



TEST YOURSELF SPINEBOARD

Structure of pamphlet

Test your own knowledge on the subject SPINEBOARD - solve a few assignments.

Find background knowledge in "Medical Guide for Seafarers" pp 51-53 and in the videos related to the book.

Find the correct answers at the end of the pamphlet.

However, test your knowledge, before you read the answers.

Stay updated

**Find all self-training
assignments on our
webpage
www.dma.dk**

**You may ask us
questions at
cms@dma.dk**

**You may phone us at
+45 7219 6004**

**DANISH MARITIME
AUTHORITY**

Centre of Maritime Health
Service
Vestervejen 1
DK 6720 Fanø

July 2023

You may want to read Chapter 6 in “Medical Guide for Seafarers” and watch video number 3.

Assignment 1

Why would you choose to strap on a casualty to a spine board?

Assignment 2

When is a stiff neck collar used?

Assignment 3

Describe the sequence in which the injured person is secured after being positioned in-line and with head immobilizer (which straps first):

1.

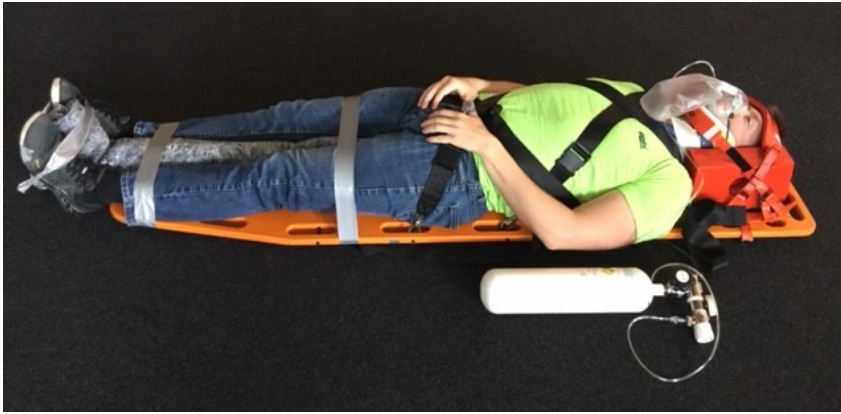
2.

3.

4.

Assignment 4

When is it considered safe to un-strap the casualty from the spine board?



Strapped on to a spine board.

Please note that a stiff neck collar is only used if prescribed by Radio Medical.



A person on spine board, placed in a hoist able stretcher.

Did you know?

If it is necessary to hoist the injured person into a helicopter, the rescuers will always use their own equipment.

The casualty needs to be (re)located to spineboard and stretcher from the helicopter.

Remember

If the casualty needs to vomit while on the spineboard – simply tilt the spineboard sideways with the patient strapped onto it, preventing patient from choking in his own vomit.

Answers to the assignments:

Assignment 1

Why would you choose to strap on a casualty to a spine board?

If you think there is risk of injuries to the cervical/spinal region e.g., injuries caused by great outer force.

"Medical Guide for Seafarers", p 75.

Assignment 2

When is a stiff neck collar used?

A stiff neck collar is only used upon prescription from Radio Medical. Instead, the head is supported using head immobilizer and subsequently secured with materials such as blankets and duct tape.

Assignment 3

Describe the sequence of the procedure (which straps first):

1. Fixate the chest region with 2 crossing straps. The cross should support and firmly strap down the rib cage.
2. The pelvic area is fixated with another 2 crossing straps. The cross should be south of bellybutton and north of genitals.
3. Feet, legs and arms are strapped down with duct tape. Keep kneecap free of tape. Keep elbows "inside" spine board to avoid damage during transport

through door-openings or other narrow places.

4. Lastly fixate head with proper head-support and Velcro-straps across the forehead and chin region/neck collar.

"Medical Guide for Seafarers", pp 52-53.

Assignment 4

When is it considered safe to un-strap the casualty from the spine board?

The spineboard is only used for transportation from the scene of the injury to the ship's hospital, unless evacuation is imminent, and Radio Medical determines that the injured person must remain on the spineboard.

Therefore, you should remove the straps and spineboard upon arrival at the ship's hospital. Start by loosening the head first, with the head supported by a head immobilizer, and then remove the straps from the body. Afterward, perform a log-roll to the bed.

On the bed, support the head with blankets and possibly duct tape. Support the body with blankets and secure it to the bed with duct tape.

Neck collar Flowchart:

<https://dma.dk/Media/637843105503655011/Flowchart%20ENG%202022.pdf>