



Cervical Collar

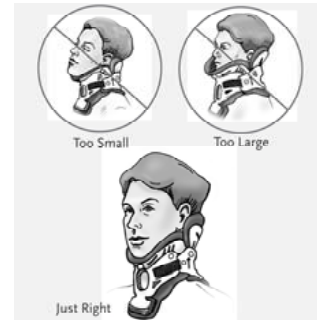
EMT-Basic

Advanced EMT

Paramedic

PROCEDURE

- Patient meets need for Spinal Motion Precaution Guideline (if yes to any of the following):
 - Blunt trauma patients not meeting Level I or II Trauma Center criteria
 - Midline cervical spine tenderness
 - Suspicion of intoxication
 - GCS < 15
 - Focal Nuerologic deficit
 - Painful distracting injury
 - Unable to communicate effectively
 - High index of suspicion based on mechanism
- Manually hold in line spine stabilization of patient's head
- Size c-collar for patient and pick appropriate size
- Slide collar under patient's neck and head and secure under chin appropriately
- Ensure patient is moved as a single unit while maintaining control of the c-spine



REFERENCE GRAPHICS



1 While one provider applies in-line stabilization (*not* traction!), slide the posterior portion of the collar behind the patient's neck. Maintain in-line stabilization in the neutral position until the patient is fully immobilized.



2 Bring the front portion of the collar around, under the patient's chin. Ensure that the chin is well supported by the chin piece. Difficulty positioning the chin piece may indicate the need for a shorter collar.



3 Attach the loop Velcro from the posterior portion of the collar to the hook Velcro on the anterior portion. Recheck the position of the patient's head for proper alignment. Tighten the collar as needed until proper support is obtained.

KEY POINTS

- Keeps the patient spine in line and immobile to prevent further injury
- Decreases chances of morbidity and mortality in the hospital and prehospital setting
- C-Collar placement is not routinely indicated in penetrating trauma

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