Type A: Lower Sacrococcygeal Injuries
- No impact on posterior pelvic or spino-pelvic instability
  - A1: Coccygeal or compression vs ligamentous avulsion fractures
  - A2: Non-displaced transverse fractures below the S-I joint
    - No implications on stability
    - Low likelihood of cauda equina injury
  - A3: Displaced transverse fractures below the S-I joint
    - Higher likelihood of neuro injury than A1 or A2 (displacement)
    - May possibly benefit from reduction and stabilization

Type B: Posterior Pelvic Injuries
- Primary impact is on posterior pelvic stability
  - B1: Central Fracture—Involves spinal canal
    - Longitudinal injuries only—rare type of Denis Zone III injuries
    - Low likelihood of neurological injury
  - B2: Transalar Fracture—Does not involve foramina or spinal canal
    - Unilateral Denis Zone I injury
  - B3: Transforaminal Fracture—involves foramina but not spinal canal
    - Denis Zone II injury

Type C: Spino-Pelvic Injuries
- Spino-pelvic instability
  - C0: Nondisplaced sacral U-type variant
    - Commonly seen low-energy insufficiency fracture
  - C1: Sacral U-type variant without posterior pelvic instability
    - Any unilateral B-subtype where ipsilateral superior S1 facet is discontinuous with medial part of sacrum
    - May impact spino-pelvic stability (Isler)
  - C2: Bilateral complete Type B injuries without transverse fracture
    - More unstable and higher likelihood of neuro injury than C1
  - C3: Displaced U-type sacral fracture
    - Worst combination of instability and likelihood of neuro injury
    - Displaced transverse sacral fracture = canal compromise

Sacral Fractures—Overview
Hierarchical system progressing from least to most unstable
- Type A: Lower Sacrococcygeal Injuries
  - No impact on posterior pelvic or spino-pelvic instability
- Type B: Posterior Pelvic Injuries
  - Primary impact is on posterior pelvic stability
- Type C: Spino-Pelvic Injuries
  - Spino-pelvic instability

Neurology
- Type M: Neurological
  - N0: Neurological intact
  - N1: Transient neurologic deficit
  - N2: Radicular symptoms
  - N3: Incomplete spinal cord injury of any degree of motor or sensory impairment
  - N4: Complete spinal cord injury
  - N5: Cannot be assessed
  - N6: Continued spinal cord compression

Modifiers
- Type M: Description
  - M0: Soft tissue injury
  - M1: Metabolic bone disease
  - M2: Anterior pelvic ring injury
  - M3: Sacroiliac joint injury

Classification Nomenclature
Transforminal fracture (B3) high energy injury associated with soft tissue injury (M0) and anterior pelvic ring (M3)

Further information:
www.aospine.org/classification