine alignment
7. Check circulation, motor function, and sensation in all four extremities
8. Do not compromise or impede respirations
9. Patient should be removed from the short spinal device when able according to the spinal immobilization protocol

Spinal Immobilization-Supine

1. Direct partner to establish and maintain neutral spinal alignment
2. Check circulation, motor function, and sensation in all four extremities
3. Apply cervical collar
4. Move patient carefully without compromising integrity of spine
5. Place patient onto stretcher, scoop, soft/vacuum immobilization device or long board according to the spinal immobilization protocol
6. Check circulation, motor function, and sensation in all four extremities
7. Do not compromise or impede respirations
8. Remove scoop or long board prior to transport if able

Spinal Immobilization – With Protective Clothing/Devices

1. Helmet face masks should always be removed prior to transport
2. If the injured patient is wearing a helmet, such as for motorcycle riding or cycling, the helmet should be removed as the helmet will interfere with achieving proper spinal alignment
3. It is preferred that athletic helmets and associated shoulder/chest pads be removed at the scene using with assistance from experienced training staff while maintaining inline spinal immobilization
4. If personnel choose to remove the helmet or shoulder pads, both should then be removed, not just one of them, to maintain proper inline immobilization of the spine