

# Spinal Injury Protocol

## General Guidelines

1. Any student athlete suspected of having a spinal injury should be managed as if a spinal injury exists, therefore the individual should never be moved.
2. Airway, breathing, circulation, neurological status, and level of consciousness should be assessed.
3. If deemed necessary to move the student athlete the head and trunk should be moved as one unit.
4. EMS should be immediately activated

## Guidelines in Determining EMS Transport of a Suspected Spinal Injury

1. Any loss of consciousness
2. Obvious swelling or deformity of the spine
3. Pain or tenderness along the spine
4. Neurological signs or symptoms
5. Pain, stiffness, or neurological symptoms with active range of motion
6. Any doubt concerning the injury sustained

The athletic training staff will act in accordance with the guidelines set forth by the Inter-Association Spine Task Force regarding transport and equipment removal when a spinal injury is suspected.

## Guidelines for Face Mask Removal

1. The face mask should be removed prior to transportation, regardless of respiratory status.
2. Medical professionals involved in the pre-hospital care of suspected spinal injury sustained by any football player should possess and have readily accessible tools utilized for face mask removal.

## Guidelines for Football Helmet Removal

1. Removal should only occur when:
  - A. If the helmet and chin strap do not securely hold the head in an immobilized position
  - B. If ventilation needs to be provided
  - C. If the attempt of face mask removal proves to be unsuccessful after a reasonable amount of time has elapsed.
  - D. If the helmet prevents immobilization for effective transportation
2. Spinal immobilization must be maintained at all times when removing the helmet
3. Helmet removal should be practiced under proper supervision frequently.
4. Removal and/or deflation of cheek padding prior to aide in effective helmet removal.

## Guidelines for Shoulder Pad Equipment Removal

1. Shoulder pads must be removed to maintain spinal stabilization and alignment when deemed necessary to remove the football helmet
2. Appropriate spinal alignment must be maintained at all times when a spinal injury is suspected
3. When CPR is deemed necessary the front of the shoulder pads need to cut open.

## Spinal Injury Return to Play (RTP)

*All spinal injuries required medical approval and clearance from the overseeing physician. The athletic trainer is not allowed to make those individual decisions in regards to return to play when spinal injuries have occurred.*

Unfortunately, there is no easy formula in determining when an athlete is truly determined for clearance to return to play. However, considerations of previous injuries to the neck or spinal cord do play a factor in the decision for clearance. Those include neck injuries resulting in any permanent damage both peripheral nerve dysfunction and central nervous system along with specific abnormalities must be highly considered.

