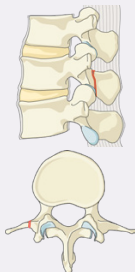


Type A Compression Injuries

A0 Minor, nonstructural fractures



A1 Wedge-compression



A2 Split

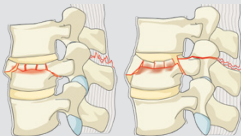


Type B Distraction Injuries

B1 Transosseous tension band disruption
Chance fracture

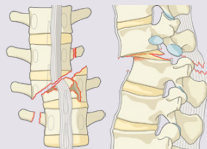


B2 Posterior tension band disruption



Type C Translation Injuries

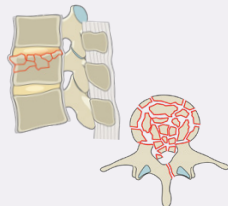
C Displacement or dislocation



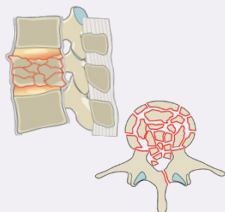
B3 Hyperextension

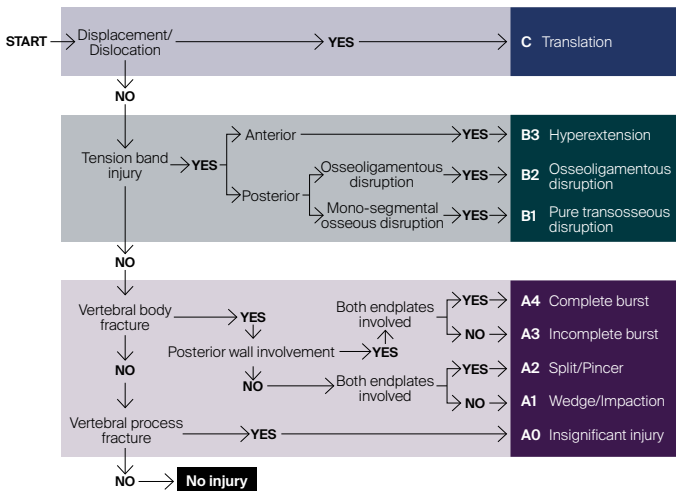


A3 Incomplete burst



A4 Complete burst





Neurology

Type	Neurological
N0	Neurology intact
N1	Transient neurologic deficit
N2	Radicular symptoms
N3	Incomplete spinal cord injury or any degree of cauda equina injury
N4	Complete spinal cord injury
NX	Cannot be examined
+	Continued spinal cord compression

Modifiers

Type	Description
M1	This modifier is used to designate fractures with an indeterminate injury to the tension band based on spinal imaging with or without MRI. This modifier is important for designating those injuries with stable injuries from a bony standpoint for which ligamentous insufficiency may help determine whether operative stabilization is a consideration.
M2	Is used to designate a patient-specific comorbidity, which might argue either for or against surgery for patients with relative surgical indications. Examples of an M2 modifier include ankylosing spondylitis or burns affecting the skin overlying the injured spine.