A. Introduction

Patient movement after an injury has the potential to worsen the injury, and/or increase a patient’s pain. The scoop stretcher can be placed under a patient with minimum movement. It can then be lifted a few inches and a long spine board placed under the patient. This action can alleviate the need for logrolling a patient prior to placing them on a long spine board (LSB).

B. Indications

1. Patient with hip/proximal femur fracture.
2. Patient with pelvic injury.
3. Patient with suspected spinal injury, who needs placement on LSB.

C. Contraindications

1. Use as the sole immobilization device for spinal injuries.
2. As a lifting device in technical rescue situations.

D. Procedure: Hip/ Proximal Femur Fracture

BLS

1. Place padding (i.e., folded blanket) between the patient’s legs. Secure legs together with triangular bandages or straps.
2. Adjust the Scoop EXL to the length of the patient.
3. Separate the Scoop EXL into right and left halves.
4. Position the stretcher halves on opposite sides of the patient.
5. Gently slide the stretcher halves under the patient on both sides. Slight rolling of the patient from side to side will facilitate rejoining of the stretcher halves.
6. After checking to prevent pinching, rejoin halves by opening and Engaging safety locks at both ends.
7. Apply at least three straps to secure patient to Scoop EXL.
E. Procedure: Spinal Injury

**BLS**

1. If the patient has a suspected spinal injury, manually immobilize the head and neck, and apply a cervical collar.

2. Adjust the Scoop EXL to the length of the patient.

3. Separate the Scoop EXL into right and left halves.

4. Position the stretcher halves on opposite sides of the patient.

5. Gently slide the stretcher halves under the patient on both sides.

6. After checking to prevent pinching, rejoin halves by opening and engaging safety locks.

7. With two rescuers on each side of Scoop EXL, lift stretcher 4 to 6 inches, and slide LSB under patient.

8. The Scoop EXL can be removed by reversing process, and patient immobilized to LSB.