

Long Boards

I General

- A. The “Long-Board” or “Back-Board” is used for the full body immobilization of a patient with a Mechanism Of Injury (MOI) suggesting that a spinal injury may be present.
- B. Board must be able to be cleaned and must be impervious to bodily fluids such as blood, urine, or vomitus.
- C. Board must include a means of immobilizing the patient’s head (Cervical Immobilization Device - CID), torso and extremities (patient restraint straps)
 - 1. Restraints may be individual straps or a “multi-strap” unit (“spider straps”)
- D. Most boards are tapered at the foot end.
 - 1. A tapered board may be required for helicopter transport due to space restrictions.
- E. The patient’s torso and extremities are ALWAYS immobilized to the board prior to immobilizing the patient’s head and neck.
- F. Restraining straps must be securely fastened and tightened to prevent any movement of the patient during transport, but must not prevent adequate chest expansion (breathing)
 - 1. Padding may be required to prevent lateral movement.
 - 2. A Minimum of THREE (3) straps are required (Chest; Pelvis; Legs).
 - 3. A minimum of FOUR (4) straps are required to “Cross” the torso straps (2 at chest; pelvis; legs).

II Loading Patient

- A. Standing Patient (place board behind patient and lower to ground).
 - 1. Minimum of 3 trained individuals required
 - 2. EMT (1), positioned behind the patient, takes manual cervical immobilization, explains what is being done, and keeps the patient calm.
 - 3. Cervical Collar is applied
 - 4. EMTs (2) and (3) position the board against the patient’s back by passing the board up between EMT(1)’s arms
 - 5. EMTs (2) and (3) reach under the patients armpits and grasp the handhold on their side of the board at the highest level they can both reach
 - 6. On EMT (1)’s command, EMTs (2) and (3) “foot” the bottom of the board to prevent movement, and lower the top of the board to the ground. EMT (1) maintains head stabilization as the board passes between his arms and continues to maintain it when board is fully lowered.
 - 7. EMTs (2) and (3) position the patient, on EMT (1)’s command, by sliding the patient into the final transport position if required.
 - 8. Torso, extremities, and lastly the head are immobilized. EMT (1) may now release manual stabilization.
- B. Supine patient (Log-roll the patient on the board)
 - 1. Minimum of 3 trained individuals required
 - 2. EMT (1), positioned at the patient’s head, takes and maintains manual stabilization.
 - 3. EMT (1), calls all moves
 - 4. Cervical Collar is applied
 - 5. Determine how the patient is to be rolled and position EMTs and board
 - 6. EMT (2) at patient’s Torso (Supports patients shoulder and pelvis)
 - 7. EMT (3) at patients upper leg (Supports patients pelvis and lower extremities)
 - 8. While maintaining manual stabilization, log-roll the patient onto their side
 - 9. After checking patient’s back for injury, position the board such that the patient will be BELOW the final transport position, and snug against patient’s back
 - 10. On command of EMT (1), roll patient onto board, lowering board to ground.
 - **PATIENT WILL NOT BE CENTERED ON BOARD – DO NOT MOVE SIDEWAYS**
 - 11. To center patient on board, on command of EMT (1), slide patient toward head end and center of board.
 - 12. Torso, extremities, and lastly the head are immobilized. EMT (1) may now release manual stabilization.