

620 GARDNER-WELLS TONGS MANAGEMENT

NOTE: PARAMEDICS MAY PROVIDE, OR ASSIST IN PROVIDING, CERVICAL SPINE TRACTION DURING INTERFACILITY TRANSPORT ONLY IF THEY HAVE COMPLETED SPECIAL ADDITIONAL TRAINING IN THE USE OF GARDNER-WELLS TONGS, INCLUDING APPROPRIATE CONTINUING EDUCATION, AND ARE PROPERLY CREDENTIALLED BY THE AMBULANCE SERVICE MEDICAL DIRECTOR TO OPERATE SUCH EQUIPMENT.

NOTE: THE PURPOSE OF GARDNER-WELLS TONGS IS TO AVOID FLEXION AND EXTENSION OF THE NECK FOLLOWING CERVICAL SPINE INJURY (ROTATION IS NOT A CONCERN) TO MAINTAIN REDUCTION OF A CERVICAL SPINE FRACTURE IF ALREADY ACCOMPLISHED (THROUGH USE OF AXIAL TRACTION) AND TO UNDERSCORE THE FACT THAT THE PATIENT HAS A CERVICAL SPINE FRACTURE (SO THAT IMMOBILIZATION IS PROPERLY MAINTAINED).

BEFORE TRANSPORT:

Place long board beneath patient to prevent extension.

Attach ten pound (10 lb..) weight to rope attached to tongs and hang off head end of long board to prevent flexion.

NOTE: A FIVE POUND (5 lb.) WEIGHT MAY BE USED IN SOME CASES, PARTICULARLY WITH HIGH CERVICAL SPINE FRACTURES.

NOTE: THE PRECISE DIRECTION OF TRACTION IS NOT IMPORTANT SO LONG AS NECK IS KEPT IN NEUTRAL POSITION.

If the transport is not accompanied by a physician or nurse, obtain written order for the strength of traction to be used enroute.

DURING TRANSPORT:

Maintain traction as before transport.

NOTE: WHEN LIFTING OR TRANSFERRING PATIENT, GRIP TONGS WITH HANDS AND USE MANUAL IN-LINE CERVICAL TRACTION.

AFTER TRANSPORT:

Record strength of traction used on Interfacility Transfer Report.