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; limitations 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.

	Daily	3x/wk	2x/wk	1x/wk	1x/mo	TD	TN
Grade I	1 wk	1-2wk	2-3 wk	>4 wk	*	>10 wk	>21
Grade II	1 wk	>4 wk	>4 wk	>4 wk	> 4 mo	>29	>33
Grade III	1-2 wk	>10 wk	>10 wk	>10 wk	>6 mo	>56 wk	>76
Grade IV	2-3 wk	>16 wk	>12 wk	>20 wk	**	**	**
Grade V		Surgical stabilization necessary – chiropractic care is post surgical.					

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	Disc protrusion/herniation	Prior vertebral facture	
Metabolic disorders	Spondylosis and/or facet arthrosis	Osteoporosis or bone disease	
Congenital anomalies of the spine	Arthritis of the spine	Spinal or foraminal stenosis	
Development anomalies of the spine	AS or other spondylarthropathy	Paraplegia/tetraplegia	
Degenerative disc disease	Prior cervical or lumbar spine surgery	Prior spinal injury; scoliosis	