AOSpine Subaxial Classification System

**Type A. Compression Injuries**

A0. Minor, nonstructural fractures
- No bony injury or minor injury such as an isolated ligamentous strain or spinal process fracture.

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

A2. Split
- Bilateral or unilateral 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 surgical 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.

**Type C. Translation Injuries**

C. Translational injury in any axis-displacement or translocation 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, >40% lateral mass, or displaced.

F3. Floating lateral mass

F4. Pathologic subluxation or perched/dislocated facet

**BL. Bilateral Injuries**

BLa. Bilateral injury

**Algorithm for morphologic classification**

**Neurological status modifier**

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

<table>
<thead>
<tr>
<th>Type</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>N0</td>
<td>Neurologically intact</td>
</tr>
<tr>
<td>N1</td>
<td>Transient neurologic deficit, resolved</td>
</tr>
<tr>
<td>N2</td>
<td>Neurologically impaired</td>
</tr>
<tr>
<td>N3</td>
<td>Complete spinal cord injury</td>
</tr>
<tr>
<td>N4</td>
<td>Complete spinal cord injury with bowel and bladder involvement</td>
</tr>
<tr>
<td>N5</td>
<td>Neurologically intact</td>
</tr>
</tbody>
</table>

**Case-specific modifiers**

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

<table>
<thead>
<tr>
<th>Type</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>M1</td>
<td>Posterior Capsuloligamentous/ligamentous disruption without complete disruption</td>
</tr>
<tr>
<td>M2</td>
<td>Critical disk herniation</td>
</tr>
<tr>
<td>M3</td>
<td>Sunderland neurologic classification (A, B, C, D)</td>
</tr>
<tr>
<td>M4</td>
<td>Vertebral artery abnormality</td>
</tr>
</tbody>
</table>

**Classification nomenclature**

(C7: A1) is the primary injury, and (C7: A2) is the secondary injury. The neurological modifier is included as a superscript to the primary injury.