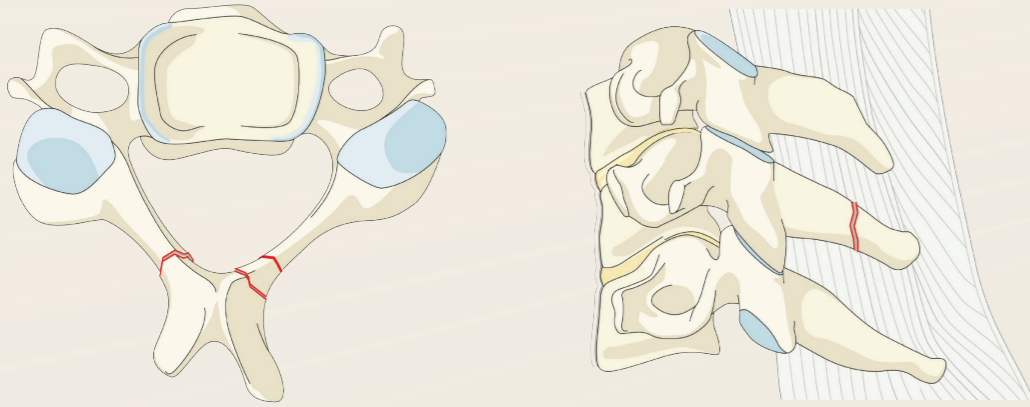


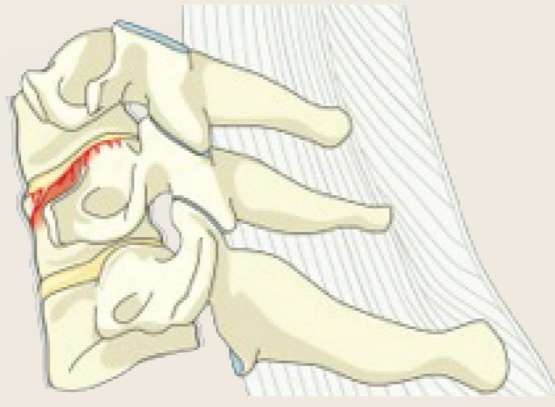
# AOSpine Subaxial Classification System

## Type A. Compression Injuries

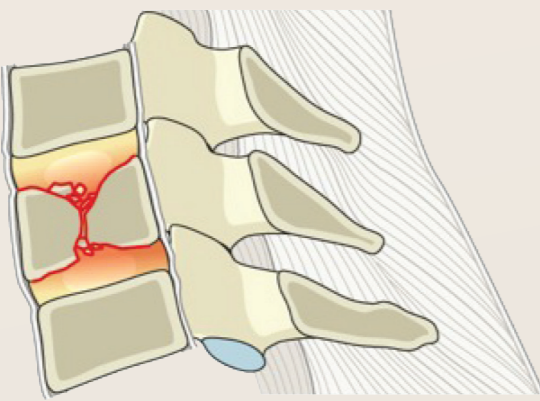
**A0. Minor, nonstructural fractures**  
No bony injury or minor injury such as an isolated lamina fracture or spinous process fracture.



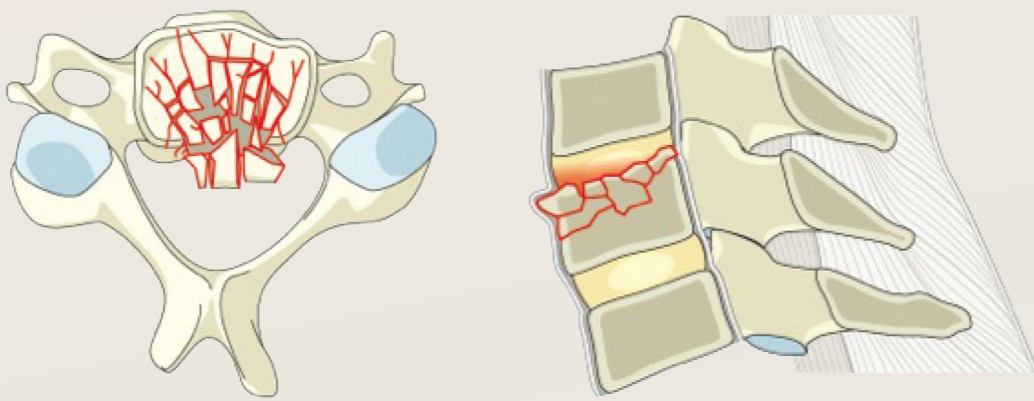
**A1. Wedge-compression**  
Compression fracture involving a single endplate without involvement of the posterior wall of the vertebral body.



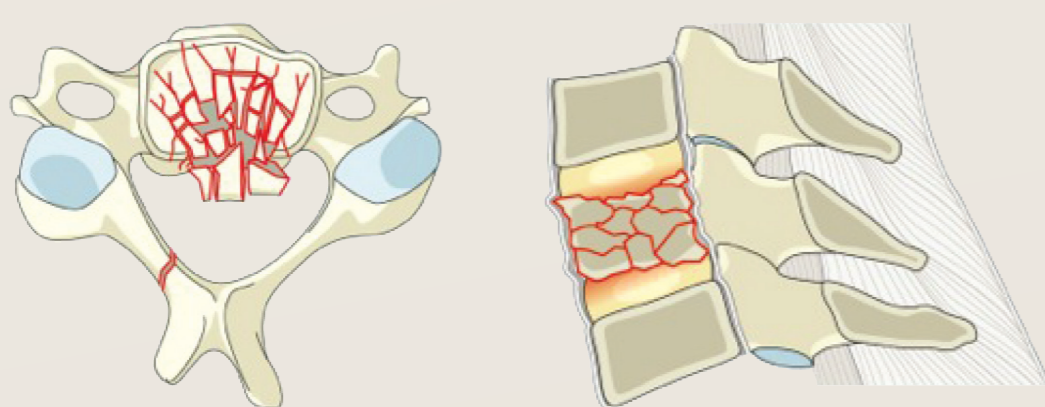
**A2. Split**  
Coronal split or pincer fracture involving both endplates without involvement of the posterior wall of the vertebral body.



**A3. Incomplete burst**  
Burst fracture involving a single endplate with involvement of the posterior vertebral wall.

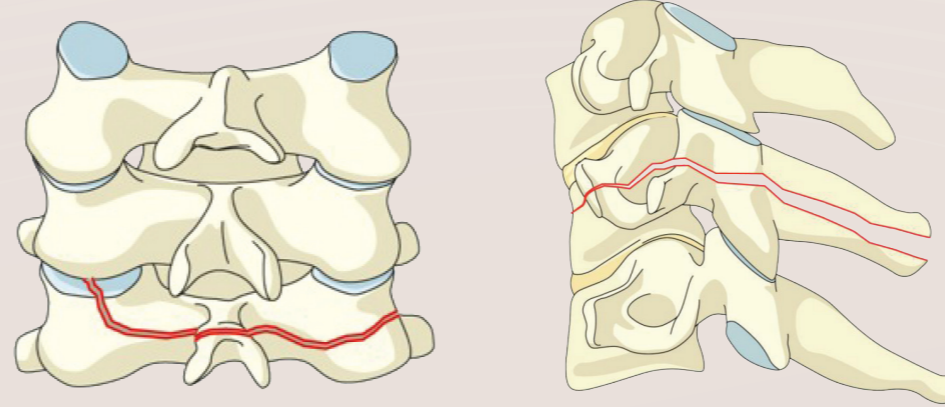


**A4. Complete burst**  
Burst fracture or sagittal split involving both endplates.

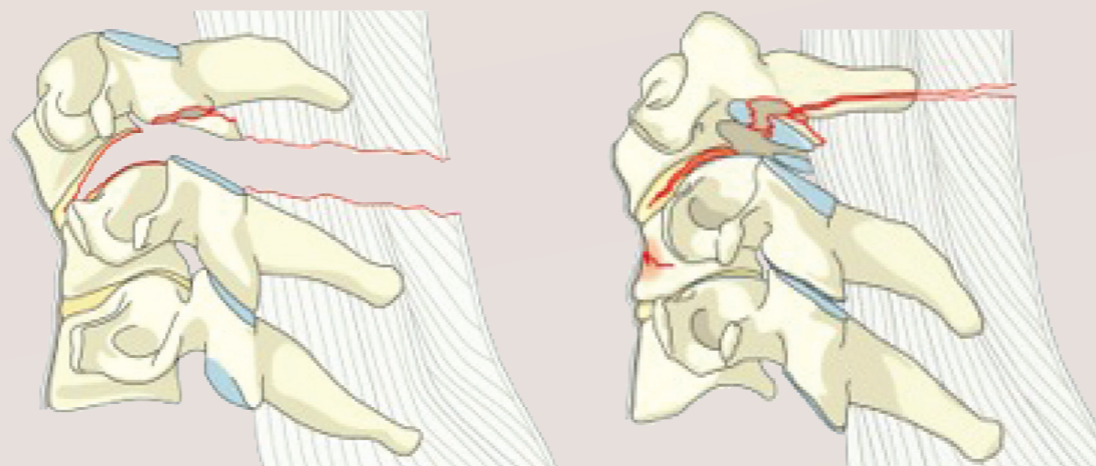


## Type B. Tension Band Injuries

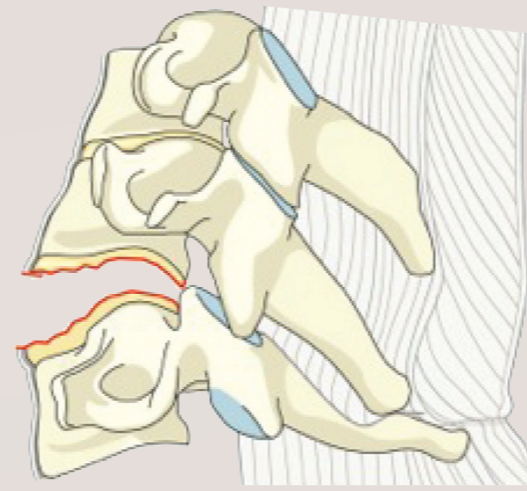
**B1. Posterior tension band injury (bony)**  
Physical separation through fractured bony structures only.



**B2. Posterior tension band injury (bony capsuloligamentous, ligamentous)**  
Complete disruption of the posterior capsuloligamentous or bony capsuloligamentous structures together with a vertebral body, disk, and/or facet injury.

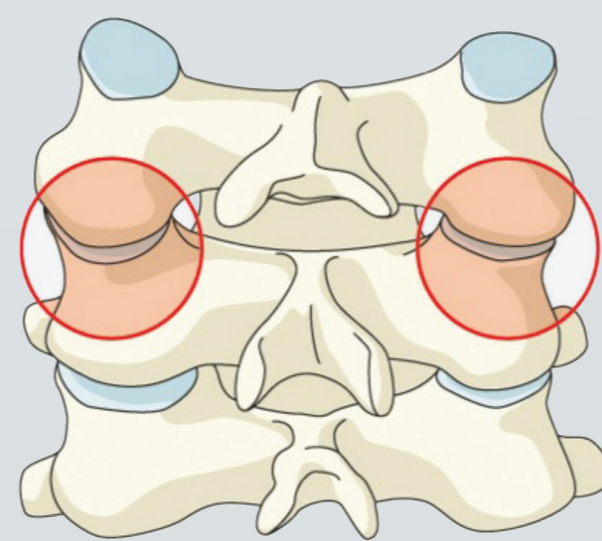


**B3. Anterior tension band injury**  
Physical disruption or separation of the anterior structures (bone/disk) with tethering of the posterior elements.



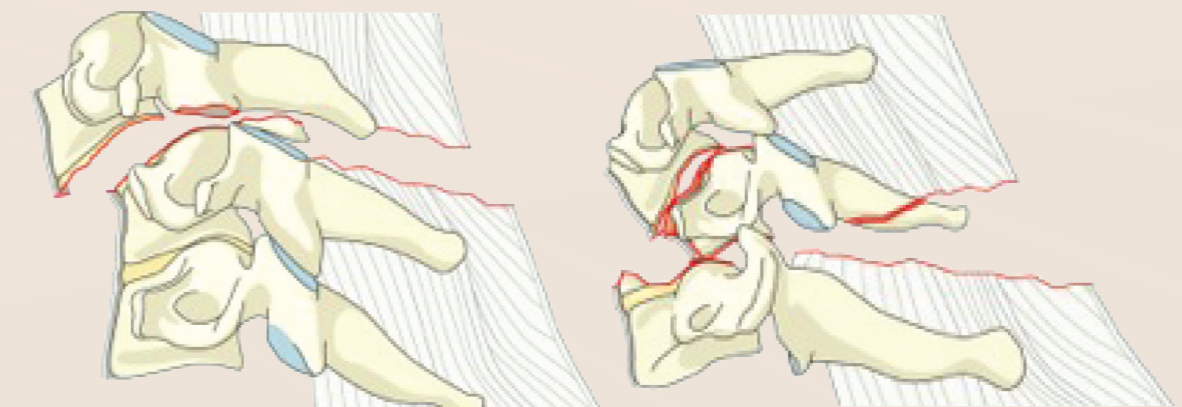
## BL. Bilateral Injuries

**BL. Bilateral injury**



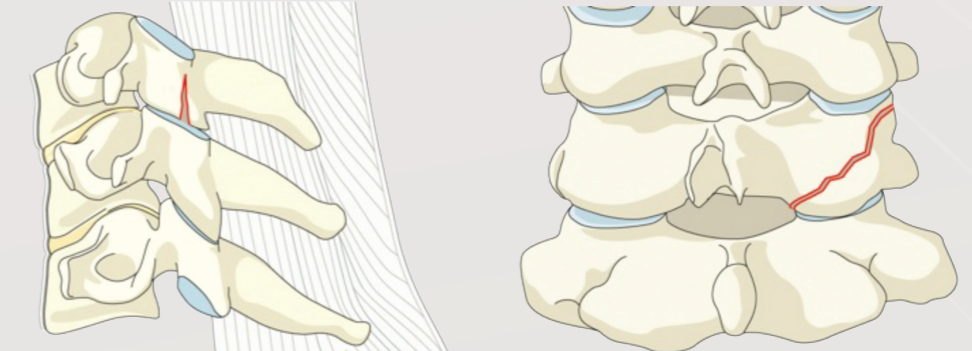
## Type C. Translation Injuries

**C. Translational injury in any axis-displacement or translation of one vertebral body relative to another in any direction**

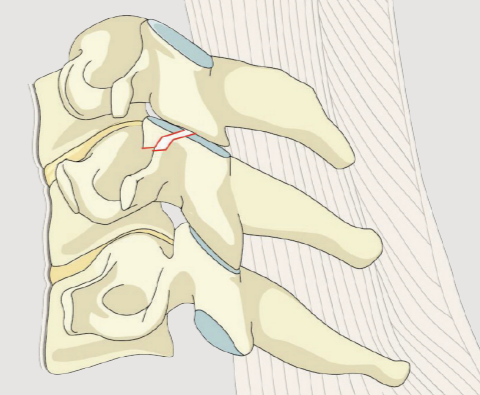


## Type F. Facet Injuries

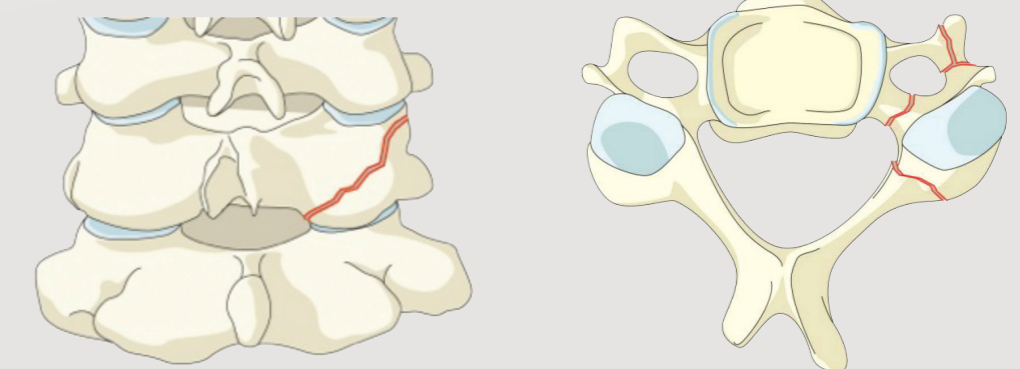
**F1. Nondisplaced facet fracture**  
With fragment <1cm in height, <40% of lateral mass.



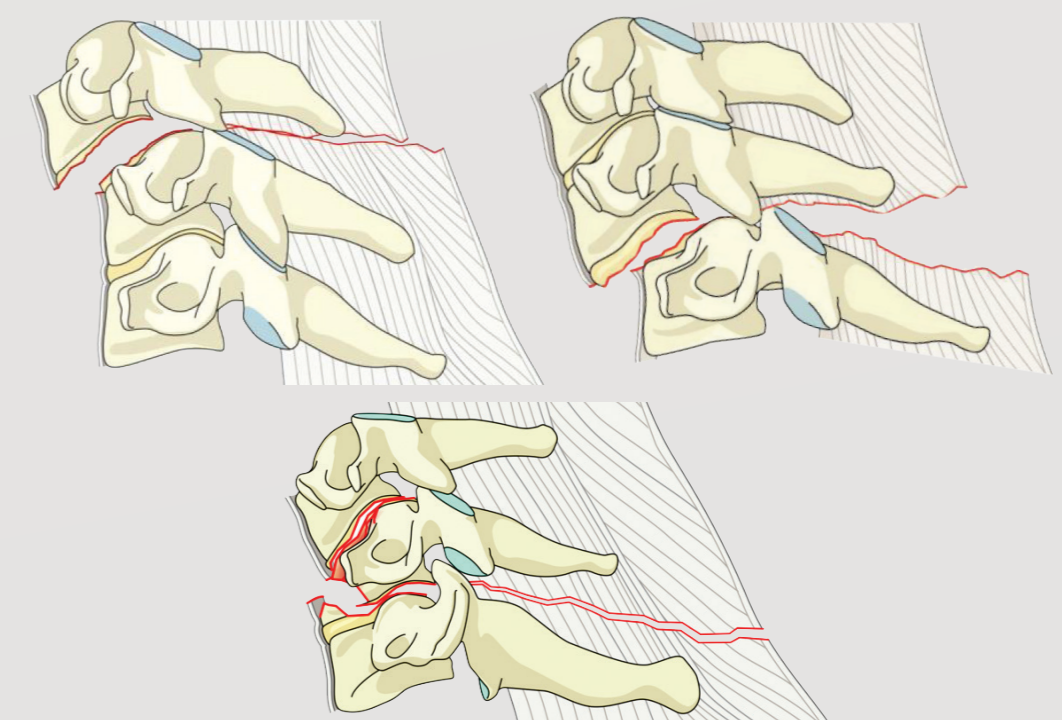
**F2. Facet fracture with potential for instability**  
With fragment >1cm, > than 40% lateral mass, or displaced.



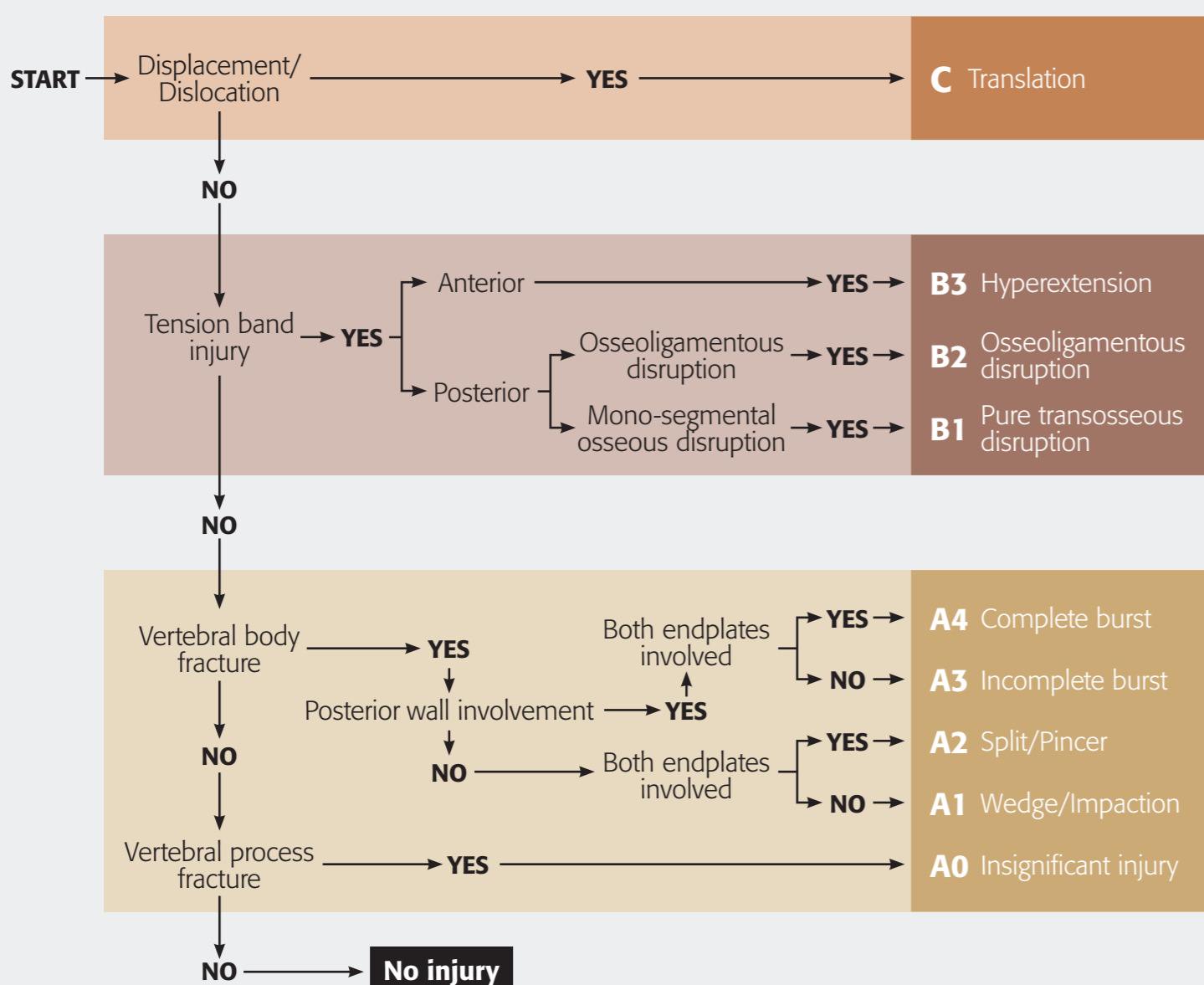
**F3. Floating lateral mass**



**F4. Pathologic subluxation or perched/dislocated facet**



## Algorithm for morphologic classification



## Neurological status modifier

Neurologic status at the moment of admission should be scored according to the following scheme:

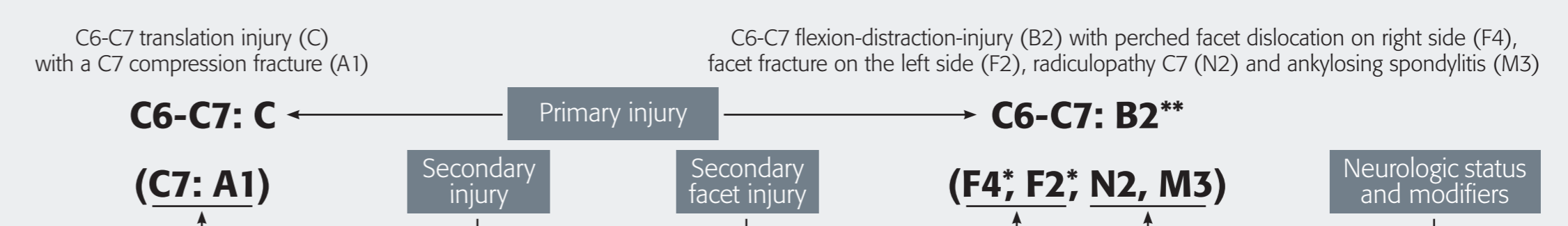
Type	Description
N0	Neurologically intact
N1	Transient neurologic deficit, resolved
N2	Radiculopathy
N3	Incomplete spinal cord injury
N4	Complete spinal cord injury
NX	Cannot be examined

## Case-specific modifiers

There are four modifiers, which can be used in addition to ad 1 and 2:

Type	Description
M1	Posterior Capsuloligamentous Complex injury without complete disruption.
M2	Critical disk herniation.
M3	Stiffening/metabolic bone disease (ie DISH, AS, OPLL, OLF).
M4	Vertebral artery abnormality.

## Classification nomenclature



\*If there are multiple injuries to the same facet – for example: small fracture (F1) and dislocation (F4) –, only the highest level facet injury is classified (F4).  
\*\*If only facet injuries are identified – no A, B, or C injury –, they are listed first after the level of injury.

Further information: [www.aospine.org/classification](http://www.aospine.org/classification)