

EMS

- Whether or not a backboard is used, attention to spinal precautions among at-risk patients is paramount. These include application of a cervical collar, adequate security to a stretcher, minimal movement/transfers, and maintenance of in-line stabilization during any necessary movement/transfers.
- Education of field emergency medical services personnel should include evaluation of risk of spinal injury in the context of options to provide spinal precautions.
- Protocols or plans to promote judicious use of long backboards during prehospital care should engage as many stakeholders in the trauma/EMS system as possible.
- Patients should be removed from backboards as soon as practical in an emergency department.

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ACS-Committee on Trauma Approved: October 30, 2012