1. PATIENT MENTATION
DECREASED LEVEL OF CONSCIOUSNESS?

- NO
- YES

ALCOHOL / DRUG IMPAIRMENT?

- NO
- YES

LOSS OF CONSCIOUSNESS INVOLVED?

- NO
- YES

2. SUBJECTIVE ASSESSMENT
CERVICAL / THORACIC / LUMBAR SPINAL PAIN?

- NO
- YES

NUMBNESS / TINGLING / WEAKNESS OR BURNING SENSATION?

- NO
- YES

3. OBJECTIVE ASSESSMENT
CERVICAL / THORACIC / LUMBAR SPINAL TENDERNESS?

- NO
- YES

OTHER PAINFUL INJURY OR SIGNIFICANT DISTRACTION?

- NO
- YES

PAIN WITH SPINE RANGE OF MOTION? (only to be checked if all other criteria are negative!)

- NO
- YES

MAY TRANSPORT WITHOUT SPINAL IMMOBILISATION.
NOTES (regarding spinal assessment):

- exercise care if a patient is seen very soon after the event
- significant distraction can be something other than a physical injury – for example, significant injury to a loved one or significant damage to car
- re-check the patient before clearing, if not transporting
- your clinical judgement may still be exercised to utilise spinal immobilisation, even if the algorithm clears the patient
- pre-existing spinal disease and older age should increase the level of suspicion even with a clear process