**Adult Cervical Spine Clearance Practice Guideline**

Cervical CT indicated by Blunt Imaging Guideline and unable to clinically clear?

- Yes
  - CT cervical spine
    - > 64-slice, 3mm collimation, skull base to T2 with 2-D recons
  - Final read by neuro-radiologist

  - Neg
    - Remove collar
      - Document clearance
      - Residual neck pain/tenderness on exam?
        - None/Minimal
          - No collar
        - Moderate
          - Place soft collar
            - Trauma followup 2 wks
      - If pain/tenderness persist, consult spine service
    - Pos
      - Leave rigid collar in place.
      - Consult spine service

In obtunded/comatose patients, place soft collar and attempt to clear clinically when mental status permits.

No patient should leave ED with a rigid collar unless the spine service is consulted (diagnosed fx, or severe pain without fx)

1. Totally negative, or
2. Chronic finding with no concern for acute worsening, or
3. Degenerative disease with no concern for acute worsening, or
4. Clinical exam that supports low level of concern for any focal neurologic changes