

Spinal Clearance Checklist

Patient's Name	
Date of birth	
St G. Hosp. No.	

To be fully completed at admission clerking and amended over time.

1. Given the mechanism of injury is there a risk of spinal injury? If uncertain, then the answer is YES. Are symptoms or signs of spinal injury reported or evident (from history, medical notes, secondary or tertiary survey)?

	Risk		Symptoms & / or signs of injury (bony & / or neurological)		Date	By whom (PRINT)
	No	Yes	No	Yes. Symptoms / signs were ...		
C-spine						
T & L spine						

2. Plain x-rays (or CT scanograms). Have they been performed? Are they adequate? Have they been reported by a radiologist OR consultant? Is the spine radiologically cleared or are there injuries noted?

	Performed		Adequate		RADIOLOGICAL CLEARANCE		Date	By whom (PRINT)
	No	Yes	No	Yes	Yes	No. Injuries are ... Stable / unstable		
C-spine								
T & L spine								

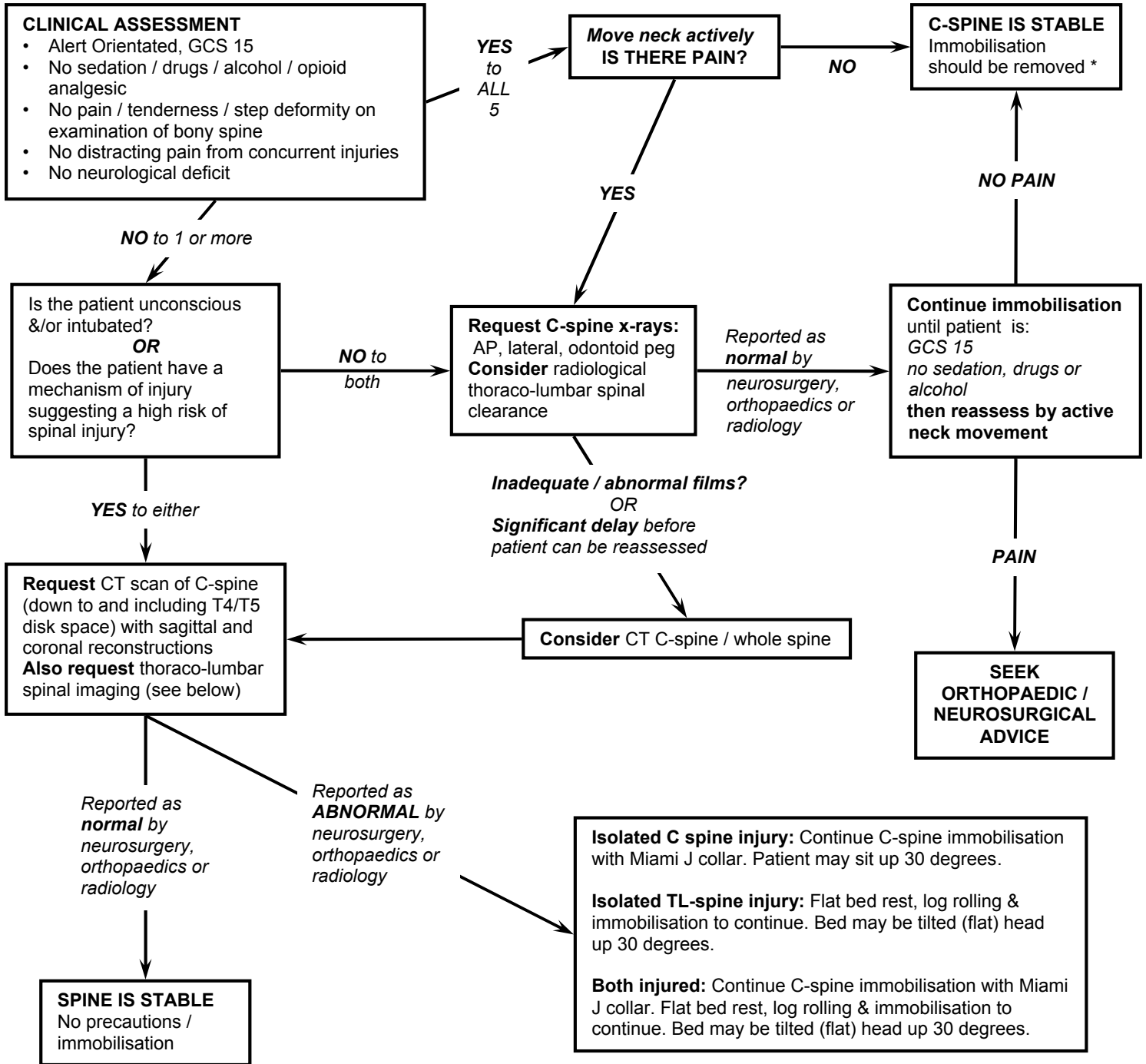
3. CT scans with planar reconstruction. Are these necessary? Have they been performed? Have they been reported by a radiologist OR consultant? Is the spine radiologically cleared or are there injuries noted?

	Necessary		Performed		RADIOLOGICAL CLEARANCE		Date	By whom (PRINT)
	No	Yes	No	Yes	Yes	No. Injuries are ... Stable / unstable		
C-spine								
T & L spine								

4. **Management plan.** It is intended that the plan will progress to no precautions over time.

Precautions (circle)	Details	Time & Date	Name (PRINT)	Sign
Full	Miami J collar / spinal mattress / log roll / scoop stretcher / supine			
Limited / special instructions				
None				
Updates / changes				

SPINAL CLEARANCE FLOW DIAGRAM



Thoracolumbar spinal assessment
Image the TL-spine if **ANY** of the following apply:

- Given the mechanism of injury, is there a risk of thoracic and / or lumbar spine injury?
- Is there pain, bruising, swelling, deformity or abnormal neurology attributable to the thoracic or lumbar spinal regions?
- Is there a fracture anywhere else in the spine?
- Is the patient unconscious?

AP and lateral films *OR* CT scanograms (preferably at time of CT C-spine) **may** be adequate. If not, request CT whole spine.

**Close observation is required during mobilisation (removal of immobilisation). Development of weakness, paraesthesia or pain may indicate a missed injury*

Neurological deficit referable to spine injury requires CONSIDERATION of urgent MRI