**Pediatric Blunt Cervical Spine Evaluation**

**Pediatric Patient**
(≤ 14 yrs) at Risk for Cervical Spine Injury

- **No altered level of consciousness**
  - Apply NEXUS & PECARN High Risk Criteria
  - Assess range of motion
  - If No Pain: Clinically clear C-Spine
  - If Pain: Re-examine

- **Altered Level of Consciousness**
  - Maintain or Place C-Collar
  - BCVI Screening
  - Positive → Plain XR + CTA
  - Negative → Plain CT

**NEXUS**
Midline tenderness
Altered level of alertness
Intoxication
Focal neuro deficits
Distracting Injury

**PECARN High Risk**
Diving/Axial-load
Fall > 10 ft
Hanging/Clotheslining, Hit by Car
MVC: Rollover, Ejection, Death same vehicle, Speed > 55 mph, head-on

**Blunt Cerebrovascular Injury (BCVI) Screening: Denver Criteria**
Any: Arterial hemorrhage, cervical bruit, expanding cervical hematoma, focal neuro deficit, neuro exam inconsistent w/ head CT, stroke on head CT
Risk Factors: Fractures of LeFort II or III, mandible, fracture of CSpine (including subluxation, transverse foramen, C1-C3, basilar, or petrous; DAI & GCS<6, clotheslining, TBI w/ thoracic injury, scalp degloving, thoracic vascular injury, blunt cardiac rupture, near-hanging with anoxic brain injury

**Disposition per provider judgement**

*Plain C-Spine XR:
Patient < 5 years: AP/Lateral
Patient ≥ 5 years: AP/Lateral/Odontoid

**Excludes**
Non-accidental trauma
High-risk congenital conditions: Down, Mucopolysaccharidosis Syndromes, Marfan, or long-term steroid therapy