DRAFT

NCRTAC Position Statement

Spinal Motion Restriction in the Trauma Patient

The North Central Regional Trauma Advisory Council (NCRTAC) endorses the adoption of the document “Spinal Motion Restriction in the Trauma Patient – A Joint Position Statement” (attachment A) for use by member hospitals and EMS agencies.

The NCRTAC identifies that safe and effective implementation of the *points of consensus* contained within the document requires:

1. **Training** – Initial and recurrent training of EMS providers performing spinal motion restriction (SMR) measures. Training of hospital staff members about current SMR indications and measures.
2. **Protocol** – A written SMR patient care protocol approved by the EMS medical director and the Wisconsin Department of Health Services EMS Section.
3. **Quality assurance** – Ongoing review of SMR cases by the EMS quality assurance program. Hospital-based performance improvement programs should provide appropriate feedback to EMS providers including outcome information and opportunities for improvement.
4. **Communication** – Effective communication must exist between the pre-hospital EMS agencies, hospitals, interfacility transfer services and tertiary hospitals. Partner organizations should communicate about protocol development and implementation, quality assurance, training needs, and patient hand-off procedures.
5. **Documentation** – EMS documentation must be provided to the hospitals as required by DHS 110.34 and include mechanism of injury, physical assessment, and SMR measures taken.
6. **Patient care priorities** – Assessment to determine that a patient does not need SMR (also known as “spinal clearance”) is not a patient care priority and should not delay primary assessment, management of life-threatening conditions and timely transport of patients.

Interfacility transfers  
The NCRTAC believes that the *points of consensus* identified in “Spinal Motion Restriction in the Trauma Patient – A Joint Position Statement” also apply to trauma patients being transported from one hospital to another. Hospitals and interfacility transfer services should additionally:

1. Refer to the NCRTAC Position Statement on Radiology Studies
2. Provide documentation of any spinal assessments completed and any resulting removal or initiation of SMR measures prior to or during the transfer.

Fischer, P. E., & Perina, D. G. et al (2018). Spinal Motion Restriction in the Trauma Patient – A Joint Position Statement. *Prehospital Emergency Care,*1-3. doi:10.1080/10903127.2018.1481476