Management of suspected or confirmed spinal injury in adults (16 years and older)

Guidelines referenced

ORGANIZATION	TITLE, YEAR	CITATION	GRADING SYSTEM
National Institute for Health and Care Excellence	Spinal injury: assessment and initial management, 2016	NICE	NICE uses 'offer' (or words such as 'measure', 'advise', or 'refer') to reflect a strong recommendation, usually where there is clear evidence of benefit. NICE uses 'consider' to indicate a recommendation for which the evidence of benefit is less certain.
British Orthopedic Association (with British Association of Spine Surgeons and Society of British Neurological Surgeons)	Spinal Clearance in the Trauma Patient (version 2), 2015	BOA 2015	None
British Orthopedic Association (with British Association of Spine Surgeons, Society of British Neurological Surgeons, and British Association of Spinal Cord Injury Specialists)	The Management of Traumatic Spinal Cord Injury, 2012	BOA 2012	None
Eastern Association for the Surgery of Trauma	Cervical spine collar clearance in the obtunded adult blunt trauma patient, 2015	EAST 2015	None
	Screening for thoracolumbar spinal injuries in blunt trauma, 2012	EAST 2012	Level 1: Convincingly justifiable based on available scientific information alone. Supported by prospective randomized studies or prospective, noncomparative studies or retrospective series with controls. Level 2: Reasonably justifiable by available scientific evidence and strongly supported by expert opinion. Supported by prospective, noncomparative studies or retrospective series with controls or a preponderance of retrospective analyses. Level 3: Supported by available data but lacking adequate evidence. Supported by retrospective analyses.
	Practice Management Guidelines for Identification of Cervical Spine Injuries Following Trauma, 2009	EAST 2009	
Joint Section of the American Association of Neurological Association and Congress of Neurological Surgeons	Guidelines for the Management of Acute Cervical Spine and Spinal Cord Injuries, 2013	AANS/CNS	Level I: (High degree of clinical certainty based on evidence) Level II: (Moderate degree clinical certainty) Level III: (Unclear clinical certainty)

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