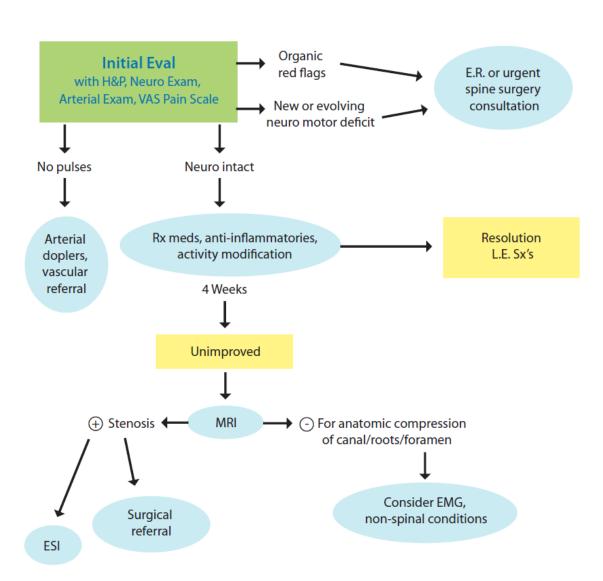
### **Management of Cervical Stenosis**

Author: Dr. David Urquia 3/2014 Reviewed: 7/2016

# Cervical Stenosis

Presentation:
Unilateral or bilateral U.E.
neuro sx's/signs, with or
without long-tract signs.
Not neck pain alone.



### **Management of Cervical Stenosis**

Author: Dr. David Urquia 3/2014
Reviewed: 7/2016

# Cervical Stenosis

Presentation:
Unilateral or bilateral upper extremity
symptoms or four-extremity
myelopathy if advanced.
Not neck pain alone, even if (+) MRI.

- 1. Algorithm same as lumbar, except neuro exam may see radicular and long tract (cord) components.
- 2. Neuro findings may include unilateral or bilat UE, or 4-extremity (red flag).
- 3. P.T./OMT not part of algorithm unless just treating the mechanical neck pain component, in a neuro-intact patient with no long-tract signs.
- 4. Cervical ESI much higher risk/benefit ratio.
- 5. Cervical stenosis may have no pain component.



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To promote the provision of efficient and effective healthcare services, Kennebec Region Health Alliance helps develop and disseminates practice guidelines for use by its member practices. Such guidelines are based upon various sources that KRHA believes to be reliable, which may include but is not limited to, guidelines from widely recognized professional societies, boards and colleges such as the American Medical Association (AMA). Practice guidelines are reviewed at least every two years and updated as necessary to reflect changes in medical practice.

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