



His spine pain and tenderness indicate a possible spine injury; weakness in the motor exams on his hands and his inability to distinguish between pinprick pain and light touch on his right hand indicate a neurological deficit and a possible spinal cord injury. He needs to be evacuated to a hospital for imaging, and if necessary, surgery. While it's safe for him to move his neck within its normal range of motion, he should pay attention to the pain signals from his body and not force any movement. It's also very important that he does not fall and hit his head or neck again. If there is spinal damage, swelling over the next 24 hours could worsen his neurological S/Sx; a level 2 evacuation is warranted. You have three options:

1. Transport him using a commercial toboggan or litter equipped with a full-body vacuum splint.
2. If a professional response is delayed due to weather or terrain, improvise a spine stable litter and begin the evacuation or transport him to a safe camp to await the rescue team.
3. Begin a self-evacuation if you can ensure that he will not fall and hit his head or neck.

Carefully evaluate the evacuation options, terrain, time to definitive care, and your shared ability to prevent a fall should you choose to self-evacuate.