

PRESENTING SIGNS	HISTORY	MANAGEMENT	PROGNOSIS
1a Spinal pain and/or mild paresis/ataxia	First presentation	<p>Recommend referral for precautionary neurological assessment</p> <p>If referral not accepted: advise precautionary plain spinal survey radiography</p> <p>If no evidence of fracture/instability or other osseous pathology:</p> <p>Cage rest: at least three weeks; gradual rehabilitation over next four weeks</p> <p>Administer pure analgesics: parenteral and then oral</p> <p>Diazepam p.r.n.: if marked epaxial muscle spasm</p> <p>Avoid steroidal and non-steroidal anti-inflammatory medications</p> <p>Daily telephone updates and at least weekly reassessment</p>	<p>Medical management: Short term: Excellent</p> <p>Long term: Good to guarded</p>
1b Spinal pain and/or mild paresis/ataxia	<p>Persistence of signs > 5d</p> <p>Deterioration at any time</p> <p>Subsequent presentation</p>	<p>Recommend referral</p> <p>Recommend referral</p> <p>Recommend referral</p> <p>Treatment as 1a</p>	<p>Medical management: Good to fair</p> <p>Surgical management: Excellent</p>
2 Moderate paresis/ataxia to non-ambulatory with or without spinal pain Nociception normal in affected limbs		<p>Recommend referral within 24 hours</p> <p>Immediate cage rest</p> <p>Medications as above</p> <p>Monitor bladder function and address as necessary (three times daily)</p> <p>Pull blood and submit for uninterpreted wellness profile</p>	<p>Medical management: Good to guarded</p> <p>Surgical management: Excellent</p>
3a Plegia (no voluntary movement in affected limbs) with or without spinal pain Nociception normal or reduced in affected limbs		<p>Strongly recommend prompt referral (within 24 hours)</p> <p>Immediate cage rest</p> <p>Medications as above</p> <p>Monitor bladder function and address as necessary (three times daily)</p> <p>Pull blood and submit for uninterpreted wellness profile</p>	<p>Medical management: Guarded to poor</p> <p>Surgical management: Excellent</p>
3b Nociception absent in affected limbs (< 24 hours)		<p>Strongly recommend urgent referral</p> <p>Management as 3a</p>	<p>Medical management: Poor to very poor</p> <p>Surgical management: Very good</p>
4 Nociception absent in affected limbs (> 24 hours)		As 3b	<p>Medical management: Very poor</p> <p>Surgical management: Guarded to poor</p>