CROFT WHIPLASH TREATMENT GUIDELINES

It is important to stress that guidelines are merely guides to care - not prescriptions for treatment schedules. The patient is always the ultimate guide to the need for care. Guidelines can alert the clinician to possibly missed or occult injuries, in the case where his treatment appears outside the guidelines, or to the possibility that his approach to care needs to be reevaluated.

THE STAGES OF INJURY

Stage I (acute inflammatory stage), 0 - 72 hours;
Stage II (repair stage), 72 hours - 14 weeks;
Stage III (remodeling stage), 14 weeks - 12 months or more; and
Stage IV (chronic; permanent).

THE FIVE GRADES OF SEVERITY OF CAD TRAUMA

Grade I: minimal; no limitation of range of motion, no ligamentous injury, no neurological symptoms;
Grade II: slight; limitation of range of motion, no ligamentous injury, no neurological findings;
Grade III: moderate; limitation of range of motion, some ligamentous injury, neurological findings present;
Grade IV: moderate to severe; limitation of range of motion, ligamentous instability, neurological findings present, fracture or disc derangement; and
Grade V: severe, requires surgical treatment and stabilization.

PLACING THE GRADED PATIENT WITHIN THE FREQUENCY/DURATION TABLE

The table below details these treatment recommendations in tabular form. In the two right hand columns are listed the approximate maximum treatment duration and the approximate maximum number of visits expected to be necessary over that period. Patients not at high risk for poor outcome should not require treatment approaching these maxima. This guideline is based on analysis of approximately 2,000 randomly selected cases from a number of treating practitioners' files.

<table>
<thead>
<tr>
<th>Grade</th>
<th>Daily</th>
<th>3x/wk</th>
<th>2x/wk</th>
<th>1x/wk</th>
<th>1x/mo</th>
<th>TD</th>
<th>TN</th>
</tr>
</thead>
<tbody>
<tr>
<td>Grade I</td>
<td>1 wk</td>
<td>1-2 wk</td>
<td>2-3 wk</td>
<td>&gt; 4 wk</td>
<td>---*</td>
<td>&gt; 10 wk</td>
<td>&gt; 21</td>
</tr>
<tr>
<td>Grade II</td>
<td>1 wk</td>
<td>&gt; 4 wk</td>
<td>&gt; 4 wk</td>
<td>&gt; 4 wk</td>
<td>&gt; 4 mo</td>
<td>&gt; 29 wk</td>
<td>&gt; 33</td>
</tr>
<tr>
<td>Grade III</td>
<td>1-2 wk</td>
<td>&gt; 10 wk</td>
<td>&gt; 10 wk</td>
<td>&gt; 10 wk</td>
<td>&gt; 6 mo</td>
<td>&gt; 56 wk</td>
<td>&gt; 76</td>
</tr>
<tr>
<td>Grade IV</td>
<td>2-3 wk</td>
<td>&gt; 16 wk</td>
<td>&gt; 12 wk</td>
<td>&gt; 20 wk</td>
<td>**</td>
<td>**</td>
<td>**</td>
</tr>
<tr>
<td>Grade V</td>
<td>Surgical stabilization necessary - chiropractic care is post surgical</td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>

**TD = treatment duration**
*possible follow-up at one month
**TN = treatment number**
**may require permanent monthly or prn care**

POTENTIALLY COMPLICATING FACTORS THAT MAY PROLONG CARE

Advance Age
Metabolic disorders
Congenital anomalies of the spine
Development anomalies of the spine
Degenerative disc disease
Disc protrusion/herniation
Spondylosis and/or facet arthrosis
Arthritis of the spine
AS or other spondylarthropathy
Prior cervical or lumbar spine surgery
Prior vertebral facture
Osteoporosis or bone disease
Spinal or foraminal stenosis
Paraplegia/tetraplegia
Prior spinal injury; scoliosis
Recognized by the New Mexico Chiropractic Association (NMCA) July 2004